

Statement by H.E. Mr Minelik Alemu Getahun, Ambassador Extraordinary & Plenipotentiary, Permanent Representative of the Federal Democratic Republic of Ethiopia to the United Nations Office at Geneva and Other International Organizations in Switzerland

UN Human Rights Council, High Level Panel on Human Rights Mainstreaming, Geneva, 1 March 2013

It is an honour for me to deliver this statement at the High Level Panel on the Agenda Item on Human Rights Mainstreaming on behalf of my delegation, Botswana, Denmark, Ghana, Mozambique, Norway, South Africa, the Netherlands, Sweden, Slovenia, Uruguay, Sudan, South Sudan, Nigeria, Colombia, Rwanda, Turkey, Morocco, New Zealand, Burundi, Bulgaria, Sierra Leone, Djibouti, and Somalia.

Mr. President,

The full realization of basic and fundamental human rights is an essential element to accelerate progress towards equitable and sustainable development.

In 1994, at the International Conference on Population Development (ICPD) in Cairo, 179 governments signed the historic Programme of Action committing to provide universal access to sexual and reproductive health information, education and services and realize reproductive rights, achieve gender equality, empowerment of women and equal access to education for girls and adolescents.

Sexual and reproductive health and rights are a matter of social justice, equality and equity: the gravest costs and consequences fall disproportionately on women, adolescent girls and communities living in poverty or otherwise marginalized. Prioritizing sexual and reproductive health and rights is therefore crucial. Not only does it enhance equality of opportunity, it also helps to reduce maternal mortality and morbidity, the spread of sexually transmitted infections, including HIV and AIDS, to retaining girls in school, improving child health, women's education and productivity.

The human rights system has also made significant contributions to States by providing guidance on the application of a human rights based approach to sexual and reproductive rights and health through the work of the Treaty Monitoring Bodies and the Special Procedures, for example, the reports of the Special Rapporteur on the right of everyone to highest attainable standard of health. Furthermore, the OHCHR technical guidance on the application of a human rights-based approach to the implementation of policies and programmes to reduce preventable maternal morbidity and mortality outlines the process to be followed at the national level to lead to sustainable and human rights-based improvements to women's health and rights. Both, the technical guidance and the Treaty Monitoring Bodies stress the need for legal and policy reform.

Mr. President,

Today as we approach the 20 year review of the ICPD Programme of Action and the culmination of the MDGs, a number of questions remain unanswered:

Why are 215 million women without access to modern contraceptives or to vital sexual and reproductive health services and information?

Why do 275,000 women and girls die each year from complications related to pregnancy and child birth?

Why do more than 2.5 million people get infected annually with HIV?

And why do 7 out of 10 women suffer some form of sexual violence in their lifetime?

If we are to fulfill our responsibility we must ensure that women and girls are able to live their lives in dignity with equal opportunities including access to health, education, and meaningful employment.

We call upon the international community to ensure the Post-2015 MDGs agenda will uphold the causes of the millions of women and girls throughout the world. New ambitious targets that build on the achievements of the MDGs and addresses those goals and targets that are most off-track, and maintaining the focus on the reduction of violence against women, the girl

child, child mortality as well as improving maternal health should remain at the center of this agenda.