



REPUBLIC OF POLAND
PERMANENT MISSION TO THE UNITED NATIONS

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Commission on Population and Development
Forty-fourth session
11–15 April 2011
General debate on national experience
in population matters

Check against delivery

STATEMENT

by

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New York, April 11th, 2011

Mister Chairman,

Distinguished Delegates,

Ladies and Gentlemen,

I am honored to address the 44th session of the Commission on Population and Development on behalf of the Republic of Poland.

At the outset, I would like to congratulate you, Mister Chair, for your election as President of the 44th Session of the Commission.

Poland aligns itself with the statement pronounced by Hungary on behalf of the European Union under agenda point 3 as well as the statements to be pronounced under agenda points 5 and 6. However, I would like to underline that in our understanding any reference to sexual and reproductive rights and services included in the texts of the above – mentioned statements does not constitute an encouragement to the promotion of abortion.

Distinguished Delegates,

Bearing in mind the importance of matters related to fertility and reproductive health and the influence of these factors on social development, I would like to shortly present the demographic situation in Poland and the solutions introduced within the framework of Poland's population policy.

For many years now, Poland has had a low birth rate due to a considerable decline in women's fertility. The replacement of generation index in Poland is at a medium level as compared to other European countries, however, it is lower by as much as one third than in North European countries and some West European countries. The reduction in the number of children born per woman results from the decision to postpone the first birth. We can predict that in the future the deformation in the age structure of the population will progress, the depopulation processes will accelerate and the population will age more rapidly.

The infant mortality rate has been gradually falling as well. Poland is the second country in our region, after the Czech Republic, to have the most significant accomplishments in the battle against infant mortality. As a result, the life expectancy of an average inhabitant of Poland has increased (in 2008, it was 71.3 years for a male and 80.0 years for a female).

With regard to reproductive health, the Government of Poland strives to provide women during pregnancy and at labour with the best health services that match their expectations and

the medical knowledge. The protection of women in the period of pregnancy, labour and postpartum is ensured in the national legislation and in international agreements ratified by Poland.

The fundamental legal act of the Republic of Poland – the Constitution – ensures special protection by the State over pregnant women. Its article 68(3) states that “Public authorities shall ensure special health care to children, pregnant women, handicapped people and persons of advanced age.”

Reproductive health is a crucial element of the State health policy. Moreover, central and local government administration bodies provide citizens with a free access to methods and means of conscious procreation. During the last two decades, the range and availability of modern contraceptive methods have increased. The research on women’s expectations as regards contraception indicates that primary factors determining the choice of a method are effectiveness, lack of adverse side effects, reversibility, and acceptance.

Given the need to provide women during pregnancy and at labour with the best possible services, the Minister of Health issued the Regulation of 23 September 2010 *on standards of conduct and medical procedures in providing health services in the area of perinatal care for women during physiological pregnancy, physiological childbirth, and postpartum and of infant care*, which entered into force on 8 April 2011. The Regulation was elaborated in keeping with the guidelines of the World Health Organisation, evidence-based medicine and the Polish experience in the field of maternal and infant care. The Regulation constitutes a response to women’s expectations; its implementation will limit the excessive medicalisation of physiological childbirth and will contribute to observing patients’ rights, applying the principles of three-stage perinatal care, increasing patients’ satisfaction with care, optimising the costs of care and ensuring adequate distribution of funds. Currently, trainings for physicians and midwives are held in the entire country concerning the implementation of the perinatal care standards.

The main document determining the direction of action undertaken in the framework of Poland’s health policy, that is the National Health Programme 2007–2015, sets out the Operational Objective 7 that includes activities related to improving healthcare for mothers, infants and small children. According to the Programme, the overriding objective of health care for pregnant women and children is to ensure the proper course of pregnancy and to identify as early as possible the risk factors, thus allowing to provide women early on with care adjusted to their medical needs.

Ladies and Gentlemen,

When talking about reproductive health and development, the question of prevention of sexually transmitted diseases, especially HIV/AIDS, cannot be overlooked. After thirty years that have passed since the first incident of HIV infection was recognised, it is known that the AIDS epidemic has a destructive impact both on all spheres of an individual's life and on the development of the entire society. In Poland, the fight against the epidemic is led by government institutions, health care systems, scientific community, private sector and civic society, as well as persons suffering from HIV/AIDS.

The process of developing a health policy should focus on the protection of human rights, on the respect of human dignity of persons living with the virus and on the support of particularly vulnerable populations, such as women, children, adolescents, migrants and marginalised persons, in order to minimise negative consequences of the epidemics.

Indeed, the Polish strategy for combating HIV/AIDS is based on the principles of inviolability of human dignity and respect for human rights. This results in a systematic improvement in the quality of life of persons infected with HIV and suffering from AIDS, and in higher social awareness of this problem. The institutional system existing in Poland guarantees continuity of funding both for preventive measures and for an easily accessible, free-of-charge ARV therapy. In Poland, due to the fact that women during pregnancy and in the perinatal period receive antiretroviral therapy, the percentage of infections at this stage fell to below 1%.

I would like to underline that in 2011 Poland has become a chair of Vice-President of PCB UNAIDS. We will make our utmost efforts in order to fight the epidemic of HIV/AIDS in the world.

Mister Chairman,

In reference to the issue of maternal mortality, the maternal mortality rate in Poland constitutes one of the principal indicators of the society's state of health. The data gathered during the last 15 years indicate a significant decrease, and, thus, an improving level of perinatal care. Moreover, the infant mortality rate has been decreasing during the last decades - over the last 15 years, this rate was 12.4‰ on average in the first five-year period, 8.2‰ on average in the second five-year period, and 7‰ on average in the third five-year period.

Nonetheless, Poland's activities in the area of obstetric care are still fundamentally aimed at steadily reducing maternal, newborn and infant mortality rates. It is mainly achieved through creating a three-stage perinatal care system that performs functions related to managing the

network of collaborating facilities, treating patients, providing consultations, ensuring flow of information, maintaining and coordinating transport of mothers and newborns, and educating.

Distinguished Delegates,

The primary objective of Poland's population policy is to influence the processes related to the formation and functioning of families, fertility, amelioration of the quality of life, mortality reduction and migrations in such a way as to make them conducive to ensuring the optimum size and structure of the population, the biological continuity of the society and the sustainable socio-economic development.

To this end, the Government of Poland has undertaken numerous activities aiming at the advancement of the level and the quality of childcare. It is worth mentioning a variety of measures that help improve the income situation of families through social benefits, social welfare and the related professional insertion of non-working parents.

In reference to health policy, the Government takes action with regard to, among others, prenatal care and medical care for pregnant women, which also involves prenatal diagnostics, and the prevention of consequences and complications resulting from developmental anomalies and foetus diseases.

Apart from the above, worth mentioning is that special educational programmes on reproductive health addressed to young people have been established and introduced into schools.

Mister Chairman, Distinguished Delegates,

Having in mind the interdependence of the population policy and the social development, as well as the profound influence of these factors on the shape of every society's demographic structure, I would like to express my belief that a comprehensive action in the area of pro-family, health and educational policies will allow us to effectively eliminate the threats posed by the demographic processes of today's world.

Thank you for your attention