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Official Records

President: Mr. Deiss (Switzerland)

In the absence of the President, Mr. Hasan Kleib (Indonesia), Vice-President, took the Chair.

The meeting was called to order at 3 p.m.

Agenda items 62 and 12 (continued)

New Partnership for Africa's Development: progress in implementation and international support

(b) Causes of conflict and the promotion of durable peace and sustainable development in Africa

Reports of the Secretary-General (A/65/152, A/65/165 and A/65/167)

Notes by the Secretary-General (A/65/62 and A/65/62/Add.1)

2001-2010: Decade to Roll Back Malaria in Developing Countries, Particularly in Africa

Note by the Secretary-General (A/65/210)

Mr. Barton (United States of America): The United States welcomes the reports of the Secretary-General on the New Partnership for Africa's Development and the promotion of durable peace in Africa (A/65/152), on monitoring mechanisms for Africa's development (A/65/165), and on the Decade to Roll Back Malaria (A/65/210). Those areas are each important individually, but they also have a direct impact on each other. We appreciate the opportunity to address them together.

The United States is committed to addressing the prevention and treatment of malaria, HIV/AIDS and

tuberculosis and to reducing their burden worldwide. Through the Global Health Initiative and our contributions to the Global Fund to Fight AIDS, Tuberculosis and Malaria, the United States will continue to lead in the fight against those diseases by focusing on strengthening health systems and meeting broader health challenges, including child and maternal health, family planning and neglected tropical diseases. In that regard, I am pleased to note the recent United States pledge to seek to contribute an additional \$4 billion to the Global Fund for 2011 to 2013, an increase of 38 per cent.

The President's Malaria Initiative (PMI) is a core component of our Global Health Initiative and the fight against malaria, as well as a key part of the United States foreign assistance strategy. Under the new United States malaria strategy, our goal is to achieve an Africa-wide impact by significantly reducing the burden of malaria for at-risk populations in sub-Saharan Africa, thereby removing malaria as a major public health problem and promoting economic growth and development throughout the region.

Since 2005, the Initiative has contributed to a rapid scaling up of malaria prevention and treatment measures across 15 countries in Africa by funding the purchase of more than 57 million life-saving antimalarial treatments and more than 27 million insecticide-treated nets. During 2009 alone, the Initiative reached more than 50 million people with preventive measures or life-saving drugs. It also provided support to countries to improve the management of antimalarial drugs and other essential

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medical commodities, which has resulted in improvements in supply chain systems in focus countries.

Many of the PMI focus countries are now reporting significant reductions in under-five mortality, and there is strong and growing evidence that the scaling up of malaria prevention and treatment efforts has been a major factor in those reductions. That progress is a result of the collective actions of African Governments, the United States and other concerned donor nations, multilateral organizations, including the Global Fund to Fight AIDS, Tuberculosis and Malaria, the United Nations, the World Health Organization and the World Bank, and non governmental organizations.

In addition, by reducing the burden of malaria in highly endemic countries, the Initiative allows critical resources and overstretched health workers to concentrate on controlling other childhood illnesses and helps to reduce malaria's drain on economic growth and development in Africa.

In the past year, the United States has increased its aid to Africa by 9 per cent to \$7.5 billion. However, we should not measure aid as an input, but rather look at outputs. As President Obama said during his address to this Assembly last month:

"Let us move beyond the old, narrow debate over how much money we are spending and instead let us focus on results — whether we are actually making improvements in people's lives" (A/65/PV.9).

The United Nations has an important role to play in assisting Africa, especially sub-Saharan African countries, to achieve the Millennium Development Goals. United Nations development agencies, such as the United Nations Development Programme, can make unique contributions by helping countries to build governance institutions that can bring about political stability, effective and democratic Governments, and economic freedom for their citizens.

We welcome the efforts of the United Nations to improve the monitoring mechanisms for Africa's development and its focus on results, rather than inputs, and on the commitments of donor nations, as well as African Governments. In our endeavour to monitor results effectively, we must ensure that there is true value added and coherence among new and existing monitoring mechanisms.

The key for Africa to meet its Millennium Development Goals is to create the conditions for sustained and broad-based economic growth, so that it can break away from dependence on development assistance. As the Secretary-General's report highlights, countries in Africa enjoyed an average growth rate of 4.65 per cent from 2000 to 2007. We must build on that achievement. To that end, we support efforts of the New Partnership for Africa's Development to promote democratization, good governance and economic transparency, as well as enhanced regional- and national-level infrastructure and food security.

The United States continues to support efforts to enhance the private sector in Africa. Since 1999, the United States has provided \$12 billion in trade capacity assistance to developing countries, and the African Growth and Opportunity Act has contributed to enhanced trade with Africa. In the first half of 2010, trade under that Act totalled \$33.1 billion, a 57 per cent increase from the same period in 2009.

We remain committed to reducing the debt burden of African States and to ensuring that resources are freed up to support the MDGs and broad-based growth. We note that sub-Saharan Africa has benefited from \$100 billion in debt cancellation to date.

As the Secretary-General reports, the number of African States in armed conflict has declined dramatically, from 14 in the late 1990s to four today. But much needs to be done to sustain the peace. Democratization and development must go hand in hand. State institutions must be strengthened and regional cooperation deepened. Peacekeeping must evolve into peacebuilding. And post-conflict recovery must be the basis for long-term sustainable development.

Africa's economic development is the only way for us to achieve the MDGs. Fighting diseases such as malaria and rooting out the maladies of conflict and poor governance are keys to growth. The United States is deeply committed to being a constructive force and to helping to advance progress on those related and important issues.

Mr. Jomaa (Tunisia) (*spoke in French*): I have the pleasure and the honour to speak before the General Assembly today to debate the important points on its agenda regarding the development of Africa. I would first of all like to thank the Secretary-General

for his reports and notes concerning the items under consideration (A/65/152, A/65/165, A/65/167, A/65/62, A/65/62/Add.1 and A/65/210), which highlight the efforts made by Africa to rid itself of underdevelopment, while also setting out the gaps and existing constraints, including in the area of crucial international support.

My delegation would like to associate itself with the statements delivered this morning by the representative of Malawi, on behalf of the Group of African States, and by the representative of Yemen, on behalf of the Group of 77 and China.

Since its establishment in 2001, the New Partnership for Africa's Development (NEPAD) has been a driving force in the continent's economic recovery and its integration into the world economy. NEPAD has given Africa a greater voice and more responsibility in choosing its own economic and social policies. It has also provided the necessary framework for the establishment of stronger partnerships with other development partners.

Tunisia welcomes NEPAD's integration into African Union structures. As an African Union technical body, the NEPAD secretariat, which has now become the Planning and Coordinating Agency for the initiative, is working to facilitate and coordinate the implementation of priority programmes and projects on the regional and continental levels.

The entire world today agrees that Africa has made significant progress in various areas in the first nine years of the existence of this development programme. The report (A/65/152) of the Secretary-General gives us a picture of that progress in the various aspects of NEPAD's infrastructure development programmes in Africa, which focus on the areas of energy, transportation, water and sanitation and information and telecommunications technologies.

The report also points to the significant progress made in the implementation of the Comprehensive Africa Agriculture Development Programme.

In the areas of health and education, the NEPAD Agency continues to carry out numerous projects aimed at strengthening Africa's capacities.

With regard to gender equality and women's empowerment, Africa continues to remain committed to supporting and promoting the socio economic status of women. The decision taken at the fourteenth African

Union Summit in February to establish a new fund for African women reflects that political will.

With regard to the current uncertain and fragile global economic recovery, the implementation of NEPAD and the achievement of the Millennium Development Goals on the continent require determination and steadfast leadership on the part of the continent and its development partners, so as to ensure the attainment of the commitments within the timelines that have been set to achieve the Development Goals. In that regard, my delegation reiterates the urgent need to establish a monitoring mechanism under the auspices of the United Nations to follow up all the commitments made with regard to Africa's development, as clearly underscored in the political declaration on Africa's development needs (resolution 63/1) and in the report of the Secretary-General on the matter (A/65/165).

Promoting sustainable peace and development in Africa requires concrete, sustained and solidarity-based efforts on the part of the international community. Such efforts should address the underlying causes of underdevelopment and the conflicts on the continent, with a view to establishing an environment conducive to investment and sustainable economic growth in Africa. Tunisia, which was ranked first in the African continent in the area of peace and security by the Global Peace Index, believes that Africa's efforts in that regard should be met by a significant commitment on the part of the international community, a better understanding of Africa's specific needs and greater coordination of policies and programmes.

Allow me to refer to a specific phenomenon that is a major source of social tension and poverty in Africa, namely, youth unemployment. Given that about 60 per cent of the continent's population is under the age of 25, unemployment among young people in Africa poses a serious threat both for African countries and for the international community owing to the disturbances to society and other repercussions caused by this phenomenon.

While this phenomenon has been present for quite some time, unemployment among young people has in recent years taken on alarming proportions. According to the International Labour Office, 21 per cent of young people between the ages of 15 and 24 in sub-Saharan Africa are affected. The situation is even

worse in North Africa, where 25.6 per cent of young people are unemployed.

It is therefore up to the international community, in particular our development partners, to work together with Africa to create an environment promoting active participation by young people in the economic, social and political development of their continent, as well as to seize the opportunity provided by the International Year of Youth. That initiative, launched by Tunisia's President and adopted by the General Assembly, seeks to promote initiatives to engender the ideals of peace, freedom, progress and solidarity among young people.

Moreover, development partners should redouble their efforts as part of an integrated approach to help Africa overcome the underlying causes of tension on the continent, including unemployment, food insecurity, climate change, water shortages and desertification.

