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Address by Mr. James P. Grant
Executive Director of the United Nations Children's Fund (UNICEF)
to the
Foreign Relations Dinner
International House

"Crises in the North/Solutions in the South:
Putting Crises to Work for People"

Tokyo, Japan
17 May 1989

[Includes Talloires Declaration]

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CRISES IN THE NORTH/SOLUTIONS IN THE SOUTH:
Putting Crises to Work for People

I am very pleased to join you in Tokyo today, and to address this distinguished gathering at the Foreign Relations Dinner of the International House.

In my remarks today, I would like to stress two areas of action which have emerged in this latter part of the 1980s as principal challenges before us just at the time we are experiencing a rapid and welcome easing of the post World War II ideological and military Cold War between East and West.

I will contend, first, that countries of the industrialized North face prospects of major economic upheaval in the near future, but that crises can still, at this stage, be avoided. The key to the disequilibrium between the massive current accounts deficits of the U.S. and the massive surpluses of Japan and the Federal Republic of Germany lies in restructuring through growth - but such an approach is likely to be successful only if it includes restoration of economic progress in the South.

Effective restoration of economic progress in the South will require facing a second challenge - i.e., it will require putting into action creative, do-able plans to restore development momentum in the social - the human - as well as in the more narrowly economic sectors. Restoration of social progress is required both to assure sound, sustainable growth in the developing countries, but also to assure widespread public support in the North for expanded assistance and for liberal trade policies.

In fact, at this moment in history, some of the keys to healing and strengthening the global community may be very similar to those which unlocked the doors to Japan's phenomenal economic and social successes of the past four-and-a-half decades. Many are aware of the importance of the economic stimulus provided to Japan in the late 1940s and early 1950s by the large scale flow, first, of economic assistance and, later, of American expenditures as a result of the Korean War. Far less well known is the contribution made by the parallel and even preceding progress in social reform and investment in improvement of Japan's human resources through basic education, nutritional improvement and basic health services. For example, in pre-war Japan the infant mortality rate was comparable to that of India today. Today the IMR of 5 is, along with Finland, the lowest in the world.

Your highly successful post-war land reform was the model for subsequent, equally successful land reform programmes in Taiwan and South Korea. Their economic "miracles" have been paralleled, and strongly reinforced, by their social development miracles. Tokyo, Taipei, Hong Kong and Singapore all now have infant mortality rates lower than Washington, D.C. Your Child Welfare Act went into effect the first day of 1947; the next year you set minimum standards for the care of indigent children; the following year - 40 years ago - UNICEF arrived at your invitation to help care for your children, thousands of whom were left homeless and in squalid conditions in the aftermath of World War II.

Societies such as those of Korea, Taiwan, Hong Kong and Singapore have achieved their own development miracles on very parallel paths. Each has benefited not only from timely inflows of external capital in their early stages in the 1950s and 1960s, but also from forward looking policies in such areas as land reform, universal primary education, organizing of farmers associations, child health, and so forth.

Hard choices

As a preface to my main theme today, there have been three historic factors which have contributed to the very possibility of the main challenges before us.

The first was captured by Arnold Toynbee over half a century ago when he said, "Our age is the first generation since the dawn of history in which mankind dared to believe it practical to make the benefits of civilization available to the whole human race". In the post-World War II era we have witnessed historically unprecedented improvement during which more progress was made for children as a whole than during the preceding 2,000 years. Between the end of World War II and 1980, for example, child death rates in the developing countries were reduced by half.

Unfortunately, today the development momentum of the past 45 years is not only dangerously stalled - but, in the 1980s, we have seen actual retrogression in most of Latin America and Africa, and particularly among the most vulnerable groups, including lower income women and children in several major industrial countries such as the United States and in Western Europe.

A second historic factor is that along with the new capacity of our era, a new morality has been gradually evolving in these same decades since the end of World War II. Many of us are compelled to seek remedial action to restore momentum and a more holistic, humanistic, and sustainable approach to development, even when the suffering we seek to alleviate occurs outside our immediate field of vision, and far from our own political borders. As we become capable of far more, it has become increasingly apparent that morality must be made to march with the new capacity. For example, if 40,000 children were dying each day from causes which we could not do much about, that would be tragic and regrettable. But when two thirds of these children die every day from causes for which we have long-since discovered low-cost cures and prevention, then it becomes not only tragic but is also increasingly seen as obscene and immoral.

The third historic factor is the harsh reality that few of the hard choices that have led to major advances in the past century have been taken without there first having been tragic, severe crises which provided the tremendous energy required to overcome the massive inertia of prevailing policies.

Thus, it took the Great Depression to achieve the breakthrough to the New Deal in the United States. The tragedy of World War II preceded and motivated the establishment of the United Nations and the Bretton Woods institutions. World War II and the awful, often painful struggles of whole peoples to control their own countries and their own destinies preceded the end of colonialism. World War II and the advent of the Cold War were the background for the unprecedented act of international economic cooperation known as the Marshall Plan. Out of the disaster of World War II arose the new Japan - now a preeminent power in so many ways - and then Taiwan, South Korea, Hong Kong and Singapore. The Cultural Revolution followed by economic crisis preceded the historic shifts in Chinese economic policies; and increasingly inadequate economic performance of the Soviet economy preceded the dramatic shifts in Soviet policies of recent years.

Crises, of course, are dangerous. They are not only costly themselves, but they can lead to still more costly crises. We saw this in the 1930s, during which the Great Depression that brought on the New Deal also contributed to the rise of fascism and world war, and we have seen it in the past three decades, during which the Cold War that has encouraged economic assistance by both blocs has cost the tremendous price of the global arms race and externally supported regional conflicts. In all of these cases, we paid dearly - in terms of massive human suffering - before finally facing up to the fact that true innovation was required. Only then did choices which were difficult to push through on the short-run come to be recognized as not only essential but reasonable for our humane survival as a civilization.

At our current moment in history, those suffering the most from the repercussions of economic and social crises of the 1980s - the poor, including particularly vulnerable women and children - are those with the least power to act. Do those with the power to act have the statesmanship to encompass the concerns and to learn from the lessons of those who already feel the crises?

Our challenge at this juncture is to determine, first, whether the present multiple crises of the 1980s are sufficiently severe to stimulate a major new opportunity for creative approaches in the coming one to two years. Or, perhaps stated more accurately, it is to determine whether we have developed, or are on the verge of developing, the political will and sophistication to react to the present multiple crises - without the further catastrophic suffering of a serious depression or even of a major war - by making the hard choices to exploit new development opportunities.

