

Be-Cause Health Seminar
28 november 2014 – 17u
Espace Jacqmotte – BTC – Hoogstraat 147 Bxl

Slottoespraak
Minister De Croo (ENG/FR)

(ENG) Dear participants of this interesting and timely seminar,

The program of today has touched upon a number of crucial subjects in the field of sexual and reproductive health and rights.

First of all, we see that 20 years after the International Conference on Population and Development in Cairo some progress has been made. However, still so much work remains and enormous challenges still lie ahead, and most definitely in the least developed countries. The main cause of death for girls and young women in sub-Saharan Africa is due to the complications of early pregnancy. Child marriage and lack of education for girls remain too common in our world today. The report on ICPD plus twenty also shows the effects of unsafe abortions and the lack of response regarding sexual and reproductive needs.

We also see that regardless of the progress we have made here and there, that a number of these rights are put back into question. I think of examples as close to home as Spain or Turkey where the laws on abortion were made stricter again. I think of Mali where only a few years ago the age to marry for girls was lowered again from 18 to 16, with a list exceptions permitting marriage as early as 15 years.

Furthermore, we also know that in countries such as Mali and other developing countries, children are hardly registered which also implies that their exact age is not known, leading to possible marriage and child bearing at an even younger age.

All these issues are human rights related: there is lack of free choice, lack of education and knowledge, and lack of access to qualitative health care services including reproductive health care. As you can read in my policy declaration, I stated that I will address authorities in our partner countries on these sensitive issues. I reiterate that I intend to do this systematically. Human rights, including sexual and reproductive rights, will be at the heart of my policy. Pointing out the importance of these rights, also will lead to other positive effects as the burden of the demographic pressure in many developing countries also puts a strain on economic progress. As you all know, investments in preventing sexual abuse, STI's, HIV and unwanted or early pregnancies leads to less public expenditure. Access to family planning offers couples the opportunity to decide on the timing and number of children they want.

Therefore, the Post 2015 debate will be of crucial importance to find a foot between the door to integrate sexual and reproductive health and rights. The angle of demography might be the only way to discuss this matter as the demographic growth puts enormous challenges on our planet. I sincerely hope

that the world will realize that respecting the rights of women and girls, in particular in this area, will be at the heart of poverty reduction, sustainable development and economic growth.

(FR) De notre part, la loi belge concernant la coopération de développement de 2013 identifie le secteur de la santé comme un des secteurs prioritaires, dont l'accès à la santé sexuelle et reproductive est mentionnée d'une manière spécifique. Je soutiens à fond l'approche d'accès aux soins primaires dont également l'approche transversale du SIDA est intégrée. La coopération belge dirige depuis des années autour de 13 - 14 % de son budget dans le secteur de la santé, ce qui correspond aux recommandations de l'OECD. Je veux continuer à mettre l'accent également sur la durabilité de ce secteur. Seulement une approche durable permettra une accessibilité à long terme.

Aussi, il faut aller au delà du secteur de la santé même. Comme je viens de dire déjà, les droits et l'application de ces droits font parties d'une politique multidisciplinaire. Souvent, les pays avec lesquels on travaille, ont fait des engagements internationaux, comme par exemple dans le cadre de l'ICPD ou en ratifiant la Convention sur l'élimination de toutes les formes de discrimination à l'égard des femmes. Nous n'imposerons rien mais nous pouvons mentionner les engagements que les pays ont fait eux-mêmes.

Afin d'obtenir des résultats concrets je veux utiliser tous les moyens dans mes compétences : je pense non seulement à la coopération bilatérale, mais également à la coopération multilatérale, déléguée et via les acteurs non-gouvernementaux. D'autant plus, des campagnes de sensibilisation seront nécessaires afin de changer la mentalité des gens. Pour que la coopération belge aurait un impact concret je suis en faveur aussi d'une politique '*more for more*', dont des indicateurs concernant les droits sexuels et reproductifs seront pris en compte.

D'ailleurs, j'ai bien compris qu'aussi en interne à la coopération et la diplomatie belge il y a des choses à améliorer. Ensemble avec mon collègue des Affaires Etrangères, monsieur Reynders, et naturellement en concertation avec le service du personnel du département, je verrai comment nous pouvons intégrer une formation concernant les droits sexuels et reproductifs dans le stage des diplomates et des attachés de la coopération.

(ENG) My services told me that the recommendations and collaboration with the Because Health platform is very much appreciated. I intend to analyse recommendations made in the past and see how we can take these into account into our future work. I understand the working group on SRHR of the administration is working together with Be-Cause Health, based on a road map.

I hope you had a fruitful day and that the recommendations made today can be picked up. I thank you for your attention and hope to work with you for the next few years.

Je vous remercie.