

STATEMENT

BY

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DURING

THE

46TH SESSION
OF THE
UNITED NATIONS COMMISSION
ON POPULATION AND DEVELOPMENT

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*Mr. Chairman,
Ladies and Gentlemen,*

Thank you for the opportunity to address this 46th Session of the Commission on Population and Development. Congratulations on your election and that of the other members of the bureau. Kenya commends you and your bureau for the efforts and hard work that have gone into the preparation of this Session. My delegation pledges its full support for the success of this session.

My delegation aligns itself with the statement delivered by the delegation of Fiji on behalf of the Group of 77 and China.

I am very happy to share the Kenyan experience of the implementation of the outcome of the International Conference on Population and Development held in Cairo in 1994. Please allow me to reiterate Kenya's firm commitment to the ICPD Programme of Action and Key Actions. This was domesticated in Kenya through the National Population Policy for Sustainable Development, amongst other legislative and policy measures undertaken.

This session comes at time when the world is at a cross roads in terms of balancing the alarming population growth, dwindling global resources and the attendant poverty, especially in the global south. The situation is further exacerbated by resource conflicts and natural disasters that have occasioned forced movement of huge segments of population, migration and insecurity.

Kenya is a host to many refugees from the neighbouring countries and also receives a substantial number of immigrants, many in transit but some do remain. Kenya is also a source of immigrants and benefits greatly from remittances from the diaspora. In this regard, Kenya while in the process of streamlining and structuring systems to support the diaspora, has established an office for diaspora affairs within the MFA. Kenya currently hosts more than 700,000 refugees in its North and North-Eastern refugee camps and many others in urban areas.

The continued instability and fragility in Somalia and other neighbouring countries has resulted in continued migration into Kenya of refugees leading to camps becoming the 3rd largest human settlements in these regions of Kenya today. In such situations, the burden falls disproportionately on Kenya, while the attention of the international community wanes and fades. Partners and the UN system have to do more and the actions have to be multi-pronged without compromising the rights of refugees and the host communities.

This burden notwithstanding, Kenya has adopted refugee specific legislation and established national institutions to address their concerns in line with its international responsibilities. In collaboration with development partners and stakeholders, we have used disaggregated data taking gender and age into account when formulating immigration policies such as the Migration and Citizenship Policy, Strengthened support for international activities to protect and assist refugees and displaced persons. In addition, Kenya's constitution provides for citizenship rights to refugees and immigrants married to Kenyans and for the human rights and access to basic services for refugees and other immigrants.

The constitution, legal and institutional framework also guarantee legal rights for all in Kenya, provide for protection from gender based and all other forms of violence; provide for justice for all and for reproductive health and rights for migrants and all Kenyans without Td [(rig)-5irne

special session to be held in 2014 this year. The ICPD Programme of Action called for action to make Reproductive Health services accessible and affordable to all individuals of appropriate ages through the primary healthcare system not later than year 2015. Further the ICPD Programme of Action called for all pregnant women to have access to skilled care throughout pregnancy, delivery, postpartum and postnatal periods. So far our government has instituted several policies and legislative measures to enforce reproductive health and rights.

While Kenya has realized some notable achievements in reproductive health, it has experienced a number of challenges that made it difficult to increase accessibility of reproductive health services. Some have weakened the health sector and negatively affected access to quality services and led to low demand for and utilization of reproductive health services. Some of these challenges include insufficient resources, social and cultural barriers that impede skilled maternal care throughout the continuum of pregnancy, delivery, postpartum and post-natal periods. Toorce pavngcdonkened thry healthcaralvlinvthrN