

**Republic of the Marshall Islands' Statement on the 6th Asia & Pacific Population
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Distinguished Chair, distinguished delegates, & friends from all over the Region. I am privileged to make this statement on behalf of my government, the Republic of the Marshall Islands and our people in this 6th Asian and Pacific Population Conference. I would like to thank and acknowledge UNFPA, ESCAP, and the government of Thailand for hosting us in this Conference. Marshall Island would like to join and give our full support to the statement by the Pacific countries delivered by Honorable Minister Nandi Glassie from Cook Island. Although Marshall Islands was not able to participate in the Pacific Parliamentary Conference for Advocacy on ICPD Beyond 2014 around progress reviews, challenges and priority Strategies towards achieving ICPD Programme of Action in Fiji, August 2013. We also endorsed the Moana Declaration, and fully support the statement by HE President Tong, from Kiribati.

REPUBLIC OF THE MARSHALL ISLANDS (RMI) reviews on the MDGs:

- **Off Track on MDGS #1, 6, & 8**
- **Mixed on MDGS #2, #3, & #7**
- **On Track MDGS #4, & #5**

Women's+empowerment+and+gender+equality+

The RMI is a matrilineal society, with children belonging to their mother's lineage and having rights to use land owned by their lineage group. The RMI's 2011 Census showed a distinct gender differential in economic activity, with 51 percent of all men of working age engaged in either paid or unpaid work, compared to 28 percent of women of working age. Despite a small increase in female participation in employment since the last Census in 1999, it is clear that the Marshall Islands are a long way from reaching employment gender parity. The recent creation of the NGO, Women Entrepreneurs in the RMI, is an example of recent initiatives to support women's engagement in the economy. This focus on economic empowerment is particularly

important for women in the outer islands given the difficulty that communities there face in terms of low incomes, lack of basic services, and poverty of opportunity.

The official focal point for gender-related work in the RMI is the Gender in Development Office, which is housed in the Ministry of Internal Affairs. The office coordinates much of its work with WUTMI (Women United Together for the Marshall Islands), the umbrella organization for most women's civil society organizations in the Marshall Islands. SPC conducted a stock take of the gender mainstreaming capacity of the government in 2011 and as a result of this process several potential starting points for increasing the capacity of the RMI government to mainstream gender and women's human rights in an effective and sustainable way were identified. These include: (i) strengthening networks for capacity development through stronger ties between the Gender in Development office, WUTMI and the Resource Development Committee (RDC) on CEDAW/CRC; (ii) the development of national gender policy which would address key thematic areas for women and support gender and women's human rights across government and allow for strategic approaches to gender related work in the RMI; (iii) improved gender statistics in all sectors of government working through EPPSO. This would involve compiling key gender indicators in a single comprehensive framework, developing user-friendly "situation of women" statistical reports, conducting policy analyses based on the priority indicators with relevant government agencies and collaboratively developing policy responses; (iv) the development of tools to raise awareness and assist capacity building on gender mainstreaming across government; (v) support a process for coordinated donor support for gender work in the RMI; and (vi) the establishment of gender focal points in all key ministries. SPC is assisting the Gender in Development office with the drafting of the Gender Policy along with other stakeholders. The Gender Policy is scheduled to be finalized before the end of 2013.

Work on Domestic violence has seen a breakthrough with the passing of a regulatory bill addressing this issue in 2012. There has been progress in enrolment figures at both lower and higher school systems; women continue to enter into the workforce. There remain key areas and issues that need to be addressed and this can be strategically done through the gender policy.

Disabled+population

The constitution states that no person may be treated in a discriminatory manner under law or by public officials, but it does not include disability in its listing of specific prohibited grounds of discrimination. In practice persons with physical, sensory, intellectual, and mental disabilities face difficulties in obtaining employment and accessing health care and other state services. RMI Gov't through the Ministry of Internal Affairs has assisted in the creation of the Marshall Islands Disabled Association that is already registered and chartered with the government. From the creation of this organization, the SPC is assisting with the drafting of the Disability Policy that is soon to be finalized.

Universal+access+to+quality+health+care

In the RMI, the health care system is comprised of two hospitals, one in Majuro and one in Ebeye, and fifty eight (58) health care centers in the outer atolls and islands. Over the last decade, the people of the Marshall Islands have seen improvements in health indicators with decreases in maternal and child mortality.

