GHANA



PERMANENT MISSION OF GHANA TO THE UNITED NATIONS 19 EAST 47TH STREET NEW YORK, N.Y. 10017 TEL. 212-832-1300 • FAX 212-751-6743

Please check against delivery

STATEMENT

BY

PROF. STEPHEN KWANKYE EXECUTIVE DIRECTOR, NATIONAL POPULATION COUNCIL

AT THE

47TH SESSION OF THE UNITED NATIONS COMMISSION ON POPULATION AND DEVELOPMENT

ON

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

NEW YORK, 7-11 APRIL, 2014

Mr. Chairman,

The delegation of Ghana wishes to express its appreciation to the Commission for dedicating this year's session to assessing the implementation of the ICPD since 1994 and the follow-up actions beyond 2014. Our delegation is confident that your stewardship will result in fruitful negotiations and a successful outcome and we assure you and your bureau of our full support. Ghana aligns itself with the statement delivered by the Plurinational State of Bolivia on behalf of the Group of 77 and China.

Lately, national governments have devoted much effort and resources to implement the ICPD-PoA, and it is essential that we continue to share our experiences and lessons learnt with each other. Ghana's recognition of the centrality of population issues in national development, predating the ICPD, gave Ghana a head-start having already taken significant steps to address many of the priority actions of the ICPD-PoA. The current development policy framework, i.e., the Ghana Shared Growth and Development Agenda (GSGDA), just ended (2010-2013) and its successor, has "people" as the central focus, seeking to improve human capital and create sustainable jobs which are essential to accelerating economic growth and achieving national development goals.

Mr. Chairman,

Over the past 20 years, Ghana has made significant progress implementing the ICPD-PoA and kindly permit me to touch on a few, namely in the field of gender equality, health and the demographic transition. As the Honourable Minister of Gender, Children and Social Protection indicated at the High Level Debate on ICPD+20 Forum last Friday, Ghana recognizes the importance of women as both agents and beneficiaries of social development and change. Accelerated improvements in institutional mechanisms as well as policy and legislative frameworks relevant to women's empowerment and promoting gender equity have led to increased awareness among the general population about the importance of upholding the rights of women and children.

Following the creation in 2001 the Ministry of Women and Children's Affairs, headed by a cabinetlevel Minister, a National Gender and Children's Policy was adopted in 2004 to mainstream gender concerns in the national development agenda. A Domestic Violence Act (Act 723) was promulgated in 2007, the Intestate Succession Act amended in 2009, and the criminalization of certain harmful cultural practices including Female Genital Mutilation/Cutting, primarily to protect the rights of women and adolescent girls.

The Community-based Health Planning Services (CHPS) initiative has also brought primary health care and other reproductive health services closer to the people. Improvements have been recorded in incidence of malaria, tuberculosis, HIV and AIDS. In the same vein, HIV testing during pregnancy is now a requirement in preventing mother-to-child transmission. Furthermore, several policies, strategies and programmes have either been developed or old ones revised to promote and safeguard the reproductive health of people particularly women and adolescents with reproductive health being an integral part of basic health services in the country.

Efforts have also been made to increase family planning uptake, skilled delivery, neonatal and post natal care while discouraging early marriage by legislation and counseling to improve maternal and child health. By law, family planning is now a benefit package under the National Health Insurance Scheme, a major social protection intervention Ghana has implemented since 2003 in addition to a free maternal and child health policy later implemented since 2007.

Mr. Chairman,

We are happy to note that fertility has steadily declined from 5.5 in 1993 to 4.3 in 2011 and maternal mortality, though still unacceptably high, has also seen some appreciable reduction from 451 per 100,000 live births in 2007 to 350 in 2010. Infant and under-five mortality, has also reduced to 53 and 82 per 1000 live births respectively and would require more effort to bring them further down. A major concern to us is the disconnect between the steady fertility decline so far recorded and modern contraceptive use among women in spite of its increase from 17 percent in 2008 to 23 percent in 2011.

Notwithstanding the significant improvements in the health of Ghanaians, rural areas are at a disadvantage for their limited attraction to professionally trained health workers, a situation which continues to impact on quality of service delivery in the remote rural communities. In addition, socio-economic and cultural factors still undermine universal access and utilization of available maternal and child health services such that anaemia in pregnancy continues to be a serious threat to maternal health particularly in rural communities.

Mr. Chairman,

As we reaffirm our commitment to the ICPD-PoA and determine strategies for the future, it is important to note that financing of the ICPD agenda has been a major challenge faced by many countries including Ghana. In the face of serious domestic resource constraints, and the dwindling external funding support, it has become increasingly imperative for countries in the south to look within themselves to mobilize resources to prosecute the ICPD and other development agenda. This calls for the urgent need for strengthened south-south collaboration for the effective implementation of programmes. There are many lessons and best practices to share and Ghana fully supports initiatives, such as that by Partners in Population and Development (PPD), as vehicles to successfully execute any unfinished agenda under the ICPD. There is also the need to strengthen our monitoring and evaluation mechanisms to ensure effective implementation and accountability at all levels.

In this regard, there is no gainsaying about the need for generating relevant and reliable data, and exploring all avenues to ensure that the required statistics and indicators are routinely collected, compiled, disaggregated, analysed and effectively utilized at all stages of the development planning process. Having joined African governments in the resolve that all countries conduct a census in the 2010 round, the Government of Ghana is further committed together with other African governments to conducting a comprehensive assessment of the national civil registration and vital statistics (CRVS) systems that should lead to accelerated improvements in civil registration.

Mr. Chairman,

In conclusion, Ghana would like to reiterate our commitment and support for the implementation of the ICPD-PoA, the MDGs and the post-2015 development agenda as well as the various regional and global instruments and frameworks agreed by African Heads of Government and member states on population and development. Ghana is ready and prepared to work with all to uphold the dignity of the human population towards enhanced quality of life for all as enshrined under the ICPD-PoA, the Maputo Plan of Action, the Addis Ababa Declaration on Population and Development Beyond 2014, among others. Let us all rally around the many issues that unite us rather than the few that divide us as we forge ahead a common development agenda beyond 2014.

Thank you.