

Distinguished Ladies and Gentlemen:

For me it is an honor to address today this important Assembly, which has a commitment as a country and in favor of its people, to ensure the right to family planning and the sustainable availability of contraceptives.

Allow me to ponder for a few minutes:

What brings us here?

I come from a country called Guatemala that neighbors Mexico, of which I would like to present a brief overview to show that despite the thousands of kilometers that lie between our countries, our challenges are the same. Perhaps our mother tongues and the color of our skins are different, but our goals and our endeavors are the same.

Guatemala has 14.7 million inhabitants - according to our National Statistics Institute, NSI - of which, as of 2010, 49% are men and 51% are women. Additionally, the NSI indicates that 51% of Guatemala's population lives in conditions of poverty and 15% lives in conditions of extreme poverty.

Social contrasts in my country are extreme. According to ICEFI, the Central American Institute for Fiscal Studies, and the *Center for Economic and Social Rights CESR*, Guatemala has the fifth highest malnutrition rate in the world, while being the fifth largest coffee- and sugar-exporting global economy.

By contrast, we have the highest per capita concentration of private airplanes and helicopters in Central America, while having the highest number of maternal mortality cases, comparable to Sierra Leone.

According to CONGCOOP, our NGO and Cooperative Coordination Organization, 8% of farmers producers in my country own 80% of the farmland. Guatemala is the second most inequitable country in terms of land tenure in Latin America, second only to Brazil.

In 2010 there were 400 maternal deaths reported, although it is estimated that 50% of the cases go unreported (non-recorded deaths). Health services cared for: 5,400 deliveries of pregnant girls under 14; 48,000 deliveries by girls between 10 and 19, many of them the result of sexual violence and/or incest.

68% of adolescent girls under 19 who are married or in a common-law marriage, do not use family planning methods. 40% of people living with HIV are under 30. A study performed in 2007 by Dr. Edgar Kestler showed that 65,000 abortions are performed every year in Guatemala.

Many young girls desperately resort to public hospitals, arriving with obstetric hemorrhages that result from abortions that were performed by inserting umbrellas, clothes hangers, herbs, metal rods and other sharp objects in the vagina. Our public health system pays enormous amounts of money to stop these infections, instead of investing that budget in family planning and reproductive health.

What brings us here?

ELAINE MAXWELL wrote: “My will shall shape my future. If I fail or if I succeed, it shall not be because of a man, but because of me. I am the force; I can clear any obstacle before me or get lost in the maze. I decide. I am accountable; whether I win or lose, only I hold the key to my destiny.”

The first *Declaration of the Rights of Man and Citizens (1789)* makes reference to the rights of man, the male citizen. Women were excluded from this declaration - in spite of the fact that women never missed any historical event during the revolutionary period - since they made their voice heard before the representatives of the General States in the *Complaints Notebooks*. Olympia de Gouges took the very same Declaration as a model to write the *Declaration of the Rights of Women and the Female Citizen*, presenting it herself before the French National Assembly two centuries ago. Yet, she died in the guillotine.

In the second *Universal Declaration of Human Rights (1948)*, its subject continues to be the white male; women were still not included. It isn't until the most recent years that several groups of women from all parts of the world have continued our task of promoting the acceptance and legitimacy of our fundamental rights and liberties, thus promoting a new global concept of Human Rights through different ways and means.

We have made progress. In 1993, the World Conference on Human Rights in Vienna saw the incorporation into the Plan of Action of the human rights of women and girls, rights which were declared inalienable, comprehensive and indivisible parts of Universal Human Rights.

What's more, violence against women and all forms of sexual harassment and exploitation were declared incompatible with human dignity and their elimination was demanded.

When speaking about Human Rights, we speak of basic liberties, faculties or claims that all persons deserve for the simple fact of their human condition, and which guarantee life with dignity. Among those faculties, among those rights, are included sexual and reproductive rights, rights that guarantee a woman's free

determination about her own body regarding sexual and reproductive decisions and that affect the sustainable dichotomy of population and development.

It is thus that human rights are evolutionary in nature and we will surely see the list of rights grow with the passing of time.

Part of the backbone of reproductive rights is family planning, the basic right of all couples and individuals to freely and responsibly decide the number of and spacing between children, and to have any information, education and means available for that purpose. It is the right that allows the achievement of the highest level of *sexual and reproductive health* and the right to make decisions about reproduction without suffering discrimination, coercion or violence.