Various actions, including relieving debt burdens, facilitating the physical movement of people, increasing foreign direct investment, increasing official development assistance, encouraging the transfer of technology and strengthening capacities in order to take greater advantage of preferential treatment schemes, are now needed to contribute to the achievement of sustainable peace and development on the African continent.

Malaria continues to be one of the main causes of illness and death among children under the age of five in Africa. Among other things, given the significant number of victims affected annually — more than 1 million people — this illness causes enormous losses to the continent's gross domestic product. Tunisia is conscious of the impact of the disease and its devastating effects on economic and social development. In spite of the fact that we are a developing country with limited resources, our President, who has advocated the creation and implementation of a robust mechanism for national solidarity and has called for the international community also to set up a global solidarity fund, an idea that the General Assembly subsequently adopted, took a decision on 4 October, during the Replenishment Conference of the Global Fund to Fight AIDS, Tuberculosis and Malaria, to support the Fund's efforts by making a financial contribution in the amount of \$2 million for the 2011-2013 period.

In conclusion, based on our deeply held belief in our common future and in the imperative need for cooperation and solidarity with African countries, Tunisia is resolved to work together with African countries to make the continent a zone of active partnership and to establish in Africa the conditions for sustainable peace and development. The priority task for all interested stakeholders now is to honour their commitments to Africa.

Mr. Tommo Monthe (Cameroon) (*spoke in French*): Allow me to begin by congratulating the Secretary-General for the reports that he has made available to the General Assembly under agenda items 62 and 12 dealing with the New Partnership for Africa's Development (NEPAD) (A/65/167) and the 2001-2010 Decade to Roll Back Malaria in Developing Countries, Particularly in Africa (A/65/210).

I would also like to state that my delegation associates itself with the statements made on those reports by the representatives who spoke on behalf of the Group of 77 and China and the Group of African States.

This joint debate on the aforementioned items is taking place a few weeks after the High-level Plenary Meeting on the Millennium Development Goals (MDGs) held from 20 to 22 September on the margins of the current session. That High-level Meeting was heralded in the report of the Secretary-General as being an opportunity for the international community to consider in detail the situation in Africa. Allow me, therefore, to provide a quick overview of the progress made on the implementation of NEPAD, taking into account, on the one hand, the report of the Secretary-General and, on the other hand, the draft outcome document of the High-level Plenary Meeting on the Millennium Development Goals (resolution 64/299), particularly with respect to Africa.

My delegation agrees with the observation made by the Secretary-General that, in the context of the current fragile and uncertain global recovery, the implementation of NEPAD and the achievement of the MDGs require determination and unfailing leadership, both from African countries and from development partners, in order to go from theory to concrete results. With respect to Africa's responsibility, it is clear that the countries of the continent have drawn up their own national development programmes in accordance with

their own priorities, the NEPAD programme and the Millennium Development Goals.

As for the agencies, the African Development Bank and the Economic Commission for Africa are continuing their mission, which involves carrying out a certain number of projects and programmes within the process of implementing NEPAD. In addition, the regional economic communities, which play a leading role in the context of economic integration, are striving to fulfil their role as key players in the implementation of projects at the subregional level. I am thinking, for example, of the Economic Community of West African States, the Economic Community of Central African States and the Southern African Development Community, in particular.

Lastly, at the continental level, in February 2010, the African Union approved the integration of NEPAD into the Union's structures and processes and set up the NEPAD Planning and Coordination Agency, whose mandate is to implement projects and programmes that are priorities at the regional and continental levels in Africa.

At those different levels, efforts are under way to implement programmes in the different sectors identified by the MDG Africa Steering Group, for example, agriculture and food security, education, health, commerce infrastructure and facilitation, as well as statistical systems.

However, recent studies carried out by the Steering Group reveal that, even if some progress has been seen, much remains to be done in the area of official development assistance (ODA), debt management, foreign direct investment flows and trade.

In the area of ODA, Africa will probably only receive \$12 billion of the \$25 billion increase that was considered at the Gleneagles summit, mainly because contributions from the main donors are lower than what was originally planned. As for the debt, efforts are being made to provide relief for African countries, both within the framework of the Heavily Indebted Poor Countries (HIPC) Initiative and the Multilateral Debt Relief Initiative, as well as through bilateral debt relief. Thus, on 1 July 2010, 23 African countries, including Cameroon, reached the completion point and benefited from debt relief under the HIPC Initiative. However, we know that the economic crisis has

undermined those efforts, producing an adverse effect on Africa's debt levels.

With respect to foreign direct investment, investment destined for Africa dropped by more than 36 per cent in 2009, because of the economic crisis.

Lastly, when it comes to trade, the Doha Round negotiations have made very little progress towards the development of an agreement on issues of concern to Africa, including the end of export subsidies for agricultural commodities.

Those gaps, which have been pointed out in the report of the Secretary-General, are those that largely undermine the implementation of NEPAD. However, we are hopeful that the progress seen in the implementation of NEPAD, such as that pointed out in the report of the Secretary-General, will be continued and that the recommendations that he has made will be followed up by action. Among the signs of progress we see, for example, a strengthening at the institutional level of the African Peer Review Mechanism, involving the integration of the newly created African Partner Country Network and its addition to the structures and processes of the African Union.

The recommendations made by the Secretary-General include the need for African countries to continue to effectively implement NEPAD's progress and programmes; the importance for all of the stakeholders to design an outreach strategy to strengthen awareness and public opinion at the national, regional, continental and international levels with respect to the vision, goals and objectives of NEPAD; the strengthening of the institutional capacity of the Commission of the African Union; the strengthening of the capacities of regional economic communities; the need to place a priority on investment in agriculture, given its importance in development, poverty reduction and the reduction of food insecurity; greater support for African women, given their major role in agriculture; and the strengthening of cooperation between rich countries and multilateral development agencies, on the one hand, and Africa, on the other.

As for the High-level Plenary Meeting on the MDGs and its outcome document, although we ought to be pleased with the commitments that were reconfirmed by world leaders, we are forced to acknowledge that the repetition of those commitments also reveals their increasingly uncertain nature.

But how do we implement all of those recommendations? The answer is to be found primarily in a greater commitment from Africa itself, but also in ensuring that development partners respect their commitments, as stated by both the Secretary-General in the conclusions to his report on NEPAD and the outcome document of the High-level Meeting on the MDGs.

Africa is not only weakened by underdevelopment and poor development. It is also literally sickened by pandemics such as malaria, a subject covered under agenda item 12, which we are considering. Over the past 10 years, the efforts to control malaria, a disease that afflicts Africa in particular, have captured the attention of political leaders and attracted funding at the international, regional and national levels.

At the African Summit to Roll Back Malaria, held in Abuja in 2000, African heads of State and Government voiced their determination to undertake intensive efforts to fight against malaria. World leaders included among the Millennium Development Goals the goal of bringing malaria under control and of starting to roll it back before 2015. The Secretary-General, Mr. Ban Ki-moon, appointed a Special Envoy for Malaria. Various stakeholders involved in the fight against the disease laid out a Global Malaria Action Plan, and in October 2009 in New York, heads of State launched the African Leaders Malaria Alliance.

Given the impact of malaria, in particular in developing countries, the international community proclaimed 2001-2010 as the Decade to Roll Back Malaria in Developing Countries, Particularly in Africa. In order to evaluate the progress achieved in reaching the goals set for 2010, the Secretary-General, in accordance with resolutions 62/180 and 64/79, has presented us with the report contained in document A/65/210. My delegation would like to thank him for that report.

There are three aspects in particular of the report that drew my delegation's attention. These are contained in paragraphs 17 to 26, having to do with the financing of malaria control; paragraphs 51 to 54, having to do with the impact of control programmes in the World Health Organization (WHO) African Region; and paragraphs 66 to 78, which contain the summary and recommendations of the report.

First, on financing, we welcome the increase in disbursements, which have now gone from \$35 million in 2000 to over \$1 billion in 2008. In that regard, we recognize the commitment of the Global Fund to Fight AIDS, Tuberculosis and Malaria and of the United States Agency for International Development and the United Kingdom Department for International Development. We note with satisfaction that it was in the WHO African Region that the disbursements for malaria made by outside agencies were increased by a factor of 28 between 2000 and 2007. But despite that progress, we cannot help but notice that the total level of financing remains below the annual amount targeted in the Global Malaria Action Plan.

In terms of the impact of programmes to combat malaria, we are happy to note the progress achieved, in particular in Africa, as highlighted in paragraphs 51 to 54 of the Secretary-General's report. In general, current trends, if they continue, suggest that intensive antimalaria efforts could help many countries in Africa to achieve a two-thirds reduction in child and infant mortality by 2015, as envisaged by MDG 4.

Finally, the recommendations made by the Secretary-General are of genuine interest to my delegation. A number of those recommendations highlight the need to strengthen the fight against malaria and boost the distribution of treated mosquito nets, diagnostic tests and access to artemisinin combination therapies, as well as the importance of pursuing foreign assistance, enhancing respect for regulations that govern the quality of medications on the market and strengthening the capacities of health ministries. Those are all measures that would support national efforts in the fight against malaria.

To conclude, I would like to reiterate my delegation's gratitude to the Secretary-General and to express to him, to his Special Envoy for Malaria, to the Director-General of WHO and to all the people working on the ground our support for the work carried out in the fight against malaria. In general, and this applies to malaria as well as to the New Partnership for Africa's Development, the United Nations must create a structured action plan, including an outline of all of their contributions to the implementation of the antimalaria programmes, for a set period of two or three years, along with a clear view of the indicators used to measure results and the distribution of responsibilities. This would allow us, when all is said

and done, to take stock of the progress made and of what remains to be accomplished.

