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Statement of Mr. James P. Grant
Executive Director of the United Nations Children's Fund (UNICEF)
to the
XIXth International Congress of Pediatrics

"Accelerating the Momentum in Child Survival and Development"

Paris, France
24 July 1989

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"ACCELERATING THE MOMENTUM IN CHILD SURVIVAL AND DEVELOPMENT"

Health Minister, Mr. Evin;
President of Congress, Mr. Frezal;
IPA President, Professor Hallman;
IPA Director-General, Professor Dogramaci;
UNESCO Assistant Director-General for Education, Dr. Power;
WHO Director for Family Health, Dr. Petros Barvazian;
Distinguished Members and Friends of the Congress:

This is the third time I have had the privilege of addressing the International Pediatrics Association (IPA) at your triennial congress. During the six years since I first met with you in Manila, your organization has played a major leadership role in some of the most important advances in child health.

In Manila I referred to the basic challenges facing all of us who are concerned with the health and well-being of the world's children, the most basic of which was so aptly stated last August by Dr. Nakajima, Director-General of WHO when he said:

"We must recognize that most of the world's major health problems and premature deaths are preventable through changes in human behaviour and at low cost. We have the know-how and technology but they have to be transformed into effective action at the community level. Parents and families, properly supported, could save two-thirds of the 14 million children who die every year - if only they were properly informed and motivated. Immunization alone could save 3 million lives - and another 3 million deaths a year could be prevented by oral rehydration, a simple and cheap technology."

Six years ago I posed the central question of how to reach the unreached - how to extend the benefits of the life-saving health knowledge and technology which you pediatricians, as physicians to the world's children, possess, to those hundreds of million of children whom you will never see in your offices nor in your hospitals.

And I outlined the potential for a virtual revolution in child survival and development, which we have come to call the Child Survival and Development Revolution (CSDR). It is a revolution now made possible by the synergistic combination of readily available low-cost/high-impact health knowledge and technology, much of it recently developed, with our new capacity to communicate with and organize among the world's poor.

I argued in Manila, however, that "This potential for a child survival revolution is not achievable without the active participation and leadership of the pediatricians". And, indeed, you were among the first great organizations to join in a Grand Alliance for Children, and take a lead in the CSDR.

We have come a long way in these past six years. When we met in Manila, about 10 per cent of the world's children were immunized against the six main child-killing diseases, even though more than 10,000 young children were dying each day from these diseases, and 50 U.S. cents worth of vaccine could protect a child for life. Today more than 60 per cent are immunized. As a result, WHO estimates that the lives of 1.5 million children were saved last year alone, and comparable numbers were saved from lives of crippling disability.

Similarly, in 1983, nearly 10,000 children were dying each day from dehydration associated with diarrhoeal diseases. Today, more than 25 per cent of the developing world's families are using oral rehydration therapy (ORT), which, as you are well aware, costs 10 U.S. cents to prepare and administer at home. The result is the saving of an estimated 750,000 to 1 million children's lives last year.

Momentum has gathered and is accelerating in these life-saving efforts. In immunization we have the United Nations goal of "Universal Child Immunization by 1990", and for ORT we have goals for vastly expanded access and use, also by the end of next year. Achievement of these goals would double the lives of children saved from some 7,000 daily in 1988 to 14,000 daily by December 1990. And chances can be very good that those targets will be met and that these ambitious goals can be doubled again, to some 30,000 daily, by the end of the 1990s - by the year 2000. But - and this is an important caveat - without the leadership of pediatricians, there is no chance.

These ambitious but clearly feasible goals are, in a sense, a test case. They are needed to prove that when the pediatricians of the IPA join forces, call others to the task, and commit themselves to a major advance in child health, that major advance will be achieved.

Enough substantial and perceivable progress has been made in the CSDR in these past six years that it has become increasingly good politics to join forces and work together. Working together we have been able, for example, to mobilize political and national leaders, including active support from several Summit meetings of heads of state: thrice from the Summit of the South Asian countries; twice from the African countries, and hopefully again this very week from Addis Ababa; from the Central American countries; and from the May-June 1988 USSR/USA Summit in Moscow.

This new high-level attention to children's issues has given great impetus to progress on the Convention on the Rights of the Child, which is poised, hopefully, for adoption by the United Nations General Assembly this fall, and, with further support from you pediatricians and others, for early ratification by the minimum of 20 governments required for the Convention to enter into force. The need for special protection for the rights of the child was stressed by the seven major Western industrial countries in their Summit here in Paris just 10 days ago. The Convention is of great relevance to pediatricians - it codifies children's rights to survival, protection and development, and it offers a valuable tool in efforts to ensure that those rights are met. It is most appropriate that this particular meeting of the IPA, held during this year of activity on the Convention, should take place in Paris, where the 200th Anniversary of the Declaration of the Rights of Man is being celebrated.

The swelling of support for children's issues has reached the point, in fact, that serious potential now exists to hold a representative World Summit for Children within the coming 12 months. The purpose of holding such a meeting of world leaders would be to mobilize practical action worldwide to achieve the readily possible two-thirds reduction in child deaths, to accelerate the national consideration required for ratification of the Convention, and to secure for children a permanent position of priority on national and global political agendas so that progress in their survival, protection and development can be sustained. I urge each of you to support plans for such a Summit through your own country, through the IPA - hopefully including a strong resolution from this Congress, - and through other organizations of which you are a member.

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Finally, today as we meet in Paris, the challenge remains the same as it was six years ago in Manila - to reach the unreached. Today as we meet in Paris, 38,000 young children will die, and still, the vast majority of them will die from readily preventable and curable causes. But today, after our recent successes, we know much more about how to reach those traditionally removed from the channels of easy access to health care. An important new tool for you and for all of us concerned with reaching the unreached will, in fact, be presented at this Congress at a joint press conference of WHO, UNESCO and UNICEF with the participation of IPA. In my brief comments here I will simply mention that Facts for Life contains, in message form, ten packages of

basic and life-saving child-health information such as immunization, child spacing, and control of diarrhoeal diseases, which every family, by right, should have, and which, if acted upon by families and their communities, would more than halve the child death rates of today.

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As you begin deliberations on child health here in Paris, I leave you with this thought - that in this domain the world looks to pediatricians - and rightfully so - for leadership. Leadership within the medical and health communities, and leadership across sectors. Others listen to your call-to-arms in this peaceful revolution for the survival and development of children. And we are just beginning to unleash the yet-untapped potential of working together, committed to common goals - for the children - and the future - of our world. With your strong leadership, the 1990s could be the best decade in history for children.

Thank you.