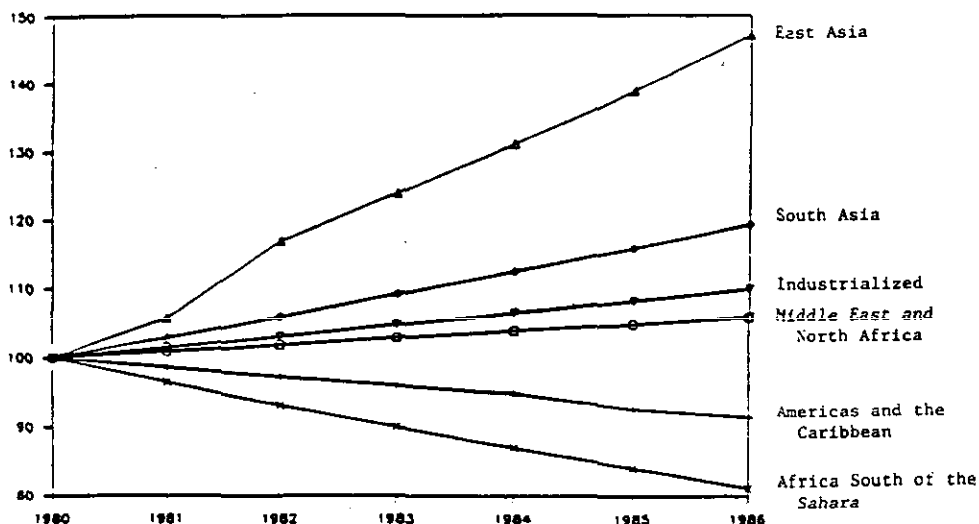
If, indeed, we are up to this challenge of political will, then we must face a second challenge: how to use that precious political will for effective change - to present creative, do-able plans of action to support opportunities for progress in overcoming poverty and to restore development momentum on a sustainable basis.

Darkness before the dawn

The first question is, of course, whether we have reached that "darkness before the dawn" - that point at which we have tolerated all that we will, and at last have mobilized the political will to support major new policies.

We certainly have been given ample evidence of the dark times currently around us in major parts of the world. The financial crises of much of the Third World are very real indeed. Per capita income is down 15 per cent for Latin America as a whole; 25 per cent in Africa south of the Sahara. And relevant debt ratios were worse in 1986 than in 1982. The impact is heaviest on the poorest countries, and even within them, a disproportionate share of suffering is borne by the most vulnerable.

GROSS DOMESTIC PRODUCT PER CAPITA 1980-1986
(1980=100)



A few years ago, Tanzanian President Nyerere asked, "Must we starve our children to pay our debts?". I regret to say that actual practice has all too often answered with a "yes", and some millions have died as a consequence, including more than 500,000 in 1988 alone. The strategies followed in the past seven years may have succeeded in containing the repercussions of Third World debt problems by the industrialized countries, but at the cost of tremendously increased human suffering in many developing countries. The strategies have kept the Third World part of the international financial system, and banks have had time to strengthen their balances. But make no mistake: the costs of this "success" for many developing country debtors has been appalling.

Dr. Michael Faber of the Institute for Development Studies (IDS) in Sussex recently depicted the plight of such debtors with this sad but appropriate adaptation of the story of Sisyphus to the 1980s: "The Third World debtor is the Sisyphus of the modern age - but with this difference from the tragic hero of antiquity: every time this Sisyphus' rock rolls down to the bottom of the mountain, he finds that it has become heavier, and each time that Sisyphus looks up at the top, behold the mountain has become higher!"

Furthermore, we have seen arms expenditures rising significantly in the 1980s - to more than one trillion dollars annually (until the welcome slowing of the past year). Many claim that the increases are beyond the sustaining point for most countries, including the superpowers. Environmental degradation is still accelerating, as is so usefully documented and analysed in the "Brundtland Report", Our Common Future: the Report of the World Commission on Environment and Development. AIDS is a new problem - an actual threat in itself - but also a great threat to other necessary programmes as increasingly large sums are diverted to the necessary fight against this new and growing danger.

Crises in the North; solutions in the South

Two additional major areas of deterioration which will contribute further to this darkness before the dawn deserve more attention than they have yet received in terms of their potential for releasing creative pressure in the near term to overcome the inertia of past policies. It is these two which hold the potential to reveal, against the horizon, rays of a greater hope for the future than the other crises which we have been discussing, because these two directly and significantly affect the well-being - the immediate self-interest - of the North. (And it is in the North, of course, where lies the power to act.)

The first is the emerging economic crises of the Western industrial world, in which far more difficult circumstances exist than surface appearances indicate. The United States needs to reduce its great balance of payments deficit by more than US\$100 billion a year if it is not to acquire the altered standard of living, status, and power of a major international debtor society. The economic crisis of the industrialized world has been largely concealed and ameliorated in the mid-1980s by virtue of the U.S. becoming the

"engine of growth" for much of the world, but at the cost of more than doubling its national debt and shifting from being the world's largest creditor nation to the world's largest debtor. This is a role which is no longer sustainable.

At the same time, Japan and Western Europe (notably the Federal Republic of Germany) need to restructure their economies to reduce their surpluses by almost a comparable amount. Japan, for example, has progressed in the past four decades from a country which received development funds to the world's largest donor nation.

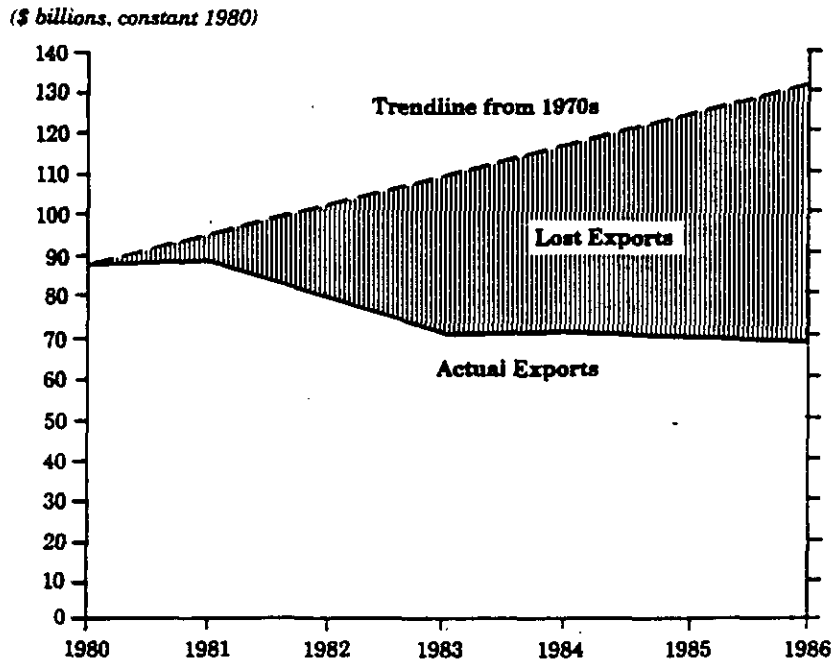
We are faced with two basic alternatives. One is for the United States, and its trading partners in the industrial world, to get out of their present situation through further massive changes in currency values, U.S. austerity, and recession. However, this would bring incalculable disaster to the entire world. It would constitute a modern day Samson bringing down the pillars of the temple.