The Secretary-General could also, in proposing programmes for the coming year to the Committee for Programme and Coordination, take another look at the three current subprogrammes under programme 9 of the proposed strategic framework for the period 2010-2011, in order to ensure that the level of work, financial resources, administrative structure and personnel employed is appropriate in terms of quantity and quality. Close coordination with the African Group would be entirely appropriate in that regard.

Mr. Onemola (Nigeria): Nigeria commends the Secretary-General for his detailed reports on agenda items 62 (a) and (b) and appreciates the opportunity to participate in this deliberation.

We also wish to commend the Planning and Coordinating Agency of the New Partnership for Africa's Development (NEPAD) for its remarkable and innovative approaches in coordinating the various clusters of its activities. We are pleased to note that encouraging progress has been made in the areas of transnational infrastructure, science and technology, health, agriculture and partnerships with the United Nations system.

We are aware of the fact that the African development targets on the NEPAD platform cannot be met without resolving the various challenges confronting member States. However, we believe that these challenges can be surmounted with renewed determination and recommitment to the goals set.

My delegation aligns itself with the statements made by the representatives of the African Group and the Group of 77 and China. We would like to comment on the following sub-items.

On sub-item (a), the economic and development challenges facing Africa are indeed unique, and approaches to resolving them must lend credence to a development philosophy that is cognizant of local circumstances and recognizes the need to use subregional, regional and international development machinery, thereby setting a new paradigm in charting a development path for Africa. Those challenges led to the creation of NEPAD a decade ago, as Africa's blueprint, with emphasis on ownership and partnership geared towards guaranteeing Africa's economic renewal and development.

Efforts to attain the targets set for each of the nine clusters identified by NEPAD have renewed the call for all African countries to build on existing progress and to fully identify with the operational blueprint of NEPAD. In this regard, we note that the failures of past development plans in Africa have had less to do with a lack of available frameworks than with haphazard implementation. My delegation therefore commends the Economic Commission for Africa, the African Development Bank and the NEPAD Planning and Coordinating Agency on their efforts to implement NEPAD programmes and objectives.

Since the inception of NEPAD, there has been renewed confidence that, through its ongoing strategies, Africa will be able to resolve its underdevelopment crisis. It is, however, imperative to ensure that NEPAD's broader mandate remains in focus. In this regard, divergent interests must be set aside for the collective good, and commitments by Member States towards successful partnership must remain unwavering.

It behooves individual Member States to strive harder to mainstream the development agenda into their sectoral programmes, using regional blocs as tools for continental economic integration. Nigeria commends the Economic Community of West African States (ECOWAS) for its various contributions that culminated in the signing of the first regional agricultural compact. We hope that such positive steps will be replicated in other subregions and integrated into the larger African continent.

It has been recognized worldwide that NEPAD stands on the planks of good governance, capacity-building and partnership. In order to garner the required momentum that would guarantee steady progress towards the implementation of the Partnership's objectives, we must not lose sight of the need to boost the continent's capacity to govern and develop long-term policies.

The current dearth in human capital can be addressed through a conscious focus on human capacity-building, which would ultimately coalesce into institutional development. We believe that, rather than substituting for them, it is better to build national capacities in a sustainable way. This will also prevent a culture of dependency.

Member countries should also leverage the enhanced support of the United Nations system in a

drive towards attaining the Ten-Year Capacity-Building Programme for the African Union. We believe that will boost Africa's ability to mobilize, manage and sustain economic development, as well as to ensure that successes achieved are not short-lived. In this connection, Nigeria welcomes the innovative NEPAD e-schools demonstration project.

My delegation appreciates the position of the Group of Eight in affirming its official development assistance commitments, as well as its resolve to enhance aid effectiveness. In particular, we welcome the Muskoka Initiative on child mortality and maternal health, as we believe that no development goal substantially supersedes another.

NEPAD no doubt opens up opportunities for Africa to fast-track its Millennium Development Goals, but we also believe that its celebrated initiatives depend largely on scaled-up and consistent development assistance for their full implementation. We therefore call on Member States and friends of Africa to adopt a complementary hands-on approach that would lead to the fulfilment of the cardinal purpose of NEPAD.

Nigeria firmly believes that NEPAD's goals of building strong economic infrastructure and creating a favourable environment for investments remain crucial. It is through this approach that Africa can be pulled out of its present economic difficulties to enable it to prosper as it should.

Turning to sub-item (b), much has been said about the inextricable link between durable peace and sustainable development in Africa. A continent as diverse as Africa can best realize partnership goals when rancorous impediments give way to lasting peace and security. My delegation recognizes that conflict, no matter its extent, poses serious challenges to the proper integration of African States, as it hampers the successful implementation of the goals of NEPAD.

My delegation calls for the continued utilization of the Continental Early Warning System, which is aimed at preventing conflicts. In addition, Member States should embrace an effective mechanism to mediate conflicting interests. It is for this reason that Nigeria, in order to highlight the importance we attach to conflict prevention, chose the theme of preventive diplomacy for its open debate during its presidency of the Security Council last year. There is no doubt that the prevention of conflicts is a less expensive option

for maintaining peace and security in the world. Indeed, it is becoming evident that preventing conflicts is the best way to preserve development gains. There is therefore a need to continue to give new impetus to conflict-prevention strategies.

Poverty is both the cause and the effect of conflicts in Africa, which are of global concern because their ripple effects go beyond African frontiers. It is therefore the responsibility of all to engage as positive catalysts in actualizing a conflict-free Africa and to ensure that the achievements so far are further consolidated. In this regard, we commend the efforts of NEPAD in reconstructing post-conflict countries and in providing credible transition and exit strategies. We equally call for continued financial and institutional support for the Peacebuilding Commission.

Nigeria currently chairs ECOWAS. We are therefore pleased to report that leaders of the organization have made substantial progress in bringing lasting peace and stability to within the borders of the subregion. That has been instrumental in improving conflict situations in West Africa. We believe that these critical steps will usher in an enabling environment for development as peace and security prevail.

In the same vein, the continued efforts of United Nations peacekeeping forces and of the African Union Peace and Security Council have become invaluable resources in the pursuit of peace and sustainable development across Africa.

Let me now turn to agenda item 12. Nigeria recognizes the health burden posed by malaria on the people of Africa. Although there have been quantifiable improvements in curbing the scourge over the past 10 years, the goals of the Roll Back Malaria campaign have still not been realized. In no small measure, malaria still constitutes a barrier to economic and social development across Africa.

My delegation commends the growing political commitment in the fight against malaria. We advocate closer cooperation between Roll Back Malaria partnerships and the international community in order to develop the capacity to fully implement individual country strategic plans and ensure the achievement of the Abuja targets.

In the same vein, Nigeria sees the need for an accelerated pace in combating this disease. We therefore call for more international donors and partners to complement existing local resources. My delegation strongly believes that an Africa free from malaria, in which its citizens peacefully coexist, will be better situated on the path towards achieving the much-needed African development targets.

Finally, although the challenges facing Africa look daunting, they are not insurmountable. With effective harmonization and coordination, the targets set out in the different frameworks could propel Africa to become a land of opportunity. In this connection, my delegation calls for the urgent fulfilment of the pledges of aid made to Africa at various international forums. We are confident that a new Africa free of hunger, disease and poverty will meaningfully contribute to global economic prosperity, peace and stability.

Mr. McNee (Canada): Canada is pleased once again this year to join this important debate on Africa. Africa is a continent rich in its cultures, diversity and history. Many African countries have made important progress in recent years, and significant parts of the continent are moving in the right direction. They have seen more free and fair elections and more prudent economic management, with more reform-minded and democratic leadership. One of the most significant developments has been the maturation of African institutions that promote regional integration and security.

Much remains to be done to assist African countries to achieve the Millennium Development Goals and to build stable political and economic institutions. Achieving the Millennium Development Goals is a shared responsibility based on commitment, partnership and perseverance.

Canada is doing its part to help Africa achieve the Millennium Development Goals. Canada met its Group of Eight (G-8) commitment to double aid to Africa from 2003-2004 levels, to \$2.1 billion. Furthermore, Canada reaffirmed its commitment to double international assistance from 2002 levels by 2011. This will increase Canada's total international assistance to approximately \$5 billion. As part of the joint G-8 pledge on food security, Canada will more than double its investment in food security and provide \$600 million in increased funding over three years, reaching \$1.18 billion in overall funding.

As President of the G-8 and the Group of 20 (G-20) for 2010, Canada ensured that Africa's voice was heard in this process. G-8 leaders had a substantive discussion with African leaders at the Muskoka Summit on peace and security and development issues. Consultations with African countries in the lead-up to the Muskoka Summit helped to shape the G-8 initiative on maternal, newborn and child health, which will see the mobilization of more than \$7 billion. G-8 and African leaders also agreed to work closely together to combat international narcotics trafficking, particularly in West Africa and the Americas.

Canada invited the leaders of Malawi, as Chair of the African Union, and of Ethiopia to the G-20 Toronto Summit to help ensure a stronger voice for Africa. Leaders held important discussions on a range of actions to support economic recovery and define the path forward for strong, sustainable and balanced global growth. This included fulfilling commitments for \$350 billion in capital increases for multilateral development banks and an ambitious replenishment for the concessional lending facilities of those banks, especially the African Development Fund and the International Development Association.

Canada has also untied all of its food aid and has committed to untie all bilateral assistance by 2013. Not only will this improve aid by increasing its impact, it will enable us to respond better to the needs of developing countries. Private sector expansion is an important component of overall development. Canada is a significant economic partner for Africa, with more than 290 Canadian companies operating in over 36 countries.

The Canadian Government applauds the decision to fully integrate the secretariat of the New Partnership for Africa's Development — a programme dedicated to accelerating cooperation and development on the continent — into the African Union's structure and budget.

