

**Bismillahir Rahmanir Rahim**

**The Secretary General of the United Nations, Mr. Ban Ki Moon,  
Excellencies,  
Ladies and Gentlemen,**

**Assalamu Alaikum and Good Afternoon.**

I warmly congratulate you, Mr. Secretary General, for your impressive “Every women and, Every Child” project, which has significantly improved the lives of millions of women and children around the world. I also applaud you for launching the “Global Campaign and the Strategy for Women’s and children’s Health” last year. I commend all of those having pledged their institutional and financial support to implement this strategy including many governments, philanthropists, NGOs, private sector companies, and healthcare professionals.

I feel honored to be here today as a woman and a people’s representative to speak on Bangladesh’s aspirations and challenges in delivering health services to its 48 million women and 50 million children.

**Excellencies,**

Eleven years ago here in New York, I joined 189 world leaders in adopting the “Magna Carta for Development” – the Millennium Declaration. On that historic occasion, I promised to realize the vision of my father and the Father of the Nation, Bangabandhu Sheikh Mujibur Rahman – To create a healthier, prosperous and equitable nation for every woman, man and child in Bangladesh. My government’s aim is to transform Bangladesh into a middle income country by 2021, including better education,

health, nutrition and empowerment for every woman and child in Bangladesh, especially the most vulnerable.

A decade later, let me say that as a least developed country with millions of climatically vulnerable people and resource constraints, Bangladesh remains ahead of the pack in achieving its millennium goals. Based in our belief that maternal and child health form the foundations of a healthy nation, we have placed women's and children's health, education, empowerment and social safety nets at the center of our national development agenda. Our strategy has already reaped great successes in women's and children's health in several areas, which I would like to share with you now.

### **Excellencies,**

- Bangladesh has reduced Infant Mortality Rate (IMR) by 45 % since 1990 and remains on track to attain the IMR target of MDG -4.
- We have reduced Maternal Mortality Rate (MMR) by 66 % since 1990 and are on track to attain the MMR target of MDG -5.
- Bangladesh has kept HIV/AIDS prevalence, especially in women, to less than 0.01 % and therefore, is on track in achieving MDG -6.
- We have raised life expectancy of women from 58 to 67 years since the 1990s.
- We have raised the vaccination rate of children under five years old to 81.9 %, and Vitamin A supplement feeding to 88.3 %.
- Ante natal check-ups by trained nurses have been raised from 29 % in 1996 to 51.7 %.

- Community Health Clinics, 11,000 of planned 18,000 are operating since we assumed office. Each one is serving 6000 people, especially mothers and children.
- Maternal Health Voucher Scheme provides monetary assistance to 250,000 poor pregnant women every year.
- Bangladesh has raised the mortality rate of children under five above the global average by successfully deploying the Expanded Program on Immunization (EPI) against six preventable diseases. We are also successfully combating diarrheal diseases through e-health services.

**Mr. Secretary General,**

In the Global Campaign last year, Bangladesh made some pledges. One was to double the percentage of healthy births by 2015 with the assistance of skilled health workers. Therefore, under our National Health, Population and Nutrition Development Program, a midwifery course has been introduced with about 100 midwives already trained. Our aim is to have 3000 trained midwives by 2015, and 7,000 of them in a few more years.

Moreover, we are upgrading 59 district hospitals for emergency obstetric care and preparing them as Women Friendly Health Service Centers. We are also formulating a “National Action Plan” and an “Adolescent Reproductive Health Strategy” to increase awareness on reproductive matters and prevent adolescent pregnancies. In this regard, we have initiated measures to improve the adolescent health service standards to international levels in one third of our hospitals by 2015. At the same time, we are already expanding the Integrated Management of Childhood Illness (IMCI) facility to all our 480 districts from the current 325 districts, by 2015.

Today, Bangladesh with a population of 150 million is not defined by mere developmental statistics, but as a nation leading

the global discourse in democracy, women’s empowerment, food security, reducing child and maternal mortality, counter terrorism and climate change. Recognizing that the aforementioned areas are largely dependent on resources and are mutually reinforcing, we have revised our National Women Development Policy, National Children Policy, National Education Policy and are shortly revising the National Health Policy We are trying to direct all available resources to strengthen these areas.

Despite our own efforts, Bangladesh is a climatically vulnerable country with numerable health challenges. Our country –led programs deserve to be supported by the international community and the global partners in the “Every Woman Every Child campaign”. Access to affordable life saving medicines for women and children remains key in combating health issues, and should be ensured through patent waiver for pharmaceuticals for LDCs beyond 2015.

Importantly as mentioned in the Global Strategy, we need more assistance for health, and early implementation of the pledge of US \$ 40 billion from our campaign partners. I call upon all of you to reinforce our collective commitment to make a life changing difference for “Every Woman, Every Child” in our world, as the future lies in their well being.

**Khoda Hafez!**  
**Joi Bangla!**  
**Joi Bangabandhu!**  
**May Bangladesh Live Forever!**