There is another alternative, however: to restructure in the context of growth - to design the entire progressive restructuring of the imbalances between the United States deficit and the Japan/Western Europe surpluses in the context of promoting global growth. The prospect of restructuring the United States external deficit through growth is not new; it has, however, been interpreted to date primarily within the context of the United States, Japan and Western Europe. Frankly, it probably will not work within that limited framework. This is because the democratic political processes in the United States, Japan and Western Europe at this point do not allow the rapidity of structural response within each society which would be needed to restructure the industrial world within an acceptable time frame of, say, five years.

Restructuring through growth has the potential to work, and could help avoid major catastrophic economic upheaval. But it will work if - and only if - we involve the Third World in a major way with this restructuring. The economic well-being of the North generally requires the restoration of economic progress in the South. So the U.S. Overseas Development Council (ODC) reported last year:

"The negative impact of the economic downturn in the developing countries on the U.S. economy was direct and measurable: U.S. exports to all developing countries dropped from US\$88 billion in 1980 to US\$77 billion in 1985. If exports had grown in the first half of this decade at the same rate as in the 1970s, the exports would have totalled about US\$150 billion in current dollars. In addition, the global recession cast doubt on the ability of the middle-income debtor countries to make their debt service payments to commercial banks in the industrial world."

U.S. Exports to the Third World in the 1980s: Lost Opportunities (\$ billions, constant 1980)



Source: ODC calculations from *U.S. Department of Commerce, Highlights of U.S. Export and Import Trade*, various December issues.

The economic downturn in so many developing countries has adversely affected the exports of other industrial nations as well.

A study conducted under the leadership of Dr. Saburo Okita for the World Institute for Development Research (WIDER) by Professor Jeffrey Sachs of Harvard University indicated that restructuring of Japanese and German surpluses through foreign aid and other financial transfers to the Third World would have a far more rapid and beneficial impact on the global restructuring than comparable expenditures devoted to domestic expansion. The study showed that a US\$25 billion expansion of expenditures within the Japanese economy would benefit the U.S. balance of payments by US\$2 billion, but that a comparably increased expenditure on foreign aid to the developing world would benefit the U.S. balance of trade by US\$9-11 billion dollars - a five times more beneficial impact - as well as significantly increasing Third World markets for other industrial nations.

Japan, Western Europe and the USA would do well, therefore, to look to low- and middle-income countries for export markets to help them restructure with growth. There are many similarities, but on a more global scale, to the late 1940s and early 1950s when the Marshall Plan and related measures restored economic growth to Japan and Western Europe which then laid the basis for decades of U.S. prosperity as well.

So we are seeing the entry into our calculations of a really major new factor of crisis for the North which highlights the depths of our global interdependence today. While the reverse situation of Southern dependency on the North has long been all-too-evident, without yet evoking an appropriate policy response from the North, today it is becoming undeniable that in order to address the problems of the North, the North will be required to focus on restoring development progress in the South.

The other major new area contributing to the economic darkness of our times, and which warrants heightened attention, is that the USSR and the socialist countries, too, are nations in crisis. This, of course, is one of the major reasons for Mr. Gorbachev's initiatives. Consequences can already be detected in "perestroika": in the arms race (nuclear and conventional) as well as in regional areas of conflict, such as we see in Afghanistan and other areas. Thus we hear increasingly that it is difficult economically and decreasingly rewarding politically for superpowers to maintain a presence in regions of conflict. And consequences can be seen in hopeful prospects for increased Soviet participation in the United Nations where the USSR has now paid its back debts. Major possibilities are opening up for a whole new participation by the socialist countries in the United Nations and its associated Bretton Woods institutions.

In short, both industrial East and industrial West have increasingly inescapable reasons for a global restructuring. The time may soon be coming for a call by the North as well as the South, and by the West as well as the East, for a new global economic order - an "NGEO".

Once the political will is in place, the means are available to support an effective new policy. First, the debt issue needs to be managed to stop the financial haemorrhage of massive net capital flows from the South to the North. The recent but still vague debt relief proposal of U.S. Treasury Secretary Brady is a welcome recognition of the need to go far beyond the now dated Baker Plan. Jim Robinson of American Express, Percy Mistry and others have proposed do-able processes.

Second, new capital flows are needed to restore developmental momentum. Again, major opportunities exist, as through increasing the leverage for private borrowing by the multilateral banks, and through increased official development assistance, particularly from Japan, Western Europe and the U.S. Japan, in particular, must increase its official development assistance, possibly by three-fold to some 1 per cent of gross national product (GNP) (i.e. \$30 billion annually) for several years. While its gross aid has now passed the United States, its percentage is lower than the Organization for Economic and Development Cooperation (OECD) average, and at .31 per cent of GNP, remains well below the non-U.S. OECD average of .36 and the 2 per cent of GNP for the U.S. during the Marshall Plan. But the political will for these actions must first come from a clearer vision by leadership in the North, and particularly in Japan, the U.S. and the Federal Republic of Germany, of the severity of the economic crisis of the industrialized countries and of the contributions needed and available from a new economic and social dynamism in the South.

Prioritising what is do-able

Let me shift quickly to focus on the second aspect of the challenge before us - i.e., whether we can present creative, do-able plans to restore development momentum in the social - the human - sectors. The present economic crises are providing, in addition to their tragic negative effects, a major beneficial impact - a "silver lining" - in terms of creating a new political will for highly cost-effective social action which could well lead toward overcoming the worst effects of absolute poverty by the year 2000. We all have known for many years that it is possible for a low- or low-middle income country or region to overcome the worst aspects of poverty, if it only has enough political will. This has been demonstrated in the 1950s and 1960s - under widely different economic and political systems - for low-income areas by China, the Koreas, Taiwan, Sri Lanka and Kerala, India, and for middle-income countries by Cuba and Costa Rica.

The 1980s have forced a re-examination of the approaches to meeting basic needs and of the assumption that the ever-increasing economic bounty would carry with it, like a boat on a rising tide, improved conditions which would encompass the meeting of human needs. That growth has now slowed, stopped or retrogressed in a majority of the world's countries. Japan did not wait for a "trickle down" effect to improve conditions in the social sectors, and that priority has been well-rewarded.

A keen look at today's situation reveals two arenas in which we can respond quickly with a redirection of approach. The first has come to be called "adjustment with a human face". By this we mean protecting the investment on the human side during the process of coping with Third World debt. We mean ensuring that human needs are met in terms of basic health, education and so forth - and not, as is happening so often, making such vital concerns the objects of greatest neglect and of the heaviest cutbacks.

Adjustment with a human face also implies restructuring the social sectors to ensure that they are realistic and that more emphasis is placed on measures which can effect all people - such as, for example, in the health sector, focusing more on prevention of illness and on primary health care and less on expansion of curative services. Such policy is an investment in a country's human resources - which ultimately are its most precious economic resource.

