

Norway's Statement at the ICPD October 1st, delivered by Ms. Bjørg Skotnes, Minister-Counsellor Global Health Issues

Norway is a strong supporter of the ICPD Programme of Action. It was a ground-breaking document in 1994, and still is the gold standard for our work.

The Sustainable Development Goals are our benchmark for the next decade. Implementing ICPD will greatly contribute to the achievement of Agenda 2030.

Today let me focus on one issue of particular concern, as it has huge implications on the achievement of the SDGs. That is the mounting pressure on women and girls sexual and reproductive health and rights. Even though sexual and reproductive health and rights are equally important to women and girls all over the planet, we know that many lack knowledge and access.

It is a paradox that while girls in many places are considered 'old enough' to get married, get pregnant and give birth, they are often viewed as 'too young' to have access to comprehensive sexuality education and family planning.

As Micelle Bachelet put it in her opening statement at the human rights council in September, "The Sustainable Development Goals will not progress without discussion of and progress on the so-called "sensitive" issues of human rights"

In Norway, we have good experiences with promoting sexual and reproductive health and rights.

New and more effective contraception methods, accessibility and good information are important reasons for the reduction in the number of unwanted pregnancies in Norway.

Norway's national strategy on sexual health (titled "Talk about it!") emphasizes that this also includes sexual orientation and gender identity. Health services should be provided without heteronormative nor discriminatory issues.

The national strategy on sexual health states the importance of comprehensive sexuality education from an early age.

In Norway, sexuality education is included in several subjects in school. Research shows that most teenagers in Norway take informed choices.

We know that comprehensive sexuality education does not lead to more sex among young people – quite the opposite; it leads to a later sexual debut.

But, we also face challenges:

The incidence of sexually transmitted diseases remains relatively high in Norway. This indicates that we must design new and more targeted efforts.

In addition to teaching CSE in the classroom, each school in Norway has access to a school nurse. Their job is to advise and provide contraception. Contraception is provided for free to teenagers from 16-19 years old.

For Norway, access to Sexual and Reproductive health and rights is not optional; it is about doing what is right. Our experience makes us even more convinced of the need to fully implement the ICPD Programme of Action in our own country and in our region.