That said, a sedentary lifestyle and processed foods have brought about a sharp rise in the levels of adult obesity and non-communicable diseases (NCDs). Diabetes-related diseases and cancer are now the leading causes of death. High population growth and crowded conditions in urban areas have also contributed to the re-emergence and/or rise of certain communicable diseases, such as tuberculosis and leprosy. Other areas of concern include malnutrition in children, immunization coverage, a high teen pregnancy rate, and alarming rates of STIs.

The Ministry of Health recently developed a revised National Health Strategy 2012-2014. This strategy acknowledges the national goals and objectives stated in the Vision 2018 while providing insight on current priorities in the health sector.

HIV epidemiology in 2011

The number of people reported to be living with HIV in the Marshall Islands remains low. The MOH HIV registry records the cumulative incidence of HIV is 25 cases since the first case was identified on-island in 1984, indicating low level prevalence. This is an increase of 3 cases on the

most recent published SPC data in 2009, which recorded 22 cases. Current MOH HIV registry data indicates ten cases have died since diagnosed – indicating that 2 cases have died since the 2009 data was published. Another seven cases have left the island, leaving eight currently living and receiving medical care in RMI.

Formal and informal sexual and reproductive health services

Young people can also access the hospital clinic in Majuro and Ebeye, although these services are not specifically targeting young people. However, YTYiH is recognized as the key agency delivering formal and informal sexual and reproductive health services specifically for young people in RMI.

The NCPI Survey revealed that the Ministry of Education has funding to integrate sexual and reproductive health, including HIV & STI awareness and education, into its national curriculum. However, the Ministry is aware that it lacks capacity in this area and progress has been slow. The Ministry has sought YTYiH and MOH's advice to assist them develop an appropriate curriculum and teacher training program. One of the recommendations discussed during the recent National Strategic Planning workshop was the development of a curriculum advisory committee to ensure that SRH are integrated into the national curriculum as a priority.

Number of adolescents and youth utilizing youth friendly health services

Comparative data on the number of adolescents and youth using youth friendly health services was difficult to ascertain. However, YTYiH's Adolescent Health Development program, which operates from the Majuro clinic and the Laura health centre, has captured information related to its reach in the first three quarters of 2011. The following tables present the data on the proportion of young people using each centre by age group and gender between January – September 2011: it shows that the two services offered services to 26.2% of all youth in Majuro, encompassing 23.2% of all males youth and 29.6% of all females.

Universal+access+to+quality+education

The RMI Ministry of Education (MOE) oversees delivery of public education from Kindergarten through grade 12. While a number of private schools also operate in the RMI, the vast majority of children attend public school. In 2009, progress on the MDG goal of universal primary

education was on track, with expanding classrooms and a falling fertility rate as drivers. However, the report also noted that while this ‘quantity’ challenge is likely to be met, the ‘quality’ challenge of improving educational performance and outcomes must be addressed.

2011 Census figures bear out concerns with educational outcomes. The 2011 Census found: (1) 28.6% of people aged 25 or older had started but not completed high school, and that (2) this proportion actually increased since the late 1990s (21.6%). School enrolment figures also show that significant numbers of school-age children are simply not in school: 20% of children ages 5-9 are not in school; 8% of children ages 10-14 are not in school; and 62% of youth 15-24 are not in school. Given that the RMI has some of the highest levels of per capita spending on education in the Pacific, these numbers suggest that an overriding issue for the government is how to use resources more efficiently and effectively.

Youth+

With the support of SPC, the RMI developed its National Youth Policy (2009-2014) as part of an effort to respond to the challenges facing its young people. Several key issues and actions identified in the policy are 1) strengthen education and training; 2) expand livelihood opportunities through a range of targeted vocational and employment training; 3) strengthen health programmes and social services for young people; and 4) foster the Marshallese culture as a way to address social and economic issues. The engagement of NGOs and Civil Society Organizations as partners with government in the delivery of youth-related services has proven very effective in the RMI. Organizations such as Youth-to-Youth in Health and Waan Aelon in Majel (WAM) have proven track records in substance abuse prevention, counseling, cultural strengthening, and vocational skills training. Looking ahead, a key challenge will be to implement priorities in the National Youth Policy 2014 such that it becomes a truly meaningful document for change in the lives of Marshallese youth.

RMI would like to contribute to reshaping the ICPD Beyond-2014 and Post-2015 Development Agenda at the regional and global levels and we will speak with a strong voice around our priority issues including the issues of the whole Pacific Countries.

Kommol tata, I thank you all