In keeping with this approach, new initiatives to link debt relief with child survival are afoot - and need to be taken further. These build on the debt-for-nature swaps which already have had some publicity. In Sudan debt relief for child survival meant a contribution of debt by a British bank in exchange for commitment by the government to use the local currency from the debt for support of a UNICEF village-level project combining social forestry (or reforestation involving community participation, especially of women) with the provision of water and the strengthening of health. In Latin America, UNICEF is exploring with the Inter-American Development Bank a \$500 million initiative for combining relief of debt with expansion of human investment. Under this scheme, support from aid donors will be used to provide resources to the Inter-American Development Bank to enable them to make loans to indebted Latin American countries. The Latin American countries will use the

loans to buy back their debt at designated prices, thereby multiplying the effect three or four times. The countries concerned will use the local resources from the debt for support of education, health or other projects, thus expanding human investment. UNICEF will work with the governments to ensure that these human investments are cost-effective and directed to priorities for children and women.

Our second avenue of approach for the years ahead involves redoubled commitment to and acceleration of social sector programmes that work effectively at relatively low cost. And it implies a tremendous creative challenge: to adapt new and successful methods - such as the breakthroughs in the field of maternal and child health experienced in the Child Survival and Development Revolution - to new areas of health and social development.

In issues related to children, many of the problems today are complex and involve tremendous resistance to improvement - problems such as drugs, street children and child abuse. In these fields we are still largely seeking to discover what to do to solve the problems, and we must push forward in this search. There are several other fields, however, such as immunization and oral rehydration therapy, which affect children on a massive scale and with life-or-death urgency, for which we know exactly what to do. And there is little actual resistance to doing it.

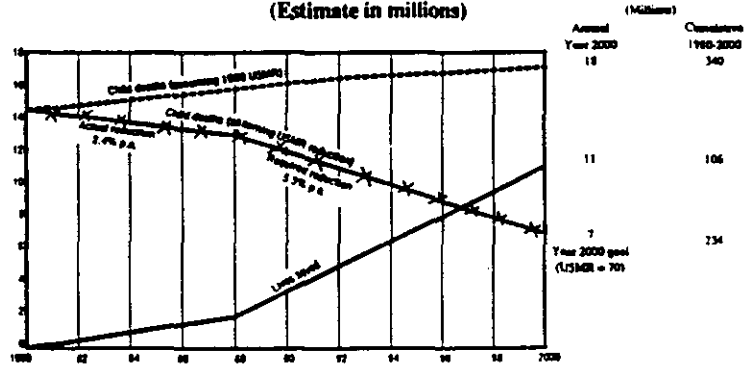
For today I will focus on the child health sector where we now have the clearest vision of what needs to - and can - be done.

Thanks to the advances of the past 20 years there has never been a greater opportunity than now to do so much for so many and for so little a cost - both financially and politically. It is the new capacity to communicate with the world's poor that makes it possible today to reach those previously unreached with readily available low-cost/high-impact health knowledge and technology capable of preventing the vast majority of young child deaths. In fact, the potential is so great that leading health experts [in such fora as the meeting of the Task Force for Child Survival¹, whose "Declaration of Talloires" is attached to the distribution copy of my speech, and the WHO-UNICEF Joint Committee on Health Policy²] have agreed that it is feasible, by the end of this century, to halve 1980 child mortality rates. If this is accomplished - and it is clearly do-able - the lives of some 100 million young children will be saved as a result, and comparable numbers will be saved from lives of crippling disabilities due to the side effects of childhood diseases. Furthermore, the same activities which are known to produce such results contribute to slowing population growth rates, as parents become confident that the children they do have will live. Such historic progress will be possible, however, only if - armed with the new low-cost/high-impact health tools, and our new ability to communicate with the world's poor - we double child mortality reduction rates of the first half of the 1980s [see required reduction rates for all countries on table attached].

The mobilization of this new capacity for the health sector is already resulting in major achievements. The "twin engines" of universal child immunization and oral rehydration alone saved 2.5 million child lives in 1988, and the total could reach five million annually by 1991, thus providing a whole new emphasis to primary health care. This, in turn, could be saving by

the year 2000 the lives of some 11 million children annually as compared to rates prevailing in 1980.

Alternative Global Projections of Child Deaths and Lives Saved
Children under five years of age: 1980-2000
(Estimate in millions)



Projection A deaths
The 1980 under-five mortality rates remain constant to the year 2000.

Projection B deaths
Up to 1987 the under-five mortality rates are as estimated by the United Nations Population Division. From 1987, countries make sufficient progress to reach their CSDR targets by the year 2000 i.e. either an under-five mortality rate of 70 or half their 1980 rate whichever is lower.

Projection C lives saved
The difference between projection A deaths and projection B deaths

Children first

It is against the background of breakthrough in child survival and development that a new atmosphere of high-level attention to children's issues is manifesting around the world. Specifics regarding the survival, protection and development of children have, within the last two and a half years, been the focus of debate, declarations, resolutions and joint support from such fora as the Summit of the new association of seven South Asian countries (three times, now), the Summit of African countries (twice), and the Summit of the seven Central American countries. The single development issue discussed by USSR General-Secretary Gorbachev and U.S. President Reagan during the May-June 1988 Moscow Summit was that of children. The joint communique issued by the two superpower leaders stated:

"Both leaders reaffirmed their support for the WHO/UNICEF goal of reducing the scale of preventable childhood deaths through the most effective methods of saving children. They urged other countries and the international community to intensify efforts to achieve this goal."

In fact, so much is possible to save the lives and improve the well-being of children, and children's issues are moving so forcefully to center stage, that we are even seeing the phenomenon of heads of state and government

calling for and encouraging a "World Summit for Children". Forty-five heads of state or government have endorsed the proposal to date, and the number is growing rapidly.

Japan, as noted earlier, shines as an example of placing children high on your national agenda in times of duress. The vitality and success of your society today attests to the wisdom of tending to children's needs first.

Today we are considering the care of a much larger community than that of a single nation. And amidst the myriad of social and economic problems that plague nation after nation throughout the Third World, the suffering of children remains a constant refrain. Readily preventable child deaths and crippling continue en-masse; shining young minds remain illiterate; life-saving information as simple as basic hygiene never finds its way into those hands in which it could make the life-or-death difference. How all Third World health systems and poor families could benefit from a standardized boshi techo! In considering the care of this larger global community, it is also important to remember that, whatever the political and ideological differences which we must face, the urgency and importance of tending to the needs of children offers a common cause with which all peoples can agree.

We must act quickly not only in the health and nutrition sectors, but we must also explore the applicability of lessons gleaned in the Child Survival and Development Revolution to other fields essential for meeting the basic needs of the world's poor: to the low income food producers - particularly to women food producers; and to meeting literacy and education needs (an endeavour to which Japan has been committed since the Edo Era).

Importantly, as we apply new development approaches, we can benefit from and further encourage the present trend toward increased democracy. To improve basic services and to encourage redistribution for the poor amidst this shift, we in the development field must come up with workable proposals, as in the Child Survival and Development Revolution, that empower families to do more without requiring massive increases in governmental expenditures.

