



Economic and Social Council

Distr.: General
9 December 2013

Original: English

Commission on the Status of Women

Fifty-eighth session

10-21 March 2014

Follow-up to the Fourth World Conference on Women and to the special session of the General Assembly, entitled “Women 2000: gender equality, development and peace for the twenty-first century”: implementation of strategic objectives and action in critical areas of concern and further actions and initiatives

Statement submitted by Vida y Familia de Guadalajara, a non-governmental organization in consultative status with the Economic and Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.



Statement

More opportunities for women and girls

Vida y Familia de Guadalajara is a private Mexican welfare institution which cares for socioeconomically vulnerable pregnant women and helps them achieve social integration after they give birth. Because our mission is to love both the mother and the child, giving each the dignity they deserve, we welcome the priority theme of the fifty-eighth session of the Commission on the Status of Women: “Challenges and achievements in the implementation of the Millennium Development Goals for women and girls”.

As the retirement of the Millennium Development Goals draws near, we call the attention of the Commission to target 5.A to “reduce by three quarters the maternal mortality ratio”. We are pleased by the significant global progress towards achievement of this goal. Research recently published in the *International Journal of Women’s Health* highlights that Mexico reduced maternal mortality by 82.7 per cent between 1957 and 2010, from 216.6 to 37.5 deaths per 100,000 live births. Between 1990 and 2010, there was a 30.6 per cent decrease in maternal mortality.

This reduction is largely due to better education for women and girls. The more educated women and girls are, the better placed they are to access health care resources, such as skilled birth attendants. Desiring to encourage youth to continue their education in order to equip them for a better life and increase their human potential, we reaffirm the call in the Programme of Action of the International Conference on Population and Development for “educational programmes in favour of life planning skills, healthy lifestyles and the active discouragement of substance abuse” (para. 6.15). For this reason, we welcome the review theme, “Access and participation of women and girls in education, training, science and technology”. Education for women and girls is key to achieving the Millennium Development Goals, particularly the target of reducing maternal mortality.

Nevertheless, we are concerned that some agencies and non-governmental organizations at the United Nations are more interested in promoting abortion than addressing the vast majority of preventable causes of maternal mortality. We believe that this emphasis on abortion is inappropriate and particularly inapplicable to Mexico’s situation.

The study published in the *International Journal of Women’s Health* also shows that approximately 98 per cent of all the maternal deaths in Mexico are related to haemorrhage during childbirth, hypertension and eclampsia, indirect causes and other pathological conditions. Less than 2 per cent of recorded cases were abortion-related. For instance, of the 1,207 maternal deaths registered in Mexico during 2009, only 25 could be attributable to induced abortion, resulting in a mortality rate of 0.97 per 100,000 live births. The Commission must understand that, as the study’s authors point out, it is very improbable that changes in the legal status of abortion could have significant effects on maternal mortality in Mexico.

Indeed, a substantial part of the maternal deaths resulting from induced abortion in Mexico may be related to violence against pregnant women, which we are concerned to see has become more common. It must be noted that these abortion-related deaths cannot be avoided by promoting changes in abortion legislation simply because they are the result of other causes, such as antibiotic-

resistant sepsis causing multiple organ failure. These complications are dangerous even in countries with well-developed health-care systems, regardless of the legal status of abortion.

Because calls for “safe abortion” do nothing to help women who want to bring their children safely into the world, Vida y Familia de Guadalajara encourages the Commission to focus its energy on the preventable causes of maternal mortality that constitute the vast majority of maternal deaths worldwide. The primary direct causes of maternal mortality are haemorrhage, infection, high blood pressure and obstructed labour. These conditions often stem from poverty, lack of education and lack of access to critical health-care infrastructure to provide adequate prenatal, perinatal and postnatal care.

Since 1985, Vida y Familia de Guadalajara has cared for more than 18,000 women and their children, of whom 80 per cent have lived in shelters while 20 per cent have been supported externally. Women cared for by Vida y Familia de Guadalajara are given the opportunity to access quality prenatal and postnatal medical care. With our support, the women are reintegrated into society with skills to provide and care for their babies. We encourage other non-governmental organizations to consider the efficient model of cooperation with government agencies that Vida y Familia de Guadalajara uses to support pregnant women in distress. Together, we can promote maternal health that respects the lives and dignity of both mother and child.