Canada sees the development of key African multilateral institutions, such as the African Union (AU), the United Nations Economic Commission for Africa and the African Development Bank, as vehicles to help achieve an enabling environment for stability and socio-economic development. Canada also strongly supports the African Peer Review Mechanism as an important initiative, vital to the overall success of Africa's development.

At the same time, Canada has maintained a strong commitment to regional and multilateral initiatives to advance global malaria prevention and control efforts. Last month, Prime Minister Harper of Canada announced that with our contribution of \$540 million to the Global Fund, Canada's contribution to date will rise to more than \$1.5 billion.

Canada has long been engaged with our African counterparts in finding durable solutions to protracted conflicts across the continent, both through direct bilateral contacts and through engagement in support for continental and regional African institutions such as the AU and the Economic Community of West African States. These organizations are increasingly demonstrating clear leadership and capacity to address the current peace and security challenges on the continent, as well as to prevent future violent conflicts and political crises.

In the Sudan, the ongoing conflict and resulting humanitarian crisis in Darfur continue to be of concern. Delays in the preparations for the two referendums mandated by the Comprehensive Peace Agreement (CPA) on the future status of South Sudan and the Abyei region are reaching a critical stage. In order to maintain peace and stability, a range of post-referendum issues also need to be negotiated.

Since 2006, Canada has contributed over \$800 million in support of peace and humanitarian objectives in the Sudan, including support for CPA implementation and the Darfur peace process. Canada's support has included partnering with African countries that contribute personnel to the Sudan's two Security Council-mandated peacekeeping missions.

(spoke in French)

In the Great Lakes region, Canada continues to play a strong leadership role as co-Chair with the European Union of the group of special envoys and friends to the International Conference on the Great Lakes Region to support regional solutions to the complex development and peace and security challenges in the region. In that regard, there has been much progress in the past year between countries in the Great Lakes region and international partners towards advancing a regional certification mechanism for minerals, which are driving the conflict in the eastern Democratic Republic of the Congo and destabilizing the region.

In the context of support for stability in the Great Lakes region, Canada has provided over \$124 million for humanitarian and development assistance to the Democratic Republic of the Congo since 2006. Canada is also contributing to peace and security in the Democratic Republic of the Congo through active diplomatic engagement, support to the United Nations Organization Stabilization Mission in the Democratic Republic of the Congo by deploying up to 12 Canadian forces personnel, who occupy key positions, and by annually committing \$4 million for the period 2010-2013.

Canada continues to support efforts to bring stability and provide humanitarian assistance to Somalia. Canada participates in the International Contact Group on Somalia and has provided more than \$72 million in humanitarian assistance since December 2006 to help respond to the urgent needs of Somalis and Somali refugees in Kenya.

In conclusion, Africa has achieved much success over the past few years. Canada joins our African partners in acknowledging that progress. The African continent is an area of great promise and substantial potential. Through coordinated African-led commitments and partnerships, this potential must be realized.

Mr. Sumi (Japan): It is my great pleasure and honour to address the Assembly today to discuss the important agenda items relating to African development.

African development is today one of the most urgent priorities for the world and for the United Nations. In May 2008, we heard the voices of Africa's leaders at the fourth Tokyo International Conference on African Development (TICAD IV), co-organized by the Office of the Special Adviser on Africa, the United Nations Development Programme (UNDP), the World Bank and Japan. It is now time for us to report to the Assembly on how we have responded to those voices. At TICAD IV, Japan pledged, first, to double its official development assistance to Africa, secondly, to proactively and flexibly provide up to \$4 billion in soft loans and, thirdly, to work to double Japanese private investment in Africa over the next five years.

In implementing those commitments, the Government of Japan established a TICAD follow-up mechanism as a framework for monitoring the implementation of the Yokohama Action Plan. After the

first TICAD ministerial follow-up meeting in Botswana in March 2009, a second ministerial meeting was held in Tanzania in May 2010, with participants from 65 countries. At that meeting, Japan pledged to step up its Millennium Development Goals-related assistance by appropriating approximately \$1 billion, beginning this year, until the next TICAD ministerial follow-up meeting. The Government of Japan also promised to make even greater use of official development assistance (ODA) loans for infrastructure projects, namely, up to \$2 billion in the next two years.

Japanese ODA to Africa covers a wide range of sectors, including infrastructure, agriculture, trade and investment, community development, health, education, water, the consolidation of peace and good governance and combating climate change. These areas correspond to the key sectoral priorities of the New Partnership for Africa's Development (NEPAD) and reflect the genuine needs of Africa.

For example, food security in Africa is an important issue. On the occasion of TICAD IV, the Japan International Cooperation Agency (JICA) launched an initiative known as the Coalition for African Rice Development, in partnership with the Alliance for a Green Revolution in Africa, in order to support the efforts of African countries to increase rice production. Japan entrusted \$100 million to the World Bank through two Japanese trust funds to support rice-producing organizations and the African Rice Development Initiative. Twenty-three African countries have already benefited from these activities.

Also, as part of TICAD joint-partner efforts to increase irrigated land area in Africa by 20 per cent by 2013, Japan intends to construct and improve irrigation facilities and increase the irrigation capacity of African countries by over 100,000 hectares. By the end of March 2010, commitments had already been made to cover 30,000 hectares. JICA, the World Bank, the African Development Bank and other financial institutions are collaborating in that regard.

Furthermore, Japan has supported the NEPAD-Organization for Economic Cooperation and Development African investment initiative, which aims to improve African capacity to strengthen the investment environment for growth and development. Since 2005, Japan has provided a total of €0.9 million to that initiative. Along with South Africa, we have

co-chaired the initiative's steering group to facilitate region-wide dialogue on investment policy.

Climate change is one of the most pressing issues in Africa. In 2008, Japan contributed \$92 million to the African adaptation programme implemented by UNDP. The programme mainly focuses on building effective leadership, institutional frameworks and national and regional capacity to cope with natural hazards associated with climate change, as well as on renewable energy as a mitigation measure. The necessary resources have been allocated to 20 African countries, with projects already in place in all those countries.

In promoting cooperation between Africa and Japan, we fully respect local leadership, ownership and partnership, in keeping with NEPAD core principles and values. We regard these principles as essential to the promotion of sustainable development in Africa. In order to ensure that the desired accelerated growth will benefit and empower individuals and communities and not aggravate social and economic disparities, the concept of human security needs to be taken into consideration, in particular in implementing the policy measures aimed at achieving the Millennium Development Goals.

Japan recognizes the increasingly important role played by the African Union in the field of development, as demonstrated by the integration of NEPAD into its structures and processes. Also, Japan welcomes the Commission of the African Union as a new co-organizer of TICAD.

Since its inception, the TICAD process has attached great importance to South-South Cooperation, which has now been adopted by a wide range of TICAD partners. For example, as a form of triangular cooperation, JICA launched its Asia-Africa Knowledge Co-Creation Programme in 2005. This subprogramme, which focuses on total quality management for better hospital services, was launched in 2007 by TICAD IV as one of its flagship programmes in order to respond to the challenges faced by the African region, including the chronic shortage of financial, logistic and human resources. Sri Lanka plays a vital role in the Programme by introducing its experience in hospital management. A total of 15 African countries currently benefit from the Programme.

Let me now touch upon the Roll Back Malaria campaign. Last month at the United Nations High-level

Plenary Meeting on the Millennium Development Goals, the international community renewed its commitment to achieve the Goals by 2015. At the meeting, Prime Minister Naoto Kan announced Japan's promises, including \$5 billion in assistance over the next five years in the area of health, where progress is particularly slow. Furthermore, to demonstrate to the international community an ideal way of providing assistance in the field of maternal and child health, Japan has proposed an assistance model called EMBRACE — which stands for Ensure Mothers and Babies Regular Access to Care. Malaria prevention and control is an essential part of implementing the EMBRACE model, to ensure that more children's lives are saved.

In the field of tackling malaria, the Global Fund has played an outstanding role and achieved excellent results, as evidenced by its having saved the lives of 5.7 million people. Many of these lives have been saved through the provision of 122 million long-lasting insecticide-treated nets, including the Olyset net developed by a Japanese company.

At the Global Fund's third Voluntary Replenishment and Pledging Conference, held here in New York on 5 October, the Government of Japan pledged to make contributions to the Global Fund in the coming years amounting to \$800 million, starting in 2011. As one of its founders and as a major donor, Japan will further reinforce its efforts to deliver the necessary assistance to people in need and to promote human security through the Global Fund. Under our global health policy, Japan will aim to enhance the complementarity of its bilateral assistance and the programmes supported by the Global Fund and other multilateral organizations, thereby increasing synergy.

In conclusion, my delegation would like to reaffirm Japan's long-term commitments and contributions to the development of Africa as a continent of hope and opportunity.

Mr. António (Mozambique): I wish to reiterate the commitment expressed during the general debate by the Minister for Foreign Affairs and Cooperation of Mozambique to render all our support to you, Mr. President, in the successful discharge of your noble duties.

My delegation aligns itself with the statements made by the representative of Yemen on behalf of the

Group of 77 and China and by the representative of Malawi on behalf of the Group of African States.

It is with great interest that my delegation participates in this joint debate on issues of fundamental importance for Africa. I would like to focus Mozambique's contribution on one agenda item, namely, "2001-2010: Decade to Roll Back Malaria in Developing Countries, Particularly in Africa". In that regard, I wish to commend the Director-General of the World Health Organization for the report before us today on the progress made to achieve the goals for the Decade (see A/65/210).

We note with encouragement that the report gives evidence of the positive trends generated by the Decade to Roll Back Malaria as a result of giving this disease high priority on the international health agenda and mobilizing the much-needed political, technical and financial support for the various efforts to control and eliminate the disease, where possible, and to ensure adequate investment in research leading to its eradication.

