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Report of the Economic and Social Council

United Nations Population Award 2004

Note by the Secretary-General

The Secretary-General has the honour to transmit to the members of the General Assembly the report of the Executive Director of the United Nations Population Fund on the United Nations Population Award, established by the Assembly in its resolution 36/201 of 17 December 1981 (see annex). The report, which covers the year 2004, was prepared in accordance with Economic and Social Council decision 1982/112 of 26 April 1982.

* A/59/150.

Annex

Report of the Executive Director of the United Nations Population Fund on the United Nations Population Award (2004)

I. Introduction

1. On 17 December 1981, the General Assembly adopted resolution 36/201, entitled "Establishment of the United Nations Population Award". The Award is presented annually to an individual or individuals, to an institution or institutions, or to any combination thereof for the most outstanding contribution to increasing awareness of population questions or to finding solutions to them.
2. The laureate is selected by the Committee for the United Nations Population Award, which is composed of representatives of 10 States Members of the United Nations elected by the Economic and Social Council for a period of three years.
3. On 5 December 1986, by its decision 41/445, the General Assembly amended article 2, paragraph 1, of the regulations governing the Award (Assembly resolution 36/201, annex), so that an individual and an institution could share the Award.
4. On 26 May 1987, by its decision 1987/129, the Economic and Social Council amended the rules of procedure of the Committee for the United Nations Population Award accordingly.
5. On 29 April 2003, the Economic and Social Council elected the following five Member States for a three-year term beginning on 1 January 2004: Algeria, Bangladesh, Kenya, the Netherlands and Peru. The Secretary-General and the Executive Director of the United Nations Population Fund (UNFPA) serve as ex officio members. The Executive Director also acts as Secretary of the Committee. The Award consists of a diploma, a gold medal and a monetary prize.
6. The Economic and Social Council postponed the election of one member from African States, one member from Asian States, one member from Eastern European States and two members from Latin American and Caribbean States for a three-year term beginning on 1 January 2004.
7. On 31 October 2003, the Economic and Social Council elected Belarus, Cameroon, Guyana and the Islamic Republic of Iran to fill four of the five remaining vacancies for the three-year term beginning on 1 January 2004.
8. Pursuant to decision 2003/201 E of 31 October 2003, the Economic and Social Council postponed the election of one member from Latin American and Caribbean States for the three-year term beginning on 1 January 2004.
9. During its first regular meeting on 7 April 2004, the Committee for the United Nations Population Award elected Mr. Iftekhar Ahmed Chowdhury (Bangladesh) as Chairman.

II. The 2004 United Nations Population Award

10. A total of 10 nominations were received for the 2004 United Nations Population Award from qualified nominators. Of these, five were for the “individual” category and five for the “institutional” category. On 21 April 2004, within the mandate given to it by the General Assembly, and after a thorough review of the nominations, the Committee selected Professor John C. Caldwell in the individual category and the Addis Ababa Fistula Hospital in the institutional category.

11. Professor Caldwell, Professor Emeritus of Demography of the Australian National University, was selected for his significant contributions to demographic research, including demographic transition theory, the study of culture and mortality decline, family formation, sexual networking and the spread of HIV/AIDS; anthropological and qualitative approaches to demographic techniques of analysis; and the interaction of culture, managerial practice, and family planning programme success. Professor Caldwell’s 1976 “Restatement of demographic transition theory” remains the single most influential work in this area, with its central notion of changing directions of inter-generational wealth flows still being tested in doctoral dissertations and still a relevant point of departure for further examination of issues in demographic transition theory. His work on the HIV/AIDS epidemic in Africa is unparalleled: no other researcher has had such a dramatic effect on the way in which HIV/AIDS is framed as a demographic, epidemiological, and sociocultural phenomenon. Professor Caldwell’s work entitled “Routes to low mortality in poor countries” represented the first comprehensive attempt to model the demographic, cultural and socio-economic determinants of cross-national variation in mortality rates. The work remains a classic example of groundbreaking demographic and social analysis.

12. The Addis Ababa Fistula Hospital was selected in the institutional category for its important achievements in providing services for women suffering from childbirth and related injuries and also in offering a holistic package of rehabilitation services with the objective of reintegrating the patients into society in a dignified manner. Obstetric fistulas and their complications are clearly a reproductive health issue. It is estimated that of the approximately 3 million women in Ethiopia who become pregnant every year, 0.3 per cent will develop obstetric fistulas, which constitute essentially a disorder of the bowels and bladder that is usually sustained during pregnancy and that results in pain, incontinence and social alienation/ostracism. With proper resources, fistulas are highly treatable, and one of the most important roles of the Addis Ababa Fistula Hospital comprises spreading the message about treatment; training young medical doctors in fistula surgical techniques; and subsidizing fistula care to the extent possible. It is especially impressive and significant that the Addis Ababa Fistula Hospital recognizes and directly addresses the social ramifications of fistulas. Fistula sufferers often exhibit embarrassing and awkward symptoms and, as a result, can be abandoned by husbands, children and friends. The Hospital’s holistic approach is centred on restoring the dignity of women who suffer from fistulas and helping them to rejoin their communities.

III. Financial matters

13. As at 1 January 2004, the Trust Fund had a total of \$736,308. Interest income in 2003 was \$13,277. Expenditures in 2004, including the prizes, totalled \$46,759.
