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Dear Mr. Watson:

We are writing to express our deep concern that the World Bank's new Health, Nutrition, and Population (HNP) Strategy, due to be discussed by the World Bank Board of Directors on April 24th, has a number of weaknesses including effectively omitting all commitments to Bank funding for family planning. We encourage you to address these major shortcomings and push for stronger family planning, and sexual and reproductive health and rights.

We are very concerned that if the Health, Nutrition, and Population Strategy is approved as it is currently written, it will mean less funding and a lower level of priority for sexual and reproductive health and rights in development strategies around the world. This will have serious consequences for the rights of women and men across the globe, as well as holding back progress towards meeting the Millennium Development Goals, including the targets around universal access to HIV treatment by 2010 and universal access to sexual and reproductive rights by 2015.

We have heard reports that a supplemental note to be appended to the strategy will make greater reference to the role of the Bank with regards to sexual and reproductive health. This is helpful, but it is no substitute for a strong HNP Strategy. An appended note also implies that reproductive rights and family planning are an afterthought at the Bank, whereas they should be a primary concern.

The weaknesses in the HNP Strategy are particularly alarming given evidence obtained by the Government Accountability Project that Managing Director Juan José Daboub instructed a team of Bank specialists to delete all references to family planning from the proposed Country Assistance Strategy for Madagascar. Mr. Daboub is the top official in charge of setting African lending policy and health sector strategies. We call on you to launch an investigation into this matter immediately.

Our apprehensions about the Draft HNP Strategy are not limited to reproductive rights and family planning. Other issues of concern include:

- The draft fails to state that the Bank's own evidence shows that user fees for essential health care have been very injurious to public health and that the strategy of providing "exemptions" for the poor has failed. From this evidence should flow a Bank recommendation to eliminate health care user fees. Language in the present draft suggesting that user fees should only be eliminated after multiple prior conditions have been met should be deleted. The Bank should also commit to work with countries to adopt appropriate financing schemes, including measures that ensure sufficient resources are allocated to clinics and facilities providing basic care to the poor.
- The draft fails to make reference to non-communicable diseases. This is a serious omission. The World Health Organization reports that non-communicable diseases account for more than 40 percent of deaths in developing countries, and many of the appropriate interventions

to reduce this toll of disease and death are highly cost-effective. The final version should include measures to address non-communicable diseases.

- The draft does not give enough weight to the Bank's responsibility to work with developing countries to resolve the human resources shortage to address the health crisis. The Bank's comparative advantage in this area is the provision of finance, and ensuring structural approaches to create national fiscal space for health care investments squeezed by current IMF loan conditions.
- In addition to ensuring access to essential health care for the poor, the Bank should support health financing approaches that are equitable, integrated and non-commercial.
- The draft focuses its discussion of governance and corruption on the public sector. Corruption is not a uniquely public sector problem -- it is a problem across all sectors and within the Bank itself. The failure to acknowledge that corruption equally affects the private sector (and the ways in which private sector actors corrupt the public) wrongly perpetuates myths about the public sector. Discussions of corruption that only reference the public sector should be dropped from the strategy.
- Finally, the strategy assumes current levels of funding, and fails to make the case for the need for -- and to outline how services must be scaled up as a result of -- the large-scale aid increases to which donors have committed themselves.

We are therefore writing to you, as Canada's Executive Director, to ask for your full assurance that you will address these concerns. The Canadian government has strong commitments to gender equality, strengthening sexual and reproductive health, including through family planning and contraception, and to a rights-based approach to development. We ask you to use your voice and vote to ensure that the proposed HNP Strategy is rejected unless these issues are addressed.

We look forward to receiving a progress update on this matter.

Signed,

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