



Malaysia

Permanent Mission to the United Nations

STATEMENT BY

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AT

THE 44th SESSION OF THE
COMMISSION ON POPULATION AND DEVELOPMENT

ON

AGENDA ITEM 4: GENERAL DEBATE ON
NATIONAL EXPERIENCE IN POPULATION MATTERS:
FERTILITY, REPRODUCTIVE HEALTH AND DEVELOPMENT

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Mr Chair, Your Excellency, Ladies and Gentlemen

On behalf of the Government and people of Malaysia, allow me at the outset to extend my sincere congratulations to you on your appointment as the Chair of this session. My delegates and I are confident that under your able leadership and guidance, the deliberations of the Commission will be both substantive and fruitful.

2. In view of the need to achieve the International Conference on Population and Development (ICPD) Plan of Action (POA) by 2015, the comprehensive report on *Fertility, Reproductive Health and Development* made available to us, reiterates the importance of universal access to reproductive health. This is particularly so in the achievement of MDG 5 i.e., the improvement of maternal mortality rate by addressing its root causes, i.e. poverty, malnutrition, unmet need for family planning, gender inequality, etc.

Chairperson,

Fertility

3. Fertility among Malaysian women is declining faster than expected due to the increase in the average age at first marriage for women that has risen from 24.7 years in 1991 to 25.3 in 2004. Malaysia's total fertility rate (TFR) is expected to reach the replacement level by year 2015. With more and more women participating in the labour force and prioritising career development, this has also led to many highly educated women choosing to marry late or not to marry at all. Malaysia hopes to sustain the current fertility rate and not let it fall below replacement level. Sustaining the current TFR of 2.3 is one of the major challenges that has to be monitored as it can lead to contraction of labour supply, rapid aging of the population and other social implications.

Chairperson,

4. Taking note of the experiences of other countries where interventions to raise fertility through incentives have not been successful, Malaysia since the late 1990's has put in place strategies to ensure fertility is sustained at the current level. Emphasis on family development; rather than target, puts people as the centre of development. The Government has introduced a National Family Policy in December 2010 that will put family perspectives in socio-economic development

planning, laws and regulations, policies and procedures, as well as facilities and services.

Reproductive Health

5. To ensure that MDG 5 is achievable, Malaysia has scaled up its efforts to reduce the maternal mortality ratio (MMR) through allocation of resources for health care; access to professional care during pregnancies and childbirth; and increasing access to quality family planning and services. The MMR for Malaysia showed an impressive decline from 140 per 100,000 live births in 1970 to 30 in 2008 and we are on our way to achieving our target of 11 by the year 2015. The country has achieved almost full coverage for the proportion of births attended by skilled health professionals at 98.4 percent since 2006. Antenatal coverage has reached 94 percent in 2008. The differentials across the states in the country have reduced significantly over the years.

6. Malaysian families are provided with affordable and acceptable methods of contraception through a network of service providers including the Government, NGOs and the private sector. The contraceptive prevalence rate (CPR) among married couples, however, has stagnated at around 50 – 52 per cent in the past 20 years compared to about 33 per cent in the mid 1970s. Unmet need for modern methods is also a cause for concern as it has risen only from 25 percent in 1988 to 36.2 percent in 2004. To address the stagnant CPR and unmet need for family planning relevant programs have been introduced.

Chairperson,

7. Malaysia has taken affirmative action with regards to the reproductive and sexual health needs of adolescents and young people. The National Policy on Reproductive Health and Social Education and its accompanying Plan of Action approved in November 2009 will further pave the way for more accessible reproductive, sexual and social health information and services for in-school, out-of-school and most at risk youths. Information and skills on adolescent sexual and reproductive health (ASRH) would also be integrated into the National Service Program curriculum which covers more than 100,000 school leavers each year. In addition, The Ministry of Education has introduced sex education (PEERS) for year one pupils in primary schools beginning this year. To ensure the young have access to reproductive health information and services, adolescent friendly centers which are managed by young people have been established by both the Government and NGOs.

8. HIV has been with us over the last 25 years, and the Government has since 2006, provided first- line treatment free of charge for all patients, at government hospitals and clinics. Of great concern to Malaysia now is the feminisation of the HIV epidemic. We take cognizance of the linkage between HIV and reproductive health and appropriate programs have been strengthened in the New National Strategic Plan (NSP) on AIDS for 2011 – 2015.

Chairperson,

9. Reproductive cancers are still a concern. As such the government has made available early detection of breast and cervical cancers at all government facilities. These services are supplemented by the NGOs and private sectors. To ensure that young girls are protected from cervical cancer Malaysia has included HPV vaccination in our National Immunisation Program.

Going Forward

Chairperson,

10. Malaysia has set its goal of becoming a high income country by the year 2020, where development is people centric. Four pillars towards Vision 2020 have been introduced; i.e. The 1Malaysia Concept (People First, Performance Now), the Government Transformation Program, the Economic Transformation Program and the Tenth Malaysia Plan (2011-2015).

11. Finally, we wish to reiterate that Malaysia is committed in implementing the ICPD-POA and will give our full support in all deliberations of this Forty-fourth Session of the United Nations Commission on Population and Development.

Thank you.