A related glimmer of hope in these dark times is that we are also seeing a changing attitude towards efforts on behalf of the rights of children. When Poland proposed, in 1979, that there be a "Convention on the Rights of the Child", I must admit that I thought that such a legally binding convention was not feasible in my life-time. Today, prospects are good - if we can continue the intensity of present efforts - that the Convention will be adopted by the United Nations General Assembly this year, the tenth anniversary of the International Year of the Child.

(I cannot mention that draft Convention without acknowledging that many Japanese have played particularly leading roles in nudging the drafting along over the past decade - and, I will add, in nudging UNICEF along to a more active leadership role in this process. I am particularly grateful that Mrs. Sadako Ogata is helping us in our leadership efforts). Japan has, of course, been a pioneer in child rights for decades. Your own Declaration of the Rights of the Child, for example, was adopted in 1951, eight years prior to adoption of the United Nations Declaration of the Rights of the Child.

In fact, what we are witnessing is a new effort emerging - worldwide and at all levels, from international to village - for seriously addressing one aspect of society's portfolio - children and mothers. A long-overdue shift in priorities toward children and mothers is clearly beginning to take place, in industrialized countries as well as in the Third World, because of a synergistic combination of crises and creative responses.

Putting crises to work for people

My meeting with you in Tokyo today actually occurs at a most propitious moment - one which may be characterized as the best of times and the worst of times. We are all sorely aware of the threats to the very existence of the human race and life on the planet we inhabit and of the tragic and costly regional conflicts in Latin America, Africa and Asia.

And yet these are far more opportune times for action than many of us thought possible until quite recently, particularly through U.N. channels - as we see with contributions toward an easing of political tensions in many parts of the world, and in other fields as well, such as child survival and development, which is of particular concern to UNICEF.

We are moving toward a moment of potential political breakthrough in our ability to "make the benefits of civilization available to the whole human race". As some of the current crises worsen, but before they become too much worse, let us once again, as in the post-World War II era, put these crises - which have already been so costly in human terms - to work to overcome the inertia of past policies. Let us make the hard choices at this time of opportunity, to commit our resources, our creativity, our wisdom, and all that we are and can be, toward ending this century by overcoming the worst effects of absolute poverty for all humankind - and, while doing so, create the climate for returning the world economy to growth, for facilitating cooperation on our environment, and for enhancing the prospects for continual progress on peace, a reduction of regional tensions, and disarmament.

Footnotes

- 1/ The international Task Force on Child Survival (often referred to as the "Bellagio Group") is sponsored by UNICEF, the World Bank, UNDP, WHO and the Rockefeller Foundation. In March 1988 at Talloires, France, the Task Force gathered a dozen health ministers and health secretaries from the largest developing countries of the world (Brazil, China, Colombia, India, Mexico, Nigeria, Pakistan); heads of major international organizations such as Barber Conable of the World Bank, Halfdan Mahler of WHO, and James Grant of UNICEF; plus major bilateral aid agency administrators such as Margaret Catley-Carlson of CIDA (Canada), Carl Tham of SIDA (Sweden), and Alan Woods of USAID; and private leadership from the Rockefeller Foundation and Rotary International.
- 2/ The Joint Committee on Health Policy (JCHP) consists of members of the Executive Boards of the WHO and UNICEF. The JCHP has guided international health policy for children for 40 years.