Indeed, amid challenges posed by the inability of high-burden countries to adequately provide universal coverage, the report indicates that the initiative has been widely publicized and currently enjoys pledged financial support amounting to \$1 billion per year in the form of grants and loans, which will allow for intensive and wide-scale implementation of malaria control activities.

We believe that these achievements were possible due to four central factors: first, the emphasis placed on malaria control instead of eradication; secondly, the focus on sub Saharan Africa, one of the major risk areas; thirdly, the global partnership between development agencies, banks, the private sector, non-governmental organizations, foundations and a network of researchers; and, fourthly, the promotion of local capacities and health systems so that malaria can be dealt with locally.

As we strive to keep the momentum generated by the Decade to Roll Back Malaria, we should seize the opportunity created by the High-level Meeting on the Millennium Development Goals to further the successful interventions made so far towards universal coverage. To this end, there is a pressing need for information about the efficacy and the cost-effectiveness of different interventions, so as to lead

policymakers to better use the available resources and obtain the maximum possible social benefits.

At this juncture, I would like to highlight some of the achievements of Mozambique's national malaria control programme in addressing the question of mortality due to malaria in the course of the Decade.

Available data indicate that Mozambique is not yet positioned to achieve pre-elimination status. Therefore, our Government's five-year plan and its poverty eradication strategy envisage bold measures to strategically develop national systems and capacities in the health sector and to increase the coverage and quality of interventions that can allow the country to move to pre elimination status sooner rather than later.

As in many malaria risk developing countries, in Mozambique the disease has shown to have not only detrimental health effects but also adverse consequences for economic and social development. For example, approximately 99 per cent of the population lives in areas at risk of malaria, and the country is prone to natural disasters that can contribute to dramatic increases in malaria transmission.

Malaria accounts for a high percentage of Mozambique's disease burden, with children under five, pregnant women, socially disadvantaged groups and people living with HIV/AIDS being the most vulnerable. In addition, the risk is higher in rural areas than in urban areas. Malaria is also responsible for up to 44 per cent of all outpatient consultations and 57 per cent of paediatric admissions and is a leading cause of low birth weight in newborns. Apart from its direct impact on health, malaria imposes an enormous socio-economic burden on local communities and the country as a whole, especially for the poorest segments of the population.

Nevertheless, in the past three years, the country has experienced a reduction in malaria mortality rates, including in patient cases and deaths. Our experience indicates that the combination of four major control methods — vector control with indoor residual spraying, the distribution of conventional mosquito nets, disease management and emergency and epidemic preparedness and response — is more effective and has produced a rapid decline in malaria morbidity and mortality.

Similarly, the combination of indoor residual spraying, intermittent preventive treatment and

artemisinin-based combination therapy seems to have played an important role in achieving the present level of malaria control in Mozambique. As a result, Mozambique has taken significant steps in reducing the burden of malaria by more than 75 per cent in reported cases since 2006, with a decrease in the number of deaths of more than 40 per cent in the same period.

Our approach to malaria control includes interventions in the Southern Africa region, as malaria does not recognize national borders. In this context, indoor residual spraying in the provinces of Maputo and Gaza has benefited from the regional approach through support from the Lubombo Spatial Development Initiative, a tri country collaborative initiative to fight malaria in the region spanning Mozambique, South Africa and Swaziland. We believe that through regional collaboration, and not only focusing on diagnosis and treatment but also expanding vector-control operations, extensive progress will be made in controlling malaria.

As indicated in the report before us, national leadership and sound strategic measures, coupled with international political will and adequate financial resources, can increase the coverage of malaria interventions and reduce the socio economic burden that the disease represents to the development of our countries. We believe that only intensive malaria control efforts will help African countries reduce child mortality by two thirds by 2015, as envisaged in the Millennium Development Goals. Therefore, a much larger infusion of resources than those currently available is needed to make headway in the fight to roll back malaria. We therefore seize this opportunity to appeal to our partners to keep their financial commitments in support of interventions to roll back malaria.

The challenges before us in addressing the weak health and data collection systems, poor infrastructure, lack of human resources and international funding require that we redouble our efforts to reduce by half the deaths due to malaria in Africa and to halt the disease and begin to reverse its incidence by 2015.

I would like to conclude by stressing that, based on the progress made so far and the commitments adhered to by various partners, we are confident that universal access will soon be a reality and that together we can beat malaria. The Government of Mozambique

remains committed to accelerating and redoubling its efforts to control this scourge.

Mr. Daoud (Sudan) (*spoke in Arabic*): My country's delegation would first like to congratulate Mr. Deiss on his election as President of the General Assembly at its sixty-fifth session. We trust that under his wise and able leadership the Assembly will achieve important accomplishments. My country's delegation would also like to express its support for his efforts and pledges its cooperation with him in ensuring the success of this session.

We also wish to associate ourselves with the statement delivered by the representative of brotherly Yemen on behalf of the Group of 77 and China, and the statement delivered by the representative of Malawi on behalf of the Group of African States.

Africa has achieved great progress since the launch of the New Partnership for Africa's Development (NEPAD), a partnership that expresses the commitment and determination of the States of Africa to put the continent on the path of economic and social growth by taking control of their own development.

Today, as we have crossed the halfway point towards the achievement of the Millennium Development Goals (MDGs) by 2015, Africa is still the only continent suffering from obstacles on its path to the full elimination of poverty and need. Therefore, more concerted effort by the international community is needed to implement the global partnership for development and to effectively fulfil development obligations without delay.

Meeting Africa's development needs, evaluating the status of implementation of various obligations, overcoming challenges and determining the way forward are all part of enhancing the global partnership for development in Africa. The political declaration on Africa's development needs (resolution 63/1) reaffirmed the commitment by the heads of State and Government, ministers and representatives of States Members of the United Nations to address Africa's special needs as contained in the Millennium Declaration (resolution 55/2), the United Nations Declaration on the New Partnership for Africa's Development (resolution 57/2), the Monterrey Consensus of the International Conference on Financing for Development, the Plan of Implementation of the World Summit on Sustainable

Development, and the 2005 World Summit Outcome (resolution 60/1).

The role of regional organizations in peacebuilding in Africa is important for the achievement of sustainable peace, especially in post-conflict States. In this forum, we call for the full implementation of the 10 year plan to build African peacekeeping capacity and enhance the regional consultative process in order to ensure effective support for the African Union and its programmes pertaining to NEPAD.

Despite some progress, the current framework for servicing the debt of low-income countries is insufficient. There is a need to expand the scope of the Heavily Indebted Poor Countries Debt Initiative and the Multilateral Debt Relief Initiative. Also, African countries need to be able to overcome the challenges that prevent them from attaining their HIPC completion points.

Creating a peaceful environment is a prerequisite for economic and social development. The Sudan has a distinguished role in sustaining peace. Arrangements for sharing wealth are among the main elements of the three peace agreements. The fact that the Sudan has joined the African Peer Review Mechanism has paved the way towards government bodies implementing the Mechanism, with a role given to interested civil society and private sector actors. We have also set up a programme within this framework to empower women, spread democracy, raise accountability and enhance the rule of law.

Half of the world's population suffers from malaria or the risk of malaria. More than 3.3 billion people have been affected by the disease, which killed almost a million in 2008. Most of the Sudan's population is threatened by malaria, and over 7 million persons a year are infected, of whom 35,000 die.

Scientific studies indicate that the negative impact of climate change has increased the rate of infection. High temperatures help increase the lifespan of mosquitoes that carry the disease, which directly affects economic and social development in the country. Therefore the Sudan has drawn up a national strategy to combat malaria and has created a specialized unit to fight the disease. It focuses on strengthening means of managing the spread of the disease and on intensifying monitoring operations.

That approach has helped us to develop effective tools and methods for prevention and treatment.

The international economic slowdown, the rise in the prices of foodstuffs and climate change all limit the achievement of tangible progress in implementing NEPAD and in combating the spread of malaria. Thus they threaten our ability to achieve the MDGs by 2015. African countries and development partners must show determination and clear leadership in order to achieve real reform in the areas of debt relief and the international trade system. Such reform should facilitate the membership of developing countries in the World Trade Organization and increase the amount of official development assistance. In addition, to achieve the Goals by the set date, that assistance must be strengthened and aligned with national ownership and the development programmes and plans of developing countries, because development is a collective responsibility and must be achieved through equitable international partnership.

Mr. Sipangule (Zambia): The Zambian delegation has the honour to address the Assembly on the agenda item entitled "2001-2010: Decade to Roll Back Malaria in Developing Countries, Particularly in Africa". Zambia notes with appreciation the report of the World Health Organization on the item, contained in document A/65/210, which my delegation has found very useful.

My delegation also aligns itself with the statement delivered by the delegate of Malawi, the current Chair of the African Union, on behalf of the African Group.

Zambia, as Chair of the Roll Back Malaria Board, wishes to reiterate that, while we recognize that some countries have almost eliminated malaria from their list of public health challenges, it is still a major public health concern in others. The burden of malaria is highest among children under five years of age, pregnant women and the vulnerable in society. In addition to its direct health impact, malaria causes severe social and economic burdens on individuals, households and indeed communities at large. Thus in Zambia, malaria control has been prioritized in the basic health-care package, the National Health Strategic Plans and the National Malaria Strategic Plan.

The Zambian Government strongly believes that every Zambian has a fundamental right to access to effective malaria control, preventive and curative

treatments and care. The Government also ensures those services are delivered as close to the home as possible. The Government and its cooperating partners have established institutional structures and strategies to ensure universal coverage.