It is the right to equalitarian sexual relations that guarantees full respect to the integrity of a person, and mutual consent that ensures the sharing of responsibilities and consequences of sexual behavior.

Sexual and reproductive health does not refer to the absence of illness, but is understood as a general state of physical, mental and social wellbeing. Reproductive health is the ability to enjoy a satisfactory and risk-free sexual life, of enjoying sexuality, the ability to reproduce, and the freedom to decide whether to do it or not, when and how frequently.

The focus on health, from the human rights perspective, begins with nutrition, then education, preventive health, mental health, and of course, the ability to freely access information. Human rights in health are the minimum conditions necessary to allow the fulfillment of human potential. Equity, on the other hand, is vital for these minimum conditions to be equally available to members of a social group as a whole.

This last condition implicitly entails the right of women and men to obtain information and to have access to family planning methods of their choice which are safe, efficient, attainable and acceptable, as well as any other method they might consider for regulating fertility which is not legally prohibited. It also includes the right to receive adequate healthcare services which make it possible for women to have risk-free pregnancies and deliveries and which provide couples the highest chances of having healthy daughters and sons.

It is said that the development of a Country is measured according to the development of its women, and here let us make a distinction between economic growth – which only measures the broad availability of goods and services during a specific moment in time – and development, which refers to how that broad availability of resources is translated into better conditions of life for the population in general, especially for women, as We are the heart of a Nation.

That is why, for several decades already, the objective is to search for mechanisms that will translate growth into better opportunities for the largest possible part of the population and to prevent it from concentrating only within a sector of society, that is to say, growth that includes development as well.

To the extent that a person can enjoy good physical and mental health, she or he will be better suited to succeed in any personal enterprise that will allow her or him to enjoy a standard of living that gives dignity to their life and to that of their family. Family planning, therefore, has the ultimate goal of improving the chances of families of providing themselves with a dignified standard of living.

It is an absolute reality that resources are scarce, family income has its limits and public spending is also surrounded by borders.

Not all of the population enjoys the same level of income. It is for this reason that the State compensates them through social spending. But States, in turn, face limits such as tax income, in view of the fact that spending is not only focused on social purposes as the population grows, but also on its regular functions. The larger the population, the more teachers, police officers and doctors are needed.

How can we support women to enable their development?

How do we empower them?

How can we promote women's management of their own pocketbook?

How can we promote job creation so that they can independently manage their own resources?

How can we help them exercise their own citizenship?

What brings us here?

In the midst of the 21st Century there are still women who are raped by their spouse or life partner. There is a daily and silent practice of physical and sexual abuse of girls and boys, and in most cases this is perpetuated by family members or acquaintances.

In the midst of the 21st Century there are still power relationships that demand sexual services to be provided in the workplace.

In the midst of the 21st Century there is sexual violence in street muggings, armed conflicts and in correctional facilities.

In the midst of the 21st Century there is discrimination for sexual orientation, sexual preferences and disability.

In the midst of the 21st Century there are girls and women who still are victims of ablation or genital mutilation.

In societies such as ours, extremely patriarchal societies where male-female relationships are tainted by inequalities not only in public but also in private life, women have been raised with the belief that our worth is linked to that of the men in our lives: father, brothers, husband or sons. Our self-esteem is bound to meeting their needs and desires and we feel guilty if we act independently.

Maternity, particularly for indigenous peasant women who live in poverty, becomes their inevitable fate and in too many cases, it is an event wholly uncontrolled by themselves. (For instance, in Guatemala in 2009 there were 12 deliveries reported for 10-year-old girls.) It is believed that paternity is to impregnate a woman, and not to assume the responsibilities that come with being a man or a father. (As an example, in the Eastern part of my country, when a boy turns 12 or 13, his godfather's present to him for having become a man, is to take the boy to a bordello to engage in unprotected sex.)

Ana María Choc, a 16-year-old Guatemalan indigenous girl, was a single mother who died of complications caused by high blood pressure during her pregnancy. Every day in Guatemala, 2 women like Ana Maria die as a result of pregnancy-, delivery- or postpartum-related causes. This tragedy is magnified as we realize that they die as a result of treatable and preventable conditions, which used to be a cause of death in Europe in the 18th Century.