Table 1: CHILD MORTALITY RATES: USMR

Country	Under 5 mortality rate*		Average annual rate of reduction of the Under 5 mortality rate			GNP per capita (U.S. \$)	GNP per capita growth rate		Annual no. of births/infant and child deaths (0-4) (thousands)	Total Fertility Rate		Average annual rate of reduction
	1960	1986	60-80	80-85	85-2000		1985	65-80		80-85	1986	
	Required**											
1 Afghanistan	380	325	0.55	0.66	8.44	...			863/ 280	7.0	6.7	0.16
2 Mali	370	297	0.66	1.40	7.96	150	1.4	-3.0	421/ 125	6.5	6.7	-0.14
3 Sierra Leone	397	297	1.01	1.40	7.96	350	1.1	-0.2	174/ 52	6.1	6.1	-0.01
4 Malawi	364	270	1.00	1.59	7.34	170	1.5	-0.6	384/ 104	6.9	7.0	-0.08
5 Ethiopia	294	255	0.57	0.38	7.15	110	0.2	-2.0	2228/ 568	6.7	6.7	-0.00
6 Guinea	346	253	1.07	1.48	7.19	320	0.8	-1.4	292/ 74	6.4	6.2	0.12
7 Somalia	294	255	0.57	0.38	7.15	280	-0.7	0.6	226/ 58	6.6	6.6	0.00
8 Mozambique	302	247	0.52	1.32	6.95	180		-13.6	651/ 161	5.7	6.1	-0.25
9 Burkina Faso	388	241	1.98	1.18	6.86	150	1.3	-1.3	342/ 82	6.5	6.5	0.00
10 Angola	346	238	1.40	1.50	6.78	470		0.1	427/ 101	6.4	6.4	-0.01
11 Niger	320	233	1.11	1.33	6.67	250	-2.1	-6.7	324/ 76	7.1	7.1	-0.02
12 Chad	326	228	1.30	1.56	6.49	80	-2.3	1.8	228/ 52	6.0	5.9	0.07
13 Guinea-Bissau	315	228	1.13	1.56	6.49	180	-1.5	1.9	37/ 8	5.1	5.4	-0.24
14 C. African Rep	308	228	1.20	0.84	6.55	260	-0.2	-1.5	117/ 27	5.7	5.9	-0.15
15 Senegal	313	227	1.12	1.57	6.49	370	-0.8	0.0	309/ 70	6.7	6.5	0.09
16 Mauritania	310	219	1.23	1.62	6.26	420	0.1	-0.7	98/ 21	6.9	6.9	-0.02
17 Liberia	303	211	1.30	1.60	6.04	470	-1.4	-6.4	110/ 23	6.3	6.9	-0.37
18 Rwanda	248	210	0.38	1.43	6.00	280	1.8	-1.5	323/ 68	6.8	7.4	-0.30
19 Kampuchea	218	206	-1.82	7.15	6.91	...			318/ 66	6.3	4.8	1.01
20 Yemen	378	204	2.33	2.31	5.99	550	5.3	0.9	339/ 69	7.0	6.9	0.03
21 Yemen. Dem.	378	204	2.33	2.31	5.99	530			104/ 21	7.0	6.6	0.20
22 Bhutan	297	202	1.42	1.57	6.27	160		3.4	54/ 11	5.9	5.4	0.36
23 Nepal	297	202	1.42	1.57	6.27	160	0.1	0.8	677/ 137	5.9	6.0	-0.07
24 Burundi	258	196	0.93	1.34	5.80	230	1.9	-0.8	225/ 44	5.7	6.4	-0.46
25 Bangladesh	262	193	1.05	1.56	5.78	150	0.4	0.9	4428/ 854	6.7	5.7	0.60
26 Benin	310	189	1.91	1.77	5.36	260	0.2	0.1	213/ 40	6.8	7.0	-0.11
27 Sudan	293	182	1.68	2.20	5.17	300	(.)	-4.2	996/ 181	6.7	6.4	0.14
28 Tanzania	248	179	1.05	1.86	5.08	290	(.)	-3.1	1184/ 212	6.9	7.1	-0.13
29 Bolivia	282	179	1.49	2.52	5.42	470	-0.2	-7.0	284/ 51	6.6	6.1	0.30
30 Nigeria	318	178	2.29	1.87	5.02	800	2.2	-7.3	5015/ 895	6.9	7.1	-0.13
31 Haiti	294	176	1.96	1.89	5.76	310	0.7	-2.5	278/ 49	6.2	5.6	0.35
32 Gabon	288	174	1.91	1.91	4.90	3670	1.5	-1.2	43/ 7	4.1	4.9	-0.76
33 Uganda	224	174	0.87	1.09	4.94	230	-2.6	2.2	810/ 141	6.9	6.9	0.01
34 Pakistan	277	170	1.84	1.85	5.34	380	2.6	2.8	4211/ 716	7.2	5.5	1.02
35 Zaire	251	166	1.46	1.89	4.63	170	-2.1	-3.8	1394/ 232	5.9	6.1	-0.10
36 Laos	232	166	0.99	2.20	5.38	...			165/ 27	5.7	5.5	0.10
37 Oman	378	166	3.08	3.16	4.96	6730	5.7	0.5	58/ 10	7.2	6.9	0.13
38 Iran	254	159	1.93	1.19	5.19	...		7.1	1801/ 286	6.1	5.3	1.60
39 Cameroon	275	158	2.15	1.87	4.35	810	3.6	4.5	435/ 69	5.7	5.8	-0.07
40 Togo	305	157	2.68	2.00	4.24	230	0.3	-5.6	138/ 22	6.2	6.1	0.04
41 India	262	154	2.14	2.90	4.63	270	1.7	3.1	22477/3455	5.8	3.9	1.55
42 Cote d'Ivoire	320	153	2.97	2.15	4.77	660	0.9	-5.2	483/ 71	6.6	6.6	-0.01
43 Ghana	224	150	1.52	1.50	4.03	380	-2.2	-3.9	663/ 99	6.5	6.5	-0.01
44 Lesotho	208	140	1.30	2.09	4.84	470	6.5	3.4	65/ 9	5.8	5.8	0.01
45 Zambia	228	132	2.14	1.82	3.93	390	-1.6	-4.1	333/ 44	6.6	6.8	-0.08
46 Egypt	300	131	2.89	4.02	3.81	610	3.1	1.3	1629/ 214	7.1	4.5	1.76
47 Peru	233	128	2.21	2.25	3.92	1010	0.2	-4.2	708/ 91	6.9	4.6	1.50
48 Libya	268	125	2.52	4.19	3.27	7170	-1.3	-9.1	167/ 21	7.2	7.0	0.11
49 Morocco	265	125	2.71	3.21	3.73	560	2.2	0.1	755/ 95	7.2	4.6	1.72
50 Indonesia	235	122	2.39	2.77	3.62	530	4.8	2.3	5020/ 614	5.4	3.7	1.49
51 Congo	241	119	2.93	1.71	3.96	1110	3.8	4.9	80/ 10	5.9	6.0	-0.08
52 Kenya	208	118	2.10	2.31	3.77	290	1.9	-1.7	1182/ 139	8.2	8.0	0.05
53 Zimbabwe	182	118	1.52	2.02	3.86	680	1.6	0.0	431/ 51	6.6	6.6	0.01
54 Honduras	232	112	2.64	3.13	3.50	720	0.4	-2.6	184/ 21	7.4	5.9	0.87
55 Algeria	270	112	2.99	4.46	3.05	2550	3.6	1.7	938/ 105	7.4	6.5	0.48
56 Tunisia	255	106	3.06	4.30	3.11	1190	4.0	1.4	226/ 24	7.2	4.3	1.93
57 Guatemala	230	105	2.89	3.16	3.49	1250	1.7	-4.3	340/ 36	6.9	5.9	0.59
58 Saudi Arabia	292	105	3.86	3.90	3.24	8850	5.3	-7.3	495/ 52	7.3	6.9	0.18
59 South Africa	192	101	2.28	2.98	3.55	2010	1.1	-1.6	1272/ 128	5.6	5.0	0.46
60 Nicaragua	210	100	2.48	3.92	3.24	770	-2.1	-3.1	145/ 14	7.3	5.6	1.01
61 Turkey	258	99	3.12	5.36	3.12	1080	2.6	2.1	1486/ 147	6.0	3.7	1.80
62 Iraq	222	98	3.36	2.24	3.79	3020			689/ 67	7.2	6.2	0.54
63 Botswana	174	96	2.22	2.26	3.78	840	8.3	7.4	57/ 5	6.4	6.5	-0.05
64 Viet Nam	233	95	3.30	3.81	3.27	...			1835/ 175	7.0	3.9	2.26
65 Madagascar	181	94	2.37	2.83	3.60	240	-1.9	-6.1	458/ 43	5.8	6.1	-0.19
66 Ecuador	183	90	2.89	2.79	3.61	1160	3.3	-2.4	347/ 31	6.9	4.8	1.43
67 Papua NG	247	90	3.88	3.44	3.39	680	0.4	-1.6	132/ 12	6.3	5.4	0.58
68 Brazil	160	89	2.23	2.26	3.79	1640	4.3	-1.5	4039/ 359	6.2	3.6	2.08
69 Burma	229	89	4.01	2.06	3.85	190	2.4	3.3	1192/ 106	5.9	3.8	1.69
70 El Salvador	206	88	3.27	3.01	3.54	820	-0.2	-3.1	222/ 20	6.9	5.2	1.03
71 Dominican Rep	200	86	3.31	2.91	3.57	790	2.9	-0.8	201/ 17	7.3	3.8	2.49
72 Philippines	135	75	2.23	1.93	3.89	580	2.3	-3.4	1757/ 132	6.6	4.1	1.83
73 Mexico	140	71	2.64	2.30	3.77	2080	2.7	-2.1	2587/ 183	6.7	4.2	1.83
74 Colombia	148	70	3.09	1.84	3.92	1320	2.9	-0.5	873/ 61	6.7	3.7	2.28
75 Syria	218	68	4.71	3.07	3.52	1570	4.0	-2.1	502/ 34	7.5	6.9	0.28

* Under 5 Mortality Rate (USMR) is the annual number of deaths of children under 5 years of age per 1,000 live births.

** REQUIRED MORTALITY RATES are those rates required in 1985 either to halve 1980 child mortality rates by the year 2000 in every country or to reduce them to 70 per 1000 live births, whichever is less.

