

# Programme of Action

ADOPTED AT THE  
International Conference  
on Population and Development  
Cairo, 5-13 September 1994

*20th Anniversary Edition*

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## INCLUDES

### **Key Actions for Further Implementation of the Programme of Action of the International Conference on Population and Development**

ADOPTED AT THE  
21st special session of the General Assembly  
New York, 30 June - 2 July 1999

## FOREWORD

*BAN Ki-moon*  
*Secretary-General*  
*United Nations*

## INTRODUCTION

*Dr. Babatunde Osotimehin*  
*Executive Director*  
*United Nations Population Fund*

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*The present volume has been edited and consolidated in accordance with United Nations practice and requirements. This edition has been amended to reflect the official withdrawal of reservations by the Governments of Argentina and El Salvador.*

# Programme of Action of the International Conference on Population Development

*20th Anniversary Edition*

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ISBN

978-0-89714-022-5

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# Foreword

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TWENTY YEARS AGO, THE LANDMARK INTERNATIONAL CONFERENCE ON POPULATION AND DEVELOPMENT PUT PEOPLE'S RIGHTS AT THE HEART OF DEVELOPMENT. IT AFFIRMED SEXUAL AND REPRODUCTIVE HEALTH AS A FUNDAMENTAL HUMAN RIGHT AND EMPHASIZED THAT EMPOWERING WOMEN AND GIRLS IS KEY TO ENSURING THE WELL-BEING OF INDIVIDUALS, FAMILIES, NATIONS AND OUR WORLD.

With the ICPD Programme of Action, governments set out an ambitious agenda to deliver inclusive, equitable and sustainable global development. This agenda has guided policy and helped secure advances in equality and empowerment for women, global health and life expectancy, and education for girls.



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However, enormous inequalities remain. At the same time, the world faces new challenges and opportunities related to population growth, changing age structures, rapid urbanization and migration. The new demographic challenges are compounded by growing environmental pressures, including the urgent threat of climate change. Our efforts must also be linked to broader development aims of water and food security, decent jobs and sustainable energy for all.

As we work to define a new framework founded on sustainable development, I am confident that the ICPD agenda grounded in principles of equality, rights and dignity will continue to enrich us all.

**BAN Ki-Moon**  
*Secretary-General*  
*United Nations*

# Introduction

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AS WE CELEBRATE THE ANNIVERSARY AND THE LEGACY OF THE 1994 INTERNATIONAL CONFERENCE ON POPULATION AND DEVELOPMENT, AND AS THE INTERNATIONAL COMMUNITY LAYS THE GROUNDWORK FOR A NEW GLOBAL DEVELOPMENT FRAMEWORK, UNFPA IS PLEASED TO ISSUE THIS 20TH ANNIVERSARY EDITION OF THE ICPD PROGRAMME OF ACTION.

Adopted by 179 governments, the ICPD Programme of Action marked a fundamental shift in global thinking on population and development issues. It moved away from a focus on reaching specific demographic targets to a focus on the needs, aspirations and rights of individual women and men. The Programme of Action asserted that everyone counts, that the true focus of development policy must be the improvement of individual lives and the measure of progress should be the extent to which we address inequalities.

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Informed by inputs from participating governments, UN agencies, and intergovernmental and non-governmental organizations, delegates from all regions and cultures agreed that human rights, including reproductive rights, were fundamental to development and population concerns. They also recognized that empowering women and girls is both the right thing to do and one of the most reliable pathways to improved well-being for all and sustainable development. This vision, which has been regularly reinforced by successive intergovernmental agreements, has driven the work of UNFPA.

The ICPD Programme of Action provided a foundation for the Millennium Development Goals and has contributed to significant improvements in poverty reduction, health, education and gender equality over the past twenty years. These development gains have not, however, reached everyone and significant gaps and inequalities remain. UN General Assembly resolution 65/234 recognized that the ICPD agenda remains unfinished and has extended

the Programme of Action indefinitely. Governments also requested an operational review of implementation of the Programme of Action on the basis of the highest quality data and analysis of the state of population and development that takes into account new challenges and the changing development environment as well as the need for a systematic, comprehensive and integrated approach to population and development issues. This review has provided a framework for tackling gaps and barriers in the achievement of the Cairo vision.

This Anniversary Edition coincides with the presentation of the Secretary-General's report on a new Framework of Actions for the follow-up to the Programme of Action of the International Conference on Population and Development (ICPD) Beyond 2014. It also comes at a time when the global community is working to define the focus and content of future sustainable development

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goals. Along with the Secretary-General's report, it provides a valuable reminder of the continued relevance of the Programme of Action for those of us who are committed to sustainable development.

Delegates in Cairo in 1994 recognized that universal human rights are fundamental to universal development gains; that tackling inequalities and unleashing the human capacity of each and every one of us is not only the means, but also the end we are working towards. Twenty years on, it is our collective duty to translate that vision into a new global development agenda. Let this small book be your guide.

**Dr. Babatunde Osotimehin**

*Executive Director*

*United Nations Population Fund*



# Programme of Action of the International Conference on Population and Development

*Adopted at the  
International Conference on  
Population and Development*

Cairo  
5-13 September 1994

# Preamble



**1.1** The 1994 International Conference on Population and Development occurs at a defining moment in the history of international cooperation. With the growing recognition of global population, development and environmental interdependence, the opportunity to adopt suitable macro- and socio-economic policies to promote sustained economic growth in the context of sustainable development in all countries and to mobilize human and financial resources for global problem- solving has never been greater. Never before has the world community had so many resources, so much knowledge and such powerful technologies at its disposal which, if suitably redirected, could foster sustained economic growth and sustainable development. None the less, the effective use of resources, knowledge and technologies is conditioned by political and economic obstacles at the national and international levels. Therefore, although ample resources have been available for some time, their use for socially equitable and environmentally sound development has been seriously limited.

**1.2** The world has undergone far-reaching changes in the past two decades. Significant progress in many fields important for human welfare has been made through national and international efforts. However, the developing countries are still facing serious economic difficulties and an unfavourable international economic environment, and the number of people living in absolute poverty has increased in many countries. Around the world many of the basic resources on which future generations will depend for their survival and well-being are being depleted and environmental degradation is intensifying, driven by unsustainable patterns of production and consumption, unprecedented growth in population, widespread and persistent poverty, and social and economic inequality. Ecological problems, such as global climate change, largely driven by unsustainable patterns of production and consumption, are adding to the threats to the well-being of future generations. There is an emerging global consensus on the need for increased international

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cooperation in regard to population in the context of sustainable development, for which Agenda 21<sup>1</sup> provides a framework. Much has been achieved in this respect, but more needs to be done.

**1.3** The world population is currently estimated at 5.6 billion. While the rate of growth is on the decline, absolute increments have been increasing, currently exceeding 86 million persons per annum. Annual population increments are likely to remain above 86 million until the year 2015.<sup>2</sup>

**1.4** During the remaining six years of this critical decade, the world's nations by their actions or inactions will choose from among a range of alternative demographic futures. The low, medium and high variants of the United Nations population projections for the coming 20 years range from a low of 7.1 billion people to the medium variant of 7.5 billion and a high of 7.8 billion. The difference of 720 million people in the short span of 20 years exceeds the current population of the African continent. Further into the future, the projections diverge even more significantly. By the year 2050, the United Nations projections range from 7.9 billion to the medium variant of 9.8 billion and a high of 11.9 billion. Implementation of the goals and objectives contained in the present 20-year Programme of Action, which address many of the fundamental population, health, education and development challenges facing the entire human community, would result in world population growth during this period and beyond at levels below the United Nations medium projection.

**1.5** The International Conference on Population and Development is not an isolated event. Its Programme of Action builds on the considerable international consensus that has developed since the World Population Conference at Bucharest in 1974<sup>3</sup> and the International Conference on Population at Mexico City in 1984,<sup>4</sup> to consider the broad issues of and interrelationships between population, sustained economic growth and sustainable development, and

advances in the education, economic status and empowerment of women. The 1994 Conference was explicitly given a broader mandate on development issues than previous population conferences, reflecting the growing awareness that population, poverty, patterns of production and consumption and the environment are so closely interconnected that none of them can be considered in isolation.

**1.6** The International Conference on Population and Development follows and builds on other important recent international activities, and its recommendations should be supportive of, consistent with and based on the agreements reached at the following:

(a) The World Conference to Review and Appraise the Achievements of the United Nations Decade for Women: Equality, Development and Peace, held in Nairobi in 1985;<sup>5</sup>

(b) The World Summit for Children, held in New York in 1990;<sup>6</sup>

(c) The United Nations Conference on Environment and Development, held in Rio de Janeiro in 1992;<sup>7</sup>

(d) The International Conference on Nutrition, held in Rome in 1992;<sup>8</sup>

(e) The World Conference on Human Rights, held in Vienna in 1993;<sup>9</sup>

(f) The International Year of the World's Indigenous People, 1993,<sup>10</sup> which would lead to the International Decade of the World's Indigenous People;<sup>11</sup>

(g) The Global Conference on the Sustainable Development of Small Island Developing States, held in Barbados in 1994;<sup>12</sup>

(h) The International Year of the Family, 1994.<sup>13</sup>

**1.7** The Conference outcomes are closely related to and will make significant contributions to other major conferences in 1995 and 1996, such as the World Summit for Social Development,<sup>14</sup> the Fourth World Conference on Women: Action for Equality, Development and Peace,<sup>15</sup> the Second United Nations Conference on Human Settlements (Habitat II), the elaboration of the Agenda for Development, as well as the celebration of the fiftieth

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anniversary of the United Nations. These events are expected to highlight further the call of the 1994 Conference for greater investment in people, and for a new action agenda for the empowerment of women to ensure their full participation at all levels in the social, economic and political lives of their communities.

**1.8** Over the past 20 years, many parts of the world have undergone remarkable demographic, social, economic, environmental and political change. Many countries have made substantial progress in expanding access to reproductive health care and lowering birth rates, as well as in lowering death rates and raising education and income levels, including the educational and economic status of women. While the advances of the past two decades in areas such as increased use of contraception, decreased maternal mortality, implemented sustainable development plans and projects and enhanced educational programmes provide a basis for optimism about successful implementation of the present Programme of Action, much remains to be accomplished. The world as a whole has changed in ways that create important new opportunities for addressing population and development issues. Among the most significant are the major shifts in attitude among the world's people and their leaders in regard to reproductive health, family planning and population growth, resulting, inter alia, in the new comprehensive concept of reproductive health, including family planning and sexual health, as defined in the present Programme of Action. A particularly encouraging trend has been the strengthening of political commitment to population-related policies and family-planning programmes by many Governments. In this regard, sustained economic growth in the context of sustainable development will enhance the ability of countries to meet the pressures of expected population growth; will facilitate the demographic transition in countries where there is an imbalance between demographic rates and social, economic and environmental goals; and will permit the balance and integration of the population dimension into other development-related policies.

**1.9** The population and development objectives and actions of the present Programme of Action will collectively address the critical challenges and interrelationships between population and sustained economic growth in the context of sustainable development. In order to do so, adequate mobilization of resources at the national and international levels will be required as well as new and additional resources to the developing countries from all available funding mechanisms, including multilateral, bilateral and private sources. Financial resources are also required to strengthen the capacity of national, regional, subregional and international institutions to implement this Programme of Action.

**1.10** The two decades ahead are likely to produce a further shift of rural populations to urban areas as well as continued high levels of migration between countries. These migrations are an important part of the economic transformations occurring around the world, and they present serious new challenges. Therefore, these issues must be addressed with more emphasis within population and development policies. By the year 2015, nearly 56 per cent of the global population is expected to live in urban areas, compared to under 45 per cent in 1994. The most rapid rates of urbanization will occur in the developing countries. The urban population of the developing regions was just 26 per cent in 1975, but is projected to rise to 50 per cent by 2015. This change will place enormous strain on existing social services and infrastructure, much of which will not be able to expand at the same rate as that of urbanization.

**1.11** Intensified efforts are needed in the coming 5, 10 and 20 years, in a range of population and development activities, bearing in mind the crucial contribution that early stabilization of the world population would make towards the achievement of sustainable development. The present Programme of Action addresses all those issues, and more, in a comprehensive and integrated framework designed to improve the quality of life of the current world population and its future generations. The

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recommendations for action are made in a spirit of consensus and international cooperation, recognizing that the formulation and implementation of population-related policies is the responsibility of each country and should take into account the economic, social and environmental diversity of conditions in each country, with full respect for the various religious and ethical values, cultural backgrounds and philosophical convictions of its people, as well as the shared but differentiated responsibilities of all the world's people for a common future.

**1.12** The present Programme of Action recommends to the international community a set of important population and development objectives, as well as qualitative and quantitative goals that are mutually supportive and of critical importance to these objectives. Among these objectives and goals are: sustained economic growth in the context of sustainable development; education, especially for girls; gender equity and equality; infant, child and maternal mortality reduction; and the provision of universal access to reproductive health services, including family planning and sexual health.

**1.13** Many of the quantitative and qualitative goals of the present Programme of Action clearly require additional resources, some of which could become available from a reordering of priorities at the individual, national and international levels. However, none of the actions required - nor all of them combined - is expensive in the context of either current global development or military expenditures. A few would require little or no additional financial resources, in that they involve changes in lifestyles, social norms or government policies that can be largely brought about and sustained through greater citizen action and political leadership. But to meet the resource needs of those actions that do require increased expenditures over the next two decades, additional commitments will be required on the part of both developing and developed countries. This will be particularly difficult in the case of

some developing countries and some countries with economies in transition that are experiencing extreme resource constraints.

**1.14** The present Programme of Action recognizes that over the next 20 years Governments are not expected to meet the goals and objectives of the International Conference on Population and Development single-handedly. All members of and groups in society have the right, and indeed the responsibility, to play an active part in efforts to reach those goals. The increased level of interest manifested by non-governmental organizations, first in the context of the United Nations Conference on Environment and Development and the World Conference on Human Rights, and now in these deliberations, reflects an important and in many places rapid change in the relationship between Governments and a variety of non-governmental institutions. In nearly all countries new partnerships are emerging between government, business, non-governmental organizations and community groups, which will have a direct and positive bearing on the implementation of the present Programme of Action.

**1.15** While the International Conference on Population and Development does not create any new international human rights, it affirms the application of universally recognized human rights standards to all aspects of population programmes. It also represents the last opportunity in the twentieth century for the international community to collectively address the critical challenges and interrelationships between population and development. The Programme of Action will require the establishment of common ground, with full respect for the various religious and ethical values and cultural backgrounds. The impact of this Conference will be measured by the strength of the specific commitments made here and the consequent actions to fulfil them, as part of a new global partnership among all the world's countries and peoples, based on a sense of shared but differentiated responsibility for each other and for our planetary home.

# Principles



The implementation of the recommendations contained in the Programme of Action is the sovereign right of each country, consistent with national laws and development priorities, with full respect for the various religious and ethical values and cultural backgrounds of its people, and in conformity with universally recognized international human rights.

International cooperation and universal solidarity, guided by the principles of the Charter of the United Nations, and in a spirit of partnership, are crucial in order to improve the quality of life of the peoples of the world.

In addressing the mandate of the International Conference on Population and Development and its overall theme, the interrelationships between population, sustained economic growth and sustainable development, and in their deliberations, the participants were and will continue to be guided by the following set of principles:

### **Principle 1**

All human beings are born free and equal in dignity and rights. Everyone is entitled to all the rights and freedoms set forth in the Universal Declaration of Human Rights, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status. Everyone has the right to life, liberty and security of person.

### **Principle 2**

Human beings are at the centre of concerns for sustainable development. They are entitled to a healthy and productive life in harmony with nature. People are the most important and valuable resource of any nation. Countries should ensure that all individuals are given the opportunity to make the most of their potential. They have the right to an adequate standard of living for themselves and their families, including adequate food, clothing, housing, water and sanitation.

### **Principle 3**

The right to development is a universal and inalienable right and an integral part of fundamental human rights, and the human person is the central subject of development. While development facilitates the enjoyment of all human rights, the lack of development may not be invoked to justify the abridgement of internationally recognized human rights. The right to development must be fulfilled so as to equitably meet the population, development and environment needs of present and future generations.

### **Principle 4**

Advancing gender equality and equity and the empowerment of women, and the elimination of all kinds of violence against women, and ensuring women's ability to control their own fertility, are cornerstones of population and development-related programmes. The human rights of women and the girl child are an inalienable, integral and indivisible part of universal human rights. The full and equal participation of women in civil, cultural, economic, political and social life, at the national, regional and international levels, and the eradication of all forms of discrimination on grounds of sex, are priority objectives of the international community.

### **Principle 5**

Population-related goals and policies are integral parts of cultural, economic and social development, the principal aim of which is to improve the quality of life of all people.

## **Principle 6**

Sustainable development as a means to ensure human well-being, equitably shared by all people today and in the future, requires that the interrelationships between population, resources, the environment and development should be fully recognized, properly managed and brought into harmonious, dynamic balance. To achieve sustainable development and a higher quality of life for all people, States should reduce and eliminate unsustainable patterns of production and consumption and promote appropriate policies, including population-related policies, in order to meet the needs of current generations without compromising the ability of future generations to meet their own needs.

## **Principle 7**

All States and all people shall cooperate in the essential task of eradicating poverty as an indispensable requirement for sustainable development, in order to decrease the disparities in standards of living and better meet the needs of the majority of the people of the world. The special situation and needs of developing countries, particularly the least developed, shall be given special priority. Countries with economies in transition, as well as all other countries, need to be fully integrated into the world economy.

## **Principle 8**

Everyone has the right to the enjoyment of the highest attainable standard of physical and mental health. States should take all appropriate measures to ensure, on a basis of equality of men and women, universal access to health-care services, including those related to reproductive health care, which includes family planning and sexual health. Reproductive health-care programmes should provide the widest range of services without any form of coercion. All couples and individuals have the basic right to decide freely and responsibly the number and spacing of their children and to have the information, education and means to do so.

## 14 PRINCIPLES

### **Principle 9**

The family is the basic unit of society and as such should be strengthened. It is entitled to receive comprehensive protection and support. In different cultural, political and social systems, various forms of the family exist. Marriage must be entered into with the free consent of the intending spouses, and husband and wife should be equal partners.

### **Principle 10**

Everyone has the right to education, which shall be directed to the full development of human resources, and human dignity and potential, with particular attention to women and the girl child. Education should be designed to strengthen respect for human rights and fundamental freedoms, including those relating to population and development. The best interests of the child shall be the guiding principle of those responsible for his or her education and guidance; that responsibility lies in the first place with the parents.

### **Principle 11**

All States and families should give the highest possible priority to children. The child has the right to standards of living adequate for its well-being and the right to the highest attainable standards of health, and the right to education. The child has the right to be cared for, guided and supported by parents, families and society and to be protected by appropriate legislative, administrative, social and educational measures from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sale, trafficking, sexual abuse, and trafficking in its organs.

## **Principle 12**

Countries receiving documented migrants should provide proper treatment and adequate social welfare services for them and their families, and should ensure their physical safety and security, bearing in mind the special circumstances and needs of countries, in particular developing countries, attempting to meet these objectives or requirements with regard to undocumented migrants, in conformity with the provisions of relevant conventions and international instruments and documents. Countries should guarantee to all migrants all basic human rights as included in the Universal Declaration of Human Rights.

## **Principle 13**

Everyone has the right to seek and to enjoy in other countries asylum from persecution. States have responsibilities with respect to refugees as set forth in the Geneva Convention on the Status of Refugees and its 1967 Protocol.

## **Principle 14**

In considering the population and development needs of indigenous people, States should recognize and support their identity, culture and interests, and enable them to participate fully in the economic, political and social life of the country, particularly where their health, education and well-being are affected.

## **Principle 15**

Sustained economic growth, in the context of sustainable development, and social progress require that growth be broadly based, offering equal opportunities to all people. All countries should recognize their common but differentiated responsibilities. The developed countries acknowledge the responsibility that they bear in the international pursuit of sustainable development, and should continue to improve their efforts to promote sustained economic growth and to narrow imbalances in a manner that can benefit all countries, particularly the developing countries.



Interrelationships  
Between  
Population,  
Sustained  
Economic Growth  
and Sustainable  
Development

## A. Integrating population and development strategies

### Basis for action

**3.1** The everyday activities of all human beings, communities and countries are interrelated with population change, patterns and levels of use of natural resources, the state of the environment, and the pace and quality of economic and social development. There is general agreement that persistent widespread poverty as well as serious social and gender inequities have significant influences on, and are in turn influenced by, demographic parameters such as population growth, structure and distribution. There is also general agreement that unsustainable consumption and production patterns are contributing to the unsustainable use of natural resources and environmental degradation as well as to the reinforcement of social inequities and of poverty with the above-mentioned consequences for demographic parameters. The Rio Declaration on Environment and Development and Agenda 21, adopted by the international community at the United Nations Conference on Environment and Development, call for patterns of development that reflect the new understanding of these and other intersectoral linkages. Recognizing the longer term realities and implications of current actions, the development challenge is to meet the needs of present generations and improve their quality of life without compromising the ability of future generations to meet their own needs.

**3.2** Despite recent declines in birth rates in many countries, further large increases in population size are inevitable. Owing to the youthful age structure, for numerous countries the coming decades will bring substantial population increases in absolute numbers. Population movements within and between countries, including the very rapid growth of cities and the unbalanced regional distribution of population, will continue and increase in the future.

## **18 INTERRELATIONSHIPS BETWEEN POPULATION, SUSTAINED ECONOMIC GROWTH AND SUSTAINABLE DEVELOPMENT**

**3.3** Sustainable development implies, inter alia, long-term sustainability in production and consumption relating to all economic activities, including industry, energy, agriculture, forestry, fisheries, transport, tourism and infrastructure, in order to optimize ecologically sound resource use and minimize waste. Macroeconomic and sectoral policies have, however, rarely given due attention to population considerations. Explicitly integrating population into economic and development strategies will both speed up the pace of sustainable development and poverty alleviation and contribute to the achievement of population objectives and an improved quality of life of the population.

### **Objectives**

**3.4** The objectives are to fully integrate population concerns into:

(a) Development strategies, planning, decision-making and resource allocation at all levels and in all regions, with the goal of meeting the needs, and improving the quality of life, of present and future generations;

(b) All aspects of development planning in order to promote social justice and to eradicate poverty through sustained economic growth in the context of sustainable development.

### **Actions**

**3.5** At the international, regional, national and local levels, population issues should be integrated into the formulation, implementation, monitoring and evaluation of all policies and programmes relating to sustainable development. Development strategies must realistically reflect the short-, medium- and long-term implications of, and consequences for, population dynamics as well as patterns of production and consumption.



**3.6** Governments, international agencies, non-governmental organizations and other concerned parties should undertake timely and periodic reviews of their development strategies, with the aim of assessing progress towards integrating population into development and environment programmes that take into account patterns of production and consumption and seek to bring about population trends consistent with the achievement of sustainable development and the improvement of the quality of life.

**3.7** Governments should establish the requisite internal institutional mechanisms and enabling environment, at all levels of society, to ensure that population factors are appropriately addressed within the decision-making and administrative processes of all relevant government agencies responsible for economic, environmental and social policies and programmes.

**3.8** Political commitment to integrated population and development strategies should be strengthened by public education and information programmes and by increased resource allocation through cooperation among Governments, non-governmental organizations and the private sector, and by improvement of the knowledge base through research and national and local capacity-building.

**3.9** To achieve sustainable development and a higher quality of life for all people, Governments should reduce and eliminate unsustainable patterns of production and consumption and promote appropriate demographic policies. Developed countries should take the lead in achieving sustainable consumption patterns and effective waste management.

## **B. Population, sustained economic growth and poverty**

### **Basis for action**

**3.10** Population policies should take into account, as appropriate, development strategies agreed upon in multilateral forums, in particular the International Development Strategy for the Fourth United Nations Development Decade,<sup>16</sup> the Programme of Action for the Least Developed Countries for the 1990s,<sup>17</sup> the outcomes of the eighth session of the United Nations Conference on Trade and Development, and of the Uruguay Round of multilateral trade negotiations, Agenda 21 and the United Nations New Agenda for the Development of Africa in the 1990s.<sup>18</sup>

**3.11** Gains recorded in recent years in such indicators as life expectancy and national product, while significant and encouraging, do not, unfortunately, fully reflect the realities of life of hundreds of millions of men, women, adolescents and children. Despite decades of development efforts, both the gap between rich and poor nations and the inequalities within nations have widened. Serious economic, social, gender and other inequities persist and hamper efforts to improve the quality of life for hundreds of millions of people. The number of people living in poverty stands at approximately 1 billion and continues to mount.

**3.12** All countries, more especially developing countries where almost all of the future growth of the world population will occur, and countries with economies in transition, face increasing difficulties in improving the quality of life of their people in a sustainable manner. Many developing countries and countries with economies in transition face major development obstacles, among which are those related to the persistence of trade imbalances, the slow-down in the world economy, the persistence of the debt-servicing problem, and the need for technologies and

external assistance. The achievement of sustainable development and poverty eradication should be supported by macroeconomic policies designed to provide an appropriate international economic environment, as well as by good governance, effective national policies and efficient national institutions.

**3.13** Widespread poverty remains the major challenge to development efforts. Poverty is often accompanied by unemployment, malnutrition, illiteracy, low status of women, exposure to environmental risks and limited access to social and health services, including reproductive health services which, in turn, include family planning. All these factors contribute to high levels of fertility, morbidity and mortality, as well as to low economic productivity. Poverty is also closely related to inappropriate spatial distribution of population, to unsustainable use and inequitable distribution of such natural resources as land and water, and to serious environmental degradation.

**3.14** Efforts to slow down population growth, to reduce poverty, to achieve economic progress, to improve environmental protection, and to reduce unsustainable consumption and production patterns are mutually reinforcing. Slower population growth has in many countries bought more time to adjust to future population increases. This has increased those countries' ability to attack poverty, protect and repair the environment, and build the base for future sustainable development. Even the difference of a single decade in the transition to stabilization levels of fertility can have a considerable positive impact on quality of life.

**3.15** Sustained economic growth within the context of sustainable development is essential to eradicate poverty. Eradication of poverty will contribute to slowing population growth and to achieving early population stabilization. Investments in fields important to the eradication of poverty, such as basic education, sanitation, drinking water, housing, adequate food supply and infrastructure

## 22 INTERRELATIONSHIPS BETWEEN POPULATION, SUSTAINED ECONOMIC GROWTH AND SUSTAINABLE DEVELOPMENT

for rapidly growing populations, continue to strain already weak economies and limit development options. The unusually high number of young people, a consequence of high fertility rates, requires that productive jobs be created for a continually growing labour force under conditions of already widespread unemployment. The numbers of elderly requiring public support will also increase rapidly in the future. Sustained economic growth in the context of sustainable development will be necessary to accommodate those pressures.

### Objective

**3.16** The objective is to raise the quality of life for all people through appropriate population and development policies and programmes aimed at achieving poverty eradication, sustained economic growth in the context of sustainable development and sustainable patterns of consumption and production, human resource development and the guarantee of all human rights, including the right to development as a universal and inalienable right and an integral part of fundamental human rights. Particular attention is to be given to the socio-economic improvement of poor women in developed and developing countries. As women are generally the poorest of the poor and at the same time key actors in the development process, eliminating social, cultural, political and economic discrimination against women is a prerequisite of eradicating poverty, promoting sustained economic growth in the context of sustainable development, ensuring quality family planning and reproductive health services, and achieving balance between population and available resources and sustainable patterns of consumption and production.

## **Actions**

**3.17** Investment in human resource development, in accordance with national policy, must be given priority in population and development strategies and budgets, at all levels, with programmes specifically directed at increased access to information, education, skill development, employment opportunities, both formal and informal, and high-quality general and reproductive health services, including family planning and sexual health care, through the promotion of sustained economic growth within the context of sustainable development in developing countries and countries with economies in transition.

**3.18** Existing inequities and barriers to women in the workforce should be eliminated and women's participation in all policy-making and implementation, as well as their access to productive resources, and ownership of land, and their right to inherit property should be promoted and strengthened. Governments, non-governmental organizations and the private sector should invest in, promote, monitor and evaluate the education and skill development of women and girls and the legal and economic rights of women, and in all aspects of reproductive health, including family planning and sexual health, in order to enable them to effectively contribute to and benefit from economic growth and sustainable development.

**3.19** High priority should be given by Governments, non-governmental organizations and the private sector to meeting the needs, and increasing the opportunities for information, education, jobs, skill development and relevant reproductive health services, of all underserved members of society.<sup>19</sup>

## **24** INTERRELATIONSHIPS BETWEEN POPULATION, SUSTAINED ECONOMIC GROWTH AND SUSTAINABLE DEVELOPMENT

**3.20** Measures should be taken to strengthen food, nutrition and agricultural policies and programmes, and fair trade relations, with special attention to the creation and strengthening of food security at all levels.

**3.21** Job creation in the industrial, agricultural and service sectors should be facilitated by Governments and the private sector through the establishment of more favourable climates for expanded trade and investment on an environmentally sound basis, greater investment in human resource development and the development of democratic institutions and good governance. Special efforts should be made to create productive jobs through policies promoting efficient and, where required, labour-intensive industries, and transfer of modern technologies.

**3.22** The international community should continue to promote a supportive economic environment, particularly for developing countries and countries with economies in transition in their attempt to eradicate poverty and achieve sustained economic growth in the context of sustainable development. In the context of the relevant international agreements and commitments, efforts should be made to support those countries, in particular the developing countries, by promoting an open, equitable, secure, non-discriminatory and predictable international trading system; by promoting foreign direct investment; by reducing the debt burden; by providing new and additional financial resources from all available funding sources and mechanisms, including multilateral, bilateral and private sources, including on concessional and grant terms according to sound and equitable criteria and indicators; by providing access to technologies; and by ensuring that structural adjustment programmes are so designed and implemented as to be responsive to social and environmental concerns.

## C. Population and environment

### Basis for action

**3.23** At the United Nations Conference on Environment and Development, the international community agreed on objectives and actions aimed at integrating environment and development which were included in Agenda 21, other Conference outcomes and other international environmental agreements. Agenda 21 has been conceived as a response to the major environment and development challenges, including the economic and social dimensions of sustainable development, such as poverty, consumption, demographic dynamics, human health and human settlement, and to a broad range of environmental and natural resource concerns. Agenda 21 leaves to the International Conference on Population and Development further consideration of the interrelationships between population and the environment.

**3.24** Meeting the basic human needs of growing populations is dependent on a healthy environment. These human dimensions need to be given attention in developing comprehensive policies for sustainable development in the context of population growth.

**3.25** Demographic factors, combined with poverty and lack of access to resources in some areas, and excessive consumption and wasteful production patterns in others, cause or exacerbate problems of environmental degradation and resource depletion and thus inhibit sustainable development.

**3.26** Pressure on the environment may result from rapid population growth, distribution and migration, especially in ecologically vulnerable ecosystems. Urbanization and policies that do not recognize the need for rural development also create environmental problems.

