



**STATEMENT ON BEHALF OF THE GROUP OF 77 AND CHINA BY H.E. MR. SACHA LLORENTTY, AMBASSADOR, PERMANENT REPRESENTATIVE OF THE PLURINATIONAL STATE OF BOLIVIA TO THE UNITED NATIONS, CHAIR OF THE GROUP OF 77, AT THE 11TH SESSION OF OPEN WORKING GROUP ON SUSTAINABLE DEVELOPMENT GOALS (SDGS), ON "HEALTH AND POPULATION DYNAMICS AS WELL AS EDUCATION AND LIFE-LONG LEARNING" (New York, 5 May 2014)**

Distinguished Co-Chairs,

1. I have the honor to deliver this statement on behalf of the Group of 77 and China.
2. Once again we would like to thank you for your work on providing the revised Focus Areas Document, which serve as an important input toward a successful outcome for the SDGs.
3. The Group recognizes the specific target a) on reducing the maternal mortality ratio to less than 40 per 100,000 live births, end preventable new-born and child deaths and reduce by x% child and maternal morbidity, and target b) to end the epidemics of HIV/AIDS, tuberculosis, malaria and neglected tropical diseases by 2030. These targets will require, as stated in the outcome document of Rio+20, further articulation on collaboration and cooperation at the national and international levels to strengthen health systems through increased health financing, recruitment, development and training and retention of the health workforce, through improved distribution and access to safe, affordable, effective and quality medicines, vaccines and medical technologies, and by improving health infrastructure.
4. The Group recognizes the fundamental importance of target c) on reducing by x% the risk of premature mortality from non-communicable diseases (NCDs), injuries and promoting mental health with strong focus on prevention. The G77 and China reiterates its previous statement on NCDs, highlighting that diabetes, heart and respiratory diseases accounted for 34.5 million deaths in 2010 of which 80% were in low and middle-income countries. This figure is expected to double within the next 20 years. This development trend is unacceptable and policies must be proactive and include access to health information and services, information on consumption and lifestyle and how to prevent health risks. Not only will this reduce health provision costs, but also contribute to economic benefits through a growing capable workforce.
5. We reaffirm the crucial importance of both targets d) and f) that address achieving universal health coverage, including financial risk protection, with particular attention to the most marginalized, and ensuring universal access to comprehensive sexual and reproductive health for all, including modern methods of family planning. The Group firmly believes that achieving universal health coverage as well as universal access to comprehensive sexual and reproductive health will require both national policy space for developing countries to be able to prioritize public expenditure and national policies for sustained investment in national health budgets, as well as international means of implementation, particularly with regard to new and additional financial resources and technological development to strengthen national healthcare services and healthcare technologies. In this regard, the Group is of the view that the critical caveat "according to national priorities" should be inserted into the proposed targets d) and f).
6. In previous OWG discussions on social protection, the G77 and China has emphasized how

austerity measures, as well as macroeconomic conditions attached to development finance loans from the international financial institutions, have serious implications for the ability of governments to prioritize financial resources for social sector budgets, particularly the health and education budgets. Fiscal adjustment through public budget cuts and rationalization of social expenditures run the high risk of deteriorating and shrinking national public health sectors rather than strengthening and expanding them.

7. We would like to reiterate that despite the progress in discussion and dialogue and cooperation at the international level, migration remains inadequately reflected in development frameworks, development agendas and sectoral policies at both national and global levels. The slow pace taken to address migration policies with the reality of human mobility at these levels will continue to expose migrants to negative public perceptions and inadequate protection of their rights.

8. The Group of 77 and China holds the view that addressing global migration as a global phenomenon is supportive to the achievement of the international agreed development goals, including the Millennium Development Goals. International migration and development mutually influence one another. We would like to recall that migration if properly managed can serve as a powerful catalyst for development, thereby benefiting communities of origin and destination.

9. Finally, The Group would like to remind the International Community one more time that when developing education-related Sustainable Development Goals, more attention needs to be placed on relevant and measurable learning outcomes. For example, we must ensure that not only a greater amount of children are educated, but also that the education these children receive is of high quality delivered by adequately qualified teachers - in the most rural areas as well as areas affected by conflict and disasters. Special attention must be given to traditionally vulnerable groups, who are girls, working children, rural and indigenous children, those with disabilities, children living with HIV/Aids, children in conflict, migrants, orphans and linguistic and cultural minorities. Inequalities need to be addressed through a case by case approach, rather than a one-size-fits-all target for countries. The need for Means of Implementation in this area should be focalized on: the commitments by developed countries to support efforts in developing countries on education activities and programmes, through provision of financial resources, capacity-building and technology transfer.

I thank you.