The Zambian Government has put in place malaria prevention interventions that include, inter alia, indoor residual spraying, long-lasting insecticide-treated nets and intermittent preventive treatment for pregnant women. The curative interventions are enshrined in prompt and effective case management activities, which focus primarily on providing care for those who are suffering from malaria.

In order to improve malaria treatment, in 2004 the Zambian Government revised its malaria treatment policy by switching from the use of chloroquine as the first-line treatment to the more efficacious artemisinin combination therapy. The drug of choice is artemether-lumefantrine, which is available free of charge in all public health facilities throughout the country.

Zambia has achieved remarkable reductions in the incidence of malaria over the recent past, and that has been attributed to the integrated approach in malaria control activities. As indicated in the above-mentioned report of the World Health Organization, the use of bednets in Zambia has reduced the number of malaria cases by 50 per cent over the past decade.

However, Zambia is committed to cooperating with the World Health Organization and other cooperating partners in efforts to further reduce the incidence of malaria. In that regard, I wish to take this opportunity to inform the Assembly that Zambia will be convening an international meeting of the Roll Back Malaria Partnership Board from 6 to 8 December in Lusaka, the Zambian capital, at which participants will learn from each other's experiences in the last decade. It is my delegation's hope that the Roll Back Malaria partnerships and other cooperating partners will attend that important meeting.

Despite the remarkable progress in controlling malaria in Zambia, a number of challenges still remain. They include late disbursement of committed funds, particularly by our cooperating partners, low utilization rates for insecticide-treated nets and inadequate human resources. We therefore call upon the international community, particularly our cooperating partners, to continue to extend assistance to the Roll Back Malaria

programme and also to our countries in the fight against this number-one killer disease, malaria.

Mr. Shin Boonam (Republic of Korea): African development is a key to the promotion of peace and prosperity in the world. The political, economic and social development of Africa is an important task for the international community as a whole. The New Partnership for Africa's Development (NEPAD) well represents our collective vision and holistic approach to African development.

As the world leaders agreed during the High-level Plenary Meeting of the General Assembly on the Millennium Development Goals (MDGs), Africa's slow and uneven progress towards achievement of the MDGs, further hindered by the recent multiple crises, requires greater attention from the world. To meet the target deadline of achieving the MDGs by 2015, the international community needs to be more involved in providing assistance to the continent. In that regard we must recognize that official development assistance has been an essential tool in meeting African development needs. Recent challenges should not impede the galvanizing of joint efforts.

We are fully aware of the need to ensure adequate resources and to implement our promises. The Republic of Korea is fully implementing its commitment to double its official development assistance to Africa by 2012, compared to 2008, as it declared on the occasion of the second Korea-Africa Forum.

We would like to highlight the idea that development cooperation with Africa should start with the identification of countries' specific needs and conditions. There is no "one size fits all" model for development cooperation.

The Republic of Korea has strived to gain a deeper understanding of Africa's specific demands and priorities and to come up with feasible means to meet those needs by making full use of channels of dialogue such as the Korea-Africa Forum and the Korea-Africa Economic Cooperation Conference. Those events have served as useful opportunities to enhance mutually beneficial partnerships in sectors such as education, agricultural and rural development and information and telecommunication technologies.

As a country that in recent history successfully transformed itself from recipient to donor country, we

have focused in particular on sharing our development experiences. In that regard, the Korean Government has delivered on its commitment to increase to 5,000 the number of participants from Africa — including public officials, researchers and engineers — who take part in our training programmes. We have also increased to over 1,000 the number of World Friends Korea volunteers in African partner countries over the next two years. We believe that that will contribute to bolstering Africa's economic and social development by fostering quality human resources.

A large number of populations in Africa still remain vulnerable to a wide range of health issues, including HIV/AIDS and malaria. The mobilization of resources is crucial in responding to those challenges. The Republic of Korea, which is a pioneer country in the introduction of innovative financing for development, such as the air-ticket solidarity levy, has allocated a significant portion of revenue to fighting those diseases through funding for UNITAID, the International Drug Purchase Facility, and GAVI, the Global Alliance for Vaccines and Immunization

Integrating African countries into the multilateral trading system is critical to achieving their sustainable development. In that regard, the Republic of Korea believes that the successful conclusion of the Doha Round will promote development in Africa and, consequently, the growth of global trade. We fully recognize the importance of ensuring that least developed countries (LDCs) in Africa have duty-free and quota-free market access. We are guaranteeing the access of LDCs' products to the Korean market.

As the Chair of the Group of 20 (G-20) Summit this year, the Republic of Korea will invite two African countries — Malawi, as Chair of the African Union, and Ethiopia, as Chair of NEPAD — to the Summit to be held next month in Seoul. For the first time at a G-20 Summit, the development issue will be discussed as an integral agenda item in the G-20 process. A multi year action plan on eight development pillars will be adopted at the Seoul Summit.

Africa has significant potential as a future driving force of global economic growth. The assistance of the international community is indispensable for the realization of the continent's development potential. It is in our common interest to support Africa's efforts to achieve sustainable development through an enhanced development partnership.

As the saying goes, good company on the road is a shortcut. The Republic of Korea will be good company along the road to African development.

Mr. Feleke (Ethiopia): Allow me at the outset to express my delegation's appreciation to the President for convening this plenary meeting, which is of great importance for developing countries and for Africa in particular. I would also like to express our deep appreciation to the Secretary-General for his leadership and commitment to putting Africa's agenda at the forefront of the work of the United Nations system.

My delegation fully associates itself with the statements delivered this morning on the agenda items under consideration by the representative of Yemen, on behalf of the Group of 77 and China, and by the representative of Malawi, on behalf of the African Group.

Ethiopia also welcomes the reports of the Secretary-General (A/65/152, A/65/165 and A/65/167) under agenda items 62 and 12.

As the Secretary-General has indicated in one report (A/65/152), Africa's leadership and political will, social progress, sustained economic growth and governance reforms are slowly changing perceptions of the continent in today's world and that at the same time, the impact of violent conflicts and poverty in Africa should not be underestimated. It is also worth mentioning that the report highlights that progress has been recorded in the implementation of the New Partnership for Africa's Development (NEPAD), in moving forward the African Peer Review Mechanism and in increasing official development assistance to Africa.

We are also of the view that the integration of the newly established NEPAD Planning and Coordinating Agency into the African Union Commission structure and process has generated new momentum in the implementation of NEPAD priority areas.

NEPAD, as a programme of the African Union, is an integral socio economic development framework for Africa. African countries are therefore collectively and individually implementing the sector-specific strategic priority areas identified within NEPAD, such as those of agriculture, infrastructure, good governance, investment, health and education. African countries have also committed themselves to achieving the Millennium Development Goals (MDGs) by, among

other things, allocating 10 per cent of their budgets to agriculture, 15 per cent to health and 20 per cent to education.

The African Union has also committed itself to good governance through the adoption of several instruments, including the African Peer Review Mechanism. The Mechanism is a self-monitoring instrument with a mandate to encourage participating States to ensure that their policies and practices conform to the agreed political, economic and corporate governance values, codes and standards, as well as to achieve mutually agreed objectives on the socio economic track, as set out in the Declaration on Democracy, Political, Economic and Corporate Governance. So far, 30 countries have become members of the Mechanism.

In keeping with the provisions of NEPAD, the international community has also committed itself to moving forward the vision of NEPAD, as indicated in the report of the Secretary-General. However, much remains to be done if Africa is to extricate itself from the problems it faces and assume its rightful place in the international community. We share the Secretary-General's view that firm determination and leadership are required on the part of us Africans and international development partners alike, so that it is possible to achieve the goals that NEPAD has envisaged. Indeed, if Africa is meaningfully supported in achieving sustainable development, we can move from managing chronic poverty to helping Africa achieve durable economic growth and social development.

When it considered Africa's development needs in the General Assembly two years ago, the international community declared (resolution 63/1) that it was concerned that Africa's share of international trade was only 2 per cent. It also underlined the important role that trade played in promoting economic growth. It also asserted that the high-level meeting represented a unique opportunity to strengthen global leadership and partnership for development in Africa, which is pivotal to bringing Africa into the mainstream of the global economy.

It is our hope and expectation that the current round of trade negotiations of the World Trade Organization (WTO) will be concluded with a successful development-oriented outcome, as initially conceived. In particular, while we appreciate the market-access initiatives in favour of Africa by

Member States, we would like to remind the international community that, if the global partnership for Africa is to be strengthened and, indeed, if the continent is to integrate in and fully benefit from the globalizing economy, then the various trade-related provisions put forward by Africa should be included in the WTO agreement.

It is exactly 10 years since the international community agreed and expressed its determination to tackle the impact of malaria in developing countries, particularly in Africa. Over the years, a broad range of national and international actions have been taken to alleviate the suffering of those afflicted by this disease.

In that regard, my delegation welcomes with appreciation the report of the World Health Organization (WHO) on the Decade to Roll Back Malaria (A/65/210, annex). Ethiopia is of the view that the recommendations in that report, if duly implemented, would further enhance our efforts to control malaria, particularly in priority countries. As the report indicates, the achievement by high-burden African countries of high coverage of their populations with bednets and treatment programmes is encouraging progress towards meeting MDG 4 — reducing mortality rates of children under five by two thirds by 2015.

Notwithstanding the concerted efforts of developing countries and their partners, malaria continues to be the major cause of morbidity and mortality on our continent. As we know, malaria affects the most productive part of a society and impedes a nation's socio-economic development. It is no wonder that the nations that are hard hit by malaria are the least prosperous. The malaria epidemic is one of the deadliest diseases in Africa. Its impact on socio-economic development is still significant, in spite of the considerable political attention and financial support it has been given at the international level. Of the half billion people in the world vulnerable to malaria, the majority live in sub-Saharan Africa.

