



**Permanent Mission of the Kingdom of Swaziland
to the United Nations**

STATEMENT BY

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**AMBASSADOR AND PERMANENT REPRESENTATIVE OF THE
KINGDOM OF SWAZILAND TO THE UNITED NATIONS**

**BEFORE THE 44TH SESSION OF THE
COMMISSION ON POPULATION AND DEVELOPMENT**

**ON AGENDA ITEM 4:
FERTILITY, REPRODUCTIVE HEALTH AND DEVELOPMENT**

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Chairperson,

At the outset allow me to congratulate you on your election and wish you and the Bureau a successful and productive session.

My delegation wishes to thank the Secretary-General for his report contained in document E/CN.9/2011/3 on this agenda item.

Chairperson,

More than 15 years ago in Cairo, countries agreed on the goal of universal access by the year 2015 to reproductive health services—to family planning, safe motherhood, prevention of sexually transmitted infections including HIV/AIDS and an end to gender based violence. It was part of a package of goals adopted by the International Conference on Population and Development—goals designed to empower women, promote gender equality, slow and eventually stabilize population growth, and foster sustainable economic growth in the world's poor countries.

In this regard my delegation is of the view that the theme under this agenda item “Fertility, reproductive health and development” warrants positive consideration during our discussions here.

Chairperson,

Allow me to share our national experiences in relation to the theme.

According to the latest census the population of the Kingdom of Swaziland is estimated at 1.02 million having increased modestly from 980 000 in 1997. The population growth rate declined significantly from 2.9 percent to 0.9 percent per annum over the last ten years. This may be attributable to the increase in HIV and AIDS related mortality and the decline in fertility. The Total Fertility Rate declined from 6.4 percent in 1986 to 3.8 percent in 2007. Unfortunately, for the same reason life expectancy at birth has also declined from 60 years in 1997 to 53 years in 2007.

The Kingdom of Swaziland has had a family planning program since 1973 under the auspices of the Ministry of Health, among whose major objectives are to provide family planning services, information and education on family planning. The family planning program integrates family planning services with maternal and child health services, the aim of the integration being to improve the health status of mother and child through child spacing.

Whilst our family planning programme has had considerable success in raising awareness -and- knowledge of family planning methods, there is still a need to ensure that every woman has access to quality maternity health care with skilled maternity care providers such as birth

attendants and midwives. However, we are challenged by the lack of resources to implement this desire. We therefore call upon our development partners to support our efforts in the regard.

In the same vein we also call upon developed countries to act on their commitments and raise development assistance in line with the Cairo agreement.

Chairperson,

At regional level we have achieved many gains, for example, we recently participated in the development of the Sexual Reproductive Health (SRH) Strategy for the SADC Region 2006-2015. This Strategy identifies the promotion and strengthening of intervention efforts in priority areas for SADC Member states such as; guaranteeing safe motherhood, promotion of education and support for exclusive breastfeeding, prevention and subsequent treatment of sub-fertility and infertility.

Chairperson,

Having mentioned the above my delegation has, however, noted with concern that several pro-abortion organizations have submitted statements under this agenda item, falsely asserting that abortion, contraception and comprehensive sex or sexuality education (particularly for young people) are international human rights, and should be guaranteed and (often funded) by governments.

We would like to put it on record that we do not view access to abortion as a human right. As a matter of fact the ICPD states that "In no case should abortion be promoted as a method of family planning." Efforts by organizations that put pressure on governments to legalize abortion not only undermine national sovereignty but are also contrary to many nations legal, religious, moral and cultural beliefs.

On another note, we also do not view comprehensive sexuality education as an internationally recognized human right. Since it encourages children as young as five years old to experiment with their sexuality, my delegation is of the view that it undermines the already recognized right of parents to prevent their children from being exposed to controversial sexual themes.

In conclusion, **Chairperson,** I would like to reaffirm the Kingdom of Swaziland's commitment to the implementation of the Programme of Action of the ICPD.

I thank you.