Table 1: CHILD MORTALITY RATES: USMR

Country	Under 5 mortality rate ^a		Average annual rate of reduction of the Under 5 mortality rate			GNP per capita (U.S. \$)	GNP per capita growth rate		Annual no. of births/infant and child deaths (0-4) (thousands)		Total Fertility Rate		Average annual rate of reduction 80-88
	1980	1988	60-80	80-85	85-2000 Required ^{aa}		1985	65-80	80-85	1988	1980	1988	
76 Paraguay	134	63	3.13	2.05	3.85	880	3.9	-1.9	132/ 8	6.6	4.6	1.40	
77 Mongolia	158	62	3.53	3.63	3.33	...	...	...	69/ 4	5.7	4.9	0.59
78 Jordan	218	62	4.89	4.07	3.18	1560	5.8	1.5	170/ 10	7.2	7.3	-0.07	
79 Lebanon	92	53	1.95	2.02	3.87	...	...	...	80/ 4	6.4	3.5	2.26
80 Thailand	149	53	3.85	4.15	3.16	800	4.0	2.6	1290/ 68	6.4	3.0	2.93	
81 Albania	164	50	4.90	2.82	3.60	...	...	...	84/ 4	5.7	3.4	1.99
82 China	202	47	6.13	2.59	3.68	310	4.8	6.6	19914/ 942	5.9	2.2	3.75	
83 Sri Lanka	113	46	3.54	2.69	3.65	380	2.9	3.2	417/ 19	5.1	3.0	2.01	
84 Venezuela	114	44	3.94	2.47	3.72	3080	0.5	-5.4	558/ 25	6.5	3.9	1.95	
85 U.A.E.	239	41	7.25	4.10	3.18	19270	...	-7.7	35/ 1	6.9	5.6	0.79	
86 Guyana	94	39	2.73	5.36	2.75	500	-0.2	-7.3	26/ 1	6.0	2.9	2.78	
87 Argentina	75	39	2.52	2.33	3.76	2130	0.2	-3.9	733/ 29	3.1	3.3	0.26	
88 Malaysia	106	37	4.41	2.44	3.73	2000	4.4	1.8	448/ 16	6.7	3.5	2.48	
89 Panama	105	34	4.48	3.58	3.35	2100	2.5	-0.2	60/ 2	5.9	3.2	2.30	
90 Korea, Dem.	120	33	4.89	4.47	3.05	...	...	...	815/ 21	5.6	3.7	1.53
91 Korea, Rep.	120	33	4.89	4.47	3.05	2150	6.6	6.3	975/ 33	5.4	2.5	2.85	
92 Uruguay	56	31	1.43	5.29	2.77	1850	1.4	-6.0	58/ 2	2.9	2.7	0.33	
93 Mauritius	104	30	4.43	5.29	2.77	1090	2.7	2.3	26/ 1	5.7	2.5	3.08	
94 Romania	82	30	4.03	2.95	3.58	2580	...	3.0	396/ 12	2.0	2.4	-0.66	
95 Yugoslavia	113	30	5.43	3.48	3.38	2070	4.1	-0.5	362/ 11	2.7	2.0	1.12	
96 USSR	53	28	2.20	3.13	3.50	4550	...	...	5207/ 147	2.5	2.4	0.22
97 Chile	142	25	6.14	8.25	1.73	1430	-0.2	-3.9	272/ 7	5.1	2.5	2.66	
98 Trinidad & T	67	25	3.94	2.82	3.60	6020	2.3	-6.0	30/ 1	5.0	2.7	2.30	
99 Jamaica	88	24	5.40	2.92	3.57	940	-0.7	-3.1	63/ 2	5.5	3.0	2.25	
100 Kuwait	128	24	6.28	6.51	2.35	14480	-0.3	-6.8	68/ 2	7.4	5.9	0.88	
101 Costa Rica	121	23	7.06	2.24	3.79	1300	1.4	-2.7	78/ 2	7.0	3.3	2.79	
102 Portugal	112	21	6.37	6.01	2.52	1970	3.3	-0.5	172/ 4	3.1	2.1	1.41	
103 Bulgaria	62	20	4.44	3.43	3.40	4150	...	...	138/ 3	2.2	2.2	-0.62
104 Hungary	57	20	3.85	4.18	3.15	1950	5.8	1.7	132/ 3	1.8	1.8	0.06	
105 Poland	70	20	5.21	2.64	3.66	2050	...	...	637/ 13	2.7	2.2	0.70
106 Cuba	87	19	6.24	4.56	3.02	...	...	...	181/ 3	4.7	2.0	3.27
107 Greece	64	17	4.99	4.78	2.94	3550	3.6	-0.3	145/ 2	2.2	2.1	0.17	
108 Czechoslovakia	32	17	2.32	3.20	3.48	5820	...	...	232/ 4	2.4	2.1	0.51
109 Israel	40	16	3.91	2.33	3.76	4990	2.5	-0.7	94/ 2	3.9	2.9	1.06	
110 New Zealand	27	13	2.58	2.64	3.66	7010	1.4	1.8	60/ 1	3.8	1.9	2.70	
111 USA	30	13	3.41	2.82	3.60	16690	1.7	1.4	3789/ 48	3.3	1.9	2.14	
112 Austria	43	13	4.82	4.07	3.18	9120	3.5	1.7	93/ 1	2.8	1.6	2.06	
113 Belgium	35	13	4.15	2.82	3.60	8280	2.8	0.8	122/ 2	2.7	1.6	1.90	
114 German Dem.	44	13	5.24	2.82	3.60	7180	...	...	240/ 3	2.5	1.9	0.97
115 Italy	50	13	5.25	5.22	2.79	6520	2.6	0.4	658/ 8	2.6	1.6	1.78	
116 Singapore	50	12	6.17	3.04	3.53	7420	7.6	6.4	43/ 1	4.9	1.7	4.05	
117 Germany, Rep.	38	12	4.23	5.59	2.67	10940	2.7	1.2	636/ 7	2.5	1.4	2.19	
118 Ireland	38	12	4.28	4.36	3.08	4850	2.2	-0.3	79/ 1	4.0	3.0	1.09	
119 Spain	56	11	6.37	4.36	3.08	4290	2.8	0.9	580/ 7	2.9	2.1	1.19	
120 United Kingdom	27	11	3.23	3.04	3.53	8460	1.6	2.1	743/ 8	2.8	1.8	1.69	
121 Australia	25	11	2.86	4.71	2.97	10830	2.0	0.9	249/ 3	3.3	1.9	2.00	
122 Hong Kong	65	11	7.39	4.71	2.97	8230	6.1	4.4	94/ 1	5.3	1.9	3.90	
123 France	34	10	4.69	3.29	3.45	9540	2.8	0.3	765/ 8	2.9	1.9	1.63	
124 Canada	33	10	4.55	5.11	2.83	13680	2.4	0.8	384/ 4	3.6	1.7	2.87	
125 Denmark	25	9	4.02	1.89	3.91	11200	1.8	2.0	56/ 1	2.6	1.5	2.15	
126 Japan	40	9	6.70	2.09	3.84	11300	4.7	3.5	1522/ 14	2.0	1.8	0.42	
127 Netherlands	22	9	3.41	1.89	3.81	9290	2.0	0.3	173/ 2	3.1	1.5	2.89	
128 Switzerland	27	9	4.39	3.93	3.23	16370	1.4	1.3	70/ 1	2.5	1.5	2.04	
129 Norway	23	8	3.62	1.89	3.91	14370	3.3	3.2	49/ 0	2.9	1.6	2.23	
130 Finland	28	7	5.52	2.33	3.76	10690	3.3	2.1	63/ 0	2.6	1.6	1.71	
131 Sweden	20	7	3.91	2.33	3.76	11690	1.8	1.5	87/ 1	2.3	1.5	1.64	