Malaria is one of the major public health problems in Ethiopia. Approximately 68 per cent of the population lives in malaria-prone areas, and 75 per cent of the country's land mass is malaria-infested. Cognizant of the impact of the malaria epidemic on the socio-economic development of the country, Ethiopia has long made its malaria prevention and control programme a priority in the social health sector. The

2006-2010 national strategic plan, among others, was aimed at rapidly scaling up malaria control intervention to achieve a 50 per cent reduction in the disease within the timeline.

The major achievements of that scaled-up effort have been free distribution of 20 million insecticide-treated bednets, provision of rapid diagnostic tests and artemisinin-based combination therapies at peripheral health facilities, development of district epidemic-preparedness plans, and deployment of 30,000 health extension workers for delivery of health-care services at the community level. Deaths have thus declined substantially, falling by 35 per cent since 1980. The effective scaling up of malaria prevention and treatment has also resulted in dramatic declines in outpatient malaria cases and malaria-related deaths among children in malaria-endemic zones around the country. Recently, Ethiopia was successful in its application for a five-year Global Fund Round.

Maintaining the achievements made so far and producing a significant impact by reducing malaria's overall burden by 50 per cent, thus paving the way towards meeting MDG 4, is heavily dependent on the availability of financial and human resources. Ethiopia is boosting local efforts by stepping up its grass-roots awareness programme on prevention of the disease, but the support of the international community is necessary in order to build on and sustain the progress.

It should be emphasized that both financial and technical resources have contributed to Ethiopia's coverage and access to prevention, treatment and support services. The partnership has also helped strengthen the country's health-care system in general, including aspects such as monitoring and evaluation, and procurement and supply management.

Ethiopia is fully implementing the five main malaria prevention and control strategies recommended by WHO. Since malaria is an ecology-related disease, in Ethiopia the health extension programme has brought coverage to all parts of the country.

Mr. Jaber (Lebanon): My delegation thanks the President for organizing today's meeting on the New Partnership for Africa's Development (NEPAD), and the Decade to Roll Back Malaria, which concludes at the end of this year. We also thank the Secretary-General for his comprehensive reports (A/65/152, A/65/165 and A/65/167) and notes (A/65/62, A/62/Add.1 and A/65/210) on these items.

Lebanon associates itself with the statement delivered by the representative of Yemen on behalf of the Group of 77 and China, in particular its support for the establishment of a monitoring mechanism to follow up on all commitments related to Africa's development under the General Assembly's auspices.

Our meeting comes not only after the conclusion of the High-level Plenary Meeting on the Millennium Development Goals (MDGs), which recognized that more attention should be given to Africa, but also after the second Afro-Arab Summit held in Sirte last week, jointly organized by the African Union Commission and the League of Arab States. The Summit highlighted the strong bond between African and Arab countries and formulated a partnership strategy between the two regions in the areas of peace and security, investment promotion and trade, agriculture and food security, and social and cultural cooperation.

The Afro-Arab Partnership Strategy is an example of the international support inspired by NEPAD. NEPAD was adopted in 2001 by African leaders with the aim of eradicating poverty, promoting sustainable growth and development, and empowering women through genuine partnerships at the country, regional and global levels. The African ownership and leadership of NEPAD have led to significant progress in all areas essential to Africa's development, such as infrastructure, agriculture and food security, health, education and training, environment and tourism, information and communications technologies, and science and technology.

Lebanon enjoys long-standing close ties with the African continent. Many African countries have been home to many Lebanese, and those friendly countries will remain their home for many years yet to come. My delegation fully supports the objectives of the Afro-Arab Partnership Strategy aimed at realizing durable peace and security in the two regions, promoting investment and trade between African and Arab countries and continuing the joint efforts to achieve the MDGs by 2015.

Lebanon believes that closing the MDG gap will only be possible if the international community steps up its support for Africa's development and reverses the negative impact the ongoing economic and financial crisis has had on African countries. In particular, my delegation wishes to highlight the importance of fulfilling official development assistance

commitments, continuing the granting of debt relief, restoring and increasing foreign direct investment and expanding access to global markets for African exports.

History tells us that development cannot be sustained and countries cannot flourish if conflict and instability persist. In that regard, we welcome the specific commitments expressed by the African Union to ensure peace and stability on the continent as demonstrated by its recent expanded engagement in Somalia and the Sudan. That commitment is further strengthened by the work of the Panel of the Wise and the Continental Early Warning System. The International Conference on the Great Lakes Region and the mediation initiatives carried out by the Economic Community of West African States and the East African Community are further examples of strong regional efforts to ensure an environment conducive to sustainable development.

Nonetheless, challenges persist. Although the number of inter-State conflicts has declined, conflicts over natural resources, such as timber and minerals, desertification and declining pastures, droughts and scant water resources, continue to stifle Africa's development potential. Achieving the MDGs and sustainable economic growth is therefore a security imperative. The protection of civilians in situations of armed conflict, in particular women and children, should thus continue to be given special attention by peacekeeping missions in order to safeguard Africa's greatest resource, namely, its human capital.

Lebanon notes with grave concern the high toll malaria continues to exact on Africa's human capital, in particular its children. As of 2008, 85 per cent of malaria cases worldwide were in Africa, threatening the lives of over 200 million people. We therefore welcome the launch of the African Leaders Malaria Alliance last year and the recent increased pledges to the Global Fund to Fight AIDS, Tuberculosis and Malaria, and we urge donors to honour their commitments in this regard.

Rolling back malaria and continuing the fight against HIV/AIDS and tuberculosis, which continue to plague the continent, are necessary for achieving the health-related MDGs. Without healthy children, women and men and unless extreme poverty is eradicated, achieving universal primary education and

enabling vibrant and productive societies will not be possible.

Mr. Seruhere (United Republic of Tanzania): I want to thank the President of the Assembly for convening this joint debate on the New Partnership for Africa's Development and the 2001-2010 Decade to Roll Back Malaria in Developing Countries, Particularly in Africa.

Tanzania aligns itself with the statements presented by the representative of Malawi on behalf of the African Group and by the representative of Yemen on behalf of the Group of 77 and China.

Tanzania welcomes the report of the World Health Organization entitled "2001-2010: Decade to Roll Back Malaria in Developing Countries, Particularly in Africa" (A/65/210), which highlights the progress made in meeting the goals concerning malaria control to be achieved by 2010 under General Assembly resolution 62/180. We acknowledge the progress that has been made in some parts of Africa, including in part of my country, the island of Zanzibar, in reversing the malaria epidemic through political engagement and sustainable national malaria control programmes. Zanzibar has achieved a success rate of over 99 per cent. We call for the continued engagement of the international community and other stakeholders to accelerate further gains achieved in malaria control and elimination.

Malaria is among the biggest health challenges to Africa. An estimated 74 per cent of the continent's inhabitants live in endemic malarial areas and about 95 per cent of the global 2 to 3 million deaths attributed to malaria occur in Africa. Malaria is a major killer of children in Africa, where 24 per cent of all deaths of children under age five are from malaria and malaria-related illnesses.

Malaria is a major economic burden in Africa, where it accounts for 30 to 40 per cent of outpatient visits and 10 to 15 per cent of all disease admissions in hospitals, private clinics and health-care systems. Malaria accounts for as much as 40 per cent of health-care spending in endemic African countries. Malaria costs the continent \$12 billion a year, and consequently malaria has slowed economic growth by up to 1.3 per cent per year through death and lost hours of economic productivity, as well as expended public funds and lost family income. Malaria is thus said to be a disease of poverty and a cause of poverty.

Such statistics are a cause of great concern to Africa and the world at large. We recognize that malaria-related ill health and deaths throughout the world can be substantially reduced with political commitment and commensurate resources, increased public awareness and sensitization about malaria prevention and availability of proper health services, particularly in malaria-endemic countries. Yet each year, we allow nearly 1 million deaths to occur, when those deaths could have been prevented with the universal application of existing tools at our disposal.

In early 2008, Secretary-General Ban Ki-moon appointed a Special Envoy for Malaria to mobilize global support for action on the disease. Following the Secretary-General's call for universal coverage and in response to a growing international push for a long-term commitment to malaria control, the malaria community collectively developed the Global Malaria Action Plan. The objectives of the Plan are to accelerate and sustain malaria control efforts, eliminating the disease where possible, and to ensure investment in research aimed at creating new tools that would permit the eradication of the disease in the long term.

My delegation would like to congratulate the Secretary-General, His Excellency Ban Ki-moon, for his leadership, dedication and commitment to the work of the Organization and for the new momentum he is bringing to the achievement of the Millennium Development Goals (MDGs). We welcome his Global Strategy for Women's and Children's Health and urge the international community to provide the support necessary for its implementation.

Once again Tanzania would like to emphasize the importance of national leadership and global partnerships for meeting the MDGs. Tanzania will do its part. We call upon partners to do their part, as stipulated under MDG 8.

One such partnership that is proving successful is the collective efforts of African leaders through the African Leaders Malaria Alliance, chaired by His Excellency Jakaya Mrisho Kikwete, President of the United Republic of Tanzania. Our focus within the Alliance is to ensure that we attain the 2010 targets for universal coverage of appropriate malaria prevention, diagnosis and treatment interventions. We are confident that, if the requested support is realized, we can attain this target. It is for this reason that we ask for the full

and timely replenishment of the Global Fund to Fight AIDS, Tuberculosis and Malaria.

All of these efforts are enshrined in the NEPAD blueprint. We therefore call on the international community to render its support in meeting the objectives of NEPAD.

We also commend the partnership and support from our friends in the international community aimed at combating malaria. Those efforts complement the efforts of the Secretary-General.

