Intervention de M. Christian Masset,
Directeur Général
Direction générale de la mondialisation, du développement et des partenariats,
Ministère des Affaires étrangères et européennes pour l’ouverture du conseil d’administration du PMNCH,
Paris, le 25 octobre 2011

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Excellencies Ministers,
Madame Assistant Director General of the World Health Organization
Distinguished guests,
Ladies and gentlemen,
Dear friends and colleagues,

Welcome to Paris! It is a great pleasure for me to be with you this morning. Thank you for giving me this opportunity to open the Board of the Partnership. During this particularly busy year where France has the huge responsibility to chair the G8 and the G20, I would very much like to stress the common vision that we share with PMNCH of a world where all women and children receive the care they need, a world where their rights are respected.

France is deeply committed to accelerate progress towards MDGs 4 and 5. The reduction of maternal, newborn and under five child deaths, as
well as the access to reproductive health care and services, is at the centre of our aid strategy. They are not dissociable from an active promotion of gender equity and women empowerment.

In this context, at the Muskoka G8 summit, the French President pledged an additional contribution of 500M€ to provide vital interventions for women and children over the period 2011 - 2015, for MDGs 4 and 5, that will increment the yearly baseline of 300M€ for these objectives. France will primarily focus its aid on the French speaking countries of West and Central Africa.

Half of this aid will be implemented within partnerships set up with beneficiary countries, through bilateral mechanisms and, for instance, through the French Agency for Development. The other half of the budget will be disbursed through a multi UN agency programme on the field via the principal organisations which share this expertise: WHO, UNFPA, UNICEF, UN WOMEN, including the Global Fund to fight aids, malaria and tuberculosis. France is the first European contributor to the Fund and the second largest worldwide contributor after the US. We have asked GFTAM to actively identify and support activities dedicated to mother and child health as a specific component.

In addition, France is the second donor for GAVI. Should I recall here GAVI’s outstanding impact in terms of number of children vaccinated and deaths averted?

Further, with its contribution based on the implementation of an airplane ticket solidarity levy, France supports UNITAID which contributes to diminish the cost of treatments, impacts on market shaping, and facilitate
access to adapted medicines for children for fighting aids, malaria and tuberculosis.

Beyond the causes related to the health system weaknesses, a large number of factors, such as nutrition, access to drinking water, sanitation, education, gender, have to be simultaneously taken into account and promoted for an effective impact on mother and child mortality. France actively supports food security, sanitation and education programmes, and is supporting the Global Partnership for Education, with a contribution of 47,5 M€ for the years 2011 – 2013.

Allow me to also highlight the attachment of our country to the crucial role of midwives in our health care delivery system. They are dedicated to the women with their specific skills and competence, with their spirit of initiative and autonomy. They have to be a reference for our development programmes. They must be the cornerstones of any sound and performing health systems in Developing countries.

As you know, demography and family planning are burning issues to be addressed for the future of Africa. There is no way to fight poverty, or increase the GNP and accelerate progress toward all the health related Millennium Development Goals without universal access to reproductive health services. With the Ouagadougou conference on demography and family planning organized in February 2011 with 9 French speaking African countries, France has reaffirmed its strong commitment for reproductive health in Developing countries.

We are committed... We will be also accountable. In this perspective, Mr Henri de Raincourt, the French minister of Cooperation, was involved in
the work of the Commission on information and accountability for women and children health. The commission ended up with a clear framework for the follow up of our commitments. This methodological tool will lead to a better tracking of resources as well as a better evaluation of the impact of the programmes on the targeted populations. Among the recommendations of the Commission, I would like to highlight the consensus around the 11 indicators for reproductive health. France and its UN partners will refer to this list for the Muskoka initiative implementation. I would also like to mention the use of the new technologies of communication and information. France, who has a strong expertise in that area, has therefore an important role to play.

The French presidency of the G8 was carried out in a tough global economic climate. The health group recalled the importance of maintaining political momentum on health, after Muskoka’s financial pledging process, with a particular mention on mother and child health and stressed the importance of aid efficiency. In addition, the French presidency in Deauville addressed the issues of food security and innovating financing, and will mobilize all the partners of the G20 in Cannes in two weeks.

We should keep the momentum and enrol others in this human adventure. With this regard PMNCH is the natural place to do so. Be sure that France is strongly engaged to deliver on its promises and to show that, by promoting and supporting the best care for all women and children, health is the wisest investment a country could ever do.

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