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Statement by

H.E. Mr. Osman Saleh
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at the

High-level Plenary Meeting of the 65th session of the United Nations
General Assembly on the Millennium Development Goals

New York, 21 September 2010

Distinguished Co-Chairs,

Five years to the target date of 2015, the Millennium Development Goals (MDGs) are begging to be achieved and I stand before you to challenge us that they **SHOULD** and **CAN** be achieved with renewed commitment and by refocusing our actions for the next five years. This makes, Co-Chairs, this High-level Plenary and your chairmanship so important. I wish to congratulate you, on behalf of the Eritrean delegation, for presiding over this historic gathering which addresses the challenges and getting back on track to achieve the MDGs by 2015.

At this juncture, I wish to thank Ambassador Paul Badji of Senegal and Ambassador Carsten Staur of Denmark who worked tirelessly, in their capacities as co-facilitators, to give us the outcome document before us today. They did indeed an excellent job and deserve our deep appreciation.

Co-Chairs,

The MDGs are the most unifying goals in the United Nations system. Therefore, the achievement of the MDGs should continue to remain the top priority of the development agenda. We should stay the course and press on the race we started at the beginning of the Millennia. Let us keep the promises we made at the Summit of September 2000. If we do not deliver these promises come 2015, we would be terribly failing the people who are looking up to us and the credibility of our multilateralism will adversely be affected. That is why this delegation finds it compelling to challenge ourselves at this juncture.

I wish to draw the attention of this august Assembly to the 2007 Millennium Development Goals Report of the United Nations that stated, “...that the **MDGs will be attained only if concerted additional action is taken immediately and sustained until 2015. All stakeholders need to fulfill, in their entirety, the commitments they made in the Millennium Declaration and subsequent pronouncements.**” Therefore, we should remain committed.

Distinguished Co-Chairs,

My own country, Eritrea, is committed and is doing its best to achieving the MDGs by 2015. It has invested hundreds of millions of dollars, especially on infrastructure for food security, to make hunger history. In its first national Millennium Development Report (MDGR) of November 2006 Eritrea had asserted that it is “...**on track to achieve the goals relating to gender equality in primary education, child health, maternal health, HIV/AIDS, malaria and other major diseases, and access to safe water.**” The second national report, which will be published in the coming weeks, updates the progress Eritrea has made towards the achievement of the MDGs since 1995. In my brief statement, I will focus on the following four areas.

1. Health

As we all know, 3 out of the 8 MDGs and 6 out of the 17 targets directly relate to health. My intervention discusses where Eritrea is at this juncture on the MDGs as well as their targets and indicators.

The significance of the MDGs lies in the linkages between them—they are a mutually reinforcing framework to improve overall human development. The 8 MDGs are synergetic and cannot be achieved in isolation. In the comprehensive nature of the MDGs is the recognition that development is an intersectoral and interdependent process. It is obvious that improved nutrition affects school completion rates, improved education levels contribute to better health, and better health contributes to poverty reduction, and so on.

Nine indicators have been used to monitor progress made in the health sector at two time intervals: 1993-95 and 2010. I am pleased to report that remarkable progress has been made in most areas of health during the last 15 years in Eritrea. The under-five mortality, infant mortality and maternal mortality rates have declined between the two time intervals (1993-95 to 2010) by 53.7%, 41.7% and 51.3%, respectively.

This progress in the health sector has come about as a result of the Government’s heavy investment, in collaboration with some partners, in the construction of new health facilities, upgrading and rehabilitating of existing facilities and the provision of equipment, drugs and other supplies. Perhaps the most important investment the Government made in order to achieve these results is in the area of human resources development. At present, 75% of the population has access to health care within 10 Km radius as opposed to 40% at the time of liberation in

1991. Immunization coverage for the third dose of DPT and Hepatitis B to children between 12 and 23 months is at over 90%. Eritrea is certified for eliminating tetanus and being a polio-free country. HIV/AIDS prevalence was estimated to be 2.4% in 2002. At the present time (2010), it is down at 0.7%, which is a 71.0% decrease in this killer disease.

Notwithstanding, there are two areas of concern in the health area. At 43.7% of all Eritrean children, the prevalence within the underweight children was already high in the 1993-95 time interval. Even though it came down to 38.8% by 2010, the decline was a modest 11.2% in the 15-year period under review. Similarly, while there is an impressive 65.5% increase in births attended by skilled health personnel between 1993-95 and 2010, about 34.1% of all pregnant women have access to this vital service during delivery at the present time.

2. Education

Upon Eritrea's liberation in May of 1991, my Government placed education among the list of top priorities for the country. Eritrea strongly believes that education is core for the overall and sustainable development of the nation. On this premise, my Government made education free to all from primary to tertiary levels.

The Education Sector Development Programme (ESDP) outlined in 2005 represented a significant step forward for the education sector since it advances a comprehensive approach to improve access to basic, adult, general, and technical and vocational education. In this connection, Eritrea has made significant progress in rehabilitating and expanding the education sector in the past 20 years.

Two indicators, net primary school enrolment and literacy rate of ages 15 to 24, have been used to monitor progress in education. The indicators show that huge advances have been achieved in enrolment in elementary school education. It rose from 30% in 1993-95 to 56.2% in 2010, an increase of 87.3%. In the same period, it is commendable also to see literacy rate of 15-24 years old reaching 85.2%. Despite this gain, however, the area of education still remains a challenge to the Government and certainly more resources will be needed to enhance access to education.

Participation in education is, nevertheless, not determined solely by expanding access to education. Whether or not communities take advantage of the increased opportunities is also influenced by a number of other determinants, including economic, cultural and religious factors. For example, the cultural prejudice against women's education is a well established phenomenon in many societies in the world, especially in the developing ones.

3. Gender Equality

Significant progress has been made in gender equality at all three levels of the educational ladder, elementary middle and secondary education and in literacy. The ratio of girls to boys has declined as we move up the three levels of

education. For example, the ratio for primary education has gone up from 80% in 1993-95 to 96.4% in 2010, an increase of 16.4 %.

4. Environment

The number of people with sustainable access to improved sources of water has increased from 21.7% in 1993-1995 to 57.9% at the present time. This is an increase of 167.0%. Eritrea being a non-oil producing country, more than three quarters of its population uses solid forms of energy. The presents not only a major threat to the environment but also a serious constraint to the country's development efforts. Modest gains have been made in sanitation. A lot more needs to be done in this vital area.

Co-Chairs,

Despite the challenges we are facing, it is gratifying to witness that Eritrea is projected to achieve most of the MDGs by 2015. We realize, however, that this is no cause for celebration for three reasons.

First, Eritrea is off-track in two crucial areas: (1) eradication of extreme poverty and hunger, and (2) achievement of universal primary education.

Second, the general consensus is that the MDGs, even if they were to be fully achieved, represent only the minimum benchmarks rather than the culmination of full development itself.

Third, the road map to 2015 is based on crucial assumptions; including the resolution of the no-peace no-war status of the border conflict with Ethiopia, the absence of drought, the robust performance of the economy, and the successful mobilization of resources-- both domestic and international-- necessary for the achievement of the MDGs.

Distinguished Co-Chairs,

In conclusion, it is this delegation's fervent hope that the member countries, the United Nations agencies and the international community gathered here work together, in true partnership, to make the MDGs a success. Then and only then, we will be able to see the accomplishment of purpose that we all could be proud of. Let us go to work and make it happen!

I thank you, Co-Chairs, for your attention.