Malaria in Africa can be eliminated in our lifetime. We have the tools to make that happen. What is required now is the enhanced political will of the international community. Let us not only roll back malaria but eliminate it in its entirety. We pledge our part.

The Acting President: I now give the floor to the Observer of the Holy See.

Archbishop Chullikatt (Holy See): As the General Assembly considers the ongoing development of Africa, my delegation takes this opportunity to affirm once again the need for the countries of Africa, jointly and with the support of the international community, to effect the eradication of poverty, to place African countries on the path towards sustainable growth and development, and to halt the marginalization of Africa in the globalization process.

Addressing the special needs of Africa requires partnerships in all areas of society. Those partnerships help to foster greater solidarity and promote more sustainable development throughout the continent. In that regard, the recent decline in the global economy has created new challenges for Africa, as foreign direct investments in the region have fallen by 36 per cent since 2008. The burden of increasing debt also threatens future sustainability and undermines the improvements that have been achieved in recent years.

We know that one of the many factors upon which all of this depends is the health of the African people. As the New Partnership for Africa's Development programme rightly points out, the health and well-being of the African people will help bring about the achievement of poverty reduction and sustainable development in Africa.

In that regard, my delegation is grateful for the recent report entitled "2001-2010: Decade to Roll Back

Malaria in Developing Countries, Particularly in Africa" (A/65/210), and is pleased to see that such progress has been made over the past decade in malaria control efforts. Certainly this is due, in part, to the considerable commitment at the international, regional and country levels.

In particular, my delegation is grateful for the recent initiative of the African Leaders Malaria Alliance, in which African heads of State and Government have come together in order to promote universal provision of malaria-control interventions. We are heartened by the commitment of the members of the Alliance to work together to translate their commitment into greater efforts to eradicate this disease.

Malaria takes the lives of nearly 1 million people each year, almost 90 per cent of whom reside in Africa, with the worst affected areas being in the Democratic Republic of the Congo, Ethiopia, Kenya, Nigeria and Tanzania. Approximately 3.3 billion people worldwide remain at risk of malaria, resulting in 250 million cases each year, 86 per cent of which occur in Africa.

Malaria most devastatingly affects children under the age of five. Many who survive an episode of severe malaria suffer learning impairments or brain damage. Pregnant women and their unborn children are also particularly vulnerable to malaria, which, during pregnancy, is a major cause of mortality, low birth weight and maternal anaemia.

It goes without saying that our focus must remain on treatment, prevention and research. Proper diagnosis is available, and infected individuals can make a full recovery, if provided with the means to do so. Appropriate treatment should be accessible to those who are affected, and individuals must be able to receive affordable, safe and, where necessary, free diagnostic testing and drugs.

We know how reduction in the transmission of malaria is achieved and, in that regard, it is important to recall the Abuja Declaration to Roll Back Malaria in Africa, which calls for the development of mechanisms to facilitate the provision of reliable information on malaria to decision-makers at the household, community, district and national levels, enabling them to make use of appropriate control and surveillance strategies.

Resources must continue to be allocated to ongoing research into developing safe and cost-efficient vaccines, as well as medicines to treat those who are infected.

My delegation takes this opportunity to highlight the work of numerous individuals in Catholic health-care services working on the front lines in countries in Africa to assist those suffering from malaria. The selfless service of those individuals as well as so many others demonstrates their commitment to the well-being of the human family, especially those who are suffering.

These organizations not only provide the resources and technical skills necessary to assist those affected by malaria but have also worked to foster greater development throughout Africa. Working in the fields of education, infrastructure and health-care programmes, often in the poorest and most vulnerable communities, those organizations are vital partners in the long-term development of Africa.

The Acting President: In accordance with General Assembly resolution 49/2 of 19 October 1994, I now call on the observer for the International Federation of Red Cross and Red Crescent Societies.

Mr. Jilani (International Federation of Red Cross and Red Crescent Societies): Despite the many successes in combating malaria, that killer disease continues to take the lives of nearly 1 million people every year, mostly children under the age of five; and, as we all know, malaria is a disease that is 100 per cent preventable and treatable.

We have seen that countries that have achieved high coverage of their population with mosquito nets, as well as improved access to effective diagnostics and treatment, have made enormous progress in the fight against malaria. Countries such as Eritrea, Rwanda, Zambia, Tanzania and Sao Tome and Principe have seen reductions in malaria cases and deaths by up to 50 per cent, demonstrating that the targets of the Millennium Development Goals can be achieved.

The malaria programmes implemented by national Red Cross and Red Crescent Societies have focused on scaling up network ownership and ensuring that net distribution is accompanied by extensive and prolonged community education and empowerment efforts. In various affected countries, it has been shown that combining net distribution with follow-on “hang

up” campaigns, carried out by Red Cross/Red Crescent-trained volunteers in the community, significantly reduces the incidence of malaria.

Combining distribution with follow-on support and training is especially crucial when trying to reach the most vulnerable groups, such as those living in remote areas, refugees and people affected by stigma and discrimination. Trained Red Cross and Red Crescent volunteers who live in the very same community and speak the local language are ideally placed to help families overcome any social or cultural barriers that may prevent the effective hanging and use of nets.

Since 2002, as a direct result of the net distribution carried out by the Red Cross and Red Crescent Societies, more than 300,000 malaria deaths have been averted, while 18.2 million people have been protected against malaria.

Furthermore, in a recently published report on a pilot project involving an innovative approach to malaria treatment, it was shown that the community approach works. The pilot project “Beyond prevention: home management of malaria in Kenya” showed that, even in the most remote areas, providing free, effective medicines to trained local volunteers can alleviate both the malaria disease burden and the strain on the health system. The malaria home management project in Kenya reaffirms earlier studies that trained community workers can safely distribute and administer malaria treatment.

The key message of the Red Cross and the Red Crescent Societies is that communities must own the activities that support the prevention and treatment of malaria at the individual and household levels. To increase ownership and action, families must have the support necessary to understand the transmission of malaria and how it can be prevented through the use of nets and treated by accessing effective treatment at the first signs of danger.

In 2009 alone, the Red Cross and Red Crescent Societies reached 3.7 million households, or 14.8 million individuals, through community-based activities to prevent malaria and to ensure that care providers are aware of the danger signs of malaria and the need to immediately access effective treatment.

The International Federation of Red Cross and Red Crescent Societies will further step up its efforts

by developing more “hang up” campaigns, by covering more affected countries and by teaming up with partners to accelerate the delivery of nets to all malaria-endemic areas.

Additionally, the Federation also includes a malaria component in its emergency response activities when disasters take place in malaria-endemic areas or where epidemics are possible as a result of a natural disaster.

The Acting President: In accordance with General Assembly resolution 64/122 of 16 December 2009, I now call on the observer for the Global Fund to Fight AIDS, Tuberculosis and Malaria.

Ms. Lwin (Global Fund to Fight AIDS, Tuberculosis and Malaria): When the world leaders came together to sign the United Nations Millennium Declaration in 2000 (resolution 55/2), dying from a mosquito bite was a reality in large parts of Africa, Asia and Latin America. A decade later, one area of development that is inspiring hope is our progress in the fight against malaria to the point that one day soon it could really be eliminated as a public health problem in most malaria-endemic countries. If countries continue to scale up their progress at the pace set in recent in health care, we will see tremendous progress.

The Global Fund to Fight AIDS, Tuberculosis and Malaria is proud to be a major international funder of malaria programmes, with more than \$5 billion committed in 82 countries to date. The Global Fund has invested particularly in the universal coverage of insecticide-treated mosquito nets and had distributed 104 million bednets by the end of 2009. We estimate that currently available funds will enable us to purchase approximately 250 million bednets, a significant step forward in addressing the estimated need for the most vulnerable populations.

Global Fund grants have also supported the indoor residual spraying of insecticides in more than 19 million sites and have treated 108 million cases of malaria, in accordance with national treatment guidelines.

Global Fund financing is having a substantial impact on malaria morbidity and mortality worldwide, with an increasing number of countries reporting a reduction in malaria deaths of more than 50 per cent.

Malaria control interventions also have an important impact in reinforcing health systems. Hospital beds are being freed up, children are remaining in schools, workers are staying at work and women are delivering healthier babies, reminding us of the close linkages among the Millennium Development Goals (MDGs).

That progress is due to excellent political leadership in countries affected by malaria and increased technical support from partners, such as the World Health Organization and the Roll Back Malaria Partnership. In no other area of development has there been such rapid and direct correlation between available resources and the impact in fighting malaria at the country level.

I am delighted to report that, earlier this month, donors from the public and private sectors made a financial commitment of \$11.7 billion to the Global Fund for the years 2011 to 2013. That contribution is the largest ever financial pledge for the collective international effort to fight the three pandemics of AIDS, tuberculosis and malaria.

At a time when so many Governments are tightening their belts at home, such commitments send a powerful message that health is integral to sustainable development. We cannot be complacent on the heels of our success so far. If we are truly going to eliminate malaria as a public health threat in endemic countries, we must maintain the pressure on all fronts in the coming years by renewing nets, ensuring availability of drugs and supporting effective malaria interventions. The Global Fund will be ready to support those activities through our continuing effort to seek the additional resources needed to fight malaria.

On behalf of the Global Fund, let me conclude with simple but sincere thanks to all Members for their collaboration and commitment to the fight against malaria and to global health. Because of their efforts, achieving the MDGs for malaria is not some elusive dream, but something that is actually within reach in many countries.

The Acting President: We have heard the last speaker in the debate on this issue.

The Assembly has thus concluded this stage of its consideration of agenda item 62 and its sub-items (a) and (b), and of agenda item 12.

The meeting rose at 5.30 p.m.