## **26 INTERRELATIONSHIPS BETWEEN POPULATION, SUSTAINED ECONOMIC GROWTH AND SUSTAINABLE DEVELOPMENT**

**3.27** Implementation of effective population policies in the context of sustainable development, including reproductive health and family-planning programmes, require new forms of participation by various actors at all levels in the policy-making process.

### **Objectives**

**3.28** Consistent with Agenda 21, the objectives are:

(a) To ensure that population, environmental and poverty eradication factors are integrated in sustainable development policies, plans and programmes;

(b) To reduce both unsustainable consumption and production patterns as well as negative impacts of demographic factors on the environment in order to meet the needs of current generations without compromising the ability of future generations to meet their own needs.

### **Actions**

**3.29** Governments at the appropriate level, with the support of the international community and regional and subregional organizations, should formulate and implement population policies and programmes to support the objectives and actions agreed upon in Agenda 21, other Conference outcomes and other international environmental agreements, taking into account the common but differentiated responsibilities reflected in those agreements. Consistent with the framework and priorities set forth in Agenda 21, the following actions, inter alia, are recommended to help achieve population and environment integration:

(a) Integrate demographic factors into environment impact assessments and other planning and decision-making processes aimed at achieving sustainable development;



(b) Take measures aimed at the eradication of poverty, with special attention to income-generation and employment strategies directed at the rural poor and those living within or on the edge of fragile ecosystems;

(c) Utilize demographic data to promote sustainable resource management, especially of ecologically fragile systems;

(d) Modify unsustainable consumption and production patterns through economic, legislative and administrative measures, as appropriate, aimed at fostering sustainable resource use and preventing environmental degradation;

(e) Implement policies to address the ecological implications of inevitable future increases in population numbers and changes in concentration and distribution, particularly in ecologically vulnerable areas and urban agglomerations.

**3.30** Measures should be taken to enhance the full participation of all relevant groups, especially women, at all levels of population and environmental decision-making to achieve sustainable management of natural resources.

**3.31** Research should be undertaken on the linkages among population, consumption and production, the environment and natural resources, and human health as a guide to effective sustainable development policies.

**3.32** Governments, non-governmental organizations and the private sector should promote public awareness and understanding for the implementation of the above-mentioned actions.

# IV

## Gender Equality, Equity and Empowerment Of Women

## A. Empowerment and status of women

### Basis for action

**4.1** The empowerment and autonomy of women and the improvement of their political, social, economic and health status is a highly important end in itself. In addition, it is essential for the achievement of sustainable development. The full participation and partnership of both women and men is required in productive and reproductive life, including shared responsibilities for the care and nurturing of children and maintenance of the household. In all parts of the world, women are facing threats to their lives, health and well-being as a result of being overburdened with work and of their lack of power and influence. In most regions of the world, women receive less formal education than men, and at the same time, women's own knowledge, abilities and coping mechanisms often go unrecognized. The power relations that impede women's attainment of healthy and fulfilling lives operate at many levels of society, from the most personal to the highly public. Achieving change requires policy and programme actions that will improve women's access to secure livelihoods and economic resources, alleviate their extreme responsibilities with regard to housework, remove legal impediments to their participation in public life, and raise social awareness through effective programmes of education and mass communication. In addition, improving the status of women also enhances their decision-making capacity at all levels in all spheres of life, especially in the area of sexuality and reproduction. This, in turn, is essential for the long-term success of population programmes. Experience shows that population and development programmes are most effective when steps have simultaneously been taken to improve the status of women.

**4.2** Education is one of the most important means of empowering women with the knowledge, skills and self-confidence necessary to participate fully in the development process. More than 40

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years ago, the Universal Declaration of Human Rights asserted that 'everyone has the right to education'. In 1990, Governments meeting at the World Conference on Education for All in Jomtien, Thailand, committed themselves to the goal of universal access to basic education. But despite notable efforts by countries around the globe that have appreciably expanded access to basic education, there are approximately 960 million illiterate adults in the world, of whom two thirds are women. More than one third of the world's adults, most of them women, have no access to printed knowledge, to new skills or to technologies that would improve the quality of their lives and help them shape and adapt to social and economic change. There are 130 million children who are not enrolled in primary school and 70 per cent of them are girls.

### Objectives

**4.3** The objectives are:

(a) To achieve equality and equity based on harmonious partnership between men and women and enable women to realize their full potential;

(b) To ensure the enhancement of women's contributions to sustainable development through their full involvement in policy- and decision-making processes at all stages and participation in all aspects of production, employment, income-generating activities, education, health, science and technology, sports, culture and population-related activities and other areas, as active decision makers, participants and beneficiaries;

(c) To ensure that all women, as well as men, are provided with the education necessary for them to meet their basic human needs and to exercise their human rights.

### Actions

**4.4** Countries should act to empower women and should take steps to eliminate inequalities between men and women as soon as possible by:

(a) Establishing mechanisms for women's equal participation and equitable representation at all levels of the political process and public life in each community and society and enabling women to articulate their concerns and needs;

(b) Promoting the fulfilment of women's potential through education, skill development and employment, giving paramount importance to the elimination of poverty, illiteracy and ill health among women;

(c) Eliminating all practices that discriminate against women; assisting women to establish and realize their rights, including those that relate to reproductive and sexual health;

(d) Adopting appropriate measures to improve women's ability to earn income beyond traditional occupations, achieve economic self-reliance, and ensure women's equal access to the labour market and social security systems;

(e) Eliminating violence against women;

(f) Eliminating discriminatory practices by employers against women, such as those based on proof of contraceptive use or pregnancy status;

(g) Making it possible, through laws, regulations and other appropriate measures, for women to combine the roles of child-bearing, breast-feeding and child-rearing with participation in the workforce.

**4.5** All countries should make greater efforts to promulgate, implement and enforce national laws and international conventions to which they are party, such as the Convention on the Elimination of All Forms of Discrimination against Women, that protect women from all types of economic discrimination and from sexual harassment, and to implement fully the Declaration on the Elimination of Violence against Women and the Vienna Declaration and Programme of Action adopted at the World Conference on Human Rights in 1993. Countries are urged to sign, ratify and implement all existing agreements that promote women's rights.

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**4.6** Governments at all levels should ensure that women can buy, hold and sell property and land equally with men, obtain credit and negotiate contracts in their own name and on their own behalf and exercise their legal rights to inheritance.

**4.7** Governments and employers are urged to eliminate gender discrimination in hiring, wages, benefits, training and job security with a view to eliminating gender-based disparities in income.

**4.8** Governments, international organizations and non-governmental organizations should ensure that their personnel policies and practices comply with the principle of equitable representation of both sexes, especially at the managerial and policy-making levels, in all programmes, including population and development programmes. Specific procedures and indicators should be devised for gender-based analysis of development programmes and for assessing the impact of those programmes on women's social, economic and health status and access to resources.

**4.9** Countries should take full measures to eliminate all forms of exploitation, abuse, harassment and violence against women, adolescents and children. This implies both preventive actions and rehabilitation of victims. Countries should prohibit degrading practices, such as trafficking in women, adolescents and children and exploitation through prostitution, and pay special attention to protecting the rights and safety of those who suffer from these crimes and those in potentially exploitable situations, such as migrant women, women in domestic service and schoolgirls. In this regard, international safeguards and mechanisms for cooperation should be put in place to ensure that these measures are implemented.

**4.10** Countries are urged to identify and condemn the systematic practice of rape and other forms of inhuman and degrading treatment of women as a deliberate instrument of war and ethnic cleansing and take steps to assure that full assistance is provided to the victims of such abuse for their physical and mental rehabilitation.

**4.11** The design of family health and other development interventions should take better account of the demands on women's time from the responsibilities of child-rearing, household work and income-generating activities. Male responsibilities should be emphasized with respect to child-rearing and housework. Greater investments should be made in appropriate measures to lessen the daily burden of domestic responsibilities, the greatest share of which falls on women. Greater attention should be paid to the ways in which environmental degradation and changes in land use adversely affect the allocation of women's time. Women's domestic working environments should not adversely affect their health.

**4.12** Every effort should be made to encourage the expansion and strengthening of grass-roots, community-based and activist groups for women. Such groups should be the focus of national campaigns to foster women's awareness of the full range of their legal rights, including their rights within the family, and to help women organize to achieve those rights.

**4.13** Countries are strongly urged to enact laws and to implement programmes and policies which will enable employees of both sexes to organize their family and work responsibilities through flexible work-hours, parental leave, day-care facilities, maternity leave, policies that enable working mothers to breast-feed their children, health insurance and other such measures. Similar rights should be ensured to those working in the informal sector.

**4.14** Programmes to meet the needs of growing numbers of elderly people should fully take into account that women represent the larger proportion of the elderly and that elderly women generally have a lower socio-economic status than elderly men.

## **B. The girl child**

### **Basis for action**

**4.15** Since in all societies discrimination on the basis of sex often starts at the earliest stages of life, greater equality for the girl child

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is a necessary first step in ensuring that women realize their full potential and become equal partners in development. In a number of countries, the practice of prenatal sex selection, higher rates of mortality among very young girls, and lower rates of school enrolment for girls as compared with boys, suggest that 'son preference' is curtailing the access of girl children to food, education and health care. This is often compounded by the increasing use of technologies to determine foetal sex, resulting in abortion of female foetuses. Investments made in the girl child's health, nutrition and education, from infancy through adolescence, are critical.

### Objectives

**4.16** The objectives are:

(a) To eliminate all forms of discrimination against the girl child and the root causes of son preference, which results in harmful and unethical practices regarding female infanticide and prenatal sex selection;

(b) To increase public awareness of the value of the girl child, and concurrently, to strengthen the girl child's self-image, self-esteem and status;

(c) To improve the welfare of the girl child, especially in regard to health, nutrition and education.

### Actions

**4.17** Overall, the value of girl children to both their family and society must be expanded beyond their definition as potential child-bearers and caretakers and reinforced through the adoption and implementation of educational and social policies that encourage their full participation in the development of the societies in which they live. Leaders at all levels of the society must speak out and act forcefully against patterns of gender discrimination within the family, based on preference for sons. One of the aims should be to eliminate excess mortality of girls, wherever such a pattern



exists. Special education and public information efforts are needed to promote equal treatment of girls and boys with respect to nutrition, health care, education and social, economic and political activity, as well as equitable inheritance rights.

**4.18** Beyond the achievement of the goal of universal primary education in all countries before the year 2015, all countries are urged to ensure the widest and earliest possible access by girls and women to secondary and higher levels of education, as well as to vocational education and technical training, bearing in mind the need to improve the quality and relevance of that education.

**4.19** Schools, the media and other social institutions should seek to eliminate stereotypes in all types of communication and educational materials that reinforce existing inequities between males and females and undermine girls' self-esteem. Countries must recognize that, in addition to expanding education for girls, teachers' attitudes and practices, school curricula and facilities must also change to reflect a commitment to eliminate all gender bias, while recognizing the specific needs of the girl child.

**4.20** Countries should develop an integrated approach to the special nutritional, general and reproductive health, education and social needs of girls and young women, as such additional investments in adolescent girls can often compensate for earlier inadequacies in their nutrition and health care.

**4.21** Governments should strictly enforce laws to ensure that marriage is entered into only with the free and full consent of the intending spouses. In addition, Governments should strictly enforce laws concerning the minimum legal age of consent and the minimum age at marriage and should raise the minimum age at marriage where necessary. Governments and non-governmental organizations should generate social support for the enforcement of laws on the minimum legal age at marriage, in particular by providing educational and employment opportunities.

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**4.22** Governments are urged to prohibit female genital mutilation wherever it exists and to give vigorous support to efforts among non-governmental and community organizations and religious institutions to eliminate such practices.

**4.23** Governments are urged to take the necessary measures to prevent infanticide, prenatal sex selection, trafficking in girl children and use of girls in prostitution and pornography.

### **C. Male responsibilities and participation**

#### **Basis for action**

**4.24** Changes in both men's and women's knowledge, attitudes and behaviour are necessary conditions for achieving the harmonious partnership of men and women. Men play a key role in bringing about gender equality since, in most societies, men exercise preponderant power in nearly every sphere of life, ranging from personal decisions regarding the size of families to the policy and programme decisions taken at all levels of Government. It is essential to improve communication between men and women on issues of sexuality and reproductive health, and the understanding of their joint responsibilities, so that men and women are equal partners in public and private life.

#### **Objective**

**4.25** The objective is to promote gender equality in all spheres of life, including family and community life, and to encourage and enable men to take responsibility for their sexual and reproductive behaviour and their social and family roles.

#### **Actions**

**4.26** The equal participation of women and men in all areas of family and household responsibilities, including family planning, child-rearing and housework, should be promoted and encouraged

by Governments. This should be pursued by means of information, education, communication, employment legislation and by fostering an economically enabling environment, such as family leave for men and women so that they may have more choice regarding the balance of their domestic and public responsibilities.

**4.27** Special efforts should be made to emphasize men's shared responsibility and promote their active involvement in responsible parenthood, sexual and reproductive behaviour, including family planning; prenatal, maternal and child health; prevention of sexually transmitted diseases, including HIV; prevention of unwanted and high-risk pregnancies; shared control and contribution to family income, children's education, health and nutrition; and recognition and promotion of the equal value of children of both sexes. Male responsibilities in family life must be included in the education of children from the earliest ages. Special emphasis should be placed on the prevention of violence against women and children.

**4.28** Governments should take steps to ensure that children receive appropriate financial support from their parents by, among other measures, enforcing child- support laws. Governments should consider changes in law and policy to ensure men's responsibility to and financial support for their children and families. Such laws and policies should also encourage maintenance or reconstitution of the family unit. The safety of women in abusive relationships should be protected.

**4.29** National and community leaders should promote the full involvement of men in family life and the full integration of women in community life. Parents and schools should ensure that attitudes that are respectful of women and girls as equals are instilled in boys from the earliest possible age, along with an understanding of their shared responsibilities in all aspects of a safe, secure and harmonious family life. Relevant programmes to reach boys before they become sexually active are urgently needed.

V

The Family,  
Its Roles,  
Rights,  
Composition  
and Structure

## A. Diversity of family structure and composition

### Basis for action

**5.1** While various forms of the family exist in different social, cultural, legal and political systems, the family is the basic unit of society and as such is entitled to receive comprehensive protection and support. The process of rapid demographic and socio-economic change throughout the world has influenced patterns of family formation and family life, generating considerable change in family composition and structure. Traditional notions of gender-based division of parental and domestic functions and participation in the paid labour force do not reflect current realities and aspirations, as more and more women in all parts of the world take up paid employment outside the home. At the same time, widespread migration, forced shifts of population caused by violent conflicts and wars, urbanization, poverty, natural disasters and other causes of displacement have placed greater strains on the family, since assistance from extended family support networks is often no longer available. Parents are often more dependent on assistance from third parties than they used to be in order to reconcile work and family responsibilities. This is particularly the case when policies and programmes that affect the family ignore the existing diversity of family forms, or are insufficiently sensitive to the needs and rights of women and children.

## Objectives

**5.2** The objectives are:

(a) To develop policies and laws that better support the family, contribute to its stability and take into account its plurality of forms, particularly the growing number of single-parent households;

(b) To establish social security measures that address the social, cultural and economic factors behind the increasing costs of child-rearing;

(c) To promote equality of opportunity for family members, especially the rights of women and children in the family.

## Actions

**5.3** Governments, in cooperation with employers, should provide and promote means to facilitate compatibility between labour force participation and parental responsibilities, especially for single-parent households with young children. Such means could include health insurance and social security, day-care centres and facilities for breast-feeding mothers within the work premises, kindergartens, part-time jobs, paid parental leave, paid maternity leave, flexible work schedules, and reproductive and child health services.

**5.4** When formulating socio-economic development policies, special consideration should be given to increasing the earning power of all adult members of economically deprived families, including the elderly and women who work in the home, and to enabling children to be educated rather than compelled to work. Particular attention should be paid to needy single parents, especially those who are responsible wholly or in part for the support of children and other dependants, through ensuring payment of at least minimum wages and allowances, credit, education, funding for women's self-help groups and stronger legal enforcement of male parental financial responsibilities.

**5.5** Governments should take effective action to eliminate all forms of coercion and discrimination in policies and practices. Measures should be adopted and enforced to eliminate child marriages and female genital mutilation. Assistance should be provided to persons with disabilities in the exercise of their family and reproductive rights and responsibilities.

**5.6** Governments should maintain and further develop mechanisms to document changes and undertake studies on family composition and structure, especially on the prevalence of one-person households, and single-parent and multigenerational families.

## **B. Socio-economic support to the family**

### **Basis for action**

**5.7** Families are sensitive to strains induced by social and economic changes. It is essential to grant particular assistance to families in difficult life situations. Conditions have worsened for many families in recent years, owing to lack of gainful employment and measures taken by Governments seeking to balance their budget by reducing social expenditures. There are increasing numbers of vulnerable families, including single-parent families headed by women, poor families with elderly members or those with disabilities, refugee and displaced families, and families with members affected by AIDS or other terminal diseases, substance dependence, child abuse and domestic violence. Increased labour migrations and refugee movements are an additional source of family tension and disintegration and are contributing to increased responsibilities for women. In many urban environments, millions of children and youths are left to their own devices as family ties break down, and hence are increasingly exposed to risks such as dropping out of school, labour exploitation, sexual exploitation, unwanted pregnancies and sexually transmitted diseases.

### Objective

**5.8** The objective is to ensure that all social and economic development policies are fully responsive to the diverse and changing needs and to the rights of families and their individual members, and provide necessary support and protection, particularly to the most vulnerable families and the most vulnerable family members.

### Actions

**5.9** Governments should formulate family-sensitive policies in the field of housing, work, health, social security and education in order to create an environment supportive of the family, taking into account its various forms and functions, and should support educational programmes concerning parental roles, parental skills and child development. Governments should, in conjunction with other relevant parties, develop the capacity to monitor the impact of social and economic decisions and actions on the well-being of families, on the status of women within families, and on the ability of families to meet the basic needs of their members.

**5.10** All levels of Government, non-governmental organizations and concerned community organizations should develop innovative ways to provide more effective assistance to families and the individuals within them who may be affected by specific problems, such as extreme poverty, chronic unemployment, illness, domestic and sexual violence, dowry payments, drug or alcohol dependence, incest, and child abuse, neglect or abandonment.



**5.11** Governments should support and develop the appropriate mechanisms to assist families caring for children, the dependent elderly and family members with disabilities, including those resulting from HIV/AIDS, encourage the sharing of those responsibilities by men and women, and support the viability of multigenerational families.

**5.12** Governments and the international community should give greater attention to, and manifest greater solidarity with, poor families and families that have been victimized by war, drought, famine, natural disasters and racial and ethnic discrimination or violence. Every effort should be made to keep their members together, to reunite them in case of separation and to ensure access to government programmes designed to support and assist those vulnerable families.

**5.13** Governments should assist single-parent families, and pay special attention to the needs of widows and orphans. All efforts should be made to assist the building of family-like ties in especially difficult circumstances, for example, those involving street children.

# VI

## Population Growth and Structure

## A. Fertility, mortality and population growth rates

### Basis for action

**6.1** The growth of the world population is at an all-time high in absolute numbers, with current increments approaching 90 million persons annually. According to United Nations projections, annual population increments are likely to remain close to 90 million until the year 2015. While it had taken 123 years for world population to increase from 1 billion to 2 billion, succeeding increments of 1 billion took 33 years, 14 years and 13 years. The transition from the fifth to the sixth billion, currently under way, is expected to take only 11 years and to be completed by 1998. World population grew at the rate of 1.7 per cent per annum during the period 1985-1990, but is expected to decrease during the following decades and reach 1.0 per cent per annum by the period 2020-2025. Nevertheless, the attainment of population stabilization during the twenty-first century will require the implementation of all the policies and recommendations in the present Programme of Action.

**6.2** The majority of the world's countries are converging towards a pattern of low birth and death rates, but since those countries are proceeding at different speeds, the emerging picture is that of a world facing increasingly diverse demographic situations. In terms of national averages, during the period 1985-1990, fertility ranged from an estimated 8.5 children per woman in Rwanda to 1.3 children per woman in Italy, while expectation of life at birth, an indicator of mortality conditions, ranged from an estimated 41 years in Sierra Leone to 78.3 years in Japan. In many regions, including some countries with economies in transition, it is estimated that life expectancy at birth has decreased. During the period 1985-1990, 44 per cent of the world population were living

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in the 114 countries that had growth rates of more than 2 per cent per annum. These included nearly all the countries in Africa, whose population-doubling time averages about 24 years, two thirds of those in Asia and one third of those in Latin America. On the other hand, 66 countries (the majority of them in Europe), representing 23 per cent of the world population, had growth rates of less than 1 per cent per annum. Europe's population would take more than 380 years to double at current rates. These disparate levels and differentials have implications for the ultimate size and regional distribution of the world population and for the prospects for sustainable development. It is projected that between 1995 and 2015 the population of the more developed regions will increase by some 120 million, while the population of the less developed regions will increase by 1,727 million.

### Objective

**6.3** Recognizing that the ultimate goal is the improvement of the quality of life of present and future generations, the objective is to facilitate the demographic transition as soon as possible in countries where there is an imbalance between demographic rates and social, economic and environmental goals, while fully respecting human rights. This process will contribute to the stabilization of the world population, and, together with changes in unsustainable patterns of production and consumption, to sustainable development and economic growth.

### Actions

**6.4** Countries should give greater attention to the importance of population trends for development. Countries that have not completed their demographic transition should take effective steps in this regard within the context of their social and economic development and with full respect of human rights. Countries that have

concluded the demographic transition should take necessary steps to optimize their demographic trends within the context of their social and economic development. These steps include economic development and poverty alleviation, especially in rural areas, improvement of women's status, ensuring of universal access to quality primary education and primary health care, including reproductive health and family-planning services, and educational strategies regarding responsible parenthood and sexual education. Countries should mobilize all sectors of society in these efforts, including non-governmental organizations, local community groups and the private sector.

**6.5** In attempting to address population growth concerns, countries should recognize the interrelationships between fertility and mortality levels and aim to reduce high levels of infant, child and maternal mortality so as to lessen the need for high fertility and reduce the occurrence of high-risk births.

## B. Children and youth

### Basis for action

**6.6** Owing to declining mortality levels and the persistence of high fertility levels, a large number of developing countries continue to have very large proportions of children and young people in their populations. For the less developed regions as a whole, 36 per cent of the population is under age 15, and even with projected fertility declines, that proportion will still be about 30 per cent by the year 2015. In Africa, the proportion of the population under age 15 is 45 per cent, a figure that is projected to decline only slightly, to 40 per cent, in the year 2015. Poverty has a devastating impact on children's health and welfare. Children in poverty are at high risk for malnutrition and disease and for falling prey to labour exploitation, trafficking, neglect, sexual abuse and drug addiction. The ongoing and future demands created by large

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young populations, particularly in terms of health, education and employment, represent major challenges and responsibilities for families, local communities, countries and the international community. First and foremost among these responsibilities is to ensure that every child is a wanted child. The second responsibility is to recognize that children are the most important resource for the future and that greater investments in them by parents and societies are essential to the achievement of sustained economic growth and development.

### Objectives

**6.7** The objectives are:

(a) To promote to the fullest extent the health, well-being and potential of all children, adolescents and youth as representing the world's future human resources, in line with the commitments made in this respect at the World Summit for Children and in accordance with the Convention on the Rights of the Child;

(b) To meet the special needs of adolescents and youth, especially young women, with due regard for their own creative capabilities, for social, family and community support, employment opportunities, participation in the political process, and access to education, health, counselling and high-quality reproductive health services;

(c) To encourage children, adolescents and youth, particularly young women, to continue their education in order to equip them for a better life, to increase their human potential, to help prevent early marriages and high-risk child-bearing and to reduce associated mortality and morbidity.

## Actions

**6.8** Countries should give high priority and attention to all dimensions of the protection, survival and development of children and youth, particularly street children and youth, and should make every effort to eliminate the adverse effects of poverty on children and youth, including malnutrition and preventable diseases. Equal educational opportunities must be ensured for boys and girls at every level.

**6.9** Countries should take effective steps to address the neglect, as well as all types of exploitation and abuse, of children, adolescents and youth, such as abduction, rape and incest, pornography, trafficking, abandonment and prostitution. In particular, countries should take appropriate action to eliminate sexual abuse of children both within and outside their borders.

**6.10** All countries must enact and strictly enforce laws against economic exploitation, physical and mental abuse or neglect of children in keeping with commitments made under the Convention on the Rights of the Child and other relevant United Nations instruments. Countries should provide support and rehabilitation services to those who fall victims to such abuses.

**6.11** Countries should create a socio-economic environment conducive to the elimination of all child marriages and other unions as a matter of urgency, and should discourage early marriage. The social responsibilities that marriage entails should be reinforced in countries' educational programmes. Governments should take action to eliminate discrimination against young pregnant women.

**6.12** All countries must adopt collective measures to alleviate the suffering of children in armed conflicts and other disasters, and provide assistance for the rehabilitation of children who become victims of those conflicts and disasters.

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**6.13** Countries should aim to meet the needs and aspirations of youth, particularly in the areas of formal and non-formal education, training, employment opportunities, housing and health, thereby ensuring their integration and participation in all spheres of society, including participation in the political process and preparation for leadership roles.

**6.14** Governments should formulate, with the active support of non-governmental organizations and the private sector, training and employment programmes. Primary importance should be given to meeting the basic needs of young people, improving their quality of life, and increasing their contribution to sustainable development.

**6.15** Youth should be actively involved in the planning, implementation and evaluation of development activities that have a direct impact on their daily lives. This is especially important with respect to information, education and communication activities and services concerning reproductive and sexual health, including the prevention of early pregnancies, sex education and the prevention of HIV/AIDS and other sexually transmitted diseases. Access to, as well as confidentiality and privacy of, these services must be ensured with the support and guidance of their parents and in line with the Convention on the Rights of the Child. In addition, there is a need for educational programmes in favour of life planning skills, healthy lifestyles and the active discouragement of substance abuse.



## C. Elderly people

### Basis for action

**6.16** The decline in fertility levels, reinforced by continued declines in mortality levels, is producing fundamental changes in the age structure of the population of most societies, most notably record increases in the proportion and number of elderly persons, including a growing number of very elderly persons. In the more developed regions, approximately one person in every six is at least 60 years old, and this proportion will be close to one person in every four by the year 2025. The situation of developing countries that have experienced very rapid declines in their levels of fertility deserves particular attention. In most societies, women, because they live longer than men, constitute the majority of the elderly population and, in many countries, elderly poor women are especially vulnerable. The steady increase of older age groups in national populations, both in absolute numbers and in relation to the working-age population, has significant implications for a majority of countries, particularly with regard to the future viability of existing formal and informal modalities for assistance to elderly people. The economic and social impact of this 'ageing of populations' is both an opportunity and a challenge to all societies. Many countries are currently re-examining their policies in the light of the principle that elderly people constitute a valuable and important component of a society's human resources. They are also seeking to identify how best to assist elderly people with long-term support needs.

## Objectives

**6.17** The objectives are:

(a) To enhance, through appropriate mechanisms, the self-reliance of elderly people, and to create conditions that promote quality of life and enable them to work and live independently in their own communities as long as possible or as desired;

(b) To develop systems of health care as well as systems of economic and social security in old age, where appropriate, paying special attention to the needs of women;

(c) To develop a social support system, both formal and informal, with a view to enhancing the ability of families to take care of elderly people within the family.

## Actions

**6.18** All levels of government in medium- and long-term socio-economic planning should take into account the increasing numbers and proportions of elderly people in the population. Governments should develop social security systems that ensure greater inter-generational and intragenerational equity and solidarity and that provide support to elderly people through the encouragement of multigenerational families, and the provision of long-term support and services for growing numbers of frail older people.

**6.19** Governments should seek to enhance the self-reliance of elderly people to facilitate their continued participation in society. In consultation with elderly people, Governments should ensure that the necessary conditions are developed to enable elderly people to lead self-determined, healthy and productive lives and to make full use of the skills and abilities they have acquired in their lives for the benefit of society. The valuable contribution that elderly people make to families and society, especially as volunteers and caregivers, should be given due recognition and encouragement.

**6.20** Governments, in collaboration with non-governmental organizations and the private sector, should strengthen formal and informal support systems and safety nets for elderly people and eliminate all forms of violence and discrimination against elderly people in all countries, paying special attention to the needs of elderly women.

## D. Indigenous people

### Basis for action

**6.21** Indigenous people have a distinct and important perspective on population and development relationships, frequently quite different from those of the populations with which they interrelate within national boundaries. In some regions of the world, indigenous people, after long periods of population loss, are experiencing steady and in some places rapid population growth resulting from declining mortality, although morbidity and mortality are generally still much higher than for other sections of the national population. In other regions, however, they are still experiencing a steady population decline as a result of contact with external diseases, loss of land and resources, ecological destruction, displacement, resettlement and disruption of their families, communities and social systems.

**6.22** The situation of many indigenous groups is often characterized by discrimination and oppression, which are sometimes even institutionalized in national laws and structures of governance. In many cases, unsustainable patterns of production and consumption in the society at large are a key factor in the ongoing destruction of the ecological stability of their lands, as well as in an ongoing exertion of pressure to displace them from those lands. Indigenous people believe that recognition of their rights to their ancestral lands is inextricably linked to sustainable development. Indigenous people call for increased respect for indigenous culture, spirituality,

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lifestyles and sustainable development models, including traditional systems of land tenure, gender relations, use of resources and knowledge and practice of family planning. At national, regional and international levels, the perspectives of indigenous people have gained increasing recognition, as reflected, inter alia, in the presence of the Working Group on Indigenous Populations at the United Nations Conference on Environment and Development, and the proclamation by the General Assembly of the year 1993 as the International Year of the World's Indigenous People.

**6.23** The decision of the international community to proclaim an International Decade of the World's Indigenous People, to commence on 10 December 1994, represents a further important step towards fulfilment of the aspirations of indigenous people. The goal of the Decade, which is the strengthening of international cooperation for the solution of problems faced by indigenous people in such areas as human rights, the environment, development, education and health, is acknowledged as directly related to the purpose of the International Conference on Population and Development and the present Programme of Action. Accordingly, the distinct perspectives of indigenous people are incorporated throughout the present Programme of Action within the context of its specific chapters.

### Objectives

**6.24** The objectives are:

- (a) To incorporate the perspectives and needs of indigenous communities into the design, implementation, monitoring and evaluation of the population, development and environment programmes that affect them;
- (b) To ensure that indigenous people receive population- and development- related services that they deem socially, culturally and ecologically appropriate;
- (c) To address social and economic factors that act to disadvantage indigenous people.

## Actions

**6.25** Governments and other important institutions in society should recognize the distinct perspective of indigenous people on aspects of population and development and, in consultation with indigenous people and in collaboration with concerned non-governmental and intergovernmental organizations, should address their specific needs, including needs for primary health care and reproductive health services. All human rights violations and discrimination, especially all forms of coercion, must be eliminated.