Ana María lived in a rural community 2 hours away from the nearest health-care center. Although she completed 4th grade, she never received any type of

information regarding reproductive health, sex education or family-planning methods. She became pregnant at 15 by her boyfriend, who decided to migrate to the United States, supposedly to provide her with a better standard of living.

Ana María began showing signs of generalized edema, headaches and blurry vision. She sought medical care at the healthcare center but passed away 12 hours after being admitted to the hospital as a result of eclampsia. The baby died along with her as a c-section was not performed.

Cases such as this one are common in our countries. Maternal mortality is an indicator of disparity and injustice. There are multiple causes, among them: the lack of sex education, the lack of access to information and to family-planning services, a health system which lacks the specific resources to address this weak and inefficient issue... The whole set of lack of responses constitutes a clear violation of the human rights of women.

Someone was telling me: “Congresswoman, this happens because our people have no education; they are ignorant.” To which I answered: “*Ignorance is the criteria of well-versed, educated authorities, who do not focus on providing education to their citizens. They do not focus on educating and training, but on obstructing, challenging and censoring instead of supporting education in Sexual and Reproductive Health and Family Planning.*”

These authorities argue that “*ignorance is essential for virtue*”. They are the ones who would like to perpetuate poverty in our societies. So, how do they expect to reform to the health system if it is not supported by an educational reform? How do they expect to bring about structural change if there are no budgetary priorities set for reproductive health?

Family planning is an effectively-proven strategy for reducing maternal mortality. Maternity is beautiful, but it must be wanted, it must be a freely-elected maternity.

We aspire to a maternity lived as an election and not as a natural, imposed fate. Voluntary maternity is a decision of love that is completely enjoyed if, and only if, it is wanted.

International consensus recognizes the responsibility of the States to provide, through the school system, a quality science and humanities education which has the purpose of ensuring the harmonious development of boys, girls and adolescents. Meanwhile, many countries count with a legal order that supports the introduction of sex education in the curricula, on the basis of comprehensive approaches and of a framework of gender rights and equality.

It is said that a State is laic, secular, when it does not allow any religious or clerical influence within its rule, as it is the only way to guarantee freedom of conscience, thought and religion. It is also the way in which the plurality of our societies can be respected and to allow people in a society to live a life in harmony, as both religious diversity and the rights of those who profess no religion are respected.

A laic, secular State does not question the rights of each to have a religious focus in their lives or not, it does not question that each can decide according to their own conscience, but rather demands that said right is guaranteed.

It is easy to judge and condemn any thought of which one does not partake. It is easy to label those who think differently, to disqualify them by attaching pejorative epithets to them in order to put an end to dialogue and mutual respect.

It is easy to condemn others and qualify them as morally unworthy of trust, on the basis of spurious and selfish interests.

What brings us here?

No Nation can achieve development while denying its women the right to health.

No Nation can make progress if large numbers of women die while giving birth.

No Nation can speak of its future if girls as young as 10, 11, 12, 13, 14 and 15 are becoming mothers, victims of violence, sexual abuse and a lack of education in family planning.

No Nation can achieve development if the human rights of a person are violated, making him or her suffer the double-standards and moral sentencing of ultra-conservatives, who become their judges and executioners, who label as “promiscuous” or “libertines” those who are nothing but victims of one of the most lethal viruses of our era: HIV/AIDS.

No Nation can make progress when prejudice and ignorance are the gag of our education and health systems when it comes time to speak about human sexuality to our youth and adolescents; this is a violation of human rights.

The State and Churches, regardless of creed, must respect other’s sensitivities and convictions, in order to ensure that their actions promote an environment which is conducive to a political and democratic culture, and which is respectful towards those who think differently.

In countries such as ours, which have a low tax collection rate and many social priorities that compete for public resources simultaneously (Guatemala, in fact,

has one of the lowest tax burdens in Latin America, about 10.5% of GDP), it is necessary that political managers that strive for causes such as reproductive health, guarantee that the funds allocated in the budgets of the State for this purpose, are indeed respected. Funds must not be absorbed by other programs, they must be fully executed.

At Legislative Assemblies, we must be more creative, innovative and even consider resorting to approving ear-marked taxes and/or budgetary locks that armor budgetary allocations.

