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## **Commission on the Status of Women**

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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.

<sup>\*</sup> The present statement is issued without formal editing.





## Statement

#### Woman as a Mother

Meeting the needs of woman as a mother in the socio-economical dimension cannot be done without taking into account her aspirations in this very important role that is raising and caring for a child. Shaping support programs for women in terms of social protection policy (institutional care for children and programs for women's vocational activation) should take into account the need and roles of women as a whole. This means that programs related to reconciliation of family, private and professional life cannot give a leading role to any of these dimensions of women's life.

These comments based on the analysis carried out by the Ordo Iuris Institute in the field of child care for children up to 3 years old in Poland and in the world, published this year (2018). The general conclusions that result from the analysis are as follows:

- 1. Child care is often perceived as a form of professional inactivity, although its value is measurable, and the benefits of its implementation are shared by whole society. Legal systems treat child care as work only on the condition that it is carried out in a formal way, usually in nurseries.
- 2. In those countries, where public opinion research on the evaluation of the various family policy models of care for children under 3 years old was conducted, there are strongly dominated assessments that there is a need to ensure pluralism of various form of child care, including home care.

Perceiving care for a child as inactivity leads to discrimination against women as mothers. As the research carried out in 2002 in 19 European countries shows women who have young children in preschool age in majority prefer a part-time employment or full dedication to care and educational duties (European Commission, New skills and jobs in Europe, France 2012, p. 19-20). In addition, along with ignoring the needs of women as mothers, there is also a neglect of the contribution of women's homework to Gross Domestic Product. For example, according to the calculations of the money.pl (financial portal) from 2016 the contribution of women's work at home (cleaning, cooking, etc.) to Polish Gross Domestic Product was 25 billion zloty that 300 billion a month, is zloty (https://www.money.pl/gospodarka/raporty/artykul/strajk-kobiet-koszty-pracykobiet-w-polsce,74,0,2165578.html).

On another point, empirical research carried out in Poland, the Czech Republic and Hungary indicate that the public authorities should respect and protect the autonomous decisions of family, including mothers and needs of families in the area of child care. In Poland, as many as 60,95 per cent of respondents said that parents should have an influence on what form of care public money will be allocated to. In Hungary, vast majority of parents are in favour of the care performed directly by parents and 56 per cent parents are using the help of grandparents in child care. In the Czech Republic 38 per cent of respondents admitted that they count on the public child care and at the same time 58 per cent of respondents stated that the child in the preschool age should be looked after mainly by family members. Model based on the one-side funding on nurseries does not, in principle, find support of respondents.

For this purpose, it is recommended to adopt a model of subsidiary child care, which is based on respecting family decision. In practice, it means to leave family decision what form of care should be supported by the public authorities. Legislation under the subsidiary model leaves a significant margin of discretion in the creation of

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childcare institutions and provides a wide range of their forms. This model can take three forms: (a) tax reliefs related to child care in the field of income taxes, (b) child care voucher (c) long parental leave.

### Women Free of Violence

Social surveys (e.g. Kenney, C.T., McLanahan, S.S. Why Are Cohabiting Relationships More Violent than Marriages?, "Demography" No 43 (2006); Kline, G. and others, Timing Is Everything: Pre-Engagement Cohabitation and Increased Risk for Poor Marital Outcomes, "Journal of Family Psychology", No 2 (2004)) confirm that the strong family bonds gives each of its members an effective protection against violence. It ensures an effective protection against the occurrence of negative phenomena which tend to be less frequent in the family founded on marriage than in other types of human relationships, including cohabitation. There is no doubt that the family founded on marriage between one man and one woman is the best setting to foster human development, and to protect women and children alike. Statistically, women in extramarital relations are more vulnerable to intimate partner violence. This fact is confirmed by the studies of the United States Department of Justice conducted in years 1993-2010, which show that through this period unmarried women experienced violence from their partner more often than married women. In 2010, violence from partner occurred four times more often in the United States in the case of unmarried women than in the case of married women (U.S. Department of Justice: S. Catalano, Intimate Partner Violence, 1993–2010, U.S. Department of Justice, 2012 (revised 2015), p. 2). Moreover, also other studies lead to similar conclusions (Fagan, P., Johnson, K., Rector, R., Marriage: Still the Safest Place for Women and Children, The Heritage Foundation, 2004).

## Woman and Her Health

Contemporary, well-documented studies and research conducted by scientists prove that abortion, contrary to popular beliefs, does not save women's health, but has long lasting negative medical effects and even leads to death.

Well-documented medical studies indicate long-term medical risks to women after abortion, including, among others: mental health problems, higher risk of breast cancer, surgical complications and pre-term births. For instance, study published in the Medical Science Monitor summarizing results of a research conducted in Denmark on 463 473 women (Reardon, D.C., Coleman, P.K. Short- and long-term mortality rates associated with first pregnancy outcome: Population register based study for Denmark 1980-2004) shows short and long-term negative influences of abortion to a woman's health and life. As for early abortion, the risk of maternal death increased 80 per cent in the first year following the procedure. 10 years later the risk was still 40 per cent higher than risk for women who delivered their baby. At the same time, the authors asserted that pregnancy may induce health benefits for women. Delivering the first baby (instead of killing it by means of abortion) decreases the risk of cancer in the breasts, ovaries and uterus. An article in The British Journal of Psychiatry in 2011 synthesized 22 researches carried out from 1995 to 2009 and concluded that there was an 81 per cent higher risk of a serious mental problem in women who had an abortion compared to women who delivered (Coleman, P.K. Abortion and mental health: quantitative synthesis and analysis of research published 1995–2009, Br J Psychiatry. 2011).

On another point, an analysis of the interrelation between law allowing for abortion and the efficiency of maternal health protection clearly shows a positive

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correlation between the intensity of protection of human life in the prenatal phase and the protection of maternal health. For instance, in Chile (WHO, UNICEF, UNFPA, World Bank Group, and the United Nations Population Division. Trends in Maternal Mortality: 1990 to 2015. Geneva, World Health Organization, 2015), the maternal mortality ratio significantly decreased since the introduction of laws limiting access to abortion - within 14 years since abortion was banned in Chile in 1989, the maternal death ratio decreased by 69,2 per cent. In Poland, when access to abortion was reduced, the maternal mortality ratio decreased from 15 in 1993 to 3 in 2015 (WHO and others: Trends in Maternal Mortality: 1990 to 2015). In contrast, countries providing wide access to so called "safe abortion", regardless of their wealth and resources to provide for better protection of mothers, witness a higher maternal mortality ratio than Poland (United States 14/100,000, France 8/100,000, Germany 6/100,000).

## **Conclusions**

Well-being of women could be only achieved through family policies that respect their needs and desires and also affirm autonomous position of family and parents in shaping their private and professional lives. Economic and social pressures should be alleviated through implementing family policies that will give motherhood the right position in society, strengthen family and protect health of mothers and future mothers from resorting to abortion in difficult situations.

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