**6.26** Within the context of the activities of the International Decade of the World's Indigenous People, the United Nations should, in full cooperation and collaboration with indigenous people and their relevant organizations, develop an enhanced understanding of indigenous people and compile data on their demographic characteristics, both current and historical, as a means of improving the understanding of the population status of indigenous people. Special efforts are necessary to integrate statistics pertaining to indigenous populations into the national data-collection system.

**6.27** Governments should respect the cultures of indigenous people and enable them to have tenure and manage their lands, protect and restore the natural resources and ecosystems on which indigenous communities depend for their survival and well-being and, in consultation with indigenous people, take this into account in the formulation of national population and development policies.

## **E. Persons with disabilities**

### **Basis for action**

**6.28** Persons with disabilities constitute a significant proportion of the population. The implementation of the World Programme of Action concerning Disabled Persons (1983-1992) contributed towards increased awareness and expanded knowledge of disability issues, increased the role played by persons with disabilities and by concerned organizations, and contributed towards the improvement and expansion of disability legislation. However, there remains a pressing need for continued action to promote effective measures for the prevention of disability, for rehabilitation and for the realization of the goals of full participation and equality for persons with disabilities. In its resolution 47/88 of 16 December 1992, the General Assembly encouraged the consideration by, inter alia, the International Conference on Population and Development, of disability issues relevant to the subject-matter of the Conference.

### **Objectives**

**6.29** The objectives are:

- (a) To ensure the realization of the rights of all persons with disabilities, and their participation in all aspects of social, economic and cultural life;
- (b) To create, improve and develop necessary conditions that will ensure equal opportunities for persons with disabilities and the valuing of their capabilities in the process of economic and social development;
- (c) To ensure the dignity and promote the self-reliance of persons with disabilities.

## Actions

**6.30** Governments at all levels should consider the needs of persons with disabilities in terms of ethical and human rights dimensions. Governments should recognize needs concerning, inter alia, reproductive health, including family planning and sexual health, HIV/AIDS, information, education and communication. Governments should eliminate specific forms of discrimination that persons with disabilities may face with regard to reproductive rights, household and family formation, and international migration, while taking into account health and other considerations relevant under national immigration regulations.

**6.31** Governments at all levels should develop the infrastructure to address the needs of persons with disabilities, in particular with regard to their education, training and rehabilitation.

**6.32** Governments at all levels should promote mechanisms ensuring the realization of the rights of persons with disabilities and reinforce their capabilities of integration.

**6.33** Governments at all levels should implement and promote a system of follow-up of social and economic integration of persons with disabilities.

# VIII

## Reproductive Rights and Reproductive Health\*



**7.1** This chapter is especially guided by the principles contained in chapter II and in particular the introductory paragraphs.

## **A. Reproductive rights and reproductive health**

### **Basis for action**

**7.2** Reproductive health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity, in all matters relating to the reproductive system and to its functions and processes. Reproductive health therefore implies that people are able to have a satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so. Implicit in this last condition are the right of men and women to be informed and to have access to safe, effective, affordable and acceptable methods of family planning of their choice, as well as other methods of their choice for regulation of fertility which are not against the law, and the right of access to appropriate health-care services that will enable women to go safely through pregnancy and childbirth and provide couples with the best chance of having a healthy infant. In line with the above definition of reproductive health, reproductive health care is defined as the constellation of methods, techniques and services that contribute to reproductive health and well-being by preventing and solving reproductive health problems. It also includes sexual health, the purpose of which is the enhancement of life and personal relations, and not merely counselling and care related to reproduction and sexually transmitted diseases.

*\* The Holy See expressed a general reservation on this chapter. The reservation is to be interpreted in terms of the statement made by the representative of the Holy See at the 14th plenary meeting, on 13 September 1994.*

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**7.3** Bearing in mind the above definition, reproductive rights embrace certain human rights that are already recognized in national laws, international human rights documents and other consensus documents. These rights rest on the recognition of the basic right of all couples and individuals to decide freely and responsibly the number, spacing and timing of their children and to have the information and means to do so, and the right to attain the highest standard of sexual and reproductive health. It also includes their right to make decisions concerning reproduction free of discrimination, coercion and violence, as expressed in human rights documents. In the exercise of this right, they should take into account the needs of their living and future children and their responsibilities towards the community. The promotion of the responsible exercise of these rights for all people should be the fundamental basis for government- and community-supported policies and programmes in the area of reproductive health, including family planning. As part of their commitment, full attention should be given to the promotion of mutually respectful and equitable gender relations and particularly to meeting the educational and service needs of adolescents to enable them to deal in a positive and responsible way with their sexuality. Reproductive health eludes many of the world's people because of such factors as: inadequate levels of knowledge about human sexuality and inappropriate or poor-quality reproductive health information and services; the prevalence of high-risk sexual behaviour; discriminatory social practices; negative attitudes towards women and girls; and the limited power many women and girls have over their sexual and reproductive lives. Adolescents are particularly vulnerable because of their lack of information and access to relevant services in most countries. Older women and men have distinct reproductive and sexual health issues which are often inadequately addressed.

**7.4** The implementation of the present Programme of Action is to be guided by the above comprehensive definition of reproductive health, which includes sexual health.

## Objectives

**7.5** The objectives are:

(a) To ensure that comprehensive and factual information and a full range of reproductive health-care services, including family planning, are accessible, affordable, acceptable and convenient to all users;

(b) To enable and support responsible voluntary decisions about child-bearing and methods of family planning of their choice, as well as other methods of their choice for regulation of fertility which are not against the law and to have the information, education and means to do so;

(c) To meet changing reproductive health needs over the life cycle and to do so in ways sensitive to the diversity of circumstances of local communities.

## Actions

**7.6** All countries should strive to make accessible through the primary health-care system, reproductive health to all individuals of appropriate ages as soon as possible and no later than the year 2015. Reproductive health care in the context of primary health care should, inter alia, include: family-planning counselling, information, education, communication and services; education and services for prenatal care, safe delivery and post-natal care, especially breast-feeding and infant and women's health care; prevention and appropriate treatment of infertility; abortion as specified in paragraph 8.25, including prevention of abortion and the management of the consequences of abortion; treatment of reproductive tract infections; sexually transmitted diseases and other reproductive health conditions; and information, education

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and counselling, as appropriate, on human sexuality, reproductive health and responsible parenthood. Referral for family-planning services and further diagnosis and treatment for complications of pregnancy, delivery and abortion, infertility, reproductive tract infections, breast cancer and cancers of the reproductive system, sexually transmitted diseases, including HIV/AIDS should always be available, as required. Active discouragement of harmful practices, such as female genital mutilation, should also be an integral component of primary health care, including reproductive health-care programmes.

**7.7** Reproductive health-care programmes should be designed to serve the needs of women, including adolescents, and must involve women in the leadership, planning, decision-making, management, implementation, organization and evaluation of services. Governments and other organizations should take positive steps to include women at all levels of the health-care system.

**7.8** Innovative programmes must be developed to make information, counselling and services for reproductive health accessible to adolescents and adult men. Such programmes must both educate and enable men to share more equally in family planning and in domestic and child-rearing responsibilities and to accept the major responsibility for the prevention of sexually transmitted diseases. Programmes must reach men in their workplaces, at home and where they gather for recreation. Boys and adolescents, with the support and guidance of their parents, and in line with the Convention on the Rights of the Child, should also be reached through schools, youth organizations and wherever they congregate. Voluntary and appropriate male methods for contraception, as well as for the prevention of sexually transmitted diseases, including AIDS, should be promoted and made accessible with adequate information and counselling.

**7.9** Governments should promote much greater community participation in reproductive health-care services by decentralizing the management of public health programmes and by forming partnerships in cooperation with local non-governmental organizations and private health-care providers. All types of non-governmental organizations, including local women's groups, trade unions, cooperatives, youth programmes and religious groups, should be encouraged to become involved in the promotion of better reproductive health.

**7.10** Without jeopardizing international support for programmes in developing countries, the international community should, upon request, give consideration to the training, technical assistance, short-term contraceptive supply needs and the needs of the countries in transition from centrally managed to market economies, where reproductive health is poor and in some cases deteriorating. Those countries, at the same time, must themselves give higher priority to reproductive health services, including a comprehensive range of contraceptive means, and must address their current reliance on abortion for fertility regulation by meeting the need of women in those countries for better information and more choices on an urgent basis.

**7.11** Migrants and displaced persons in many parts of the world have limited access to reproductive health care and may face specific serious threats to their reproductive health and rights. Services must be particularly sensitive to the needs of individual women and adolescents and responsive to their often powerless situation, with particular attention to those who are victims of sexual violence.

## **B. Family planning**

### **Basis for action**

**7.12** The aim of family-planning programmes must be to enable couples and individuals to decide freely and responsibly the number and spacing of their children and to have the information and means to do so and to ensure informed choices and make available a full range of safe and effective methods. The success of population education and family-planning programmes in a variety of settings demonstrates that informed individuals everywhere can and will act responsibly in the light of their own needs and those of their families and communities. The principle of informed free choice is essential to the long-term success of family-planning programmes. Any form of coercion has no part to play. In every society there are many social and economic incentives and disincentives that affect individual decisions about child-bearing and family size. Over the past century, many Governments have experimented with such schemes, including specific incentives and disincentives, in order to lower or raise fertility. Most such schemes have had only marginal impact on fertility and in some cases have been counterproductive. Governmental goals for family planning should be defined in terms of unmet needs for information and services. Demographic goals, while legitimately the subject of government development strategies, should not be imposed on family-planning providers in the form of targets or quotas for the recruitment of clients.

**7.13** Over the past three decades, the increasing availability of safer methods of modern contraception, although still in some respects inadequate, has permitted greater opportunities for individual choice and responsible decision-making in matters of reproduction throughout much of the world. Currently, about 55 per cent of couples in developing regions use some method of

family planning. This figure represents nearly a fivefold increase since the 1960s. Family-planning programmes have contributed considerably to the decline in average fertility rates for developing countries, from about six to seven children per woman in the 1960s to about three to four children at present. However, the full range of modern family-planning methods still remains unavailable to at least 350 million couples world wide, many of whom say they want to space or prevent another pregnancy. Survey data suggest that approximately 120 million additional women world wide would be currently using a modern family-planning method if more accurate information and affordable services were easily available, and if partners, extended families and the community were more supportive. These numbers do not include the substantial and growing numbers of sexually active unmarried individuals wanting and in need of information and services. During the decade of the 1990s, the number of couples of reproductive age will grow by about 18 million per annum. To meet their needs and close the existing large gaps in services, family planning and contraceptive supplies will need to expand very rapidly over the next several years. The quality of family-planning programmes is often directly related to the level and continuity of contraceptive use and to the growth in demand for services. Family-planning programmes work best when they are part of or linked to broader reproductive health programmes that address closely related health needs and when women are fully involved in the design, provision, management and evaluation of services.

## Objectives

**7.14** The objectives are:

(a) To help couples and individuals meet their reproductive goals in a framework that promotes optimum health, responsibility and family well-being, and respects the dignity of all persons and their right to choose the number, spacing and timing of the birth of their children;

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(b) To prevent unwanted pregnancies and reduce the incidence of high-risk pregnancies and morbidity and mortality;

(c) To make quality family-planning services affordable, acceptable and accessible to all who need and want them, while maintaining confidentiality;

(d) To improve the quality of family-planning advice, information, education, communication, counselling and services;

(e) To increase the participation and sharing of responsibility of men in the actual practice of family planning;

(f) To promote breast-feeding to enhance birth spacing.

### Actions

**7.15** Governments and the international community should use the full means at their disposal to support the principle of voluntary choice in family planning.

**7.16** All countries should, over the next several years, assess the extent of national unmet need for good-quality family-planning services and its integration in the reproductive health context, paying particular attention to the most vulnerable and under-served groups in the population. All countries should take steps to meet the family-planning needs of their populations as soon as possible and should, in all cases by the year 2015, seek to provide universal access to a full range of safe and reliable family-planning methods and to related reproductive health services which are not against the law. The aim should be to assist couples and individuals to achieve their reproductive goals and give them the full opportunity to exercise the right to have children by choice.

**7.17** Governments at all levels are urged to institute systems of monitoring and evaluation of user-centred services with a view to detecting, preventing and controlling abuses by family-planning managers and providers and to ensure a continuing improvement



in the quality of services. To this end, Governments should secure conformity to human rights and to ethical and professional standards in the delivery of family planning and related reproductive health services aimed at ensuring responsible, voluntary and informed consent and also regarding service provision. In-vitro fertilization techniques should be provided in accordance with appropriate ethical guidelines and medical standards.

**7.18** Non-governmental organizations should play an active role in mobilizing community and family support, in increasing access and acceptability of reproductive health services including family planning, and cooperate with Governments in the process of preparation and provision of care, based on informed choice, and in helping to monitor public- and private-sector programmes, including their own.

**7.19** As part of the effort to meet unmet needs, all countries should seek to identify and remove all the major remaining barriers to the utilization of family-planning services. Some of those barriers are related to the inadequacy, poor quality and cost of existing family-planning services. It should be the goal of public, private and non-governmental family-planning organizations to remove all programme-related barriers to family-planning use by the year 2005 through the redesign or expansion of information and services and other ways to increase the ability of couples and individuals to make free and informed decisions about the number, spacing and timing of births and protect themselves from sexually transmitted diseases.

**7.20** Specifically, Governments should make it easier for couples and individuals to take responsibility for their own reproductive health by removing unnecessary legal, medical, clinical and regulatory barriers to information and to access to family-planning services and methods.

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**7.21** All political and community leaders are urged to play a strong, sustained and highly visible role in promoting and legitimizing the provision and use of family-planning and reproductive health services. Governments at all levels are urged to provide a climate that is favourable to good-quality public and private family-planning and reproductive health information and services through all possible channels. Finally, leaders and legislators at all levels must translate their public support for reproductive health, including family planning, into adequate allocations of budgetary, human and administrative resources to help meet the needs of all those who cannot pay the full cost of services.

**7.22** Governments are encouraged to focus most of their efforts towards meeting their population and development objectives through education and voluntary measures rather than schemes involving incentives and disincentives.

**7.23** In the coming years, all family-planning programmes must make significant efforts to improve quality of care. Among other measures, programmes should:

(a) Recognize that appropriate methods for couples and individuals vary according to their age, parity, family-size preference and other factors, and ensure that women and men have information and access to the widest possible range of safe and effective family-planning methods in order to enable them to exercise free and informed choice;

(b) Provide accessible, complete and accurate information about various family-planning methods, including their health risks and benefits, possible side effects and their effectiveness in the prevention of the spread of HIV/AIDS and other sexually transmitted diseases;

(c) Make services safer, affordable, more convenient and accessible for clients and ensure, through strengthened logistical systems, a sufficient and continuous supply of essential high-

quality contraceptives. Privacy and confidentiality should be ensured;

(d) Expand and upgrade formal and informal training in sexual and reproductive health care and family planning for all health-care providers, health educators and managers, including training in interpersonal communications and counselling;

(e) Ensure appropriate follow-up care, including treatment for side effects of contraceptive use;

(f) Ensure availability of related reproductive health services on site or through a strong referral mechanism;

(g) In addition to quantitative measures of performance, give more emphasis to qualitative ones that take into account the perspectives of current and potential users of services through such means as effective management information systems and survey techniques for the timely evaluation of services;

(h) Family-planning and reproductive health programmes should emphasize breast-feeding education and support services, which can simultaneously contribute to birth spacing, better maternal and child health and higher child survival.

**7.24** Governments should take appropriate steps to help women avoid abortion, which in no case should be promoted as a method of family planning, and in all cases provide for the humane treatment and counselling of women who have had recourse to abortion.

**7.25** In order to meet the substantial increase in demand for contraceptives over the next decade and beyond, the international community should move, on an immediate basis, to establish an efficient coordination system and global, regional and subregional facilities for the procurement of contraceptives and other commodities essential to reproductive health programmes of developing countries and countries with economies in transition. The international community should also consider such measures as the transfer of technology to developing countries to enable them

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to produce and distribute high-quality contraceptives and other commodities essential to reproductive health services, in order to strengthen the self-reliance of those countries. At the request of the countries concerned, the World Health Organization should continue to provide advice on the quality, safety and efficacy of family-planning methods.

**7.26** Provision of reproductive health-care services should not be confined to the public sector but should involve the private sector and non-governmental organizations, in accordance with the needs and resources of their communities, and include, where appropriate, effective strategies for cost recovery and service delivery, including social marketing and community-based services. Special efforts should be made to improve accessibility through outreach services.

### C. Sexually transmitted diseases and prevention of human immunodeficiency virus (HIV)

#### Basis for action

**7.27** The world-wide incidence of sexually transmitted diseases is high and increasing. The situation has worsened considerably with the emergence of the HIV epidemic. Although the incidence of some sexually transmitted diseases has stabilized in parts of the world, there have been increasing cases in many regions.

**7.28** The social and economic disadvantages that women face make them especially vulnerable to sexually transmitted infections, including HIV, as illustrated, for example, by their exposure to the high-risk sexual behaviour of their partners. For women, the symptoms of infections from sexually transmitted diseases are often hidden, making them more difficult to diagnose than in men, and the health consequences are often greater, including increased

risk of infertility and ectopic pregnancy. The risk of transmission from infected men to women is also greater than from infected women to men, and many women are powerless to take steps to protect themselves.

## Objective

**7.29** The objective is to prevent, reduce the incidence of, and provide treatment for, sexually transmitted diseases, including HIV/AIDS, and the complications of sexually transmitted diseases such as infertility, with special attention to girls and women.

## Actions

**7.30** Reproductive health programmes should increase their efforts to prevent, detect and treat sexually transmitted diseases and other reproductive tract infections, especially at the primary health-care level. Special outreach efforts should be made to those who do not have access to reproductive health-care programmes.

**7.31** All health-care providers, including all family-planning providers, should be given specialized training in the prevention and detection of, and counselling on, sexually transmitted diseases, especially infections in women and youth, including HIV/AIDS.

**7.32** Information, education and counselling for responsible sexual behaviour and effective prevention of sexually transmitted diseases, including HIV, should become integral components of all reproductive and sexual health services.

**7.33** Promotion and the reliable supply and distribution of high-quality condoms should become integral components of all reproductive health-care services. All relevant international organizations, especially the World Health Organization, should significantly increase their procurement. Governments and the international community should provide all means to reduce the spread and the rate of transmission of HIV/AIDS infection.

## **D. Human sexuality and gender relations**

### **Basis for action**

**7.34** Human sexuality and gender relations are closely interrelated and together affect the ability of men and women to achieve and maintain sexual health and manage their reproductive lives. Equal relationships between men and women in matters of sexual relations and reproduction, including full respect for the physical integrity of the human body, require mutual respect and willingness to accept responsibility for the consequences of sexual behaviour. Responsible sexual behaviour, sensitivity and equity in gender relations, particularly when instilled during the formative years, enhance and promote respectful and harmonious partnerships between men and women.

**7.35** Violence against women, particularly domestic violence and rape, is widespread, and rising numbers of women are at risk from AIDS and other sexually transmitted diseases as a result of high-risk sexual behaviour on the part of their partners. In a number of countries, harmful practices meant to control women's sexuality have led to great suffering. Among them is the practice of female genital mutilation, which is a violation of basic rights and a major lifelong risk to women's health.

### **Objectives**

**7.36** The objectives are:

(a) To promote adequate development of responsible sexuality, permitting relations of equity and mutual respect between the genders and contributing to improving the quality of life of individuals;

(b) To ensure that women and men have access to the information, education and services needed to achieve good sexual health and exercise their reproductive rights and responsibilities.

## Actions

**7.37** Support should be given to integral sexual education and services for young people, with the support and guidance of their parents and in line with the Convention on the Rights of the Child, that stress responsibility of males for their own sexual health and fertility and that help them exercise those responsibilities. Educational efforts should begin within the family unit, in the community and in the schools at an appropriate age, but must also reach adults, in particular men, through non-formal education and a variety of community-based efforts.

**7.38** In the light of the urgent need to prevent unwanted pregnancies, the rapid spread of AIDS and other sexually transmitted diseases, and the prevalence of sexual abuse and violence, Governments should base national policies on a better understanding of the need for responsible human sexuality and the realities of current sexual behaviour.

**7.39** Active and open discussion of the need to protect women, youth and children from any abuse, including sexual abuse, exploitation, trafficking and violence, must be encouraged and supported by educational programmes at both national and community levels. Governments should set the necessary conditions and procedures to encourage victims to report violations of their rights. Laws addressing those concerns should be enacted where they do not exist, made explicit, strengthened and enforced, and appropriate rehabilitation services provided. Governments should also prohibit the production and the trade of child pornography.

**7.40** Governments and communities should urgently take steps to stop the practice of female genital mutilation and protect women and girls from all such similar unnecessary and dangerous practices. Steps to eliminate the practice should include strong community outreach programmes involving village and religious

leaders, education and counselling about its impact on girls' and women's health, and appropriate treatment and rehabilitation for girls and women who have suffered mutilation. Services should include counselling for women and men to discourage the practice.

## **E. Adolescents**

### **Basis for action**

**7.41** The reproductive health needs of adolescents as a group have been largely ignored to date by existing reproductive health services. The response of societies to the reproductive health needs of adolescents should be based on information that helps them attain a level of maturity required to make responsible decisions. In particular, information and services should be made available to adolescents to help them understand their sexuality and protect them from unwanted pregnancies, sexually transmitted diseases and subsequent risk of infertility. This should be combined with the education of young men to respect women's self-determination and to share responsibility with women in matters of sexuality and reproduction. This effort is uniquely important for the health of young women and their children, for women's self-determination and, in many countries, for efforts to slow the momentum of population growth. Motherhood at a very young age entails a risk of maternal death that is much greater than average, and the children of young mothers have higher levels of morbidity and mortality. Early child-bearing continues to be an impediment to improvements in the educational, economic and social status of women in all parts of the world. Overall for young women, early marriage and early motherhood can severely curtail educational and employment opportunities and are likely to have a long-term, adverse impact on their and their children's quality of life.



**7.42** Poor educational and economic opportunities and sexual exploitation are important factors in the high levels of adolescent child-bearing. In both developed and developing countries, adolescents faced with few apparent life choices have little incentive to avoid pregnancy and child-bearing.

**7.43** In many societies, adolescents face pressures to engage in sexual activity. Young women, particularly low-income adolescents, are especially vulnerable. Sexually active adolescents of both sexes are increasingly at high risk of contracting and transmitting sexually transmitted diseases, including HIV/AIDS, and they are typically poorly informed about how to protect themselves. Programmes for adolescents have proven most effective when they secure the full involvement of adolescents in identifying their reproductive and sexual health needs and in designing programmes that respond to those needs.

## Objectives

**7.44** The objectives are:

- (a) To address adolescent sexual and reproductive health issues, including unwanted pregnancy, unsafe abortion<sup>20</sup> and sexually transmitted diseases, including HIV/AIDS, through the promotion of responsible and healthy reproductive and sexual behaviour, including voluntary abstinence, and the provision of appropriate services and counselling specifically suitable for that age group;
- (b) To substantially reduce all adolescent pregnancies.

## Actions

**7.45** Recognizing the rights, duties and responsibilities of parents and other persons legally responsible for adolescents to provide, in a manner consistent with the evolving capacities of the adolescent, appropriate direction and guidance in sexual and reproductive matters, countries must ensure that the programmes and attitudes of health-care providers do not restrict the access

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of adolescents to appropriate services and the information they need, including on sexually transmitted diseases and sexual abuse. In doing so, and in order to, inter alia, address sexual abuse, these services must safeguard the rights of adolescents to privacy, confidentiality, respect and informed consent, respecting cultural values and religious beliefs. In this context, countries should, where appropriate, remove legal, regulatory and social barriers to reproductive health information and care for adolescents.

**7.46** Countries, with the support of the international community, should protect and promote the rights of adolescents to reproductive health education, information and care and greatly reduce the number of adolescent pregnancies.

**7.47** Governments, in collaboration with non-governmental organizations, are urged to meet the special needs of adolescents and to establish appropriate programmes to respond to those needs. Such programmes should include support mechanisms for the education and counselling of adolescents in the areas of gender relations and equality, violence against adolescents, responsible sexual behaviour, responsible family-planning practice, family life, reproductive health, sexually transmitted diseases, HIV infection and AIDS prevention. Programmes for the prevention and treatment of sexual abuse and incest and other reproductive health services should be provided. Such programmes should provide information to adolescents and make a conscious effort to strengthen positive social and cultural values. Sexually active adolescents will require special family-planning information, counselling and services, and those who become pregnant will require special support from their families and community during pregnancy and early child care. Adolescents must be fully involved in the planning, implementation and evaluation of such information and services with proper regard for parental guidance and responsibilities.

**7.48** Programmes should involve and train all who are in a position to provide guidance to adolescents concerning responsible sexual and reproductive behaviour, particularly parents and families, and also communities, religious institutions, schools, the mass media and peer groups. Governments and non-governmental organizations should promote programmes directed to the education of parents, with the objective of improving the interaction of parents and children to enable parents to comply better with their educational duties to support the process of maturation of their children, particularly in the areas of sexual behaviour and reproductive health.

## VIII

Health,  
Morbidity  
and Mortality\*

## A. Primary health care and the health-care sector

### Basis for action

**8.1** One of the main achievements of the twentieth century has been the unprecedented increase in human longevity. In the past half century, expectation of life at birth in the world as a whole has increased by about 20 years, and the risk of dying in the first year of life has been reduced by nearly two thirds. Nevertheless, these achievements fall short of the much greater improvements that had been anticipated in the World Population Plan of Action and the Declaration of Alma Ata, adopted by the International Conference on Primary Health Care in 1978. There remain entire national populations and sizeable population groups within many countries that are still subject to very high rates of morbidity and mortality. Differences linked to socio-economic status or ethnicity are often substantial. In many countries with economies in transition, the mortality rate has considerably increased as a result of deaths caused by accidents and violence.

**8.2** The increases in life expectancy recorded in most regions of the world reflect significant gains in public health and in access to primary health-care services. Notable achievements include the vaccination of about 80 per cent of the children in the world and the widespread use of low-cost treatments, such as oral rehydration therapy, to ensure that more children survive. Yet these achievements have not been realized in all countries, and preventable or treatable illnesses are still the leading killers of young children. Moreover, large segments of many populations continue to lack access to clean water and sanitation facilities, are

\* *The Holy See expressed a general reservation on this chapter. The reservation is to be interpreted in terms of the statement made by the representative of the Holy See at the 14th plenary meeting, on 13 September 1994.*

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forced to live in congested conditions and lack adequate nutrition. Large numbers of people remain at continued risk of infectious, parasitic and water-borne diseases, such as tuberculosis, malaria and schistosomiasis. In addition, the health effects of environmental degradation and exposure to hazardous substances in the workplace are increasingly a cause of concern in many countries. Similarly, the growing consumption of tobacco, alcohol and drugs will precipitate a marked increase in costly chronic diseases among working age and elderly people. The impact of reductions in expenditures for health and other social services which have taken place in many countries as a result of public-sector retrenchment, misallocation of available health resources, structural adjustment and the transition to market economies has pre-empted significant changes in lifestyles, livelihoods and consumption patterns and is also a factor in increasing morbidity and mortality. Although economic reforms are essential to sustained economic growth, it is equally essential that the design and implementation of structural adjustment programmes incorporate the social dimension.

### Objectives

**8.3** The objectives are:

(a) To increase the accessibility, availability, acceptability and affordability of health-care services and facilities to all people in accordance with national commitments to provide access to basic health care for all;

(b) To increase the healthy life-span and improve the quality of life of all people, and to reduce disparities in life expectancy between and within countries.

### Actions

**8.4** All countries should make access to basic health care and health promotion the central strategies for reducing mortality and morbidity. Sufficient resources should be assigned so that primary health services attain full coverage of the population. Governments

should strengthen health and nutrition information, education and communication activities so as to enable people to increase their control over and improve their health. Governments should provide the necessary backup facilities to meet the demand created.

**8.5** In keeping with the Declaration of Alma Ata, all countries should reduce mortality and morbidity and seek to make primary health care, including reproductive health care, available universally by the end of the current decade. Countries should aim to achieve by 2005 a life expectancy at birth greater than 70 years and by 2015 a life expectancy at birth greater than 75 years. Countries with the highest levels of mortality should aim to achieve by 2005 a life expectancy at birth greater than 65 years and by 2015 a life expectancy at birth greater than 70 years. Efforts to ensure a longer and healthier life for all should emphasize the reduction of morbidity and mortality differentials between males and females as well as among geographical regions, social classes and indigenous and ethnic groups.

**8.6** The role of women as primary custodians of family health should be recognized and supported. Access to basic health care, expanded health education, the availability of simple cost-effective remedies, and the reappraisal of primary health-care services, including reproductive health-care services to facilitate the proper use of women's time, should be provided.

**8.7** Governments should ensure community participation in health policy planning, especially with respect to the long-term care of the elderly, those with disabilities and those infected with HIV and other endemic diseases. Such participation should also be promoted in child-survival and maternal health programmes, breast-feeding support programmes, programmes for the early detection and treatment of cancer of the reproductive system, and programmes for the prevention of HIV infection and other sexually transmitted diseases.

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**8.8** All countries should re-examine training curricula and the delegation of responsibilities within the health-care delivery system in order to reduce frequent, unnecessary and costly reliance on physicians and on secondary- and tertiary-care facilities, while maintaining effective referral services. Access to health-care services for all people and especially for the most underserved and vulnerable groups must be ensured. Governments should seek to make basic health-care services more sustainable financially, while ensuring equitable access, by integrating reproductive health services, including maternal and child health and family-planning services, and by making appropriate use of community-based services, social marketing and cost-recovery schemes, with a view to increasing the range and quality of services available. The involvement of users and the community in the financial management of health-care services should be promoted.

**8.9** Through technology transfer, developing countries should be assisted in building their capacity to produce generic drugs for the domestic market and to ensure the wide availability and accessibility of such drugs. To meet the substantial increase in demand for vaccines, antibiotics and other commodities over the next decade and beyond, the international community should strengthen global, regional and local mechanisms for the production, quality control and procurement of those items, where feasible, in developing countries. The international community should facilitate regional cooperation in the manufacture, quality control and distribution of vaccines.

**8.10** All countries should give priority to measures that improve the quality of life and health by ensuring a safe and sanitary living environment for all population groups through measures aimed at avoiding crowded housing conditions, reducing air pollution, ensuring access to clean water and sanitation, improving waste management, and increasing the safety of the workplace. Special attention should be given to the living conditions of the poor and disadvantaged in urban and rural areas. The impact of



environmental problems on health, particularly that of vulnerable groups, should be monitored by Governments on a regular basis.

**8.11** Reform of the health sector and health policy, including the rational allocation of resources, should be promoted in order to achieve the stated objectives. All Governments should examine ways to maximize the cost- effectiveness of health programmes in order to achieve increased life expectancy, reduce morbidity and mortality and ensure access to basic health- care services for all people.