DECLARATION OF TALLOIRES

12 March 1988 - Talloires, France

PROTECTING THE WORLD'S CHILDREN: AN AGENDA FOR THE 1990's

Remarkable health progress has been achieved during the past decade. Global recognition that healthy children and healthy families are essential for human and national development is steadily increasing. Consensus has been reached on the strategy for providing essential community primary health programmes. The international community has become engaged in partnership with national governments in the creation of successful global programmes, ensuring the availability financial support and appropriate technologies. These include:

immunization programmes, which now protect more than 50% of infants in developing countries with polio or DPT vaccines, preventing some 200,000 children from becoming paralyzed with polio and over a million children from dying each year from measles, whooping cough, or neonatal tetanus;

diarrhoeal diseases control programmes which now make life-saving fluids (particularly oral rehydration salts) available for 60% of the developing world population, the use of which may be preventing as many as 1 million deaths annually from diarrhoea;

initiatives to control respiratory infections which hold promise in the years ahead of averting many of the 3 million childhood deaths from acute respiratory infections each year in developing countries not prevented currently by immunization;

safe motherhood and family planning programmes which are so important in protecting the well-being of families.

Progress to date demonstrates that resources can be mobilized and that rapid and effective action can be taken to combat dangerous threats to the health of children and mothers, particularly in developing countries.

This progress is the result of:

enthusiastic world-wide agreement for the development of health strategies based on primary health care;

the commitment of national governments, multi- and bilateral development agencies, non-governmental organizations, private and voluntary groups and people in all walks of life to give priority to these programmes;

co-ordinated action by the sponsors of the Task Force for Child Survival: UNICEF, the World Bank, UNDP, WHO and the Rockefeller Foundation.

We, The Task Force For Child Survival, conveners of the meeting "Protecting the World's Children - An Agenda for the 1990s" in Talloires, France on 10-12 March 1988:

1. EXPRESS appreciation and admiration for the efforts made by the developing countries to reduce infant and child deaths through primary health care and child survival actions.

2. COMMIT OURSELVES to pursue and expand these initiatives in the 1990s.

3. URGE national governments, multi- and bilateral development agencies, United Nations agencies, non-governmental organizations and private and voluntary groups to commit themselves to:

increase national resources from both developing and industrialized countries devoted to health in the context of overall development and self-reliance;

improve women's health and education, recognizing the importance for women themselves, recognizing women's contribution to national development and recognizing that mothers are by far the most important primary health care workers;

accelerate progress to achieve Universal Childhood Immunization by 1990 and to sustain it thereafter;

accelerate progress to eliminate or markedly reduce as public health problems the other main preventable causes of child and maternal mortality and morbidity, striving to reach sustained universal coverage of children and mothers by the year 2000;

assure the development of new vaccines and technologies and their application, particularly in developing countries, as they become appropriate for public health use;

promote expanded coverage of water supply and sanitation;

/....



The Task Force For
Child Survival

pursue research and development, including technology transfer, in support of the above actions.

4. **SUGGEST** that the following be considered by national and international bodies as targets to be achieved by the year 2000:

the global eradication of polio;

the virtual elimination of neonatal tetanus deaths;

a 90% reduction of measles cases and a 95% reduction in measles deaths compared to pre-immunization levels;

a 70% reduction in the 7.4 million annual deaths due to diarrhoea in children under the age of 5 years which would occur in the year 2000 in the absence of oral rehydration therapy, and a 25% reduction in the diarrhoea incidence rate;

a 25% reduction in case/fatality rates associated with acute respiratory infection in children under 5 years;

reduction of infant and under five child mortality rates in all countries by at least half (1980-2000), or to 50 and 70 respectively per 1000 live births, whichever achieves the greater reduction;

a 50% reduction in current maternal mortality rates.

Achievement of these targets would result in the avoidance of tens of millions of child deaths and disabilities by the year 2000, as well as a balanced population growth as parents become more confident their children will survive and develop. The eradication of poliomyelitis would, with the eradication of smallpox, represent a fitting gift from the 20th to the 21st centuries.

5. **DRAW** world attention to the potential for enlarging upon the successes outlined above to encompass low cost, effective initiatives to:

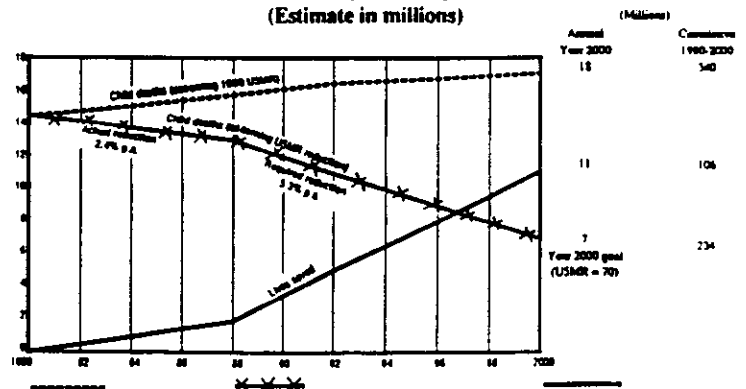
improve the quality and coverage of educational services to obtain universal primary education and 80% female literacy, and

virtual elimination of severe malnutrition of under five children while also significantly reducing moderate and mild malnutrition in each country.

6. **WELCOME** the progress being made in drafting the Convention on Rights of the Child and join the United Nations General Assembly in urging completion of the Convention in 1989, the 10th anniversary of the International Year of the Child.

We are convinced that vigorous pursuit of these initiatives aimed at protecting the world's children will ensure that children and mothers - indeed whole families - will benefit from the best of available health technologies, making an essential contribution to human and national development and to the attainment of Health For All By The Year 2000.

Alternative Global Projections of Child Deaths and Lives Saved
Children under five years of age: 1980-2000
(Estimate in millions)



Projection A deaths
The 1980 under-five mortality rates remain constant to the year 2000.

Projection B deaths
Up to 1987 the under-five mortality rates are as estimated by the United Nations Population Division. From 1987, countries make sufficient progress to reach their CSDR targets by the year 2000 i.e. either an under-five mortality rate of 70 or half their 1980 rate whichever is lower.

Projection C lives saved
The difference between projection A deaths and projection B deaths