Statement by the Delegation of the State of Eritrea

to the

ICPD+5 Forum

The Hague

11 February 1999

Mr. President, Executive Director of UNFPA, Ladies and Gentlemen,

I wish to state here that the State of Eritrea fully subscribes to the International Conference on Population and Development (ICPD) Programme of Action. The implementation of the Programme of Action has, however, been very challenging for Eritrea as a new nation. This is all the more so because the Government of Eritrea has, since liberation in 1991, been vigorously undertaking the extremely demanding challenge of national reconstruction, which has included:

- establishment of a new government and all its institutions
- rehabilitation of infrastructure
- establishment of social services and human resource development
- initiation of an economic recovery programme
- repatriation of refugees and resettlement of displaced persons
- demobilization and integration of former freedom fighters

These challenges of all these activities notwithstanding, Eritrea has made significant progress towards many of the goals of ICPD, particularly in the areas of:

- 1. Development of a statistical data base and analysis;
- 2. Gender equality and empowerment of women; and
- 3. Improving access to health and education.

First, I would like to talk about statistical data base development:

There has never been any census of the Eritrean population. Therefore, the demographic and socio-economic characteristics of the population have yet to be documented. This lack of an adequate and reliable database has placed severe constraints on economic and social planning by government ministries, agencies and non-governmental bodies.

In order to provide for basic statistical data, the government has established the National Statistics Office which is mandated to collect, compile and disseminate statistical information to all users. Although it has an extremely small staff, the National Statistics Office has already conducted two surveys: the 1995 Eritrean Demographic and Health Survey (EDHS) and the 1996-97 Eritrea Household Income Expenditure Survey (EHIES). The results of the 1995 Demographic and Health Survey has been disseminated while the Household Income and Expenditure Survey results will be distributed soon.

These two surveys have provided crucial basic information on the health, demographic, educational, and household economic situation of the population. However, there remains a need for comprehensive census data in order to provide for full information on the population. Thus, a national population and housing census is also planned: all pre-enumeration activities are completed and the census will be conducted in 1999.

At present, Eritrea does not have an explicit population policy, simply because of the inadequate data on the demographic, social and economic situation of the country. Therefore, the government needs continued support from the international community, in general, and UNFPA, in particular, to generate the necessary statistical data required for both policy formulation and for sectoral planning.

I wish to underline here that even though we have no comprehensive and explicit population policy at present, Eritrea is implementing an implicit, but responsive, population policy by investing in social services and human welfare, especially in the sectors of health and education.

Already, despite the constraint of limited resources, the Government of Eritrea has improved and strengthened agricultural practices and production, rationalized the labour market, and provided an enabling environment for rapid and sustainable economic growth through investment in human resources, infrastructure and the environment.

Now, I would like to talk about our achievements in empowerment of women:

The Government of Eritrea firmly believes in equal rights for women and their full participation in policy formulation, decision-making, and programme implementation.

The evidence of this is clear in many areas. For instance, there has been a very active policy to expand girls education; since independence, only six years ago, the enrollment rate of girls at the primary level has more than doubled. Women also play a very active role in the rapid improvements in the society and economy. Thirty per cent of the seats in the National and Regional Assemblies are specifically reserved for women, while at the same time, they also have equal opportunity to compete for the remaining 70% of the seats. The legal status of women has been raised through legislation on marriage and divorce, equal pay, land tenure, inheritance rights, and maternity leave benefits. The National Union of Eritrean Women serves as a catalyst for the promotion of gender equity and equality, both at the community, regional, and national levels, while also providing training and credit programmes for women.

Thus, Eritrea has already made substantial progress not only in eliminating legal barriers to equality, but also to ensuring equal access to opportunities and services. However, we are acutely aware that it will take time, perseverance, and continued commitment to overcome traditional norms, values and beliefs which still impede the achievement of real gender equality.

I would also like to discuss some of our achievements in health:

The Government has placed priority on the rehabilitation of infrastructure and the expansion of health services so that primary health care is available to all. I wish to stress here that the national commitment to equity, which is expressed in all sectors, is reflected in the health sector by the emphasis on provision of services to previously marginalised groups. This can be indicated by the fact that, of the over 50 health facilities constructed and staffed during the first five years after independence, all were in the rural areas - not one was in the capital city. Full immunization of children has increased from less than 10% to over 65% in rural areas in only six years.

The Primary Health Care Policy of the Ministry of Health includes a strong component for comprehensive reproductive health care and the Government has initiated national multi sectoral

programmes for information, education and service expansion in reproductive health. A national Safe Motherhood Strategy has been adopted to help lower the very high maternal mortality rates and a National AIDS Prevention Strategy has been active in prevention of sexually transmitted diseases and HIV/AIDS.

In this area, I must also note the very active role played by the National Union of Eritrean Youth and Students, which not only has education, training and sports programmes at the community and national levels, but also has a strong programme for adolescent reproductive health, including service delivery and counselling for young people.

In education, we have also made progress, although there is still a long way to go:

The Government policy is to provide universal basic education (grade 1-7) to all school age children (6-15 years), and has placed special emphasis on increasing female enrollment by making girls' education compulsory, by working to educate parents about the importance of girls' schooling, by trading moire women teachers, and increasing physical access to schools through creation of more schools in rural areas. The adult literacy programmes of the Ministry of Education and of the NUEW also have significantly increased literacy flag both rural and urban women.

As an indicator of the Government commitment to human rights, equality and diversity, basic education is provided in the mother tongue of all national ethnic groups. This, too, has helped to encourage parents to enroll their girls in school and has also improved literacy among both girls and boys.

Population and reproductive health education is included in the national curriculum in a number of subjects and is also a component of the adult literacy programmes.

Mr. Chairman, Ladies and Gentlemen:

As you have heard, even though Eritrea is a new nation facing many challenges of development, including the implementation of the ICPD Programme of Action, the government and the people are committed to the goals of ICPD and have made considerable progress, particularly in health, education, gender equality and the empowerment of women.

This progress, however, is hampered, and even seriously jeopardized, by the unfortunate and unnecessary border conflict triggered by Ethiopia's territorial ambitions over Eritrea and its tragic consequences for the civilian populations of both countries.

In particular, the expulsions and deportations of over 52,000 ethnic Eritreans to date, the detention and incarceration of thousands of Eritreans in Ethiopia, the forcible separation of families and the confiscation of their properties by the Ethiopian Government, all of which have been documented by the U. N. and other independent agencies, have seriously compromised the health and well-being of thousands of innocent victims, most of whom are women and children. Needless to say, the expulsions and the displacement of border populations puts additional stress on already overtaxed social services, the consequences of which may be that these vulnerable groups, on top of the trauma they have already experienced, may not even have access to the most basic of life-supporting services.

In keeping with the principles of the various conventions on human rights and development, including ICPD, this August assembly must call for an immediate and unconditional cessation of hostilities as a prelude to the peaceful resolution of the conflict. This assembly should also join other major actors in the international community in raising a voice against the Ethiopian Government's gross violations of the human rights and fundamental freedoms of ethnic Eritreans in Ethiopia.

Thankyou.		