## **B. Child survival and health**

### **Basis for action**

**8.12** Important progress has been made in reducing infant and child mortality rates everywhere. Improvements in the survival of children have been the main component of the overall increase in average life expectancy in the world over the past century, first in the developed countries and over the past 50 years in the developing countries. The number of infant deaths (i.e., of children under age 1) per 1,000 live births at the world level declined from 92 in 1970-1975 to about 62 in 1990-1995. For developed regions, the decline was from 22 to 12 infant deaths per 1,000 births, and for developing countries from 105 to 69 infant deaths per 1,000 births. Improvements have been slower in sub-Saharan Africa and in some Asian countries where, during 1990-1995, more than one in every 10 children born alive will die before their first birthday. The mortality of children under age 5 exhibits significant variations between and within regions and countries. Indigenous people generally have higher infant and child mortality rates than the national norm. Poverty, malnutrition, a decline in breast-feeding, and inadequacy or lack of sanitation and of health facilities are all factors associated with high infant and child mortality. In some countries, civil unrest and wars have also had major negative impacts on child survival. Unwanted births, child neglect and abuse are also factors contributing to the rise in child mortality. In addition, HIV infection can be transmitted from mother

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to child before or during childbirth, and young children whose mothers die are at a very high risk of dying themselves at a young age.

**8.13** The World Summit for Children, held in 1990, adopted a set of goals for children and development up to the year 2000, including a reduction in infant and under-5 child mortality rates by one third, or to 50 and 70 per 1,000 live births, respectively, whichever is less. These goals are based on the accomplishments of child-survival programmes during the 1980s, which demonstrate not only that effective low-cost technologies are available but also that they can be delivered efficiently to large populations. However, the morbidity and mortality reductions achieved through extraordinary measures in the 1980s are in danger of being eroded if the broad-based health-delivery systems established during the decade are not institutionalized and sustained.

**8.14** Child survival is closely linked to the timing, spacing and number of births and to the reproductive health of mothers. Early, late, numerous and closely spaced pregnancies are major contributors to high infant and child mortality and morbidity rates, especially where health-care facilities are scarce. Where infant mortality remains high, couples often have more children than they otherwise would to ensure that a desired number survive.

### Objectives

**8.15** The objectives are:

- (a) To promote child health and survival and to reduce disparities between and within developed and developing countries as quickly as possible, with particular attention to eliminating the pattern of excess and preventable mortality among girl infants and children;
- (b) To improve the health and nutritional status of infants and children;
- (c) To promote breast-feeding as a child-survival strategy.

## Actions

**8.16** Over the next 20 years, through international cooperation and national programmes, the gap between average infant and child mortality rates in the developed and the developing regions of the world should be substantially narrowed, and disparities within countries, those between geographical regions, ethnic or cultural groups, and socio-economic groups should be eliminated. Countries with indigenous people should achieve infant and under-5 mortality levels among their indigenous people that are the same as those of the general population. Countries should strive to reduce their infant and under-5 mortality rates by one third, or to 50 and 70 per 1,000 live births, respectively, whichever is less, by the year 2000, with appropriate adaptation to the particular situation of each country. By 2005, countries with intermediate mortality levels should aim to achieve an infant mortality rate below 50 deaths per 1,000 and an under-5 mortality rate below 60 deaths per 1,000 births. By 2015, all countries should aim to achieve an infant mortality rate below 35 per 1,000 live births and an under-5 mortality rate below 45 per 1,000. Countries that achieve these levels earlier should strive to lower them further.

**8.17** All Governments should assess the underlying causes of high child mortality and should, within the framework of primary health care, extend integrated reproductive health-care and child-health services, [including safe motherhood,<sup>21</sup> child-survival programmes and family-planning services, to all the population and particularly to the most vulnerable and underserved groups. Such services should include prenatal care and counselling, with special emphasis on high-risk pregnancies and the prevention of sexually transmitted diseases and HIV infection; adequate delivery assistance; and neonatal care, including exclusive breast-feeding, information on optimal breast-feeding and on proper weaning practices, and the provision of micronutrient supplementation and tetanus toxoid, where appropriate. Interventions to reduce

the incidence of low birth weight and other nutritional deficiencies, such as anaemia, should include the promotion of maternal nutrition through information, education and counselling and the promotion of longer intervals between births. All countries should give priority to efforts to reduce the major childhood diseases, particularly infectious and parasitic diseases, and to prevent malnutrition among children, especially the girl child, through measures aimed at eradicating poverty and ensuring that all children live in a sanitary environment and by disseminating information on hygiene and nutrition. It is also important to provide parents with information and education about child care, including the use of mental and physical stimulation.

**8.18** For infants and children to receive the best nutrition and for specific protection against a range of diseases, breast-feeding should be protected, promoted and supported. By means of legal, economic, practical and emotional support, mothers should be enabled to breast-feed their infants exclusively for four to six months without food or drink supplementation and to continue breast-feeding infants with appropriate and adequate complementary food up to the age of two years or beyond. To achieve these goals, Governments should promote public information on the benefits of breast-feeding; health personnel should receive training on the management of breast-feeding; and countries should examine ways and means to implement fully the WHO International Code of Marketing of Breast Milk Substitutes.

## **C. Women's health and safe motherhood**

### **Basis for action**

**8.19** Complications related to pregnancy and childbirth are among the leading causes of mortality for women of reproductive age in many parts of the developing world. At the global level, it has been estimated that about half a million women die each year of pregnancy-related causes, 99 per cent of them in developing countries. The gap in maternal mortality between developed and

developing regions is wide: in 1988, it ranged from more than 700 per 100,000 live births in the least developed countries to about 26 per 100,000 live births in the developed regions. Rates of 1,000 or more maternal deaths per 100,000 live births have been reported in several rural areas of Africa, giving women with many pregnancies a high lifetime risk of death during their reproductive years. According to the World Health Organization, the lifetime risk of dying from pregnancy or childbirth-related causes is 1 in 20 in some developing countries, compared to 1 in 10,000 in some developed countries. The age at which women begin or stop child-bearing, the interval between each birth, the total number of lifetime pregnancies and the socio-cultural and economic circumstances in which women live all influence maternal morbidity and mortality. At present, approximately 90 per cent of the countries of the world, representing 96 per cent of the world population, have policies that permit abortion under varying legal conditions to save the life of a woman. However, a significant proportion of the abortions carried out are self-induced or otherwise unsafe, leading to a large fraction of maternal deaths or to permanent injury to the women involved. Maternal deaths have very serious consequences within the family, given the crucial role of the mother for her children's health and welfare. The death of the mother increases the risk to the survival of her young children, especially if the family is not able to provide a substitute for the maternal role. Greater attention to the reproductive health needs of female adolescents and young women could prevent the major share of maternal morbidity and mortality through prevention of unwanted pregnancies and any subsequent poorly managed abortion. Safe motherhood has been accepted in many countries as a strategy to reduce maternal morbidity and mortality.

## **Objectives**

**8.20** The objectives are:

(a) To promote women's health and safe motherhood; to achieve a rapid and substantial reduction in maternal morbidity and mortality and reduce the differences observed between

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developing and developed countries and within countries. On the basis of a commitment to women's health and well-being, to reduce greatly the number of deaths and morbidity from unsafe abortion<sup>20</sup>

(b) To improve the health and nutritional status of women, especially of pregnant and nursing women.

### Actions

**8.21** Countries should strive to effect significant reductions in maternal mortality by the year 2015: a reduction in maternal mortality by one half of the 1990 levels by the year 2000 and a further one half by 2015. The realization of these goals will have different implications for countries with different 1990 levels of maternal mortality. Countries with intermediate levels of mortality should aim to achieve by the year 2005 a maternal mortality rate below 100 per 100,000 live births and by the year 2015 a maternal mortality rate below 60 per 100,000 live births. Countries with the highest levels of mortality should aim to achieve by 2005 a maternal mortality rate below 125 per 100,000 live births and by 2015 a maternal mortality rate below 75 per 100,000 live births. However, all countries should reduce maternal morbidity and mortality to levels where they no longer constitute a public health problem. Disparities in maternal mortality within countries and between geographical regions, socio-economic and ethnic groups should be narrowed.

**8.22** All countries, with the support of all sections of the international community, must expand the provision of maternal health services in the context of primary health care. These services, based on the concept of informed choice, should include education on safe motherhood, prenatal care that is focused and effective, maternal nutrition programmes, adequate delivery assistance that avoids excessive recourse to caesarean sections and provides for obstetric emergencies; referral services for pregnancy, childbirth and abortion complications; post-natal care and family planning. All births should be assisted by trained

persons, preferably nurses and midwives, but at least by trained birth attendants. The underlying causes of maternal morbidity and mortality should be identified, and attention should be given to the development of strategies to overcome them and for adequate evaluation and monitoring mechanisms to assess the progress being made in reducing maternal mortality and morbidity and to enhance the effectiveness of ongoing programmes. Programmes and education to engage men's support for maternal health and safe motherhood should be developed.

**8.23** All countries, especially developing countries, with the support of the international community, should aim at further reductions in maternal mortality through measures to prevent, detect and manage high-risk pregnancies and births, particularly those to adolescents and late-parity women.

**8.24** All countries should design and implement special programmes to address the nutritional needs of women of child-bearing age, especially those who are pregnant or breast-feeding, and should give particular attention to the prevention and management of nutritional anaemia and iodine-deficiency disorders. Priority should be accorded to improving the nutritional and health status of young women through education and training as part of maternal health and safe motherhood programmes. Adolescent females and males should be provided with information, education and counselling to help them delay early family formation, premature sexual activity and first pregnancy.

**8.25** In no case should abortion be promoted as a method of family planning. All Governments and relevant intergovernmental and non-governmental organizations are urged to strengthen their commitment to women's health, to deal with the health impact of unsafe abortion<sup>20</sup> as a major public health concern and to reduce the recourse to abortion through expanded and improved family-planning services. Prevention of unwanted pregnancies must always be given the highest priority and every attempt should be made to eliminate the need for abortion. Women who

have unwanted pregnancies should have ready access to reliable information and compassionate counselling. Any measures or changes related to abortion within the health system can only be determined at the national or local level according to the national legislative process. In circumstances where abortion is not against the law, such abortion should be safe. In all cases, women should have access to quality services for the management of complications arising from abortion. Post-abortion counselling, education and family-planning services should be offered promptly, which will also help to avoid repeat abortions.

**8.26** Programmes to reduce maternal morbidity and mortality should include information and reproductive health services, including family-planning services. In order to reduce high-risk pregnancies, maternal health and safe motherhood programmes should include counselling and family-planning information.

**8.27** All countries, as a matter of some urgency, need to seek changes in high-risk sexual behaviour and devise strategies to ensure that men share responsibility for sexual and reproductive health, including family planning, and for preventing and controlling sexually transmitted diseases, HIV infection and AIDS.

## **D. Human immunodeficiency virus (HIV) infection and acquired immunodeficiency syndrome (AIDS)**

### **Basis for action**

**8.28** The AIDS pandemic is a major concern in both developed and developing countries. WHO estimates that the cumulative number of AIDS cases in the world amounted to 2.5 million persons by mid-1993 and that more than 14 million people had been infected with HIV since the pandemic began, a number that is projected to rise to between 30 million and 40 million by the end of the decade if effective prevention strategies are not pursued. As of mid-1993, about four fifths of all persons ever infected with



HIV lived in developing countries where the infection was being transmitted mainly through heterosexual intercourse and the number of new cases was rising most rapidly among women. As a consequence, a growing number of children are becoming orphans, themselves at high risk of illness and death. In many countries, the pandemic is now spreading from urban to rural areas and between rural areas and is affecting economic and agricultural production.

## Objectives

**8.29** The objectives are:

(a) To prevent, reduce the spread of and minimize the impact of HIV infection; to increase awareness of the disastrous consequences of HIV infection and AIDS and associated fatal diseases, at the individual, community and national levels, and of the ways of preventing it; to address the social, economic, gender and racial inequities that increase vulnerability to the disease;

(b) To ensure that HIV-infected individuals have adequate medical care and are not discriminated against; to provide counselling and other support for people infected with HIV and to alleviate the suffering of people living with AIDS and that of their family members, especially orphans; to ensure that the individual rights and the confidentiality of persons infected with HIV are respected; to ensure that sexual and reproductive health programmes address HIV infection and AIDS;

(c) To intensify research on methods to control the HIV/AIDS pandemic and to find an effective treatment for the disease.

## Actions

**8.30** Governments should assess the demographic and development impact of HIV infection and AIDS. The AIDS pandemic should be controlled through a multisectoral approach that pays sufficient attention to its socio-economic ramifications, including the heavy burden on health infrastructure and household income, its negative impact on the labour force and productivity, and the increasing number of orphaned children. Multisectoral national plans and strategies to deal with AIDS should be integrated into

population and development strategies. The socio-economic factors underlying the spread of HIV infection should be investigated, and programmes to address the problems faced by those left orphaned by the AIDS pandemic should be developed.

**8.31** Programmes to reduce the spread of HIV infection should give high priority to information, education and communication campaigns to raise awareness and emphasize behavioural change. Sex education and information should be provided to both those infected and those not infected, and especially to adolescents. Health providers, including family-planning providers, need training in counselling on sexually transmitted diseases and HIV infection, including the assessment and identification of high-risk behaviours needing special attention and services; training in the promotion of safe and responsible sexual behaviour, including voluntary abstinence, and condom use; training in the avoidance of contaminated equipment and blood products; and in the avoidance of sharing needles among injecting drug users. Governments should develop guidelines and counselling services on AIDS and sexually transmitted diseases within the primary health-care services. Wherever possible, reproductive health programmes, including family-planning programmes, should include facilities for the diagnosis and treatment of common sexually transmitted diseases, including reproductive tract infection, recognizing that many sexually transmitted diseases increase the risk of HIV transmission. The links between the prevention of HIV infection and the prevention and treatment of tuberculosis should be assured.

**8.32** Governments should mobilize all segments of society to control the AIDS pandemic, including non-governmental organizations, community organizations, religious leaders, the private sector, the media, schools and health facilities. Mobilization at the family and community levels should be given priority. Communities need to develop strategies that respond to local perceptions of the priority accorded to health issues associated with the spread of HIV and sexually transmitted diseases.

**8.33** The international community should mobilize the human and financial resources required to reduce the rate of transmission of HIV infection. To that end, research on a broad range of approaches to prevent HIV transmission and to seek a cure for the disease should be promoted and supported by all countries. In particular, donor and research communities should support and strengthen current efforts to find a vaccine and to develop women-controlled methods, such as vaginal microbicides, to prevent HIV infection. Increased support is also needed for the treatment and care of HIV-infected persons and AIDS patients. The coordination of activities to combat the AIDS pandemic must be enhanced. Particular attention should be given to activities of the United Nations system at the national level, where measures such as joint programmes can improve coordination and ensure a more efficient use of scarce resources. The international community should also mobilize its efforts in monitoring and evaluating the results of various efforts to search for new strategies.

**8.34** Governments should develop policies and guidelines to protect the individual rights of and eliminate discrimination against persons infected with HIV and their families. Services to detect HIV infection should be strengthened, making sure that they ensure confidentiality. Special programmes should be devised to provide care and the necessary emotional support to men and women affected by AIDS and to counsel their families and near relations.

**8.35** Responsible sexual behaviour, including voluntary sexual abstinence, for the prevention of HIV infection should be promoted and included in education and information programmes. Condoms and drugs for the prevention and treatment of sexually transmitted diseases should be made widely available and affordable and should be included in all essential drug lists. Effective action should be taken to further control the quality of blood products and equipment decontamination.

## IX

Population  
Distribution,  
Urbanization  
and Internal  
Migration

## A. Population distribution and sustainable development

### Basis for action

**9.1** In the early 1990s, approximately half of the Governments in the world, mostly those of developing countries, considered the patterns of population distribution in their territories to be unsatisfactory and wished to modify them. A key issue was the rapid growth of urban areas, which are expected to house more than half of the world population by 2005. Consequently, attention has mostly been paid to rural-urban migration, although rural-rural and urban-urban migration are in fact the dominant forms of spatial mobility in many countries. The process of urbanization is an intrinsic dimension of economic and social development and, in consequence, both developed and developing countries are going through the process of shifting from predominantly rural to predominantly urban societies. For individuals, migration is often a rational and dynamic effort to seek new opportunities in life. Cities are centres of economic growth, providing the impetus for socio-economic innovation and change. However, migration is also prompted by push factors, such as inequitable allocation of development resources, adoption of inappropriate technologies and lack of access to available land. The alarming consequences of urbanization visible in many countries are related to its rapid pace, to which Governments have been unable to respond with their current management capacities and practices. Even in developing countries, however, there are already signs of a changing pattern of population distribution, in the sense that the trend towards concentration in a few large cities is giving way to a more widespread distribution in medium-sized urban centres. This movement is also found in some developed countries, with people indicating preference for living in smaller places. Effective population distribution policies are those that, while respecting the right of individuals to

live and work in the community of their choice, take into account the effects of development strategies on population distribution. Urbanization has profound implications for the livelihood, way of life and values of individuals. At the same time, migration has economic, social and environmental implications – both positive and negative – for the places of origin and destination.

## **Objectives**

**9.2** The objectives are:

(a) To foster a more balanced spatial distribution of the population by promoting in an integrated manner the equitable and ecologically sustainable development of major sending and receiving areas, with particular emphasis on the promotion of economic, social and gender equity based on respect for human rights, especially the right to development;

(b) To reduce the role of the various push factors as they relate to migration flows.

## **Actions**

**9.3** Governments formulating population distribution policies should ensure that the objectives and goals of those policies are consistent with other development goals, policies and basic human rights. Governments, assisted by interested local, regional and intergovernmental agencies, should assess on a regular basis how the consequences of their economic and environmental policies, sectoral priorities, infrastructure investment and balance of resources among regional, central, provincial and local authorities influence population distribution and internal migration, both permanent and temporary.

**9.4** In order to achieve a balanced spatial distribution of production employment and population, countries should adopt sustainable regional development strategies and strategies for

the encouragement of urban consolidation, the growth of small or medium-sized urban centres and the sustainable development of rural areas, including the adoption of labour-intensive projects, training for non-farming jobs for youth and effective transport and communication systems. To create an enabling context for local development, including the provision of services, Governments should consider decentralizing their administrative systems. This also involves giving responsibility for expenditure and the right to raise revenue to regional, district and local authorities. While vast improvements to the urban infrastructure and environmental strategies are essential in many developing countries to provide a healthy environment for urban residents, similar activities should also be pursued in rural areas.

**9.5** To reduce urban bias and isolated rural development, Governments should examine the feasibility of providing incentives to encourage the redistribution and relocation of industries and businesses from urban to rural areas and to encourage the establishment of new businesses, industrial units and income-generating projects in rural areas.

**9.6** Governments wishing to create alternatives to out-migration from rural areas should establish the preconditions for development in rural areas, actively support access to ownership or use of land and access to water resources, especially for family units, make and encourage investments to enhance rural productivity, improve rural infrastructure and social services and facilitate the establishment of credit, production and marketing cooperatives and other grass-roots organizations that give people greater control over resources and improve their livelihoods. Particular attention is needed to ensure that these opportunities are also made available to migrants' families remaining in the areas of origin.

**9.7** Governments should pursue development strategies offering tangible benefits to investors in rural areas and to rural producers.

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Governments should also seek to reduce restrictions on international trade in agricultural products.

**9.8** Governments should strengthen their capacities to respond to the pressures caused by rapid urbanization by revising and reorienting the agencies and mechanisms for urban management as necessary and ensuring the wide participation of all population groups in planning and decision-making on local development. Particular attention should be paid to land management in order to ensure economical land use, protect fragile ecosystems and facilitate the access of the poor to land in both urban and rural areas.

**9.9** Countries are urged to recognize that the lands of indigenous people and their communities should be protected from activities that are environmentally unsound or that the indigenous people concerned consider to be socially and culturally inappropriate. The term 'lands' is understood to include the environment of the areas which the people concerned traditionally occupy.

**9.10** Countries should increase information and training on conservation practices and foster the creation of sustainable off-farm rural employment opportunities in order to limit the further expansion of human settlements to areas with fragile ecosystems.

**9.11** Population distribution policies should be consistent with such international instruments, when applicable, as the Geneva Convention relative to the Protection of Civilian Persons in Time of War (1949), including article 49.



## B. Population growth in large urban agglomerations

### Basis for action

**9.12** In many countries, the urban system is characterized by the overwhelming preponderance of a single major city or agglomeration. The tendency towards population concentration, fostered by the concentration of public and private resources in some cities, has also contributed to the rising number and size of mega-cities. In 1992, there were 13 cities with at least 10 million inhabitants and their number is expected to double by 2010, when most mega-cities will be located in the developing countries. The continued concentration of population in primate cities, and in mega-cities in particular, poses specific economic, social and environmental challenges for Governments. Yet large agglomerations also represent the most dynamic centres of economic and cultural activity in many countries. It is therefore essential that the specific problems of large cities be analysed and addressed, in full awareness of the positive contribution that large cities make to national economic and social development. The challenges faced by cities are often exacerbated by weak management capacities at the local level to address the consequences of population concentration, socio-economic development, environmental impacts and their interrelations.

### Objective

**9.13** The objective is to enhance the management of urban agglomerations through more participatory and resource-conscious planning and management, review and revise the policies and mechanisms that contribute to the excessive concentration of population in large cities, and improve the security and quality of life of both rural and urban low-income residents.

## **Actions**

**9.14** Governments should increase the capacity and competence of city and municipal authorities to manage urban development, to safeguard the environment, to respond to the need of all citizens, including urban squatters, for personal safety, basic infrastructure and services, to eliminate health and social problems, including problems of drugs and criminality, and problems resulting from overcrowding and disasters, and to provide people with alternatives to living in areas prone to natural and man-made disasters.

**9.15** In order to improve the plight of the urban poor, many of whom work in the informal sector of the economy, Governments are urged to promote the integration of migrants from rural areas into urban areas and to develop and improve their income-earning capability by facilitating their access to employment, credit, production, marketing opportunities, basic education, health services, vocational training and transportation, with special attention to the situation of women workers and women heads of households. Child-care centres and special protection and rehabilitation programmes for street children should be established.

**9.16** To finance the needed infrastructure and services in a balanced manner, taking into account the interests of the poor segments of society, local and national government agencies should consider introducing equitable cost-recovery schemes and increasing revenues by appropriate measures.

**9.17** Governments should strengthen the capacity for land management, including urban planning, at all levels in order to take into account demographic trends and encourage the search for innovative approaches to address the challenges facing cities, with special attention to the pressures and needs resulting from the growth of their populations.

**9.18** Governments should promote the development and implementation of effective environmental management strategies for urban agglomerations, giving special attention to water, waste and air management, as well as to environmentally sound energy and transport systems.

## C. Internally displaced persons

### Basis for action

**9.19** During the past decade, awareness of the situation of persons who are forced to leave their places of usual residence for a variety of reasons has been rising. Because there is no single definition of internally displaced persons, estimates of their number vary, as do the causes of their migration. However, it is generally accepted that these causes range from environmental degradation to natural disasters and internal conflicts that destroy human settlements and force people to flee from one area of the country to another. Indigenous people, in particular, are in many cases subject to displacement. Given the forced nature of their movement, internally displaced persons often find themselves in particularly vulnerable situations, especially women, who may be subjected to rape and sexual assault in situations of armed conflict. Internal displacement is often a precursor of outflows of refugees and externally displaced persons. Returning refugees may also be internally displaced.

## Objectives

**9.20** The objectives are:

(a) To offer adequate protection and assistance to persons displaced within their country, particularly women, children and the elderly, who are the most vulnerable, and to find solutions to the root causes of their displacement in view of preventing it and, when appropriate, to facilitate return or resettlement;

(b) To put an end to all forms of forced migration, including 'ethnic cleansing'.

## Actions

**9.21** Countries should address the causes of internal displacement, including environmental degradation, natural disasters, armed conflict and forced resettlement, and establish the necessary mechanisms to protect and assist displaced persons, including, where possible, compensation for damages, especially those who are not able to return to their normal place of residence in the short term. Adequate capacities for disaster preparedness should be developed. The United Nations, through dialogue with Governments and all intergovernmental and non-governmental organizations, is encouraged to continue to review the need for protection and assistance to internally displaced persons, the root causes of internal displacement, prevention and long-term solutions, taking into account specific situations.

**9.22** Measures should be taken to ensure that internally displaced persons receive basic education, employment opportunities, vocational training and basic health-care services, including reproductive health services and family planning.

**9.23** In order to reverse declining environmental quality and minimize conflict over access to grazing land, the modernization of the pastoralist economic system should be pursued, with assistance provided as necessary through bilateral and multilateral arrangements.

**9.24** Governments, international organizations and non-governmental organizations are encouraged to strengthen development assistance for internally displaced persons so that they can return to their places of origin.

**9.25** Measures should be taken, at the national level with international cooperation, as appropriate, in accordance with the Charter of the United Nations, to find lasting solutions to questions related to internally displaced persons, including their right to voluntary and safe return to their home of origin.



# International Migration

## A. International migration and development

### Basis for action

**10.1** International economic, political and cultural interrelations play an important role in the flow of people between countries, whether they are developing, developed or with economies in transition. In its diverse types, international migration is linked to such interrelations and both affects and is affected by the development process. International economic imbalances, poverty and environmental degradation, combined with the absence of peace and security, human rights violations and the varying degrees of development of judicial and democratic institutions are all factors affecting international migration. Although most international migration flows occur between neighbouring countries, interregional migration, particularly that directed to developed countries, has been growing. It is estimated that the number of international migrants in the world, including refugees, is in excess of 125 million, about half of them in the developing countries. In recent years, the main receiving countries in the developed world registered a net migration intake of approximately 1.4 million persons annually, about two thirds of whom originated in developing countries. Orderly international migration can have positive impacts on both the communities of origin and the communities of destination, providing the former with remittances and the latter with needed human resources. International migration also has the potential of facilitating the transfer of skills and contributing to cultural enrichment. However, international migration entails the loss of human resources for many countries of origin and may give rise to political, economic or social tensions in countries of destination. To be effective, international migration policies need to take into account the economic constraints of the receiving country, the impact of migration on the host society and its effects on

countries of origin. The long-term manageability of international migration hinges on making the option to remain in one's country a viable one for all people. Sustainable economic growth with equity and development strategies consistent with this aim are a necessary means to that end. In addition, more effective use can be made of the potential contribution that expatriate nationals can make to the economic development of their countries of origin.

## **Objectives**

**10.2** The objectives are:

- (a) To address the root causes of migration, especially those related to poverty;
- (b) To encourage more cooperation and dialogue between countries of origin and countries of destination in order to maximize the benefits of migration to those concerned and increase the likelihood that migration has positive consequences for the development of both sending and receiving countries;
- (c) To facilitate the reintegration process of returning migrants.

## **Actions**

**10.3** Governments of countries of origin and of countries of destination should seek to make the option of remaining in one's country viable for all people. To that end, efforts to achieve sustainable economic and social development, ensuring a better economic balance between developed and developing countries and countries with economies in transition, should be strengthened. It is also necessary to increase efforts to defuse international and internal conflicts before they escalate; to ensure that the rights of persons belonging to ethnic, religious or linguistic minorities, and indigenous people are respected; and to respect the rule of law, promote good governance, strengthen democracy and promote human rights. Furthermore, greater support should be provided for the attainment of national and household food security, for education, nutrition, health and population-related programmes and to ensure



effective environmental protection. Such efforts may require national and international financial assistance, reassessment of commercial and tariff relations, increased access to world markets and stepped-up efforts on the part of developing countries and countries with economies in transition to create a domestic framework for sustainable economic growth with an emphasis on job creation. The economic situation in those countries is likely to improve only gradually and, therefore, migration flows from those countries are likely to decline only in the long term; in the interim, the acute problems currently observed will cause migration flows to continue for the short-to-medium term, and Governments are accordingly urged to adopt transparent international migration policies and programmes to manage those flows.

**10.4** Governments of countries of origin wishing to foster the inflow of remittances and their productive use for development should adopt sound exchange rate, monetary and economic policies, facilitate the provision of banking facilities that enable the safe and timely transfer of migrants' funds, and promote the conditions necessary to increase domestic savings and channel them into productive investment.

**10.5** Governments of countries of destination are invited to consider the use of certain forms of temporary migration, such as short-term and project-related migration, as a means of improving the skills of nationals of countries of origin, especially developing countries and countries with economies in transition. To that end, they should consider, as appropriate, entering into bilateral or multilateral agreements. Appropriate steps should be taken to safeguard the wages and working conditions of both migrant and native workers in the affected sectors. Governments of countries of origin are urged to facilitate the return of migrants and their reintegration into their home communities, and to devise ways of using their skills. Governments of countries of origin should consider collaborating with countries of destination and engaging the

support of appropriate international organizations in promoting the return on a voluntary basis of qualified migrants who can play a crucial role in the transfer of knowledge, skills and technology. Countries of destination are encouraged to facilitate return migration by adopting flexible policies, such as the transferability of pensions and other work benefits.

**10.6** Governments of countries affected by international migration are invited to cooperate, with a view to integrating the issue into their political and economic agendas and engaging in technical cooperation to aid developing countries and countries with economies in transition in addressing the impact of international migration. Governments are urged to exchange information regarding their international migration policies and the regulations governing the admission and stay of migrants in their territories. States that have not already done so are invited to consider ratifying the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families.

**10.7** Governments are encouraged to consider requests for migration from countries whose existence, according to available scientific evidence, is imminently threatened by global warming and climate change.

**10.8** In cooperation with international and non-governmental organizations and research institutions, Governments should support the gathering of data on flows and stocks of international migrants and on factors causing migration, as well as the monitoring of international migration. The identification of strategies to ensure that migration contributes to development and international relations should also be supported. The role of international organizations with mandates in the area of migration should be strengthened so that they can deliver adequate technical support to developing countries, advise in the management of international migration flows and promote intergovernmental cooperation through, inter alia, bilateral and multilateral negotiations, as appropriate.

## B. Documented migrants

### Basis for action

**10.9** Documented migrants are those who satisfy all the legal requirements to enter, stay and, if applicable, hold employment in the country of destination. In some countries, many documented migrants have, over time, acquired the right to long-term residence. In such cases, the integration of documented migrants into the host society is generally desirable, and for that purpose it is important to extend to them the same social, economic and legal rights as those enjoyed by citizens, in accordance with national legislation. The family reunification of documented migrants is an important factor in international migration. It is also important to protect documented migrants and their families from racism, ethnocentrism and xenophobia, and to respect their physical integrity, dignity, religious beliefs and cultural values. Documented migration is generally beneficial to the host country, since migrants are in general concentrated in the most productive ages and have skills needed by the receiving country, and their admission is congruent with the policies of the Government. The remittances of documented migrants to their countries of origin often constitute a very important source of foreign exchange and are instrumental in improving the well-being of relatives left behind.

