Remarks by H.E. President Ellen Johnson Sirleaf  
at GAVI Alliance High-Level Pledging Conference for Immunisation  
Grange St Paul’s Hotel, London  
Monday, June 13, 2011

Prime Minister Stoltenberg;  
Mr. Gates;  
Secretary Mitchell;  
Distinguished Guests;  
Distinguished Participants;  
Ladies and Gentlemen:

I am pleased to be a participating advocate for such a worthy cause.

The statistics are startling: 1.7 million children die of a vaccine-preventable disease; that amounts to one child every 20 seconds, three children every minute.

We started this journey in 2000 when we all committed to the Millennium Development Goal Number 4, to reduce infant and child mortality by two-thirds by the year 2015. We are now in the year 2011, with only four years to go.

The records show that, globally, the under-five mortality rate fell 30 percent between 1990 and 2007. Large, absolute reductions occurred in regions of highest initial mortality rates, such as sub-Saharan Africa. Despite this progress, in some 36 of our countries in sub-Saharan Africa, child mortality rates are above 100 per 1,000 births.

Child immunization has made a difference, a big difference, with 63 countries, recording at least 90 percent coverage. A number of sub-Saharan countries are in the top ten in terms of this coverage.

This progress can, in large measure, be attributed to the GAVI Alliance. By 2010, 288 million children immunized, and more than 5 million deaths prevented. This is
with interventions considered the most cost-efficient, effective and results-driven.

Those of you who know my country, Liberia, know that we have had a recent, very difficult history, but also that we have made tremendous progress in the last five years, including doubling the size of our economy.

We have had to rebuild every sector of a destroyed nation. We were also faced with the challenges of having one of the worst records of child and maternal mortality. With GAVI Alliance support of over US$5 million for the period 2008-2010, we have increased immunization coverage on average 70 percent for three of the five life-threatening diseases, thus reducing infant mortality from 144 to 71 and under-five mortality from 175 to 110 per 1,000 live births. A major contributing factor to this progress has been our success in bringing coherence to our health delivery system through the establishment of the Health Sector Pool Fund in 2008.

Today we are here to build upon the GAVI Alliance success, to close or exceed the US3.7 billion gap, thereby mobilizing the US$6.8 billion required for an accelerated program for the period 2011-2015. This will immunize 250 million children and save an additional 4 million lives.

This effort, aimed at saving lives, is in sharp contrast to the much higher costs of the ongoing conflicts that are destroying lives.

The GAVI Alliance’s strategic goals are clear: accelerating the uptake and use of underused and new vaccines; contributing to strengthening the capacity of integrated health systems to deliver immunization; increasing the predictability of global financing; and improving the sustainability of national financing for immunization.

In return, this will propel the achievement of goals established in the Business Plan – 90 million infants in 40 countries will receive pneumococcal vaccines; 50 million infants in more than 30 countries will receive rotavirus vaccines; 230 million infants will receive pentavalent vaccines; 65 million will get yellow fever vaccines.
This will happen only if the programs are fully funded through the collective action of those in this room and beyond, due to increased levels of donor contributions, reduction in vaccine prices and increased co-financing from our own countries, the benefitting ones.

I cannot think of a better cause, I cannot think a more compelling objective than what this conference, and your participation, is all about – saving the lives of children.

I thank you.