Remarks by Ms. Christine N. Umutoni
UN Resident Representative/Humanitarian Coordinator, Eritrea

Honourable Minister Osman Saleh, Minister of Foreign Affairs, Government of the State of Eritrea; UNICEF Deputy Executive Director, Ms. Yoka Brandt; Senior UN officials present, Excellency Ambassador Girma Asmerom, Permanent Representative of Eritrea to the United Nations; Ambassadors, Permanent Representatives to the UN and Heads of Missions; Senior Government Officials of the State of Eritrea; Members of the Diplomatic Corps; Representatives from different organizations, Distinguished Guests; Colleagues from the United Nations family; Ladies and Gentlemen:

Please allow me to begin my remarks by expressing my deep appreciation to all those who have responded to our invitation to attend this meeting, as a continuum or perhaps a culmination of previous meetings focussed on Eritrea, the recent of which was an internal brainstorming session held earlier this month on 5 September, led by DPA and facilitated by the Conflict Prevention and Peace forum. There have been various high level visits to Eritrea including from agencies like OCHA, the UNDG mission, DPA, OHCHR, ADB, ministers from partner countries and companies from the private sector.
This Side Event focused on Eritrea’s progress on the Health MDGs therefore comes at a critical moment in the evolution of Eritrea’s engagement with the UN and the world, and provides a platform for closer, more creative, collaborative, committed and sustainable engagement between Eritrea and its development partners, in order to build on achievements gained thus far, and to create positive momentum in the country’s development process.

This Side Event also comes at an opportune time, when the MDG project is winding up and the Post-2015 Development Agenda is being formulated. It therefore gives us the opportunity to draw relevant lessons from the implementation of the MDGs, which could inform the formulation and implementation of the MDGs successor; the sustainable development goals (SDGs).

The UNCT’s engagement with the State of Eritrea is guided by the Strategic Partnership Cooperation Framework, which was signed between the Government of the State of Eritrea and the United Nations on 28 January 2013. The SPCF forms the basis of the UN work in the country and is fully aligned with Eritrea’s national development priorities, as articulated through the GoSE sector plans, strategies and policies for the period 2013-2016; the Millennium Development Goals (MDGs); and other internationally agreed goals and commitments.

Eritrea’s commendable and judicious use of resources including those from donor and other development funds has led to tangible success stories, particularly in its achievements on the MDGs. Specifically, Eritrea’s success on the Health MDGs, where most African countries are not doing well, suggests that other countries have lessons to learn from Eritrea, and that given the right tools, Eritrea could score well on the other MDGs.

To give you a snap shot:
For MDG 4, which calls for the reduction of the under-five mortality rate, WHO statistics recorded an unprecedented reduction in infant mortality rates per 1,000 live births from 92 in 1990 to 58 in 2000, and down to 37 in 2012.
MDG 5 on maternal mortality, Eritrea’s maternal mortality ratio in 2013 was 380 per 100,000 births, beating the 2015 target of 425 two years ahead of schedule.

For MDG 6, Combatting HIV/AIDS, Malaria and Other Diseases, there has been steady progress in expanding both the preventive and treatment services. The HIV prevalence result from the 2010 Eritrean Population & Health Survey (EPHS) is 0.93%. This is an outstanding achievement for a disease which has become an entrenched and endemic problem in the region and beyond.

The presentation from the technicians will tell us more.

I would like to mention factors that we find important as we cooperate with Eritrea 1) Leadership both at central and local levels with the ability to mobilize people behind clear goals; 2) Government ownership of development projects and programs; 3) community participation and community based approaches to the management of diseases; 4) effective cross-sectoral coordination; and 5) value for money; an overall tangible and praiseworthy maximization of the use of resources including donor money, vis-a-vis achieved results. Eritrea’s partners recognise and appreciate this quality and would like to urge the government and people of Eritrea to continue this way.

That said, the fact that several other countries are excelling in non-Health MDGs like Poverty Reduction, Universal Primary Education, Gender Equality and others, indicates that Eritrea also could learn from these countries too and that there is a lot more to be done as we move to the SDGs.

The UN and Development partners need to maintain existing positive momentum by infusing more funding for a fresh impetus, to ensure these success stories are sustained and that the same success is replicated in other sectors.
More needs to be done, on the side of the Government of the State of Eritrea, on the UN side, and on other development partners and multilateral actors’ side. Nationally, on the socio-economic front, there is much scope to engage the youth - tomorrow’s generation - in nation building; more focus needs to be placed on poverty reduction programs, gender equality and family-focused initiatives and in the protection of vulnerable population. At the national and regional levels more efforts should be focussed on peacebuilding initiatives and social cohesion.

However, funding shortfalls are glaring. The 2013-2016 SPCF total funding requirement currently stands at USD 184.6million, of which only USD 60.1 million is fully funded, leaving a gaping shortfall of USD 124.5 million which represents a 67% funding gap. In the Health and Nutrition sector alone, available funding is 25% of the requirement. Needless to say, there is a need to bridge these gaps, and this calls for concerted commitments from all parties.

Besides funding, building and maintaining momentum calls for an effective monitoring and evaluation mechanism. Monitoring development outcomes at the national level requires a continuous building of robust and strong national statistical system. This is beyond what the national institutions can do alone. Close collaboration with the UN and development partners is a critical component of this process, hence the need for a capacity development fund.

While this Side Event serves as an opportunity to highlight commendable efforts made in Eritrea, it also serves to shine a torch on existing gaps, raise the collective consciousness, spark interest and reignite concerted and collaborative efforts to plug them. The critical role of development partners cannot be emphasized more.

This Side Event also lays the foundation for developing the 2015 National MDG Reports that will address all the MDGs, including the health and non-health MDGs which will also link to the post 2015 agenda as the SDGs get developed.
Honorable Minister, Madam Deputy Executive Director, Excellency Ambassador, Colleagues, Ladies and Gentlemen,

Our work is cut out. I take this opportunity to reaffirm that the UNCT remains a solid and committed partner of the Government and State of Eritrea in its development journey, and call on bilateral and multilateral institutions to join the UN in supporting this vital process.

Once again I would like to thank the government and the UNCT for co-organising this event, the colleagues from the CO, UN HQ and the embassy that have worked hard. I thank all those individuals that have worked behind the scenes to prepare this event.

I wish all of you fruitful discussions and thank you for your attention.