### Objectives

**10.10** The objectives are:

- (a) To ensure the social and economic integration of documented migrants, especially of those who have acquired the right to long-term residence in the country of destination, and their equal treatment before the law;
- (b) To eliminate discriminatory practices against documented migrants, especially women, children and the elderly;

(c) To ensure protection against racism, ethnocentrism and xenophobia;

(d) To promote the welfare of documented migrants and members of their families;

(e) To ensure the respect of the cultural and religious values, beliefs and practices of documented migrants, in so far as they accord with national legislation and universally recognized human rights;

(f) To take into account the special needs and circumstances of temporary migrants.

## **Actions**

**10.11** Governments of receiving countries are urged to consider extending to documented migrants who meet appropriate length-of-stay requirements, and to members of their families whose stay in the receiving country is regular, treatment equal to that accorded their own nationals with regard to the enjoyment of basic human rights, including equality of opportunity and treatment in respect of religious practices, working conditions, social security, participation in trade unions, access to health, education, cultural and other social services, as well as equal access to the judicial system and equal treatment before the law. Governments of receiving countries are further urged to take appropriate steps to avoid all forms of discrimination against migrants, including eliminating discriminatory practices concerning their nationality and the nationality of their children, and to protect their rights and safety. Women and children who migrate as family members should be protected from abuse or denial of their human rights by their sponsors, and Governments are asked to consider extending their stay should the family relationship dissolve, within the limits of national legislation.

**10.12** In order to promote the integration of documented migrants having the right to long-term residence, Governments of receiving countries are urged to consider giving them civil and political

rights and responsibilities, as appropriate, and facilitating their naturalization. Special efforts should be made to enhance the integration of the children of long-term migrants by providing them with educational and training opportunities equal to those of nationals, allowing them to exercise an economic activity, and facilitating the naturalization of those who have been raised in the receiving country. Consistent with article 10 of the Convention on the Rights of the Child and all other relevant universally recognized human rights instruments, all Governments, particularly those of receiving countries, must recognize the vital importance of family reunification and promote its integration into their national legislation in order to ensure the protection of the unity of the families of documented migrants. Governments of receiving countries must ensure the protection of migrants and their families, giving priority to programmes and strategies that combat religious intolerance, racism, ethnocentrism, xenophobia and gender discrimination and that generate the necessary public sensitivity in that regard.

**10.13** Governments of countries of destination should respect the basic human rights of documented migrants as those Governments assert their right to regulate access to their territory and adopt policies that respond to and shape immigration flows. With regard to the admission of migrants, Governments should avoid discriminating on the basis of race, religion, sex and disability, while taking into account health and other considerations relevant under national immigration regulations, particularly considering the special needs of the elderly and children. Governments are urged to promote, through family reunion, the normalization of the family life of legal migrants who have the right to long-term residence.

**10.14** Governments should consider providing assistance and cooperation for programmes that would address the adverse social and economic consequences of forced migration.

## C. Undocumented migrants

### Basis for action

**10.15** It is the right of every nation State to decide who can enter and stay in its territory and under what conditions. Such right, however, should be exercised taking care to avoid racist or xenophobic actions and policies. Undocumented or irregular migrants are persons who do not fulfil the requirements established by the country of destination to enter, stay or exercise an economic activity. Given that the pressures for migration are growing in a number of developing countries, especially since their labour force continues to increase, undocumented or irregular migration is expected to rise.

### Objectives

**10.16** The objectives are:

- (a) To address the root causes of undocumented migration;
- (b) To reduce substantially the number of undocumented migrants, while ensuring that those in need of international protection receive it; to prevent the exploitation of undocumented migrants and to ensure that their basic human rights are protected;
- (c) To prevent all international trafficking in migrants, especially for the purposes of prostitution;
- (d) To ensure protection against racism, ethnocentrism and xenophobia.

### Actions

**10.17** Governments of countries of origin and countries of destination are urged to cooperate in reducing the causes of undocumented migration, safeguarding the basic human rights of

undocumented migrants including the right to seek and to enjoy in other countries asylum from persecution, and preventing their exploitation. Governments should identify the causes of undocumented migration and its economic, social and demographic impact as well as its implications for the formulation of social, economic and international migration policies.

**10.18** Governments of both receiving countries and countries of origin should adopt effective sanctions against those who organize undocumented migration, exploit undocumented migrants or engage in trafficking in undocumented migrants, especially those who engage in any form of international traffic in women, youth and children. Governments of countries of origin, where the activities of agents or other intermediaries in the migration process are legal, should regulate such activities in order to prevent abuses, especially exploitation, prostitution and coercive adoption.

**10.19** Governments, with the assistance of appropriate international organizations, should deter undocumented migration by making potential migrants aware of the legal conditions for entry, stay and employment in host countries through information activities in the countries of origin.

**10.20** Governments of countries of origin of undocumented migrants and persons whose asylum claims have been rejected have the responsibility to accept the return and reintegration of those persons, and should not penalize such persons on their return. In addition, Governments of countries of origin and countries of destination should try to find satisfactory solutions to the problems caused by undocumented migration through bilateral or multilateral negotiations on, inter alia, readmission agreements that protect the basic human rights of the persons involved in accordance with relevant international instruments.

## D. Refugees, asylum-seekers and displaced persons

### Basis for action

**10.21** In less than 10 years, from 1985 to 1993, the number of refugees has more than doubled, from 8.5 million to 19 million. This has been caused by multiple and complex factors, including massive violations of human rights. Most of those refugees find asylum in developing countries, often imposing great burdens on those States. The institution of asylum is under severe strain in industrialized countries for a variety of reasons, including the growing numbers of refugees and asylum-seekers and the misuse of asylum procedures by migrants attempting to circumvent immigration restrictions. While two thirds of all countries in the world have ratified the 1951 Convention relating to the Status of Refugees or the 1967 Protocol, which establish standards for the protection of refugees, there is a need to strengthen the support for international protection of and assistance to refugees, especially refugee women and refugee children, who are particularly vulnerable. Displaced persons, who do not qualify for refugee status and are in some cases outside their country, are also vulnerable and need international assistance. Regional agreements to provide protection to persons fleeing war should be considered.

### Objectives

**10.22** The objectives are:

- (a) To reduce pressures leading to refugee movements and displacement by combating their root causes at all levels and undertaking related preventive action;



(b) To find and implement durable solutions to the plight of refugees and displaced persons;

(c) To ensure effective protection of and assistance to refugee populations, with particular attention to the needs and physical security of refugee women and refugee children;

(d) To prevent the erosion of the institution of asylum;

(e) To provide adequate health, education and social services for refugees and displaced persons;

(f) To integrate refugee and returnee assistance and rehabilitation programmes into development planning, with due attention to gender equity.

## **Actions**

**10.23** Governments are urged to address the root causes of movements of refugees and displaced persons by taking appropriate measures, particularly with respect to conflict resolution; the promotion of peace and reconciliation; respect for human rights, including those of persons belonging to minorities; respect for independence, territorial integrity and sovereignty of States. Moreover, factors that contribute to forced displacements need to be addressed through initiatives related to the alleviation of poverty, democratization, good governance and the prevention of environmental degradation. Governments and all other entities should respect and safeguard the right of people to remain in safety in their homes and should refrain from policies or practices that force people to flee.

**10.24** Governments are urged to strengthen their support for international protection and assistance activities on behalf of refugees and, as appropriate, displaced persons and to promote the search for durable solutions to their plight. In doing so, Governments are encouraged to enhance regional and international mechanisms that promote appropriate shared responsibility for the protection and

assistance needs of refugees. All necessary measures should be taken to ensure the physical protection of refugees - in particular, that of refugee women and refugee children - especially against exploitation, abuse and all forms of violence.

**10.25** Adequate international support should be extended to countries of asylum to meet the basic needs of refugees and to assist in the search for durable solutions. Refugee populations should be assisted in achieving self-sufficiency. Refugees, particularly refugee women, should be involved in the planning of refugee assistance activities and in their implementation. In planning and implementing refugee assistance activities, special attention should be given to the specific needs of refugee women and refugee children. Refugees should be provided with access to adequate accommodation, education, health services, including family planning, and other necessary social services. Refugees are invited to respect the laws and regulations of their countries of asylum.

**10.26** Governments should create conditions that would allow for the voluntary repatriation of refugees in safety and dignity. Rehabilitation assistance to repatriating refugees should, where possible, be linked to long-term reconstruction and development plans. The international community should provide assistance for refugee repatriation and rehabilitation programmes and for the removal of land mines and other unexploded devices that constitute a serious threat to the safety of returnees and the local population.

**10.27** Governments are urged to abide by international law concerning refugees. States that have not already done so are invited to consider acceding to the international instruments concerning refugees - in particular, the 1951 Convention and the 1967 Protocol relating to the Status of Refugees. Governments are furthermore

urged to respect the principle of non-refoulement (i.e., the principle of no forcible return of persons to places where their lives or freedom would be threatened because of race, religion, nationality, membership in a particular social group, or political opinion). Governments should ensure that asylum-seekers in the Government's territory have access to a fair hearing and should facilitate the expeditious processing of asylum requests, ensuring that guidelines and procedures for the determination of refugee status are sensitive to the particular situation of women.

**10.28** In cases of sudden and massive arrivals of refugees and displaced persons in need of international protection, Governments of receiving countries should consider according to them at least temporary protection and treatment in accordance with internationally recognized standards and with national law, practices and regulations, until a solution to their plight can be found. Persons in need of protection should be encouraged to stay in safe areas and, to the extent possible and as appropriate, near their countries of origin. Governments should strengthen protection mechanisms and provide aid to assist the population in such areas. The principles of collective cooperation and international solidarity should be followed in assisting host countries, upon their request.

**10.29** The problems of refugees and displaced persons arising from forced migration, including their right to repatriation, should be settled in accordance with the relevant principles of the Charter of the United Nations, the Universal Declaration of Human Rights, other international instruments and relevant United Nations resolutions.

# XI

## Population, Development and Education\*

## A. Education, population and sustainable development

### Basis for action

**11.1** In the past 20 years, the world has experienced a rise in educational levels. Although the differences in educational attainment between males and females have shrunk, 75 per cent of illiterate persons in the world are women. Lack of basic education and low levels of literacy of adults continue to inhibit the development process in every area. The world community has a special responsibility to ensure that all children receive an education of improved quality and that they complete primary school. Education is an indispensable tool for the improvement of the quality of life. However, it is more difficult to meet educational needs when there is rapid population growth.

**11.2** Education is a key factor in sustainable development: it is at the same time a component of well-being and a factor in the development of well-being through its links with demographic as well as economic and social factors. Education is also a means to enable the individual to gain access to knowledge, which is a precondition for coping, by anyone wishing to do so, with today's complex world. The reduction of fertility, morbidity and mortality rates, the empowerment of women, the improvement in the quality of the working population and the promotion of genuine democracy are largely assisted by progress in education. The integration of migrants is also facilitated by universal access to education, which respects the religious and cultural backgrounds of migrants.

\* *The Holy See expressed a general reservation on this chapter. The reservation is to be interpreted in terms of the statement made by the representative of the Holy See at the 14th plenary meeting, on 13 September 1994.*

**11.3** The relationship between education and demographic and social changes is one of interdependence. There is a close and complex relationship among education, marriage age, fertility, mortality, mobility and activity. The increase in the education of women and girls contributes to greater empowerment of women, to a postponement of the age of marriage and to a reduction in the size of families. When mothers are better educated, their children's survival rate tends to increase. Broader access to education is also a factor in internal migration and the composition of the working population.

**11.4** The education and training of young people should prepare them for career development and professional life in order to cope with today's complex world. It is on the content of the educational curricula and the nature of the training received that the prospects of gainful employment opportunities depend. Inadequacies in and discrepancies between the educational system and the production system can lead to unemployment and underemployment, a devaluing of qualifications and, in some cases, the exodus of qualified people from rural to urban areas and to 'brain drain'. It is therefore essential to promote harmonious development of educational systems and economic and social systems conducive to sustainable development.

## **Objectives**

**11.5** The objectives are:

(a) To achieve universal access to quality education, with particular priority being given to primary and technical education and job training, to combat illiteracy and to eliminate gender disparities in access to, retention in, and support for, education;

(b) To promote non-formal education for young people, guaranteeing equal access for women and men to literacy centres;

(c) To introduce and improve the content of the curriculum so as to promote greater responsibility and awareness on the interrelationships between population and sustainable development; health issues, including reproductive health; and gender equity.

## **Actions**

**11.6** The eradication of illiteracy is one of the prerequisites for human development. All countries should consolidate the progress made in the 1990s towards providing universal access to primary education, as agreed upon at the World Conference on Education for All, held at Jomtien, Thailand, in 1990. All countries should further strive to ensure the complete access to primary school or an equivalent level of education by both girls and boys as quickly as possible, and in any case before the year 2015. Attention should also be given to the quality and type of education, including recognition of traditional values. Countries that have achieved the goal of universal primary education are urged to extend education and training to, and facilitate access to and completion of education at secondary school and higher levels.

**11.7** Investments in education and job training should be given high priority in development budgets at all levels, and should take into account the range and level of future workforce skill requirements.

**11.8** Countries should take affirmative steps to keep girls and adolescents in school by building more community schools, by training teachers to be more gender sensitive, by providing scholarships and other appropriate incentives and by sensitizing parents to the value of educating girls, with a view to closing the gender gap in primary and secondary school education by the year 2005. Countries should also supplement those efforts by making full use of non-formal education opportunities. Pregnant adolescents should be enabled to continue their schooling.

**11.9** To be most effective, education about population issues must begin in primary school and continue through all levels of formal and non-formal education, taking into account the rights and responsibilities of parents and the needs of children and adolescents. Where such programmes already exist, curricula should be reviewed, updated and broadened with a view to ensuring adequate coverage of such important concerns as gender sensitivity, reproductive choices and responsibilities, and sexually transmitted diseases, including HIV/AIDS. To ensure acceptance of population education programmes by the community, population education projects should emphasize consultation with parents and community leaders.

**11.10** Efforts in the training of population specialists at the university level should be strengthened and the incorporation of content relating to demographic variables and their interrelationships with development planning in the social and economic disciplines, as well as to health and the environment, should be encouraged.

## **B. Population information, education and communication**

### **Basis for action**

**11.11** Greater public knowledge, understanding and commitment at all levels, from the individual to the international, are vital to the achievement of the goals and objectives of the present Programme of Action. In all countries and among all groups, therefore, information, education and communication activities concerning population and sustainable development issues must be strengthened. This includes the establishment of gender- and culturally sensitive information, education and communication plans and strategies related to population and development. At the national level, more adequate and appropriate information



enables planners and policy makers to make more appropriate plans and decisions in relation to population and sustainable development. At the most basic level, more adequate and appropriate information is conducive to informed, responsible decision-making concerning health, sexual and reproductive behaviour, family life, and patterns of production and consumption. In addition, more and better information about the causes and benefits of migration can create a more positive environment for societies to address and respond to migration challenges.

**11.12** Effective information, education and communication are prerequisites for sustainable human development and pave the way for attitudinal and behavioural change. Indeed, this begins with the recognition that decisions must be made freely, responsibly and in an informed manner, on the number and spacing of children and in all other aspects of daily life, including sexual and reproductive behaviour. Greater public knowledge and commitment in a democratic setting create a climate conducive to responsible and informed decisions and behaviour. Most important, they also pave the way for democratic public discussion and thereby make possible strong political commitment and popular support for needed action at the local, national and international levels.

**11.13** Effective information, education and communication activities include a range of communication channels, from the most intimate levels of interpersonal communication to formal school curricula, from traditional folk arts to modern mass entertainment, and from seminars for local community leaders to coverage of global issues by the national and international news media. Multichannel approaches are usually more effective than any single communication channel. All these channels of communication have an important role to play in promoting an understanding of the interrelationships between population and sustainable development. Schools and religious institutions, taking into

account their values and teachings, may be important vehicles in all countries for instilling gender and racial sensitivity, respect, tolerance and equity, family responsibility and other important attitudes at all ages. Effective networks also exist in many countries for non-formal education on population and sustainable development issues through the workplace, health facilities, trade unions, community centres, youth groups, religious institutions, women's organizations and other non-governmental organizations. Such issues may also be included in more structured adult education, vocational training and literacy programmes, particularly for women. These networks are critical to reaching the entire population, especially men, adolescents and young couples. Parliamentarians, teachers, religious and other community leaders, traditional healers, health professionals, parents and older relatives are influential in forming public opinion and should be consulted during the preparation of information, education and communication activities. The media also offer many potentially powerful role models.

**11.14** Current information, education and communication technologies, such as global interlinked telephone, television and data transmission networks, compact discs and new multimedia technologies, can help bridge the geographical, social and economic gaps that currently exist in access to information around the world. They can help ensure that the vast majority of the world's people are involved in debates at the local, national and global levels about demographic changes and sustainable human development, economic and social inequities, the importance of empowering women, reproductive health and family planning, health promotion, ageing populations, rapid urbanization and migration. Greater public involvement of national authorities and the community ensure the widespread diffusion of such technologies and the freer flow of information within and between countries. It is essential that parliaments have full access to the information necessary for decision-making.

## Objectives

**11.15** The objectives are:

(a) To increase awareness, knowledge, understanding and commitment at all levels of society so that families, couples, individuals, opinion and community leaders, non-governmental organizations, policy makers, Governments and the international community appreciate the significance and relevance of population-related issues, and take the responsible actions necessary to address such issues within sustained economic growth in the context of sustainable development;

(b) To encourage attitudes in favour of responsible behaviour in population and development, especially in such areas such environment, family, sexuality, reproduction, gender and racial sensitivity;

(c) To ensure political commitment to population and development issues by national Governments in order to promote the participation of both public and private sectors at all levels in the design, implementation and monitoring of population and development policies and programmes;

(d) To enhance the ability of couples and individuals to exercise their basic right to decide freely and responsibly on the number and spacing of their children, and to have the information, education and means to do so.

## **Actions**

**11.16** Information, education and communication efforts should raise awareness through public education campaigns on such priority issues as: safe motherhood, reproductive health and rights, maternal and child health and family planning, discrimination against and valorization of the girl child and persons with disabilities; child abuse; violence against women; male responsibility; gender equality; sexually transmitted diseases, including HIV/AIDS; responsible sexual behaviour; teenage pregnancy; racism and xenophobia; ageing populations; and unsustainable consumption and production patterns. More education is needed in all societies on the implications of population-environment relationships, in order to influence behavioural change and consumer lifestyles and to promote sustainable management of natural resources. The media should be a major instrument for expanding knowledge and motivation.

**11.17** Elected representatives at all levels, the scientific community, religious, political, traditional and community leaders, non-governmental organizations, parents' associations, social workers, women's groups, the private sector, qualified communication specialists and others in influential positions should have access to information on population and sustainable development and related issues. They should promote understanding of the issues addressed in the present Programme of Action and mobilize public opinion in support of the actions proposed.

**11.18** Members of Parliament are invited to continue to promote wide awareness on issues related to population and sustainable development and to ensure the enactment of legislation necessary for effective implementation of the present Programme of Action.

**11.19** A coordinated strategic approach to information, education and communication should be adopted in order to maximize the impact of various information, education and communication activities, both modern and traditional, which may be undertaken on several fronts by various actors and with diverse audiences. It is especially important that information, education and communication strategies be linked to, and complement, national population and development policies and strategies and a full range of services in reproductive health, including family planning and sexual health, in order to enhance the use of those services and improve the quality of counselling and care.

**11.20** Information, education and communication activities should rely on up-to-date research findings to determine information needs and the most effective culturally acceptable ways of reaching intended audiences. To that end, professionals experienced in the traditional and non-traditional media should be enlisted. The participation of the intended audiences in the design, implementation and monitoring of information, education and communication activities should be ensured so as to enhance the relevance and impact of those activities.

**11.21** The interpersonal communication skills - in particular, motivational and counselling skills - of public, private and non-governmental organization service providers, community leaders, teachers, peer groups and others should be strengthened, whenever possible, to enhance interaction and quality assurance in the delivery of reproductive health, including family planning and sexual health services. Such communication should be free from coercion.

**11.22** The tremendous potential of print, audiovisual and electronic media, including databases and networks such as the United Nations Population Information Network (POPIN), should be harnessed to disseminate technical information and to promote and strengthen understanding of the relationships between population, consumption, production and sustainable development.

**11.23** Governments, non-governmental organizations and the private sector should make greater and more effective use of the entertainment media, including radio and television soap operas and drama, folk theatre and other traditional media to encourage public discussion of important but sometimes sensitive topics related to the implementation of the present Programme of Action. When the entertainment media - especially dramas - are used for advocacy purposes or to promote particular lifestyles, the public should be so informed, and in each case the identity of sponsors should be indicated in an appropriate manner.

**11.24** Age-appropriate education, especially for adolescents, about the issues considered in the present Programme of Action should begin in the home and community and continue through all levels and channels of formal and non-formal education, taking into account the rights and responsibilities of parents and the needs of adolescents. Where such education already exists, curricula and educational materials should be reviewed, updated and broadened with a view to ensuring adequate coverage of important population-related issues and to counteract myths and misconceptions about them. Where no such education exists, appropriate curricula and materials should be developed. To ensure acceptance, effectiveness and usefulness by the community, education projects should be based on the findings of socio-cultural studies and should involve the active participation of parents and families, women, youth, the elderly and community leaders.

**11.25** Governments should give priority to the training and retention of information, education and communication specialists, especially teachers, and of all others involved in the planning, implementation, monitoring and evaluation of information, education and communication programmes. It is necessary to train specialists who can contribute to the important conceptual and methodological development of education concerning population and related issues. Therefore, systems for professional training should be created and strengthened with specializations that prepare them to work effectively with Governments and with non-governmental organizations active in this field. In addition, there should be greater collaboration between the academic community and other entities in order to strengthen conceptual and methodological work and research in this field.

**11.26** To enhance solidarity and to sustain development assistance, all countries need to be continuously informed about population and development issues. Countries should establish information mechanisms, where appropriate, to facilitate the systematic collection, analysis, dissemination and utilization of population-related information at the national and international levels, and networks should be established or strengthened at the national, subregional, regional and global levels to promote information and experience exchange.

# XII

Technology,  
Research and  
Development\*



## A. Basic data collection, analysis and dissemination

### Basis for action

**12.1** Valid, reliable, timely, culturally relevant and internationally comparable data form the basis for policy and programme development, implementation, monitoring and evaluation. While there have been marked improvements in the availability of population and related development data following important advances made during the past two decades in the methodologies and technology for data collection and analysis, many gaps remain with regard to the quality and coverage of baseline information, including vital data on births and deaths, as well as the continuity of data sets over time. Gender and ethnicity-specific information, which is needed to enhance and monitor the sensitivity of development policies and programmes, is still insufficient in many areas. Measurement of migration, particularly at the regional and international levels, is also among the areas least valid and least adequately covered. As a matter of principle, individuals, organizations and developing countries should have access, on a no-cost basis, to the data and findings based on research carried out in their own countries, including those maintained by other countries and international agencies.

### Objectives

**12.2** The objectives are:

(a) To establish a factual basis for understanding and anticipating the interrelationships of population and socio-economic

\* *The Holy See expressed a general reservation on this chapter. The reservation is to be interpreted in terms of the statement made by the representative of the Holy See at the 14th plenary meeting, on 13 September 1994.*

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- including environmental - variables and for improving programme development, implementation, monitoring and evaluation;

(b) To strengthen national capacity to seek new information and meet the need for basic data collection, analysis and dissemination, giving particular attention to information classified by age, sex, ethnicity and different geographical units, in order to use the findings in the formulation, implementation, monitoring and evaluation of overall sustainable development strategies and foster international cooperation, including such cooperation at the regional and subregional levels;

(c) To ensure political commitment to, and understanding of, the need for data collection on a regular basis and the analysis, dissemination and full utilization of data.

### Actions

**12.3** Governments of all countries, particularly developing countries, assisted as appropriate through bilateral cooperation and international organizations and, where necessary, through inter-regional, regional and subregional cooperation, should strengthen their national capacity to carry out sustained and comprehensive programmes on collection, analysis, dissemination and utilization of population and development data. Particular attention should be given to the monitoring of population trends and the preparation of demographic projections and to the monitoring of progress towards the attainment of the health, education, gender, ethnic and social-equity goals, and of service accessibility and quality of care, as stated in the present Programme of Action.

**12.4** Programmes for the collection, processing, analysis and timely dissemination and utilization of population and related development data should include disaggregation, including gender disaggregation, and coverage and presentation compatible with the needs of effective programme implementation on population and development. Interaction between the community of data

users and data providers should be promoted in order to enable data providers to respond better to user needs. Research should be designed to take into account legal and ethical standards and should be carried out in consultation and partnership with, and with the active participation of, local communities and institutions, and the findings thereof should be made accessible and available to policy makers, decision makers, planners and managers of programmes for their timely use. Comparability should be ensured in all research and data collection programmes.

**12.5** Comprehensive and reliable qualitative as well as quantitative databases, allowing linkages between population, education, health, poverty, family well-being, environment and development issues and providing information disaggregated at appropriate and desired levels, should be established and maintained by all countries to meet the needs of research as well as those of policy and programme development, implementation, monitoring and evaluation. Special attention should be given to assessing and measuring the quality and accessibility of care through the development of suitable indicators.

**12.6** Demographic, socio-economic and other relevant information networks should be created or strengthened, where appropriate, at the national, regional and global levels to facilitate monitoring the implementation of programmes of action and activities on population, environment and development at the national, regional and global levels.

**12.7** All data collection and analysis activities should give due consideration to gender-disaggregation, enhancing knowledge on the position and role of gender in social and demographic processes. In particular, in order to provide a more accurate picture of women's current and potential contribution to economic development, data collection should delineate more precisely the nature of women's social and labour force status and make that a

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basis for policy and programme decisions on improving women's income. Such data should address, inter alia, women's unpaid economic activities in the family and in the informal sector.

**12.8** Training programmes in statistics, demography, and population and development studies should be designed and implemented at the national and regional levels, particularly in developing countries, with enhanced technical and financial support, through international cooperation and greater national resources.

**12.9** All countries, with the support of appropriate organizations, should strengthen the collection and analysis of demographic data, including international migration data, in order to achieve a better understanding of that phenomenon and thus support the formulation of national and international policies on international migration.

## B. Reproductive health research

### Basis for action

**12.10** Research, in particular biomedical research, has been instrumental in giving more and more people access to a greater range of safe and effective modern methods for regulation of fertility. However, not all persons can find a family-planning method that suits them and the range of choices available to men is more limited than that available to women. The growing incidence of sexually transmitted diseases, including HIV/AIDS, demands substantially higher investments in new methods of prevention, diagnosis and treatment. In spite of greatly reduced funding for reproductive health research, prospects for developing and introducing new methods and products for contraception and regulation of fertility have been promising. Improved collaboration and coordination of activities internationally will

increase cost-effectiveness, but a significant increase in support from Governments and industry is needed to bring a number of potential new, safe and affordable methods to fruition, especially barrier methods. This research needs to be guided at all stages by gender perspectives, particularly women's, and the needs of users, and should be carried out in strict conformity with internationally accepted legal, ethical, medical and scientific standards for biomedical research.

## Objectives

**12.11** The objectives are:

(a) To contribute to the understanding of factors affecting universal reproductive health, including sexual health, and to expand reproductive choice;

(b) To ensure the initial and continued safety, quality and health aspects of methods for regulation of fertility;

(c) To ensure that all people have the opportunity to achieve and maintain sound reproductive and sexual health, the international community should mobilize the full spectrum of basic biomedical, social and behavioural and programme-related research on reproductive health and sexuality.

## Actions

**12.12** Governments, assisted by the international community and donor agencies, the private sector, non-governmental organizations and the academic community, should increase support for basic and applied biomedical, technological, clinical, epidemiological and social science research to strengthen reproductive health services, including the improvement of existing and the development of new methods for regulation of fertility that meet users' needs and are acceptable, easy to use, safe, free of long- and short-term side-effects and second-generation effects, effective, affordable and suitable for different age and cultural groups and

for different phases of the reproductive cycle. Testing and introduction of all new technologies should be continually monitored to avoid potential abuse. Specifically, areas that need increased attention should include barrier methods, both male and female, for fertility control and the prevention of sexually transmitted diseases, including HIV/AIDS, as well as microbicides and virucides, which may or may not prevent pregnancy.

**12.13** Research on sexuality and gender roles and relationships in different cultural settings is urgently needed, with emphasis on such areas as abuse, discrimination and violence against women; genital mutilation, where practised; sexual behaviour and mores; male attitudes towards sexuality and procreation, fertility, family and gender roles; risk-taking behaviour regarding sexually transmitted diseases and unplanned pregnancies; women's and men's perceived needs for methods for regulation of fertility and sexual health services; and reasons for non-use or ineffective use of existing services and technologies.

**12.14** High priority should also be given to the development of new methods for regulation of fertility for men. Special research should be undertaken on factors inhibiting male participation in order to enhance male involvement and responsibility in family planning. In conducting sexual and reproductive health research, special attention should be given to the needs of adolescents in order to develop suitable policies and programmes and appropriate technologies to meet their health needs. Special priority should be given to research on sexually transmitted diseases, including HIV/AIDS, and research on infertility.

**12.15** To expedite the availability of improved and new methods for regulation of fertility, efforts must be made to increase the involvement of industry, including industry in developing countries and countries with economies in transition. A new type

of partnership between the public and private sectors, including women and consumer groups, is needed to mobilize the experience and resources of industry while protecting the public interest. National drug and device regulatory agencies should be actively involved in all stages of the development process to ensure that all legal and ethical standards are met. Developed countries should assist research programmes in developing countries and countries with economies in transition with their knowledge, experience and technical expertise and promote the transfer of appropriate technologies to them. The international community should facilitate the establishment of manufacturing capacities for contraceptive commodities in developing countries, particularly the least developed among them, and countries with economies in transition.

**12.16** All research on products for regulation of fertility and sexual and reproductive health must be carried out in adherence to internationally accepted ethical and technical standards and cultural conditions for biomedical research. Special attention needs to be given to the continuous surveillance of contraceptive safety and side-effects. Users', in particular women's, perspectives and women's organizations should be incorporated into all stages of the research and development process.

**12.17** Since unsafe abortion(20) is a major threat to the health and lives of women, research to understand and better address the determinants and consequences of induced abortion, including its effects on subsequent fertility, reproductive and mental health and contraceptive practice, should be promoted, as well as research on treatment of complications of abortions and post-abortion care.

**12.18** There should be enhanced research on natural methods for regulation of fertility, looking for more effective procedures to detect the moment of ovulation during the menstrual cycle and after childbirth.

## C. Social and economic research

### Basis for action

**12.19** During the past several decades, the formulation, implementation, monitoring and evaluation of population policies, programmes and activities have benefited from the findings of social and economic research highlighting how population change results from and impacts on complex interactions of social, economic and environmental factors. Nevertheless, some aspects of those interactions are still poorly understood and knowledge is lacking, especially with regard to developing countries, in areas relevant to a range of population and development policies, particularly concerning indigenous practices. Social and economic research is clearly needed to enable programmes to take into account the views of their intended beneficiaries, especially women, the young and other less empowered groups, and to respond to the specific needs of those groups and of communities. Research regarding the interrelations between global or regional economic factors and national demographic processes is required. Improved quality of services can be achieved only where quality has been defined by both users and providers of services and where women are actively involved in decision-making and service delivery.



