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47th Commission on Population and Development (7-11th April 2014)
Agenda Item 4. General debate on national experience in population matters: assessment of
the status of implementation of the Programme of Action of the International Conference on
Population and Development

Statement by Finland H.E. Mr. Jarmo Viinanen, Ambassador, Permanent Representative of Finland to the United Nations

Excellencies, Ladies and Gentlemen,

Let me begin by sharing an experience from Finland, which we think reflects the importance of a strong connection between sexuality education and sexual and reproductive health services,

Sexuality education became part of the curriculum in Finnish schools in the early seventies. At the same time school health services were improved, and school nurses also provided sexuality education, including contraception. Education and health services were developed in good cooperation. And what was the impact? Adolescent abortion and delivery rates declined continuously for the next twenty-five years [to about 10 abortions per 1000 teenage girls.]

However, during the 1990's, due to economic recession, resources for sexuality education were cut in Finland. As a result, the quality and quantity of sexuality education in schools deteriorated. What was the impact? A whopping 50% increase in adolescent abortions.

Fortunately, conclusions were drawn and the necessary changes made. A <u>new subject, health education</u>, was introduced into school curriculum. <u>Sexuality education became part of health education</u>.

As a result the percentage of pupils with a sexual debut before the age of 16 <u>decreased</u>, the percentage not having used contraception <u>decreased</u>, and the rate of abortions among teenagers declined again, [to about 11 per 1000 girls in 2012. This is the lowest figure among all of the Nordic countries].

Thus, our conclusion is clear: comprehensive sexuality education and adolescent friendly sexual health services lead to delayed sexual debut, better use of contraception and fewer abortions. Results we all want to achieve.

Taken into account our own experiences, it is no wonder that Finland is a strong supporter of the ICPD Programme of Action. We advocate for its goals and targets in the international arena, as well as in our own development policy. We believe sexual and reproductive health and rights need to be kept high on the international development agenda and discussions. They are key to people's wellbeing, especially that of women and girls, and to achieving sustainable development. Therefore, they need to be strongly reflected in the Post-2015 Development Agenda and integrated, at least, into gender equality, health, and education aspects of the forthcoming new development framework.

Excellencies, Ladies and Gentlemen.

I would like to add a few more words on sexual and reproductive health and rights, which are a value in itself, and central for the well-being of all people. They are basic human rights, and form a basis for personal decision-making on essential issues related to human life – right to decide upon one's own body, sexuality, health, couple relationships, marriage, and having children. They need to be ensured to all people without any form of coercion or discrimination.

Sexual health services need to be comprehensive, universally accessible, and they have to cover comprehensive sexuality education, maternal health services, prevention and treatment of STIs, including HIV, and safe abortion. Ensuring young and unmarried people's access to sexual and reproductive health services, comprehensive sexuality education, and contraceptive methods, and the realization of their sexual rights, need to be a priority.

Good sexual and reproductive health and rights of all people are also essential in achieving social, environmental and economic development in societies. Women and girls, who can decide upon their sexuality and the number and timing of their children, are healthier, more educated, have a smaller family, are gainfully employed, and are able to participate in the activities and decision-making in their community and society. Healthier families are more resilient in crisis situations and environmental challenges.

Excellencies, Ladies and Gentlemen.

Finally, I would now like to turn over to the issue of gender equality. Finland believes that gender equality needs to be included on the new development agenda as a stand-alone goal, and to be integrated in all other goals.

Without women's participation, societies function ineffectively. Women's empowerment, education, and employment promote families welfare and accelerate social development. It is a well-known fact that education, and specifically that of women and girls, is the key to development. Educated women get married later, have less and healthier children, have better health themselves, are more likely to provide their children education, and have better opportunities for paid employment. This is not only beneficial for themselves and their families, but for their communities and for the society, leading to positive development and eradication of poverty.

I am looking forward to continuing our interesting discussions during the 47th Session of the CPD.

Thank you Mr. Chairperson.