

Oral Statement from New Zealand Family Planning

Presented to the 44th session of the UN Commission on Population and Development on the theme “Fertility, reproductive health and development” by NGOs with ECOSOC consultative status: New Zealand Family Planning

Mr.Chairman and delegates,

I am here today to reflect the collective concerns of New Zealand Family Planning New South Wales, The Burnet Institute, Australian Reproductive Health Alliance and the Asia-Pacific Alliance for Sexual and Reproductive Health. These are civil society organizations who work in the Pacific region to ensure that every man and woman, including adolescents, have the information and services that they want and need for optimal sexual and reproductive health.

Pacific context

The Pacific region consists of 22 countries spread over 20000 to 30000 islands and separated by millions of hectares of the Pacific Ocean. The region has a total population of under 10 million and is broadly divided into:

- Melanesia (Papua New Guinea, Solomon Islands, Fiji, Vanuatu, New Caledonia)
- Micronesia (Kiribati, Federated States of Micronesia, Marshall Islands and Nauru among others)
- Polynesia (New Zealand, Cook Islands, Tonga, Tuvalu and Niue among others)

The Pacific is the second least likely region to achieve the MDGs after Sub-Saharan Africa. MDG5b “Universal access to reproductive health” is one of the most “off track” MDGs not only globally but also in the Pacific. The challenging geography and the high per-capita costs of programmes and interventions are often deterrents to development efforts in the region.

Maternal mortality

Five women in the region die every day due to pregnancy and child-birth related complications. In countries like Papua New Guinea, more than 700 women die for every 100,000 live births. The maternal mortality ratio is also persistently high in countries like Solomon Islands, Kiribati and Vanuatu. However, these figures underestimate the several thousands who bear the non-fatal consequences arising from complications of pregnancy and childbirth.

Adolescent fertility

More than fifty percent of the region’s population is 24 years of age or less. In countries such as the Republic of Marshall Islands, for every 1000 girls in the 15-19 age group, there are 138 births. The teenage fertility rate is consistently high in other countries of the region as well. This has tremendous implications for maternal mortality in the region. Young girls who are not physically mature are twice as much at risk for complications during pregnancy and childbirth. Anecdotal evidence (given lack of adequate data on abortion in the region) suggests that the rate of unsafe abortions is also much higher among adolescent girls.

Unmet need

Pacific women want to have fewer children and want to plan and space the timing of their children’s births better. But they do not know where they can obtain the information, the tools

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and the services to make these choices. In many situations, they do not have a choice, because socio-cultural norms don't allow them to search for this information and when they do, the stigma from health care providers and clinic staff and the cost of commodities and services are prohibitive. All indications are that women and adolescent girls have a high unmet need for family planning services in the region.

STIs including HIV

There is a high prevalence of sexually transmissible infections in the Pacific region. One in four women in Vanuatu in the age of 15-44 are likely to have Chlamydia. Similarly, Chlamydia prevalence rates are close to 30% among women in Samoa and Fiji. Papua New Guinea has a generalized HIV epidemic and although adequate data on HIV prevalence is not available for several other countries in the region, the high rates of other sexually transmitted diseases and high adolescent fertility rates are good indicators of unsafe sexual practices and behaviour.

Gender based violence, including sexual violence

The Pacific region is also characterized by extremely high rates of gender-based violence (including sexual violence). In the Solomon Islands, more than 50% and in Kiribati, 46% of women and girls report that they have experienced sexual violence in their lives. Sexual violence has been linked to serious and direct sexual and reproductive health outcomes - from contraction of STIs and HIV to miscarriages among pregnant women. It also leads to unwanted pregnancies and complications arising from unsafe abortions of the unwanted pregnancies.

Population, climate change and development

In the Pacific, where environmental and climate change issues are of critical importance reducing the population pressure for food, water and sanitation through prevention of unintended pregnancies becomes more significant than ever. Meeting the unmet need for family planning has been found to reduce carbon emissions by 8-15% and is equivalent to stopping all deforestation.

When people, especially girls and women, have a choice of leading lives, free from coercion and violence and are able to have control over their sexual and reproductive lives, they are more likely to complete their education, are more likely to be productive members of the workforce and more likely to have an equal say in household, community and national matters. The development of their countries is dependent on them. The people of the Pacific depend on your support.