## Objectives

**12.20** The objectives are:

(a) To promote socio-cultural and economic research that assists in the design of programmes, activities and services to improve the quality of life and meet the needs of individuals, families and communities, in particular all underserved groups;<sup>22</sup>

(b) To promote the use of research findings to improve the formulation of policies and the implementation, monitoring and evaluation of programmes and projects that improve the welfare of individuals and families and the needy to enhance their quality, efficiency and client-sensitivity, and to increase the national and international capacity for such research;

(c) To understand that sexual and reproductive behaviour occurs in varying socio-cultural contexts, and to understand the importance of that context for the design and implementation of service programmes.

## Actions

**12.21** Governments, funding agencies and research organizations should encourage and promote socio-cultural and economic research on relevant population and development policies and programmes, including indigenous practices, especially with regard to interlinkages between population, poverty alleviation, environment, sustained economic growth and sustainable development.

**12.22** Socio-cultural and economic research should be built into population and development programmes and strategies in order to provide guidance for programme managers on ways and means of reaching underserved clients and responding to their needs. To this end, programmes should provide for operations research, evaluation research and other applied social science research. This research should be participatory in character. Mechanisms should be established with a view to ensuring that research findings are incorporated into the decision-making process.

**12.23** Policy-oriented research, at the national and international levels, should be undertaken on areas beset by population pressures, poverty, over-consumption patterns, destruction of ecosystems and degradation of resources, giving particular attention to the interactions between those factors. Research should also be done on the development and improvement of methods with regard to sustainable food production and crop and livestock systems in both developed and developing countries.

**12.24** Governments, intergovernmental organizations, non-governmental organizations concerned, funding agencies and research organizations are urged to give priority to research on the linkages between women's roles and status and demographic and development processes. Among the vital areas for research are changing family structures; family well-being; the interactions between women's and men's diverse roles, including their use of time, access to power and decision-making and control over resources; associated norms, laws, values and beliefs; and the economic and demographic outcomes of gender inequality. Women should be involved at all stages of gender research planning, and efforts should be made to recruit and train more female researchers.

**12.25** Given the changing nature and extent of the spatial mobility of population, research to improve the understanding of the causes and consequences of migration and mobility, whether internal or international, is urgently needed. To provide a sound foundation for such research, special efforts need to be made to improve the quality, timeliness and accessibility of data on internal and international migration levels, trends and policies.

**12.26** In the light of the persistence of significant mortality and morbidity differentials between population subgroups within countries, it is urgent to step up efforts to investigate the factors underlying such differentials, in order to devise more effective policies and programmes for their reduction. Of special importance are the causes of differentials, including gender differentials, in mortality and morbidity, particularly at younger and older ages. Increased attention should also be paid to the relative importance of various socio-economic and environmental factors in determining mortality differentials by region or socio-economic and ethnic group. Causes and trends in maternal, perinatal and infant morbidity and mortality also need further investigation.

# XIII

## National Action\*

## A. National policies and plans of action

### Basis for action

**13.1** During the past few decades, considerable experience has been gained around the world on how government policies and programmes can be designed and implemented to address population and development concerns, enhance the choices of people and contribute to broad social progress. As is the case with other social development programmes, experience has also shown, in instances where the leadership is strongly committed to economic growth, human resource development, gender equality and equity and meeting the health needs of the population, in particular the reproductive health needs, including family planning and sexual health, countries have been able to mobilize sustained commitment at all levels to make population and development programmes and projects successful.

**13.2** While such success can be facilitated by developments in the overall social and economic context, and by success in other development efforts, population and development are intrinsically interrelated and progress in any component can catalyse improvement in others. The many facets of population relate to many facets of development. There is increased recognition of the need for countries to consider migration impacts, internal and international, in developing their relevant policies and programmes. There is also growing recognition that population-related policies, plans, programmes and projects, to be sustainable, need to engage their intended beneficiaries fully in their design and subsequent implementation.

\* *The Holy See expressed a general reservation on this chapter. The reservation is to be interpreted in terms of the statement made by the representative of the Holy See at the 14th plenary meeting, on 13 September 1994.*

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**13.3** The role of non-governmental organizations as partners in national policies and programmes is increasingly recognized, as is the important role of the private sector. Members of national legislatures can have a major role to play, especially in enacting appropriate domestic legislation for implementing the present Programme of Action, allocating appropriate financial resources, ensuring accountability of expenditure and raising public awareness of population issues.

### Objectives

**13.4** The objectives are:

- (a) To incorporate population concerns in all relevant national development strategies, plans, policies and programmes;
- (b) To foster active involvement of elected representatives of people, particularly parliamentarians, concerned groups, especially at the grass-roots level, and individuals, in formulating, implementing, monitoring and evaluating strategies, policies, plans and programmes in the field of population and development.

### Actions

**13.5** Governments, with the active involvement of parliamentarians, locally elected bodies, communities, the private sector, non-governmental organizations and women's groups, should work to increase awareness of population and development issues and formulate, implement and evaluate national strategies, policies, plans, programmes and projects that address population and development issues, including migration, as integral parts of their sectoral, intersectoral and overall development planning and implementation process. They should also promote and work to ensure adequate human resources and institutions to coordinate and carry out the planning, implementation, monitoring and evaluation of population and development activities.

**13.6** Governments and parliamentarians, in collaboration with the international community and non-governmental organizations, should make the necessary plans in accordance with national concerns and priorities and take the actions required to measure, assess, monitor and evaluate progress towards meeting the goals of the present Programme of Action. In this connection, the active participation of the private sector and the research community is to be encouraged.

## **B. Programme management and human resource development**

### **Basis for action**

**13.7** Building the capacity and self-reliance of countries to undertake concerted national action to promote sustained economic growth, to further sustainable national development and to improve the quality of life for the people is a fundamental goal. This requires the retention, motivation and participation of appropriately trained personnel working within effective institutional arrangements, as well as relevant involvement by the private sector and non-governmental organizations. The lack of adequate management skills, particularly in the least developed countries, critically reduces the ability for strategic planning, weakens programme execution, lessens the quality of services and thus diminishes the usefulness of programmes to their beneficiaries. The recent trend towards decentralization of authority in national population and development programmes, particularly in government programmes, significantly increases the requirement for trained staff to meet new or expanded responsibilities at the lower administrative levels. It also modifies the 'skill mix' required in central institutions, with policy analysis, evaluation and strategic planning having higher priority than previously.

## Objectives

**13.8** The objectives are:

(a) To improve national capacities and the cost-effectiveness, quality and impact of national population and development strategies, plans, policies and programmes, while ensuring their accountability to all persons served, in particular the most vulnerable and disadvantaged groups in society, including the rural population and adolescents;

(b) To facilitate and accelerate the collection, analysis and flow of data and information between actors in national population and development programmes in order to enhance the formulation of strategies, policies, plans and programmes and monitor and evaluate their implementation and impact;

(c) To increase the skill level and accountability of managers and others involved in the implementation, monitoring and evaluation of national population and development strategies, policies, plans and programmes;

(d) To incorporate user and gender perspectives in training programmes and ensure the availability, motivation and retention of appropriately trained personnel, including women, for the formulation, implementation, monitoring and evaluation of national population and development strategies, policies, plans and programmes.

## Actions

**13.9** Countries should:

(a) Formulate and implement human resource development programmes in a manner that explicitly addresses the needs of population and development strategies, policies, plans and programmes, giving special consideration to the basic education, training and employment of women at all levels, especially at decision-making and managerial levels, and to the incorporation of user and gender perspectives throughout the training programmes;



(b) Ensure the nationwide and efficient placement of trained personnel managing population and development strategies, policies, plans and programmes;

(c) Continuously upgrade the management skills of service delivery personnel to enhance the cost-effectiveness, efficiency and impact of the social services sector;

(d) Rationalize remuneration and related matters, terms and conditions of service to ensure equal pay for equal work by women and men and the retention and advancement of managerial and technical personnel involved in population and development programmes, and thereby improve national execution of these programmes;

(e) Establish innovative mechanisms to promote experience-sharing in population and development programme management within and among countries at subregional, regional, interregional and international levels in order to foster relevant national expertise;

(f) Develop and maintain databases of national experts and institutions of excellence in order to foster the use of national competence, giving special consideration to the inclusion of women and youth;

(g) Ensure effective communication with, and the involvement of, programme beneficiaries at all levels, in particular at rural levels, in order to ensure better overall programme management.

**13.10** Governments should give special attention to the development and implementation of client-centred management information systems for population and development, and particularly for reproductive health, including family- planning and sexual health programmes, covering both governmental and non-governmental activities and containing regularly updated data on clientele, expenditures, infrastructure, service accessibility, output and quality of services.

## C. Resource mobilization and allocation

### Basis for action

**13.11** Allocation of resources for sustained human development at the national level generally falls into various sectoral categories. How countries can most beneficially allocate resources among various sectors depends largely on each country's social, economic, cultural and political realities as well as its policy and programme priorities. In general, the quality and success of programmes benefit from a balanced allocation of resources. In particular, population-related programmes play an important role in enabling, facilitating and accelerating progress in sustainable human development programmes, especially by contributing to the empowerment of women, improving the health of the people (particularly of women and children, and especially in the rural areas), slowing the growth rate of demand for social services, mobilizing community action and stressing the long-term importance of social-sector investments.

**13.12** Domestic resources provide the largest portion of funds for attaining development objectives. Domestic resource mobilization is, thus, one of the highest priority areas for focused attention to ensure the timely actions required to meet the objectives of the present Programme of Action. Both the public and the private sectors can potentially contribute to the resources required. Many of the countries seeking to pursue the additional goals and objectives of the Programme of Action, especially the least developed countries and other poor countries that are undergoing painful structural adjustments, are continuing to experience recessionary trends in their economies. Their domestic resource mobilization efforts to expand and improve their population and development programmes will need to be complemented by a significantly greater provision of financial and technical resources by the international community, as indicated in chapter XIV. In

the mobilization of new and additional domestic resources and resources from donors, special attention needs to be given to adequate measures to address the basic needs of the most vulnerable groups of the population, particularly in the rural areas, and to ensure their access to social services.

**13.13** Based on the current large unmet demands for reproductive health services, including family planning, and the expected growth in numbers of women and men of reproductive age, demand for services will continue to grow very rapidly over the next two decades. This demand will be accelerated by growing interest in delayed child-bearing, better spacing of births and earlier completion of desired family size, and by easier access to services. Efforts to generate and make available higher levels of domestic resources, and to ensure their effective utilization, in support of service-delivery programmes and of associated information, education and communication activities, thus, need to be intensified.

**13.14** Basic reproductive health, including family-planning services, involving support for necessary training, supplies, infrastructure and management systems, especially at the primary health-care level, would include the following major components, which should be integrated into basic national programmes for population and reproductive health:

(a) In the family-planning services component - contraceptive commodities and service delivery; capacity-building for information, education and communication regarding family planning and population and development issues; national capacity-building through support for training; infrastructure development and upgrading of facilities; policy development and programme evaluation; management information systems; basic service statistics; and focused efforts to ensure good quality care;

(b) In the basic reproductive health services component - information and routine services for prenatal, normal and safe delivery and post-natal care; abortion (as specified in paragraph 8.25); information, education and communication about reproductive health, including sexually transmitted diseases, human sexuality and responsible parenthood, and against harmful practices; adequate counselling; diagnosis and treatment for sexually transmitted diseases and other reproductive tract infections, as feasible; prevention of infertility and appropriate treatment, where feasible; and referrals, education and counselling services for sexually transmitted diseases, including HIV/AIDS, and for pregnancy and delivery complications;

(c) In the sexually transmitted diseases/HIV/AIDS prevention programme component - mass media and in-school education programmes, promotion of voluntary abstinence and responsible sexual behaviour and expanded distribution of condoms;

(d) In the basic research, data and population and development policy analysis component - national capacity-building through support for demographic as well as programme-related data collection and analysis, research, policy development and training.

**13.15** It has been estimated that, in the developing countries and countries with economies in transition, the implementation of programmes in the area of reproductive health, including those related to family planning, maternal health and the prevention of sexually transmitted diseases, as well as other basic actions for collecting and analysing population data, will cost: \$17.0 billion in 2000, \$18.5 billion in 2005, \$20.5 billion in 2010 and \$21.7 billion in 2015; these are cost-estimates prepared by experts, based on experience to date, of the four components referred to above. These estimates should be reviewed and updated on the basis of the comprehensive approach reflected in paragraph 13.14 of the present Programme of Action, particularly with respect to

the costs of implementing reproductive health service delivery. Of this, approximately 65 per cent is for the delivery system. Programme costs in the closely related components which should be integrated into basic national programmes for population and reproductive health are estimated as follows:

(a) The family-planning component is estimated to cost: \$10.2 billion in 2000, \$11.5 billion in 2005, \$12.6 billion in 2010 and \$13.8 billion in 2015. This estimate is based on census and survey data which help to project the number of couples and individuals who are likely to be using family-planning information and services. Projections of future costs allow for improvements in quality of care. While improved quality of care will increase costs per user to some degree, these increases are likely to be offset by declining costs per user as both prevalence and programme efficiency increase;

(b) The reproductive health component (not including the delivery-system costs summarized under the family-planning component) is estimated to add: \$5.0 billion in 2000, \$5.4 billion in 2005, \$5.7 billion in 2010 and \$6.1 billion in 2015. The estimate for reproductive health is a global total, based on experience with maternal health programmes in countries at different levels of development, selectively including other reproductive health services. The full maternal and child health impact of these interventions will depend on the provision of tertiary and emergency care, the costs of which should be met by overall health-sector budgets;

(c) The sexually transmitted diseases/HIV/AIDS prevention programme is estimated by the WHO Global Programme on AIDS to cost: \$1.3 billion in 2000, \$1.4 billion in 2005 and approximately \$1.5 billion in 2010 and \$1.5 billion in 2015;

(d) The basic research, data and population and development policy analysis programme is estimated to cost: \$500 million in 2000, \$200 million in 2005, \$700 million in 2010 and \$300 million in 2015.

**13.16** It is tentatively estimated that up to two thirds of the costs will continue to be met by the countries themselves and in the order of one third from external sources. However, the least developed countries and other low-income developing countries will require a greater share of external resources on a concessional and grant basis. Thus, there will be considerable variation in needs for external resources for population programmes, between and within regions. The estimated global requirements for international assistance are outlined in paragraph 14.11.

**13.17** Additional resources will be needed to support programmes addressing population and development goals, particularly programmes seeking to attain the specific social- and economic-sector goals contained in the present Programme of Action. The health sector will require additional resources to strengthen the primary health-care delivery system, child survival programmes, emergency obstetrical care and broad-based programmes for the control of sexually transmitted diseases, including HIV/AIDS, as well as the humane treatment and care of those infected with sexually transmitted diseases/HIV/AIDS, among others. The education sector will also require substantial and additional investments in order to provide universal basic education and to eliminate disparities in educational access owing to gender, geographical location, social or economic status etc.

**13.18** Additional resources will be needed for action programmes directed to improving the status and empowerment of women and their full participation in the development process (beyond ensuring their basic education). The full involvement of women in the design, implementation, management and monitoring of all development programmes will be an important component of such activities.

**13.19** Additional resources will be needed for action programmes to accelerate development programmes; generate employment; address environmental concerns, including unsustainable patterns of production and consumption; provide social services; achieve balanced distributions of population; and address poverty eradication through sustained economic growth in the context of sustainable development. Important relevant programmes include those addressed in Agenda 21.

**13.20** The resources needed to implement the present Programme of Action require substantially increased investments in the near term. The benefits of these investments can be measured in future savings in sectoral requirements; sustainable patterns of production and consumption and sustained economic growth in the context of sustainable development; and overall improvements in the quality of life.

## **Objective**

**13.21** The objective is to achieve an adequate level of resource mobilization and allocation, at the community, national and international levels, for population programmes and for other related programmes, all of which seek to promote and accelerate social and economic development, improve the quality of life for all, foster equity and full respect for individual rights and, by so doing, contribute to sustainable development.

## Actions

**13.22** Governments, non-governmental organizations, the private sector and local communities, assisted upon request by the international community, should strive to mobilize and effectively utilize the resources for population and development programmes that expand and improve the quality of reproductive health care, including family-planning and sexually transmitted diseases/HIV/AIDS prevention efforts. In line with the goal of the present Programme of Action to ensure universal availability of and access to high- quality reproductive health and family-planning services, particular emphasis must be put on meeting the needs of underserved population groups, including adolescents, taking into account the rights and responsibilities of parents and the needs of adolescents and the rural and the urban poor, and on ensuring the safety of services and their responsiveness to women, men and adolescents. In mobilizing resources for these purposes, countries should examine new modalities such as increased involvement of the private sector, the selective use of user fees, social marketing, cost-sharing and other forms of cost recovery. However, these modalities must not impede access to services and should be accompanied with adequate 'safety net' measures.



**13.23** Governments, non-governmental organizations, the private sector and local communities, assisted upon request by the international community, should strive to mobilize the resources needed to reinforce social development goals, and in particular to satisfy the commitments Governments have undertaken previously with regard to Education for All (the Jomtien Declaration), the multisectoral goals of the World Summit for Children, Agenda 21 and other relevant international agreements, and to further mobilize the resources needed to meet the goals in the present Programme of Action. In this regard, Governments are urged to devote an increased proportion of public-sector expenditures to the social sectors, as well as an increased proportion of official development assistance, stressing, in particular, poverty eradication within the context of sustainable development.

**13.24** Governments, international organizations and non-governmental organizations should collaborate on an ongoing basis in the development of precise and reliable cost estimates, where appropriate, for each category of investment.

# XIV

## International Cooperation\*

## A. Responsibilities of partners in development

### Basis for action

**14.1** International cooperation has been proved to be essential for the implementation of population and development programmes during the past two decades. The number of financial donors has steadily increased and the profile of the donor community has increasingly been shaped by the growing presence of non-governmental and private-sector organizations. Numerous experiences of successful cooperation between developing countries have dispelled the stereotyped view of donors being exclusively developed countries. Donor partnerships have become more prevalent in a variety of configurations, so that it is no longer unusual to find Governments and multilateral organizations working closely together with national and international non-governmental organizations and segments of the private sector. This evolution of international cooperation in population and development activities reflects the considerable changes that have taken place during the past two decades, particularly with the greater awareness of the magnitude, diversity and urgency of unmet needs. Countries that formerly attached minimal importance to population issues now recognize them at the core of their development challenge. International migration and AIDS, for instance, formerly matters of marginal concern to a few countries, are currently high-priority issues in a large number of countries.

**14.2** The maturing process undergone by international cooperation in the field of population and development has accentuated a number of difficulties and shortcomings that need to be

\* *The Holy See expressed a general reservation on this chapter. The reservation is to be interpreted in terms of the statement made by the representative of the Holy See at the 14th plenary meeting, on 13 September 1994.*

addressed. For instance, the expanding number and configuration of development partners subjects both recipients and donors to increasing pressures to decide among a multitude of competing development priorities, a task which recipient Governments in particular may find exceedingly difficult to carry out. Lack of adequate financial resources and effective coordination mechanisms have been found to result in unnecessary duplication of efforts and lack of programme congruency. Sudden shifts in the development policies of donors may cause disruptions of programme activities across the world. Re-establishing and adhering to national priorities requires a new clarification of, and commitment to, reciprocal responsibilities among development partners.

## **Objectives**

**14.3** The objectives are:

(a) To ensure that international cooperation in the area of population and development is consistent with national population and development priorities centred on the well-being of intended beneficiaries and serves to promote national capacity-building and self-reliance;

(b) To urge that the international community adopt favourable macroeconomic policies for promoting sustained economic growth and sustainable development in developing countries;

(c) To clarify the reciprocal responsibilities of development partners and improve coordination of their efforts;

(d) To develop long-term joint programmes between recipient countries and between recipient and donor countries;

(e) To improve and strengthen policy dialogue and coordination of population and development programmes and activities at the international level, including bilateral and multilateral agencies;

(f) To urge that all population and development programmes, with full respect for the various religious and ethical values and cultural backgrounds of each country's people, adhere to basic human rights recognized by the international community and recalled in the present Programme of Action.

## Actions

**14.4** At the programme level, national capacity-building for population and development and transfer of appropriate technology and know-how to developing countries, including countries with economies in transition, must be core objectives and central activities for international cooperation. In this respect, important elements are to find accessible ways to meet the large commodity needs, of family-planning programmes, through the local production of contraceptives of assured quality and affordability, for which technology cooperation, joint ventures and other forms of technical assistance should be encouraged.

**14.5** The international community should promote a supportive economic environment by adopting favourable macroeconomic policies for promoting sustained economic growth and development.

**14.6** Governments should ensure that national development plans take note of anticipated international funding and cooperation in their population and development programmes, including loans from international financial institutions, particularly with respect to national capacity-building, technology cooperation and transfer of appropriate technology, which should be provided on favourable terms, including on concessional and preferential terms, as mutually agreed, taking into account the need to protect international property rights, as well as the special needs of developing countries.

**14.7** Recipient Governments should strengthen their national coordination mechanisms for international cooperation in population and development, and in consultations with donors clarify the responsibilities assigned to various types of development partners, including intergovernmental and international non-governmental organizations, based on careful consideration of their comparative advantages in the context of national development priorities and of their ability to interact with national development partners. The international community should assist recipient Governments to undertake these coordinating efforts.

## **B. Towards a new commitment to funding population and development**

### **Basis for action**

**14.8** There is a strong consensus on the need to mobilize significant additional financial resources from both the international community and within developing countries and countries with economies in transition for national population programmes in support of sustainable development. The Amsterdam Declaration on a Better Life for Future Generations, adopted at the International Forum on Population in the Twenty-first Century, held at Amsterdam in 1989, called on Governments to double the total global expenditures in population programmes and on donors to increase substantially their contribution, in order to meet the needs of millions of people in developing countries in the fields of family planning and other population activities by the year 2000. However, since then, international resources for population activities have come under severe pressure, owing to the prolonged economic recession in traditional donor countries. Also, developing countries face increasing difficulties in allocating sufficient funds for their population and related programmes. Additional resources are urgently required to better identify and satisfy unmet needs in issues related to population and development, such as reproductive health care, including family-planning and sexual health information and services, as well as to respond to future increases in demand, to keep pace with the growing demands that need to be served, and to improve the scope and quality of programmes.

**14.9** To assist the implementation of population and reproductive health care, including family-planning and sexual health programmes, financial and technical assistance from bilateral and multilateral agencies have been provided to the national and

subnational agencies involved. As some of these began to be successful, it became desirable for countries to learn from one another's experiences, through a number of different modalities (e.g., long- and short- term training programmes, observation study tours and consultant services).

## Objectives

**14.10** The objectives are:

(a) To increase substantially the availability of international financial assistance in the field of population and development in order to enable developing countries and countries with economies in transition to achieve the goals of the present Programme of Action as they pursue their self-reliant and capacity-building efforts;

(b) To increase the commitment to, and the stability of, international financial assistance in the field of population and development by diversifying the sources of contributions, while striving to avoid as far as possible a reduction in the resources for other development areas. Additional resources should be made available for short-term assistance to the countries with economies in transition;

(c) To increase international financial assistance to direct South-South cooperation and to facilitate financing procedures for direct South-South cooperation.

## Actions

**14.11** The international community should strive for the fulfilment of the agreed target of 0.7 per cent of the gross national product for overall official development assistance and endeavour to increase the share of funding for population and development programmes commensurate with the scope and scale of activities required to achieve the objectives and goals of the present Programme of Action. A crucially urgent challenge to the international donor community is therefore the translation of their commitment to the objectives and quantitative goals of the

present Programme of Action into commensurate financial contributions to population programmes in developing countries and countries with economies in transition. Given the magnitude of the financial resource needs for national population and development programmes (as identified in chapter XIII), and assuming that recipient countries will be able to generate sufficient increases in domestically generated resources, the need for complementary resource flows from donor countries would be in the order of (in 1993 US dollars): \$5.7 billion in 2000; \$6.1 billion in 2005; \$6.8 billion in 2010; and \$7.2 billion in 2015. The international community takes note of the initiative to mobilize resources to give all people access to basic social services, known as the 20/20 initiative, which will be studied further in the context of the World Summit for Social Development.

**14.12** Recipient countries should ensure that international assistance for population and development activities is used effectively to meet national population and development objectives so as to assist donors to secure commitment to further resources for programmes.

**14.13** The United Nations Population Fund, other United Nations organizations, multilateral financial institutions, regional banks and bilateral financial sources are invited to consult, with a view to coordinating their financing policies and planning procedures to improve the impact, complementarity and cost-effectiveness of their contributions to the achievement of the population programmes of the developing countries and countries with economies in transition.



**14.14** Criteria for allocation of external financial resources for population activities in developing countries should include:

- (a) Coherent national programmes, plans and strategies on population and development;
- (b) The recognized priority to the least developed countries;
- (c) The need to complement national financial efforts on population;
- (d) The need to avoid obstacles to, or reversal of, progress achieved thus far;
- (e) Problems of significant social sectors and areas that are not reflected in national average indicators.

**14.15** Countries with economies in transition should receive temporary assistance for population and development activities in the light of the difficult economic and social problems these countries face at present.

**14.16** In devising the appropriate balance between funding sources, more attention should be given to South-South cooperation as well as to new ways of mobilizing private contributions, particularly in partnership with non-governmental organizations. The international community should urge donor agencies to improve and modify their funding procedures in order to facilitate and give higher priority to supporting direct South-South collaborative arrangements.

**14.17** Innovative financing, including new ways of generating public and private financing resources and various forms of debt relief should be explored.

**14.18** International financial institutions are encouraged to increase their financial assistance, particularly in population and reproductive health, including family planning and sexual health care.

XV

Partnership  
with the  
Non-Governmental  
Sector\*

## A. Local, national and international non-governmental organizations

### Basis for action

**15.1** As the contribution, real and potential, of non-governmental organizations gains clearer recognition in many countries and at regional and international levels, it is important to affirm its relevance in the context of the preparation and implementation of the present Programme of Action. To address the challenges of population and development effectively, broad and effective partnership is essential between Governments and non-governmental organizations (comprising not-for-profit groups and organizations at the local, national and international levels) to assist in the formulation, implementation, monitoring and evaluation of population and development objectives and activities.

**15.2** Despite widely varying situations in their relationship and interaction with Governments, non-governmental organizations have made and are increasingly making important contributions to both population and development activities at all levels. In many areas of population and development activities, non-governmental groups are already rightly recognized for their comparative advantage in relation to government agencies, because of innovative, flexible and responsive programme design and implementation, including grass-roots participation, and because quite often they are rooted in and interact with constituencies that are poorly served and hard to reach through government channels.

**15.3** Non-governmental organizations are important voices of the people, and their associations and networks provide an effective and efficient means of better focusing local and national initiatives

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and addressing pressing population, environmental, migration and economic and social development concerns.

**15.4** Non-governmental organizations are actively involved in the provision of programme and project services in virtually every area of socio-economic development, including the population sector. Many of them have, in a number of countries, a long history of involvement and participation in population-related activities, particularly family planning. Their strength and credibility lies in the responsible and constructive role they play in society and the support their activities engender from the community as a whole. Formal and informal organizations and networks, including grass-roots movements, merit greater recognition at the local, national and international levels as valid and valuable partners for the implementation of the present Programme of Action. For such partnerships to develop and thrive, it is necessary for governmental and non-governmental organizations to institute appropriate systems and mechanisms to facilitate constructive dialogue, in the context of national programmes and policies, recognizing their distinct roles, responsibilities and particular capacities.

**15.5** The experience, capabilities and expertise of many non-governmental organizations and local community groups in areas of direct relevance to the Programme of Action is acknowledged. Non-governmental organizations, especially those working in the field of sexual and reproductive health and family planning, women's organizations and immigrant and refugee support advocacy groups, have increased public knowledge and provided educational services to men and women which contribute towards successful implementation of population and development policies. Youth organizations are increasingly becoming effective partners in developing programmes to educate youth on reproductive health, gender and environmental issues. Other groups, such as organizations of the aged, migrants, organizations of persons with disabilities and informal grass-roots groups, also contribute effectively to the enhancement of programmes for their

particular constituencies. These diverse organizations can help in ensuring the quality and relevance of programmes and services to the people they are meant to serve. They should be invited to participate with local, national and international decision-making bodies, including the United Nations system, to ensure effective implementation, monitoring and evaluation of the present Programme of Action.

**15.6** In recognition of the importance of effective partnership, non-governmental organizations are invited to foster coordination, cooperation and communication at the local, national, regional and international levels and with local and national governments, to reinforce their effectiveness as key participants in the implementation of population and development programmes and policies. The involvement of non-governmental organizations should be seen as complementary to the responsibility of Governments to provide full, safe and accessible reproductive health services, including family-planning and sexual health services. Like Governments, non-governmental organizations should be accountable for their actions and should offer transparency with respect to their services and evaluation procedures.

## Objective

**15.7** The objective is to promote an effective partnership between all levels of government and the full range of non-governmental organizations and local community groups, in the discussion and decisions on the design, implementation, coordination, monitoring and evaluation of programmes relating to population, development and environment in accordance with the general policy framework of Governments, taking duly into account the responsibilities and roles of the respective partners.

## Actions

**15.8** Governments and intergovernmental organizations, in dialogue with non-governmental organizations and local community

groups, and in full respect for their autonomy, should integrate them in their decision-making and facilitate the contribution that non-governmental organizations can make at all levels towards finding solutions to population and development concerns and, in particular, to ensure the implementation of the present Programme of Action. Non-governmental organizations should have a key role in national and international development processes.

**15.9** Governments should ensure the essential roles and participation of women's organizations in the design and implementation of population and development programmes. Involving women at all levels, especially the managerial level, is critical to meeting the objectives and implementing the present Programme of Action.

**15.10** Adequate financial and technical resources and information necessary for the effective participation of non-governmental organizations in the research, design, implementation, monitoring and evaluation of population and development activities should, if feasible and if requested, be made available to the non-governmental sector by Governments, intergovernmental organizations and international financial institutions in a manner that will not compromise their full autonomy. To ensure transparency, accountability and effective division of labour, these same institutions should make available the necessary information and documents to those non-governmental organizations. International organizations may provide financial and technical assistance to non-governmental organizations in accordance with the laws and regulations of each country.

**15.11** Governments and donor countries, including intergovernmental organizations and international financial institutions, should ensure that non-governmental organizations and their networks are able to maintain their autonomy and strengthen their capacity through regular dialogue and consultations, appropriate training and outreach activities, and thus play a greater partnership role at all levels.

**15.12** Non-governmental organizations and their networks and local communities should strengthen their interaction with their constituencies, ensure the transparency of their activities, mobilize public opinion, participate in the implementation of population and development programmes and actively contribute to the national, regional and international debate on population and development issues. Governments, where appropriate, should include representation of non-governmental organizations on country delegations to regional and international forums where issues on population and development are discussed.