In the Executive, the Ministries or Secretariats in charge of these programs must have a relevance map available, that is, one that shows in which areas or regions the distribution of medications and contraceptives is required. It has been observed, for instance, that in regions that are close to land borders or seaports, the propensity to sexually transmitted diseases (STDs) is higher as a result of the heavy flows of people. Therefore, it is necessary to have a distribution and logistics network that can guarantee timely access.

Likewise, not only the Legislative Body but also the Executive must strive to achieve an open and transparent system for the procurement of contraceptives and treatments by means of easily bidding processes. We know of the permanent risks stemming from commercial interests that are linked to politics, which prevent the assurance of the best procurement prices and conditions in the international market.

This is why we must locate the best prices and quality possible, establishing partnerships with civil society and international organizations for the benefit of the Nation, in view of the fact that the general wellbeing of the population should prevail over individuals' wellbeing.

What brings us here?

We must take the initiative and the leadership to break the barrier of silence, the abuse, the discrimination and the stigma; we, together with the organized civil society, the political class, academia, intellectuals, media partners, our youth, and women.

We know what needs to be done.

We know which interventions are effective.

We have scientific evidence.

We have technical evidence.

What we still need is the political will and a sense of urgency to bring forth a greater investment in family planning, in order for reproductive health as well as sexual and reproductive rights to become an equitable reality.

We must promote a deep social revolution, which will assign more power to women and which will transform the relationships between men and women at every level of society, in search of equality, equity and justice.

We shall succeed if we lead our countries towards growth and development, if the coming generations are well-informed enough to make responsible decisions.

We shall succeed if we lead our countries towards growth and development within an environment of tolerance and respect.

Centuries ago, British, French, North American women showed the whole world that women could rebel against the rules that had been imposed on them. They proved that they were capable of organizing themselves and to provide ideological support to their feelings, and proved that they were able to win great

battles.

It is thanks to them that today I can stand on this stage without the fear of male wrath. It is thanks to them that women today rule nations, are part of spaceship crews, win Nobel Prizes, are distinguished in the sciences, the arts and sports and, as always, give their spirit, soul and body while holding in their arms all the girls and boys who will become the women and men of tomorrow.

Regardless of whether we have tried once and again and have been unable to attain it, we can start over but we must not stay still.

We must not be passive, we must not be indifferent,

We must not look the other way; now is the time for action.

I recall that during one of the legislatures in which I participated my Party was a minority force at the time. It was urgent to approve a tax reform to cover the dire lack of resources necessary to ensure the continued functioning of the State. We were a parliamentary minority and a government opposition party, but our votes would determine the approval of said tax reform.

Therefore, at the time when the leader of our party in Congress was discussing the final draft of the Bill of Law for the Tax on the Distribution of Alcoholic and Distilled Beverages, Beer and other Fermented Beverages (Decree 21-2004) the women in my Party got together and told him we would not raise our hands unless 15% of that tax would be earmarked for sexual and reproductive health and family planning programs of the Ministry of Public Health and Social Welfare.

They agreed and we won the voting round. Women have learned how to exercise the levers of power. Don't take us for granted.

Afterwards, and with the purpose of ensuring the procurement of contraceptive supplies, on October 8, 2010 a new law was passed: Decree 32-2010, the Healthy Motherhood Law. This was done through the revision of Decree 21-2004 to earmark a 30% of that 15% solely and exclusively for the procurement of contraceptives.

The Healthy Maternity Law, states that, among other provisions, it is mandatory to provide women access to quality and warm healthcare services, care in their mother tongue, the right to choose the position they prefer for childbirth, the right to be provided advice and family planning methods and supplies, as well as orientation regarding cervical-uterine and breast cancer. Very young and adolescent girls will receive differential care according to their age, ethnicity and level of schooling.

What brings us here?

We need to be as Eduardo Galeano, the Uruguayan writer, wrote in his verses about **FIRE**:

“No two fires are alike: there are big fires and small fires, and fires in every color.

There are people with a mild fire that does not even mind the wind.

And people with a wild fire, that fills the air with sparks.

Some silly fires, do not even light up or burn.

But other fires burn for a lifetime, with so much will, that one cannot stare at them, without blinking, and whoever comes near them, is set ablaze.”

The former president of the Republic of France, Valéry Giscard d'Estaing, once said: "I am catholic, but I am also the president of a Republic whose State is laic, secular. I have no right to impose my personal convictions on my fellow citizens. I must rather ensure that the Law corresponds to the real state of the French society."