## **B. The private sector**

### **Basis for action**

**15.13** The private, profit-oriented sector plays an important role in social and economic development, including production and delivery of reproductive health-care services and commodities, appropriate education and information relevant to population and development programmes. In a growing number of countries, the private sector has or is developing the financial, managerial and technological capacity to carry out an array of population and development activities in a cost-efficient and effective manner. This experience has laid the groundwork for useful partnerships which the private sector can further develop and expand. Private-sector involvement may assist or supplement but must not mitigate the responsibility of Governments to provide full, safe and accessible reproductive health services to all people. The private sector must also ensure that all population and development programmes, with full respect for the various religious and ethical values and cultural backgrounds of each country's people, adhere to basic rights recognized by the international community and recalled in the present Programme of Action.

**15.14** Another aspect of the private sector's role is its importance as a partner for economic growth and sustainable development.

Through its actions and attitudes, the private sector can make a decisive impact on the quality of life of its employees and often on large segments of society and their attitudes. Experience gained from these programmes is useful to Governments and non-governmental organizations alike in their ongoing efforts to find innovative ways of effectively involving the private sector in population and development programmes. A growing consciousness of corporate responsibilities increasingly is leading private-sector decision makers to search for new ways in which for-profit entities can constructively work with Governments and non-governmental organizations on population and sustainable development issues. By acknowledging the contribution of the private sector, and by seeking more programme areas for mutually beneficial cooperation, Governments and non-governmental organizations alike may strengthen the efficiency of their population and development activities.

## Objectives

**15.15** The objectives are:

(a) To strengthen the partnership between Governments, international organizations and the private sector in identifying new areas of cooperation;

(b) To promote the role of the private sector in service delivery and in the production and distribution, within each region of the world, of high- quality reproductive health and family-planning commodities and contraceptives, which are accessible and affordable to low-income sectors of the population.

## Actions

**15.16** Governments and non-governmental and international organizations should intensify their cooperation with the private, for-profit sector in matters pertaining to population and sustainable development in order to strengthen the contribution of that sector in the implementation of population and development



programmes, including the production and delivery of quality contraceptive commodities and services with appropriate information and education, in a socially responsible, culturally sensitive, acceptable and cost-effective manner.

**15.17** Non-profit and profit-oriented organizations and their networks should develop mechanisms whereby they can exchange ideas and experiences in the population and development fields with a view to sharing innovative approaches and research and development initiatives. The dissemination of information and research should be a priority.

**15.18** Governments are strongly encouraged to set standards for service delivery and review legal, regulatory and import policies to identify and eliminate those policies that unnecessarily prevent or restrict the greater involvement of the private sector in efficient production of commodities for reproductive health, including family planning, and in service delivery. Governments, taking into account cultural and social differences, should strongly encourage the private sector to meet its responsibilities regarding consumer information dissemination.

**15.19** The profit-oriented sector should consider how it might better assist non-profit non-governmental organizations to play a wider role in society through the enhancement or creation of suitable mechanisms to channel financial and other appropriate support to non-governmental organizations and their associations.

**15.20** Private-sector employers should continue to devise and implement special programmes that help meet their employees' needs for information, education and reproductive health services, and accommodate their employees' needs to combine work and family responsibilities. Organized health-care providers and health insurers should also continue to include family planning and reproductive health services in the package of health benefits they provide.

# XVI

Follow-Up  
to the  
Conference\*

## A. Activities at the national level

### Basis for action

**16.1** The significance of the International Conference on Population and Development will depend on the willingness of Governments, local communities, the non-governmental sector, the international community and all other concerned organizations and individuals to turn the recommendations of the Conference into action. This commitment will be of particular importance at the national and individual levels. Such a willingness to truly integrate population concerns into all aspects of economic and social activity and their interrelationships will greatly assist in the achievement of an improved quality of life for all individuals as well as for future generations. All efforts must be pursued towards sustained economic growth within the context of sustainable development.

**16.2** The extensive and varied preparatory processes at the international, regional, subregional, national and local levels have constituted an important contribution to the formulation of the present Programme of Action. Considerable institutional development has taken place in many countries in order to steer the national preparatory process; greater awareness of population issues has been fostered through public information and education campaigns, and national reports have been prepared for the Conference. The great majority of countries participating in the Conference responded to an invitation to prepare comprehensive national population reports. The complementarity of those reports to others commissioned by recent international conferences and initiatives relating to environmental, economic and social

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development is noteworthy and encouraging. The importance of building on these activities in the follow-up to the Conference is fully acknowledged.

**16.3** The main functions related to Conference follow-up include policy guidance, including building strong political support at all levels for population and development; resource mobilization; coordination and mutual accountability of efforts to implement the Programme of Action; problem solving and sharing of experience within and between countries; and monitoring and reporting of progress in the implementation of the Programme of Action. Each of these functions requires concerted and coordinated follow-up at the national and international levels, and must fully involve all relevant individuals and organizations, including non-governmental and community-based organizations. Implementation, monitoring and evaluation of the Programme of Action at all levels should be conducted in a manner consistent with its principles and objectives.

**16.4** The implementation of the present Programme of Action at all levels must be viewed as part of an integrated follow-up effort to major international conferences, including the present Conference, the World Conference on Health for All, the World Conference on Education for All, the World Summit for Children, the United Nations Conference on the Least Developed Countries, the United Nations Conference on Environment and Development, the International Conference on Nutrition, the World Conference on Human Rights, the Global Conference on the Sustainable Development of Small Island Developing States, the World Summit for Social Development, the Fourth World Conference on Women and the United Nations Conference on Human Settlements (Habitat II).

**16.5** The implementation of the goals, objectives and actions of the present Programme of Action will in many instances require additional resources.

## Objective

**16.6** The objective is to encourage and enable countries to fully and effectively implement the Programme of Action, through appropriate and relevant policies and programmes at the national level.

## Actions

**16.7** Governments should:

(a) commit themselves at the highest political level to achieving the goals and objectives contained in the present Programme of Action and

(b) take a lead role in coordinating the implementation, monitoring and evaluation of follow-up actions.

**16.8** Governments, organizations of the United Nations system and major groups, in particular non-governmental organizations, should give the widest possible dissemination to the Programme of Action and should seek public support for the goals, objectives and actions of the Programme of Action. This may involve follow-up meetings, publications and audio-visual aids and both print and electronic media.

**16.9** All countries should consider their current spending priorities with a view to making additional contributions for the implementation of the Programme of Action, taking into account the provisions of chapters XIII and XIV and the economic constraints faced by developing countries.

**16.10** All countries should establish appropriate national follow-up, accountability and monitoring mechanisms in partnership with non-governmental organizations, community groups and representatives of the media and the academic community, as well as with the support of parliamentarians.

**16.11** The international community should assist interested Governments in organizing appropriate national-level follow-up, including national capacity-building for project formulation and programme management, as well as strengthening of coordination and evaluation mechanisms to assess the implementation of the present Programme of Action.

**16.12** Governments, with the assistance of the international community, where necessary, should as soon as possible set up or enhance national databases to provide baseline data and information that can be used to measure or assess progress towards the achievement of the goals and objectives of the present Programme of Action and other related international documents, commitments and agreements. For the purpose of assessing progress, all countries should regularly assess their progress towards achieving the objectives and goals of the Programme of Action and other related commitments and agreements and report, on a periodic basis, in collaboration with non-governmental organizations and community groups.

**16.13** In the preparation of those assessments and reports, Governments should outline successes achieved, as well as problems and obstacles encountered. Where possible, such national reports should be compatible with the national sustainable development plans that countries will prepare in the context of the implementation of Agenda 21. Efforts should also be made to devise an appropriate consolidated reporting system, taking into account all relevant United Nations conferences having national reporting requirements in related fields.

## B. Subregional and regional activities

### Basis for action

**16.14** Activities undertaken at both the subregional and regional levels have been an important aspect of preparations for the Conference. The outcome of subregional and regional preparatory meetings on population and development has clearly demonstrated the importance of acknowledging, alongside both international and national actions, the continuing contribution of subregional and regional action.

### Objective

**16.15** The objective is to promote implementation of the present Programme of Action at the subregional and regional levels, with attention to specific subregional and regional strategies and needs.

### Actions

**16.16** Regional commissions, organizations of the United Nations system functioning at the regional level, and other relevant subregional and regional organizations should play an active role within their mandates regarding the implementation of the present Programme of Action through subregional and regional initiatives on population and development. Such action should be coordinated among the organizations concerned at the subregional and regional levels, with a view to ensuring efficient and effective action in addressing specific population and development issues relevant to the regions concerned, as appropriate.

**16.17** At the subregional and regional levels:

(a) Governments in the subregions and regions and relevant organizations are invited, where appropriate, to reinforce existing follow-up mechanisms, including meetings for the follow-up of regional declarations on population and development issues;

(b) Multidisciplinary expertise should, where necessary, be utilized to play a key role in the implementation and follow-up of the present Programme of Action;

(c) Cooperation in the critical areas of capacity-building, the sharing and exchange of information and experiences, know-how and technical expertise should be strengthened with the appropriate assistance of the international community, taking into account the need for a partnership with non-governmental organizations and other major groups, in the implementation and follow-up of the Programme of Action at the regional level;

(d) Governments should ensure that training and research in population and development issues at the tertiary level are strengthened, and that research findings and implications are widely disseminated.

## **C. Activities at the international level**

### **Basis for action**

**16.18** The implementation of the goals, objectives and actions of the present Programme of Action will require new and additional financial resources from the public and private sectors, non-governmental organizations and the international community. While some of the resources required could come from the reordering of priorities, additional resources will be needed. In this context, developing countries, particularly the least developed countries, will require additional resources, including on concessional and grant terms, according to sound and equitable indicators. Countries with economies in transition may also require temporary assistance in the light of the difficult economic and social problems these countries face at present. Developed countries, and others in a position to do so, should consider providing additional resources, as needed, to support the implementation of the decisions of this Conference through bilateral and multilateral channels, as well as through non-governmental organizations.



**16.19** South-South cooperation at all levels is an important instrument of development. In this regard, such cooperation - technical cooperation among developing countries - should play an important part in the implementation of the present Programme of Action.

## Objectives

**16.20** The objectives are:

(a) To ensure full and consistent support, including financial and technical assistance from the international community, including the United Nations system, for all efforts directed at the implementation of the present Programme of Action at all levels;

(b) To ensure a coordinated approach and a clearer division of labour in population-relevant policy and operational aspects of development cooperation. This should be supplemented by enhanced coordination and planning in the mobilization of resources;

(c) To ensure that population and development issues receive appropriate focus and integration in the work of the relevant bodies and entities of the United Nations system.

## Actions

**16.21** The General Assembly is the highest intergovernmental mechanism for the formulation and appraisal of policy on matters relating to the follow-up to this Conference. To ensure effective follow-up to the Conference, as well as to enhance intergovernmental decision-making capacity for the integration of population and development issues, the Assembly should organize a regular review of the implementation of the present Programme of Action. In fulfilling this task, the Assembly should consider the timing, format and organizational aspects of such a review.

**16.22** The General Assembly and the Economic and Social Council should carry out their respective responsibilities, as entrusted to them in the Charter of the United Nations, in the formulation of policies and the provision of guidance to and coordination of United Nations activities in the field of population and development.

**16.23** The Economic and Social Council, in the context of its role under the Charter, vis-à-vis the General Assembly and in accordance with Assembly resolutions 45/264, 46/235 and 48/162, should assist the General Assembly in promoting an integrated approach and in providing system-wide coordination and guidance in the monitoring of the implementation of the present Programme of Action and in making recommendations in this regard. Appropriate steps should be taken to request regular reports from the specialized agencies regarding their plans and programmes related to the implementation of this Programme of Action, pursuant to Article 64 of the Charter.

**16.24** The Economic and Social Council is invited to review the reporting system within the United Nations system regarding population and development issues, taking into account the reporting procedures that are required in follow-up to other international conferences, with a view to establishing, where possible, a more coherent reporting system.

**16.25** Within their respective mandates and in accordance with General Assembly resolution 48/162, the Assembly, during its forty-ninth session, and the Economic and Social Council, in 1995, should review the roles, responsibilities, mandates and comparative advantages of both the relevant intergovernmental bodies and the organs of the United Nations system addressing population and development, with a view to:

(a) Ensuring the effective and efficient implementation, monitoring and evaluation of the United Nations operational activities that will be undertaken on the basis of the present Programme of Action;

(b) Improving the efficiency and effectiveness of the current United Nations structures and machinery responsible for implementing and monitoring population and development activities, including strategies for addressing coordination and for intergovernmental review;

(c) Ensuring clear recognition of the interrelationships between policy guidance, research, standard-setting and operational activities for population and development, as well as the division of labour between the bodies concerned.

**16.26** As part of this review, the Economic and Social Council should, in the context of General Assembly resolution 48/162, consider the respective roles of the relevant United Nations organs dealing with population and development, including the United Nations Population Fund and the Population Division of the Department for Economic and Social Information and Policy Analysis of the United Nations Secretariat, regarding the follow-up to the present Programme of Action.

**16.27** The General Assembly, at its forty-ninth session, in accordance with its resolution 48/162, is invited to give further consideration to the establishment of a separate Executive Board of the United Nations Population Fund, taking into account the results of the above-mentioned review and bearing in mind the administrative, budgetary and programme implications of such a proposal.

**16.28** The Secretary-General of the United Nations is invited to consult with the various bodies of the United Nations system, as well as with international financial institutions and various bilateral aid organizations and agencies, with a view to promoting an exchange of information among them on the requirements for international assistance and to reviewing, on a regular basis, the specific needs of countries in the field of population and development, including emergency and temporary needs, and maximizing the availability of resources and their most effective utilization.

**16.29** All specialized agencies and related organizations of the United Nations system are invited to strengthen and adjust their activities, programmes and medium-term strategies, as appropriate, to take into account the follow-up to the Conference. Relevant governing bodies should review their policies, programmes, budgets and activities in this regard.

# Notes

- 1 *Report of the United Nations Conference on Environment and Development, Rio de Janeiro, 3-14 June 1992, vol. I, Resolutions Adopted by the Conference* (United Nations publication, Sales No. E.93.I.8 and corrigenda), resolution 1, annex II.
- 2 The source for the population figures in paragraphs 1.3 and 1.4 is *World Population Prospects: The 1994 Revision* (United Nations publication, forthcoming).
- 3 See *Report of the United Nations World Population Conference, Bucharest, 19-30 August 1974* (United Nations publication, Sales No. E.75.XIII.3).
- 4 See *Report of the International Conference on Population, Mexico City, 6-14 August 1984* (United Nations publication, Sales No. E.84.XIII.8 and corrigenda).
- 5 See *Report of the World Conference to Review and Appraise the Achievements of the United Nations Decade for Women: Equality, Development and Peace, Nairobi, 15-26 July 1985* (United Nations publication, Sales No. E.85.IV.10).
- 6 See *First Call for Children* (New York, United Nations Children's Fund, 1990).
- 7 See *Report of the United Nations Conference on Environment and Development, Rio de Janeiro, 3-14 June 1992* (United Nations publication, Sales No. E.93.I.8 and corrigenda).
- 8 See *The Final Report of the International Conference on Nutrition, Rome, 5-11 December 1992* (Rome, Food and Agriculture Organization of the United Nations, 1993).
- 9 See *Report of the World Conference on Human Rights, Vienna, 14-25 June 1993* (A/CONF.157/24 (Part I)).

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- 10 General Assembly resolution 47/75.
- 11 General Assembly resolution 48/163.
- 12 See *Report of the Global Conference on the Sustainable Development of Small Island Developing States, Bridgetown, Barbados, 25 April-6 May 1994* (United Nations publication, Sales No. 94.I.18 and corrigenda).
- 13 General Assembly resolution 44/82.
- 14 General Assembly resolution 47/92.
- 15 Resolutions 36/8 and 37/7 of the Commission on the Status of Women (*Official Records of the Economic and Social Council, 1992, Supplement No. 4 (E/1992/24)*, chap. I, sect. C, and *ibid.*, 1993, *Supplement No. 7 (E/1993/27)*, chap. I, sect. C).
- 16 General Assembly resolution 45/199, annex.
- 17 See *Report of the Second United Nations Conference on the Least Developed Countries, Paris, 3-14 September 1990* (A/CONF.147/18), part one.
- 18 General Assembly resolution 46/151, annex, sect. II.
- 19 Children, as appropriate, adolescents, women, the aged, the disabled, indigenous people, rural populations, urban populations, migrants, refugees, displaced persons and slum-dwellers.

- 20** Unsafe abortion is defined as a procedure for terminating an unwanted pregnancy either by persons lacking the necessary skills or in an environment lacking the minimal medical standards or both (based on World Health Organization, *The Prevention and Management of Unsafe Abortion*, Report of a Technical Working Group, Geneva, April 1992 (WHO/MSM/92.5)).
- 21** Safe motherhood aims at attaining optimal maternal and newborn health. It implies reduction of maternal mortality and morbidity and enhancement of the health of newborn infants through equitable access to primary health care, including family planning, prenatal, delivery and post-natal care for the mother and infant, and access to essential obstetric and neonatal care (World Health Organization, *Health Population and Development*, WHO Position Paper, Geneva, 1994 (WHO/FHE/94.1)).
- 22** Which could include children, adolescents, women, the aged, the disabled, indigenous people, rural populations, urban populations, migrants, refugees, displaced persons and slum-dwellers.

# Statements and Reservations on the Programme of Action



**Explanatory Note** *The following statements are not part of the Programme of Action of the International Conference on Population and Development (Cairo, 1994). They are part of the record of proceedings contained in the report of the Conference (United Nations publications, Sales No. E.95.XIII.18). They are placed in this booklet for ease of reference.*

## Oral statements and reservations on the Programme of Action

*At the 13th and 14th plenary meetings, the representatives of a number of countries made statements which they requested the secretariat of the Conference to place on record. Those statements are set out below.*

### **The representative of Afghanistan stated the following:**

"The delegation of Afghanistan wishes to express its reservation about the word 'individual' in chapter VII and also about those parts that are not in conformity with Islamic Sharia. "

### **The representative of Brunei Darussalam stated the following:**

"According to our interpretation, one aspect of reproductive rights and reproductive health, referring specifically to paragraphs 7.3 and 7.47 and subparagraph 13.14(c) of the Programme of Action, contradicts Islamic law and our national legislation, ethical values and cultural background. My country wishes to place on record its reservation on those paragraphs."

### **The representative of Honduras stated the following:**

"Pursuant to rule 33 of the rules of procedure, the delegation of Honduras, in subscribing to the Programme of Action of this Conference, would like to submit in accordance with rule 38 of the same rules of procedure, the following statement of reservations, requesting that it be included in full in the final report.

"The delegation of Honduras in supporting the Programme of Action of the International Conference on Population and Development bases itself on the Declaration of the Fifteenth Summit of Central American Presidents, adopted at Guacimo de Limon, Costa Rica, on 20 August 1994 and bases itself specifically on the following:

"(a) Article 65 of the Constitution of the Republic of Honduras, which provides for the fact that the right to life is inviolable, and articles 111 and 112 of the same Constitution, which state that the State must protect the institution of the family and marriage and the right of men and women to contract marriages and common law marriages;

"(b) The American Convention on Human Rights, which reaffirms that every person has the right to life and that this right will be protected by law and will be protected in general, starting from the moment of conception, based on moral, ethical, religious and cultural principles, which should regulate the international community, and in accordance with the internationally recognized human rights.

"As a consequence of this, one accepts the concepts of 'family planning', 'sexual health', 'reproductive health', 'maternity without risk', 'regulation of fertility', 'reproductive rights' and 'sexual rights' so long as these terms do not include 'abortion' or 'termination of pregnancy', because Honduras does not accept these as arbitrary actions; nor do we accept them as a way of controlling fertility or regulating the population.

"Secondly, given that new terminology has been introduced in the document, as well as concepts which should be further analysed, and that these terms and concepts are expressed in scientific language, social language or public service language, which will have to be understood in terms of their proper context and are not interpreted in a way that could undermine respect for human

beings, the delegation of Honduras considers that this terminology can only be understood without prejudice to its national law.

“Finally, we also state that the terms ‘family composition and structure’, ‘types of families’, ‘different types of families’, ‘other unions’ and similar terms can only be accepted on the understanding that in Honduras these terms will never be able to mean unions of persons of the same sex. ”

**The representative of Jordan stated the following:**

“The delegation of Jordan, in its deliberations and discussions with all delegations and in a very serious and responsible manner, always wanted to join the consensus on the Programme of Action. While deeply appreciating the great efforts deployed by the Main Committee and the working groups, which have worked for long hours with the aim of achieving consensus on the language, and in full respect of the values of all countries, the delegation of Jordan has reached some compromises regarding the language on all issues.

“We fully believe that the international community respects our national legislation, our religious beliefs and the sovereign right of each country to apply population policies in accordance with its legislation. The delegation of Jordan understands that the final document, particularly chapters IV, V, VI and VII, will be applied within the framework of Islamic Sharia and our ethical values, as well as the laws that shape our behaviour. We will deal with the paragraphs of this document accordingly. Therefore, we interpret the word ‘individuals’ to mean couples, a married couple. I hope that you will put these comments on record.”

**The representative of Kuwait stated the following:**

“The delegation of Kuwait would like to express its support for the Programme of Action, including all its positive points for the benefit of humankind. At the same time, we would like to put on record that our commitment to any objectives on population policies is subject to their not being in contradiction with Islamic

Sharia or with the customs and traditions of Kuwaiti society and the Constitution of the State.”

**The representative of the Libyan Arab Jamahiriya stated the following:**

“The delegation of the Libyan Arab Jamahiriya wishes to express a reservation on all terms in the document that are in contravention of Islamic Sharia, such as we see in paragraph 4.17 and in chapter II of the document, in relation to inheritance and extramarital sexual activities, and the references to sexual behaviour, as in paragraph 8.31.

“I wish to express a reservation, despite the discussion that took place in the Main Committee regarding the basic rights of couples and individuals. We express a reservation regarding the word ‘individuals’.

“The Jamahiriya reconfirms, as part of Arab civilization, the importance of a dialogue among all religions, cultures and peoples in order to achieve world peace; yet no country, no civilization has the right to impose its political, economic and social orientations on any other people.

“I also want to express a reservation on the words ‘unwanted pregnancies’ in paragraph 8.25, because our written Constitution does not allow the State to undertake abortions unless the mother’s health is in danger. ”

**The representative of Nicaragua stated the following:**

“Under rule 33 of the rules of procedure of this Conference, the delegation of Nicaragua supports the general agreement arrived at on the Programme of Action. Nevertheless, we would submit in writing pursuant to rule 38 of the rules of procedure, the following statement of reservations. We would request that this statement be fully reflected in the final report of this Conference.

“The Government of Nicaragua, pursuant to its Constitution and its laws, and as a signatory of the American Convention on Human Rights, confirms that every person has a right to life, this

being a fundamental and inalienable right, and that this right begins from the very moment of conception.

"Accordingly, first we agree that the family may take various forms, but in no event can its essence be changed. Its essence is the union between man and woman, from which new human life derives.

"Second, we accept the concepts of 'family planning', 'sexual health', 'reproductive health', 'reproductive rights' and 'sexual rights' expressing an explicit reservation on these terms and any others when they include 'abortion' or 'termination of pregnancy' as a component. Abortion and termination of pregnancy can under no circumstances be regarded as a method of regulating fertility or a means of population control.

"Third, we also express an explicit reservation on the terms 'couple' or 'unions' when they may refer to persons of the same sex.

"Fourth, Nicaragua accepts therapeutic abortion on the grounds of medical necessity under our Constitution. Thus, we express an explicit reservation on 'abortion' and 'termination of pregnancy' in any part of the Programme of Action of this Conference. "

### **The representative of Paraguay stated the following:**

"In accordance with the introduction to chapter II of the Programme of Action, the delegation of Paraguay would like to express the following reservations.

"On chapter VII, paragraph 7.2, the right to life is the inherent right of every human being from conception to natural death. This is stipulated in article 4 of our national Constitution. Therefore, Paraguay accepts all forms of family planning with full respect for life, as is provided for in our national Constitution, and as an expression of exercising responsible parenthood.

"The inclusion of the term 'interruption of pregnancy' as part of the concept of regulation of fertility in the working definition proposed by the World Health Organization, which was used during the course of this Conference, makes this concept totally unacceptable to our country. We wish to point out that in Paraguay we recognize

constitutionally the need to work on the reproductive health of the population as a way of improving the quality of life of the family.

“On chapter II, principle 9, and chapter V, paragraph 5.1, our national Constitution considers that the family is the basic unit of society and is based on the union of a couple - man and woman - recognizing as well single-parent families. It is only from this perspective that we can include the term ‘various forms of the family’, respecting the various cultures, traditions and religions.

“We would like to request that this statement of reservations be included in the final report of the Conference. ”

**The representative of the Philippines stated the following:**

“The Philippine delegation would like to put on record our regret that in paragraph 10.12 of the Programme of Action the originally proposed wording, recognizing ‘the right to family reunification’ was toned down to just recognizing ‘the vital importance of family reunification’. In the spirit of compromise, we agreed to the revised wording based on the argument forwarded by other delegations that there have been no previous international conventions or declarations proclaiming such a right, and that this is not the appropriate conference to establish this right. For this and other worthy reasons, we wish to reiterate the recommendation made in the Main Committee, supported by many delegations and received positively by the Chairman, that an international conference on migration be convened in the near future. We trust that this recommendation will be part of the record of this Conference and will be formally referred to the Economic and Social Council and the General Assembly for proper consideration.”

**The representative of the Syrian Arab Republic stated the following:**

“I should like to put on record that the Syrian Arab Republic will deal with and address the concepts contained in the Programme of Action in accordance with chapter II and in full accordance with the ethical, cultural and religious concepts and convictions of our

society in order to serve the unit of the family, which is the nucleus of society, and in order to enhance prosperity in our societies.”

**The representative of the United Arab Emirates stated the following:**

“The delegation of the United Arab Emirates believes in protecting man and promoting his welfare and in enhancing his role in the family and in the State and at the international level. We consider also that man is the central object and the means for attaining sustainable development. We do not consider abortion as a means of family planning, and we adhere to the principles of Islamic law also in matters of inheritance.

“We wish to express reservations on everything that contravenes the principles and precepts of our religion Islam, a tolerant religion, and our laws. We would like the secretariat of the Conference to put on record the position we have expressed among the reservations that have been mentioned by other States on the final document. ”

**The representative of Yemen stated the following:**

“The delegation of Yemen believes that chapter VII includes certain terminology that is in contradiction with Islamic Sharia. Consequently, Yemen expresses reservations on every term and all terminology that is in contradiction with Islamic Sharia.

“In chapter VIII, we have some observations to make, particularly relating to paragraph 8.24. Actually, we wanted to delete the words ‘sexual activity’. And, if we cannot delete them, then we wish to express our reservations. In paragraph 8.25, concerning ‘unsafe abortion’, we find that the definition is unclear and is not in accordance with our religious beliefs. In Islamic Sharia there are certain clear-cut provisions on abortion and when it should be undertaken. We object to the expression ‘unsafe abortion’. We wish to express our reservations on paragraph 8.35, relating to ‘responsible sexual behaviour’.”

## Written Statements Submitted On The Programme Of Action

*The written statements set out below were submitted to the Conference secretariat for inclusion in the report of the Conference.*

### **The representative of Djibouti submitted the following written statement:**

"The delegation of the Republic of Djibouti has the honour to inform you of its wish to enter express reservations on all the passages in the paragraphs of the Programme of Action of the International Conference on Population and Development which conflict with the principles of Islam and with the legislation, laws and culture of the Republic of Djibouti.

"The delegation of Djibouti would like its reservations to be reflected in the report of the Conference."

### **The representative of the Dominican Republic submitted the following written statement:**

"Pursuant to rule 33 of the rules of procedure of the Conference (A/CONF.171/2) the Dominican Republic joins in the general agreement on the Programme of Action. However, in accordance with its Constitution and laws and as a signatory of the American Convention on Human Rights, it fully confirms its belief that everyone has a fundamental and inalienable right to life and that this right to life begins at the moment of conception.

"Accordingly, it accepts the content of the terms 'reproductive health', 'sexual health', 'safe motherhood', 'reproductive rights', 'sexual rights' and 'regulation of fertility' but enters an express reservation on the content of these terms and of other terms when their meaning includes the concept of abortion or interruption of pregnancy.

"We also enter an express reservation on the term 'couple' here it refers to persons of the same sex or where individual reproductive rights are mentioned outside the context of marriage and the family.

"These reservations also apply to all regional and international agreements which refer to these concepts.



*“Chapters V and X*

“The Government of the Dominican Republic wishes to place on record that during the proceedings of the Conference in general, and in particular with regard to chapters V and X, it often proved difficult to reach a consensus owing to the lack of international instruments embodying the right to the integrity of the family.

“Aware that by promoting the unity and integrity of the family as a natural development system we are ensuring the comprehensive, sustainable development of our communities, we propose that this right to the integrity of the family be considered by the United Nations with a view to its adoption as soon as possible.

“Pursuant to rule 38 of the rules of procedure, we request that this statement of reservations be included in full in the final report of the Conference. 24.”

**The representative of Ecuador submitted the following written statement:**

“Pursuant to rule 33 of the rules of procedure of the Conference (A/CONF.171/2), the Government of Ecuador joins in the general agreement on the Programme of Action.

“However, pursuant to rule 38 of the rules of procedure, we enter the following reservations for inclusion in the final report of the Conference.

*“Reservation*

“With regard to the Programme of Action of the Cairo International Conference on Population and Development and in accordance with the provisions of the Constitution and laws of Ecuador and the norms of international law, the delegation of Ecuador reaffirms, inter alia, the following principles embodied in its Constitution: the inviolability of life, the protection of children from the moment of conception, freedom of conscience and religion, the protection of the family as the fundamental unit of society, responsible paternity, the right of parents to bring up their children and the formulation of population and development plans by the Government in accordance with the principles of respect for sovereignty.

"Accordingly, the delegation of Ecuador enters a reservation with respect to all terms such as 'regulation of fertility', 'interruption of pregnancy', 'reproductive health', 'reproductive rights' and 'unwanted children', which in one way or another, within the context of the Programme of Action, could involve abortion.

"Ecuador also enters a reservation concerning certain unnatural concepts relating to the family, inter alia, which might undermine the principles contained in its Constitution.

"The Government of Ecuador is willing to collaborate in all activities designed to achieve the common good, although it does not and cannot accept principles which infringe its sovereignty, Constitution and laws."

**The representative of Egypt submitted the following written statement:**

"We wish to point out that the delegation of Egypt was among those delegations that registered numerous comments on the contents of the Programme of Action with regard to the phrase 'couples and individuals'.

"While recognizing that this expression was adopted by consensus at the two previous population conferences of 1974 and 1984, our delegation called for the deletion of the word 'individuals' since it has always been our understanding that all the questions dealt with by the Programme of Action in this regard relate to harmonious relations between couples united by the bond of marriage in the context of the concept of the family as the primary cell of society.

"We should like the report of the Conference to reflect the above."

**The Government of Guatemala submitted the following written statement:**

"The delegation of Guatemala wishes to offer its thanks to the Egyptian people and authorities and to the organizers of the Conference for their hospitality and for the services provided, for they made it possible for our deliberations about life and

humanity's future development to reach a conclusion which our delegation sincerely hopes will enhance respect for the life and dignity of men and women, especially those of the new generations, in which we will have to place our faith and trust in order to face the future without recourse to apocalyptic forecasts but in solidarity, justice and truth.

"Pursuant to rule 33 of the rules of procedure of the Conference (A/CONF.171/2), the Republic of Guatemala joins in the general agreement on the Programme of Action.

"Pursuant to rule 38, we submit the following statement of reservations and request that it be included in full in the final report of the Conference.

"The Government of Guatemala enters an express reservation on the use of terms, stipulations and provisions which are implicitly or explicitly inconsistent with:

- "1. The American Declaration of the Rights and Duties of Man;
- "2. The American Convention on Human Rights (Pact of San Jose);
- "3. The guidelines adopted at the fifteenth summit meeting of Central American Presidents;
- "4. The Constitution of the Republic of Guatemala;
- "5. Civil, criminal and human rights legislation;
- "6. The Multisectoral Agreement on Population Education issued by the Ministry of Education of Guatemala and the teaching approach used in such education;
- "7. The message to the Conference from the President of the Republic, Ramiro de Leon Carpio. We also enter express reservations on:

"(a) Chapter II (Principles): we accept this chapter but note that life exists from the moment of conception and that the right to life is the source of all other rights;

"(b) Chapter V, paragraph 5.1: we accept this provision on the understanding that, although the family may exist in various forms, under no circumstances can its essential nature, which is

the union between a man and a woman from which love and life stem, be changed;

“(c) Chapter VII: we enter a reservation on the whole chapter, for the General Assembly’s mandate to the Conference does not extend to the creation or formulation of rights; this reservation therefore applies to all references in the document to ‘reproductive rights’, ‘sexual rights’, ‘reproductive health’, ‘fertility regulation’, ‘sexual health’, ‘individuals’, ‘sexual education and services for minors’, ‘abortion in all its forms’, ‘distribution of contraceptives’ and ‘safe motherhood’;

“(d) Chapter VIII: on all the paragraphs or sentences which contain or refer to the terms and concepts mentioned above;

“(e) Chapters IX, XII, XIII and XV: on references to those same terms and concepts.”

**The representative of the Holy See submitted the following written statement:**

“Our conference, attended by persons of various traditions and cultures, with widely differing viewpoints, has carried out its work in a peaceful and respectful atmosphere. The Holy See welcomes the progress that has been made in these days, but also finds that some of its expectations have not been met. I am sure that most delegations share similar sentiments.

“The Holy See knows well that some of its positions are not accepted by others present here. But there are many, believers and non-believers alike, in every country of the world, who share the views we have expressed. The Holy See appreciates the manner in which delegations have listened to and taken into consideration views which they may not always have agreed with. But the Conference would be poorer if these views had not been heard. An international conference which does not welcome voices that are different would be much less a consensus conference.

“As you well know, the Holy See could not find its way to join the consensus of the Conferences of Bucharest and Mexico City,

because of some fundamental reservations. Yet, now in Cairo for the first time, development has been linked to population as a major issue of reflection. The current Programme of Action, however, opens out some new paths concerning the future of population policy. The document is notable for its affirmations against all forms of coercion in population policies. Clearly elaborated principles, based on the most important documents of the international community, clarify and enlighten the later chapters. The document recognizes the protection and support required by the basic unit of society, the family founded on marriage. Women's advancement and the improvement of women's status, through education and better health-care services, are stressed. Migration, the all too often forgotten sector of population policy has been examined. The Conference has given clear indications of the concern that exists in the entire international community about threats to women's health. There is an appeal to greater respect for religious and cultural beliefs of persons and communities.

"But there are other aspects of the final document which the Holy See cannot support. Together with so many people around the world, the Holy See affirms that human life begins at the moment of conception. That life must be defended and protected. The Holy See can therefore never condone abortion or policies which favour abortion. The final document, as opposed to the earlier documents of the Bucharest and Mexico City Conferences, recognizes abortion as a dimension of population policy and, indeed of primary health care, even though it does stress that abortion should not be promoted as means of family planning and urges nations to find alternatives to abortion. The preamble implies that the document does not contain the affirmation of a new internationally recognized right to abortion.

"My delegation has now been able to examine and evaluate the document in its entirety. On this occasion the Holy See wishes, in some way, to join the consensus, even if in an incomplete, or partial manner.

“First, my delegation joins the consensus on the Principles (chapter II), as a sign of our solidarity with the basic inspiration which has guided, and will continue to guide, our work. Similarly, it joins the consensus on chapter V on the family, the basic unit of society.

“The Holy See joins the consensus on chapter III on population, sustained economic growth and sustainable development, although it would have preferred to see a more detailed treatment of this subject. It joins the consensus on chapter IV (Gender equality, equity and empowerment of women) and chapters IX and X on migration issues.

“The Holy See, because of its specific nature, does not find it appropriate to join the consensus on the operative chapters of the document (chapters XII to XVI).

“Since the approval of chapters VII and VIII in the Committee of the Whole, it has been possible to evaluate the significance of these chapters within the entire document, and also within health-care policy in general. The intense negotiations of these days have resulted in the presentation of a text which all recognize as improved, but about which the Holy See still has grave concerns. At the moment of their adoption by consensus by the Main Committee, my delegation already noted its concerns about the question of abortion. The chapters also contain references which could be seen as accepting extramarital sexual activity, especially among adolescents. They would seem to assert that abortion services belong within primary health care as a method of choice.

“Despite the many positive aspects of chapters VII and VIII, the text that has been presented to us has many broader implications, which has led the Holy See to decide not to join the consensus on these chapters. This does not exclude the fact that the Holy See supports a concept of reproductive health as a holistic concept for the promotion of the health of men and women and will continue to work, along with others, towards the evolution of a more precise definition of this and other terms.

"The intention therefore of my delegation is to associate itself with this consensus in a partial manner compatible with its own position, without hindering the consensus among other nations, but also without prejudicing its own position with regard to some sections.

"Nothing that the Holy See has done in this consensus process should be understood or interpreted as an endorsement of concepts it cannot support for moral reasons. Especially, nothing is to be understood to imply that the Holy See endorses abortion or has in any way changed its moral position concerning abortion or on contraceptives or sterilization or on the use of condoms in HIV/AIDS prevention programmes.

"I would ask that the text of this statement and the reservations formally indicated below be included in the report of the Conference.

#### *"Reservations*

"The Holy See, in conformity with its nature and its particular mission, by joining in the consensus to parts of the final document of the International Conference on Population and Development (Cairo, 5-13 September 1994), wishes to express its understanding of the Programme of Action of the Conference.

"1. Regarding the terms 'sexual health' and 'sexual rights', and 'reproductive health' and 'reproductive rights', the Holy See considers these terms as applying to a holistic concept of health, which embrace, each in their own way, the person in the entirety of his or her personality, mind and body, and which foster the achievement of personal maturity in sexuality and in the mutual love and decision-making that characterize the conjugal relationship in accordance with moral norms. The Holy See does not consider abortion or access to abortion as a dimension of these terms.

"2. With reference to the terms 'contraception', 'family planning', 'sexual and reproductive health', 'sexual and reproductive rights', and "women's ability to control their own fertility", 'widest range of family-planning services' and any other terms regarding

family-planning services and regulation of fertility concepts in the document, the Holy See's joining the consensus should in no way be interpreted as constituting a change in its well-known position concerning those family-planning methods which the Catholic Church considers morally unacceptable or on family-planning services which do not respect the liberty of the spouses, human dignity and the human rights of those concerned.

"3. With reference to all international agreements, the Holy See reserves its position in this regard, in particular on any existing agreements mentioned in this Programme of Action, consistent with its acceptance or non-acceptance of them.

"4. With reference to the term 'couples and individuals', the Holy See reserves its position with the understanding that this term is to mean married couples and the individual man and woman who constitute the couple. The document, especially in its use of this term, remains marked by an individualistic understanding of sexuality which does not give due attention to the mutual love and decision-making that characterizes the conjugal relationship.

"5. With reference to chapter V, the Holy See interprets this chapter in the light of principle 9, that is, in terms of the duty to strengthen the family, the basic unit of society, and in terms of marriage as an equal partnership between husband and wife.

"6. The Holy See places general reservations on chapters VII, VIII, XI, XII, XIII, XIV, XV and XVI. This reservation is to be interpreted in terms of the statement made by the delegation in the plenary meeting of the Conference on 13 September 1994. We request that this general reservation be noted in each of the above-mentioned chapters."

**The representative of the Islamic Republic of Iran submitted the following written statement:**

"The Programme of Action, although it has some positive elements, does not take into account the role of religion and religious systems in the mobilization of development capabilities. It suffices for us to



know that Islam, for example, makes it the duty of every Muslim to satisfy the essential needs of the community and also imposes the duty of showing gratitude for benefits by utilizing them in the best possible way, as well as the duties of justice and balance.

"We therefore believe that the United Nations should convene symposiums to study this matter.

"There are some expressions that could be interpreted as applying to sexual relations outside the framework of marriage, and this is totally unacceptable. The use of the expression "individuals and couples" and the contents of principle 8 demonstrate this point. We have reservations regarding all such references in the document.

"We believe that sexual education for adolescents can only be productive if the material is appropriate and if such education is provided by the parents and aimed at preventing moral deviation and physiological diseases."

**The representative of Malta submitted the following written statement:**

*"Reservations on chapter VII*

"In joining the consensus, the delegation of Malta would like to state:

"The delegation of Malta reserves its position on the title and provisions of this chapter and in particular on the use of such terms as "reproductive health", "reproductive rights" and "regulation of fertility" in this chapter and in other parts of the document.

"The interpretation given by Malta is consistent with its national legislation, which considers the termination of pregnancy through induced abortion as illegal.

"Furthermore the delegation of Malta reserves its position on the provisions of paragraph 7.2, in particular on "international human rights documents and other relevant United Nations consensus documents", consistent with its previous acceptance or non-acceptance of them.

*“Reservations on chapter VIII, paragraph 8.25*

“In joining the consensus, the delegation of Malta would like to state:

“The termination of pregnancy through procedures of induced abortion is illegal in Malta. The delegation of Malta therefore cannot accept without reservation that part of paragraph 8.25 which provides for ‘circumstances in which abortion is not against the law’.

“Furthermore the delegation of Malta reserves its position on the wording “such abortion should be safe” since it feels that this phrase could lend itself to multiple interpretations, implying among other things, that abortion can be completely free of medical and other psychological risks, while ignoring altogether the rights of the unborn.”

**The representative of Peru submitted the following written statement:**

“The delegation of Peru will join in the agreement on the Programme of Action. In its opinion, the negotiations which are culminating today in the adoption of the Programme of Action have also demonstrated that positions diverge on some of the substantive concepts of the Programme and that the international community clearly wishes to reach agreements which we hope will benefit everyone; we welcome this attempt to reach consensus.

“However, the Government of Peru wishes to place on record the following points:

“1. The main lines of the Programme of Action will be implemented in Peru under the Constitution and laws of the Republic and, inter alia, under the international human rights treaties and the Convention on the Rights of the Child, which have been duly approved and ratified by Peru.

“2. We must mention in this context article 2 of the Constitution, which accords to everyone the right to life from the moment of conception; abortion is rightly classified as a crime in the Criminal Code of Peru, with the sole exception of therapeutic abortion.

"3. Peru regards abortion as a public health problem to be tackled mainly by means of education and family planning programmes. Accordingly, the Constitution acknowledges the fundamental role played by the family and parents in the form of responsible paternity and maternity, which is nothing more than the right of parents to choose freely and voluntarily the number and the spacing of their children. The same applies to their chosen method of family planning, provided that it does not place life at risk.

"4. The Programme of Action contains concepts such as 'reproductive health', 'reproductive rights' and 'fertility regulation', which in the opinion of the Peruvian Government require more precise definition, with the total exclusion of abortion on the ground that it is inconsistent with the right to life.

"We should be grateful if this interpretative reservation on the Programme of Action could be duly placed on record.

"Finally, we wish to endorse the congratulations and thanks expressed by other delegations."

## **Withdrawal of reservations to the Programme of Action of 1994 International Conference on Population and Development**

1. The Government of El Salvador withdrew its reservations to the Programme of Action of 1994 International Conference on Population and Development on 11 August 2010. Please refer to General Assembly document A/64/894 dated 16 August 2010.

2. The Government of Argentina withdrew its reservations to the Programme of Action of 1994 International Conference on Population and Development on 13 September 2013 through a letter to the Secretary General.



# Key Actions for the Further Implementation of the Programme of Action of the International Conference on Population and Development

*Adopted at the  
Twenty-first special session  
of the General Assembly*

New York  
30 June – 2 July 1999

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# Preamble



**1.** The Programme of Action of the International Conference on Population and Development,<sup>1</sup> approved by consensus on 13 September 1994, as contained in the report of the Conference and as endorsed by the General Assembly in its resolution 49/128 of 19 December 1994, marked the beginning of a new era in population and development. The objective of the landmark agreement reached at the Conference was to raise the quality of life and the well-being of human beings and to promote human development by recognizing the interrelationships between population and development policies and programmes aiming to achieve poverty eradication, sustained economic growth in the context of sustainable development, education, especially for girls, gender equity and equality, infant, child and maternal mortality reduction, the provision of universal access to reproductive health services, including family planning and sexual health, sustainable patterns of consumption and production, food security, human resources development and the guarantee of all human rights, including the right to development as a universal and inalienable right and an integral part of fundamental human rights.

**2.** The Programme of Action acknowledges that the goal of the empowerment and autonomy of women and the improvement of their political, social, economic and health status is a highly important end in itself and is essential for the achievement of sustainable development. Greater investments in health and education services for all people, in particular women, to enable the full and equal participation of women in civil, cultural, economic, political and social life are essential to achieving the objectives of the Programme of Action.

**3.** The Programme of Action emphasizes that everyone has the right to education, which shall be directed to the full development of human resources, and human dignity and potential, with particular attention to women and the girl child, and therefore everyone should be provided with the education necessary to meet basic human needs and to exercise human rights. It calls for the elimination of all practices that discriminate against women, and affirms that advancing gender equality and equity and the empowerment of women, the elimination of all kinds of violence against women and ensuring women's ability to control their own fertility are cornerstones of population and development-related programmes. It affirms that the human rights of women and the girl child are an inalienable, integral and indivisible part of universal human rights. It further affirms that reproductive rights embrace certain human rights that are already recognized in national laws, international human rights documents, and other consensus documents. These rights rest on the recognition of the basic right of all couples and individuals to decide freely and responsibly the number, spacing and timing of their children and to have the information and means to do so, and the right to attain the highest standard of sexual and reproductive health. It also includes their right to make decisions concerning reproduction free of discrimination, coercion and violence, as expressed in human rights documents. In the exercise of this right, they should take into account the needs of their living and future children and their responsibilities towards the community. The promotion of the responsible exercise of those rights for all people should be the fundamental basis for government- and community-supported policies and programmes in the area of reproductive health, including family planning.

**4.** The International Conference on Population and Development and its implementation must be seen as being closely related to the outcome of and coordinated follow-up to the other major United Nations conferences held in the 1990s. Progress in the implementation of the Programme of Action should be supportive of and consistent with the integrated follow-up to all major United Nations conferences and summits.

**5.** The implementation of the recommendations contained in the Programme of Action and those contained in the present document is the sovereign right of each country, consistent with national laws and development priorities, with full respect for the various religious and ethical values and cultural backgrounds of its people, and in conformity with universally recognized international human rights.

**6.** The Programme of Action recommended a set of interdependent quantitative goals and objectives. These included universal access to primary education, with special attention to closing the gender gap in primary and secondary school education, wherever it exists; universal access to primary health care; universal access to a full range of comprehensive reproductive health-care services, including family planning, as set out in paragraph 7.6 of the Programme of Action; reductions in infant, child and maternal morbidity and mortality; and increased life expectancy. The Programme of Action also proposed a set of qualitative goals that are mutually supportive and of critical importance to achieving the quantitative goals and objectives.

**7.** The Programme of Action articulates a comprehensive approach to issues of population and development, identifying a range of demographic and social goals to be achieved over a 20-year period. While the Programme of Action does not quantify goals for population growth, structure and distribution, it reflects the view that an early stabilization of world population would make a crucial contribution to realizing the overarching objective of sustainable development.

**8.** According to the United Nations estimates and projections, the world's population will exceed 6 billion for the first time in 1999, of which nearly 80 per cent will be living in developing countries. Depending on the quality and the magnitude of the actions taken over the next five to ten years in the areas of population policy and reproductive health, including the provision of family planning services, world population will total somewhere between 6.9 billion and 7.4 billion in 2015. The majority of the world's countries are converging in a pattern of low birth and death rates, but since these countries are proceeding at different speeds, the emerging picture is that of a world facing increasingly diverse demographic situations. The world's reproductive age population continues to grow at a slightly higher rate than the world's population as a whole, reflecting the large number of young people entering their childbearing years. The Programme of Action rightly emphasizes the need to integrate population concerns fully into development strategies and planning, taking into account the interrelationship of population issues with the goals of poverty eradication, food security, adequate shelter, employment and basic social services for all, with the objective of improving the quality of life of present and future generations through appropriate population and development policies and programmes.

9. The five-year review of progress shows that the implementation of the recommendations of the Programme of Action has shown positive results. Many countries have taken steps to integrate population concerns into their development strategies. Mortality in most countries has continued to fall in the five years since the adoption of the Programme of Action. The Conference's broad-based definition of reproductive health is being accepted by an increasing number of countries and steps are being taken to provide comprehensive services in many countries, with increasing emphasis being given to quality of care. The rising use of family planning methods indicates that there is greater accessibility to family planning and that more and more couples and individuals are able to choose the number and spacing of their children. Many countries, both countries of origin and countries of destination, have taken important steps, including, *inter alia*, at the regional level, aimed at better managing international migration flows through bilateral and multinational agreements. In addition, many civil society organizations are contributing to the formulation and implementation of policies, programmes and projects on their own or in partnerships with governmental and intergovernmental organizations as well as the private sector.

**10.** However, for some countries and regions, progress has been limited and, in some cases, setbacks have occurred. Women and the girl child continue to face discrimination. The human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS) pandemic has led to rises in mortality in many countries, in particular in sub-Saharan Africa. Mortality and morbidity among adults and children from infectious, parasitic and water-borne diseases, such as tuberculosis, malaria and schistosomiasis, continue to take their toll. Maternal mortality and morbidity remain unacceptably high. Adolescents remain particularly vulnerable to reproductive and sexual risks. Millions of couples and individuals still lack access to reproductive health information and services. An increase in adult mortality, especially among men, is a matter of special concern for countries with economies in transition and some developing countries. The impact of the financial crises in countries of Asia and elsewhere, as well as the long-term and large-scale environmental problems in Central Asia and other regions, is affecting the health and well-being of individuals and limiting progress in implementing the Programme of Action. Despite the goal of the Programme of Action of reducing pressures leading to refugee movements and displaced persons, the plight of refugees and displaced persons remains unacceptable.

**11.** Achieving the goals and objectives of the Programme of Action will require sufficient domestic and external resources, committed government action and effective, transparent partnerships. In order to implement further the Programme of Action, a number of financial, institutional and human-resource constraints must be overcome. Implementing the key actions of the present document and addressing the full range of recommendations of the

Programme of Action will require greater political commitment, development of national capacity, increased international assistance and increased domestic resources. Effective priority-setting, within each national context, is an equally critical factor for the successful implementation of the Programme of Action.

**12.** In implementing and taking forward the Programme of Action, an integrated approach should be adopted towards policy design, development planning, service delivery, research and monitoring to utilize scarce resources for greater added value and to promote intersectoral coordination.

**13.** The present document draws on the results and findings of intergovernmental reviews under the auspices of the United Nations, including the annual and quinquennial review and appraisal by the Commission on Population and Development and meetings and reports of the United Nations regional commissions regarding progress made and constraints faced in the implementation of the Programme of Action.

**14.** In recommending the key actions contained in the present document, Governments affirm their renewed and sustained commitment to the principles, goals and objectives of the Programme of Action. Governments and civil society at the national level, in partnership with the international community, should join in efforts to ensure that the goals and objectives of the International Conference on Population and Development are accomplished as soon as possible, with special attention to those that should be met within the twenty-year time-frame of the Programme of Action.

# Population and Development Concerns



## A. Population, economic development and the environment

### 15. Governments should:

(a) Intensify efforts to equip planners and decision makers with a better understanding of the relationships among population, poverty, gender inequity and inequality, health, education, the environment, financial and human resources, and development; and re-examine recent research concerning the relationships among reductions in fertility and economic growth and its equitable distribution;

(b) Draw attention to and promote linkages among macro-economic, environmental and social policies through increased dialogue among finance ministries and other relevant ministries;

(c) Intensify efforts to implement legislative and administrative measures as well as to promote public education, with special attention to youth, about the need for sustainable production and consumption patterns; foster sustainable natural resource use; and work concertedly to prevent environmental degradation within their countries;

(d) Increase investments in the social sector, especially health and education, as an effective strategy for development;

(e) Develop and expand integrated community-based approaches to sustainable development.

16. Governments, in cooperation with the international community, should reaffirm their commitment to promoting an enabling environment to achieve sustained economic growth in the context of sustainable development and to eradicating poverty, with a special emphasis on gender, including by promoting an open, equitable, secure, non-discriminatory and predictable trading system; stimulating direct investment; reducing the debt burden; and ensuring that structural adjustment programmes are responsive to

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social, economic and environmental concerns. Population-related goals and policies outlined in the Programme of Action need to be reflected, as appropriate, in international agreements in such areas as environment and trade.

**17.** Governments of developing countries and countries with economies in transition, with the assistance of the international community, especially donors, including through bilateral and multilateral financial support, should ensure that social safety nets are implemented, especially in those countries most affected by the recent global financial crisis, and ensure that they are adequately funded.

**18.** Governments of developing countries and countries with economies in transition, with the assistance of the international community, especially donors, should:

(a) Continue to support declines in infant and child mortality rates by strengthening infant and child health programmes that emphasize improved prenatal care and nutrition, including breastfeeding, unless it is medically contraindicated, universal immunization, oral rehydration therapies, clean water sources, infectious disease prevention, reduction of exposure to toxic substances, and improvements in household sanitation; and by strengthening maternal health services, quality family-planning services to help couples to time and space births, and efforts to prevent transmission of HIV/AIDS and other sexually transmitted diseases;

(b) Strengthen health-care systems to respond to priority demands on them, taking into account the financial realities of countries and the need to ensure that resources are focused on the health needs of people in poverty;

(c) Determine the causes of the stagnation or increase in mortality levels among adult populations and develop special policies and programmes on health promotion where such stagnation or increase is observed, especially among women in reproductive age groups and males in productive age groups;

(d) Ensure that poverty eradication programmes are targeted particularly at females and that priority is given to female-headed households;

(e) Develop innovative ways to provide more effective assistance to strengthen families in extreme poverty, such as providing micro-credit for poor families and individuals;

(f) Undertake policies and programmes that seek to ensure a level of consumption that meets the basic needs of the poor and disadvantaged.

**19.** Measures should be taken to strengthen food, nutrition and agricultural policies and programmes, and fair trade relations, with special attention to the creation and strengthening of food security at all levels.

**20.** Governments should promote and protect the rights of indigenous people with particular regard to their cultures, resources, belief systems, land rights and languages.

## **B. Changing age structure and ageing of the population**

### **21. Governments should:**

(a) Continue to examine the economic and social implications of demographic change and how they relate to development planning concerns and the needs of individuals;

(b) Meet the needs of youth, especially young women, with the active support, guidance and participation, as appropriate, of parents, families, communities, non-governmental organizations and the private sector, by investing in the development and implementation of national, regional and local plans. In this context, priority should be given to programmes such as education, income-generating opportunities, vocational training, and health services, including those related to sexual and reproductive health. Youth should be fully involved in the design, implementation and evaluation of such programmes and plans. These policies, plans and programmes should be implemented in line with the commitments made at the International Conference on Population and Development and in conformity with the relevant international conventions and agreements. Emphasis should be placed on fostering intergenerational dialogue through better communication and mutual support;

(c) Support research and develop comprehensive strategies at the national, regional and local levels to meet, where appropriate, the challenges of population ageing. Invest more resources in gender-sensitive research as well as in training and capacity-building in social policies and health care of older persons, especially the elderly poor, paying special attention to the economic and social security of older persons, in particular older women; affordable, accessible and appropriate health-care services; the human rights and dignity of older persons and the productive and useful roles that they can play in society; support systems to enhance

the ability of families and communities to care for older family members; the ability of the elderly to care for family members and community victims of HIV/AIDS; and generational solidarity with the goal of maintaining and improving social cohesion.

**22.** Governments and civil society, including non-governmental organizations and the private sector, should create opportunities and remove barriers that hinder elderly women and men from continuing to contribute their skills to their families, to the workforce and to their communities, in order to help to foster intergenerational solidarity and enhance the well-being of society. This will require life-long education and opportunities for retraining.

**23.** The United Nations system should, provided that additional resources are made available, document the positive experience of policies and programmes in the area of ageing of men and women and disseminate information and recommendations about those practices. Countries should be enabled, through adequate training and capacity-building, to evolve their own policies appropriate to their cultures, traditions and socio-economic circumstances.

## C. International migration

**24.** Governments in both countries of origin and countries of destination, including through international cooperation, are urged:

(a) To intensify efforts to protect the human rights and dignity of migrants irrespective of their legal status; provide effective protection for migrants; provide basic health and social services, including sexual and reproductive health and family-planning services; facilitate family reunification of documented migrants; monitor violations of the human rights of migrants; effectively enforce the laws applicable to the protection of human rights; and ensure the social and economic integration of documented migrants, especially of those who have acquired the right to long-term residence in the country of destination, and their equal

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treatment before the law. Non-governmental organizations should play a valuable role in meeting the needs of migrants;

(b) To prevent trafficking in migrants, in particular women and children subjected to forced labour or sexual or commercial exploitation; to develop clear penalties for such trafficking and migrant smuggling, backed by effective administrative procedures and laws, ensuring punishment of those who commit such crimes; and to finalize as soon as possible the trafficking and smuggling protocols which are currently being negotiated by the Commission on Crime Prevention and Criminal Justice;

(c) To support and ensure effective follow-up to bilateral and multilateral initiatives, including regional and subregional consultation processes, where appropriate, to develop national policies and cooperative strategies to maximize the benefits and manage the challenges posed by international migration;

(d) To conduct public information campaigns on migration in both countries of origin and countries of destination so that racist and xenophobic attitudes in countries of destination are combated and so that potential migrants fully understand the implications of the decisions to move;

(e) To consider ratifying or acceding to the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families,<sup>2</sup> if they have not already done so.

**25.** The international community should extend assistance and support to programmes in developing countries that host the majority of refugees and displaced persons. Assistance should also be extended to programmes in countries lacking the capacity to manage large flows of migrants and displaced persons.

**26.** All States are encouraged to become parties to the 1951 Convention<sup>3</sup> and the 1967 Protocol<sup>4</sup> relating to the Status of Refugees and put in place effective asylum procedures.

**27.** Governments, with the assistance of the international community, should intensify their efforts to improve data collection and analysis, including gender-based analysis, in the areas of international migration and, in this context, promote the implementation of the United Nations recommendations on statistics of international migration; encourage studies designed to assess the causes of international migration and displacement and the positive contribution that migration makes to both countries of origin and countries of destination; and improve understanding of the links between relevant factors that have an impact on international migration.

**28.** The international community should channel adequate support to effective programmes to address the causes of movement of refugees and displaced persons.

**29.** In planning and implementing refugee assistance activities, special attention should be given to the specific needs of refugee women and children and elderly refugees. Adequate and sufficient international support should be extended to meet the basic needs of refugee populations, including the provision of access to adequate accommodation, education, protection from violence, health services, including reproductive health and family planning, and other basic social services, including clean water, sanitation, and nutrition. Refugees should respect the laws and regulations of their countries of asylum. Governments are urged to abide by international law concerning refugees, *inter alia*, by respecting the principle of non-refoulement. In acknowledging refugees' rights to repatriation, their return and integration should be facilitated in cooperation with relevant international organizations.

## **D. Internal migration, population distribution and urban agglomerations**

**30.** Governments should carry out research to strengthen the understanding of the factors, trends and characteristics of internal migration and geographical distribution of the population in order to provide grounds for the formulation of effective population distribution policy.

**31.** Governments should improve the management and delivery of services for the growing urban agglomerations and put in place enabling legislative and administrative instruments and adequate financial resources to meet the needs of all citizens, especially the urban poor, internal migrants, older persons and the disabled.

**32.** Governments should strongly reaffirm the call in the Programme of Action that population distribution policies should be consistent with such international instruments as the Geneva Convention relative to the Protection of Civilian Persons in Time of War, of 12 August 1949,<sup>5</sup> including article 49 thereof.

**33.** Governments should strongly reaffirm the call in the Programme of Action that countries should address the causes of internal displacement, including environmental degradation, natural disasters, armed conflict and forced resettlement, and establish the necessary mechanisms to protect and assist displaced persons, including, where possible, compensation for damages, especially for those who are not able to return to their normal place of residence in the short term and, where appropriate, facilitate their return and reintegration, with special attention to the needs of women and children.



## E. Population, development and education

**34.** Governments and civil society, with the assistance of the international community, should, as quickly as possible, and in any case before 2015, meet the goal of the International Conference on Population and Development of achieving universal access to primary education, eliminate the gender gap in primary and secondary education by 2005 and strive to ensure that by 2010 the net primary school enrolment ratio for children of both sexes will be at least 90 per cent, compared with an estimated 85 per cent in 2000. Special efforts should be made to increase the retention rates of girls in primary and secondary school. Parents should be sensitized to the value of education of children, particularly of girls, so that the girls do achieve their full potential.

**35.** Governments, in particular of developing countries, with the assistance of the international community, should:

(a) Expand youth and adult education and lifelong culture- and gender-sensitive learning policies and programmes, with particular attention to migrants, indigenous people and people with disabilities;

(b) Include at all levels, as appropriate, of formal and non-formal schooling, education about population and health issues, including sexual and reproductive health issues, in order to implement further the Programme of Action in terms of promoting the well-being of adolescents, enhancing gender equality and equity as well as responsible sexual behaviour, and protecting them from early and unwanted pregnancy, sexually transmitted diseases, including HIV/AIDS, and sexual abuse, incest and violence; and ensure the active involvement and participation of parents, youth, community leaders and organizations for the sustainability, increased coverage and effectiveness of such programmes;

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(c) Reduce the rate of illiteracy of women and men, at least halving it for women and girls by 2005, compared with the rate in 1990;

(d) Promote the achievement of functional literacy for adults as well as children, where schooling remains unavailable;

(e) Continue to give high priority to investments in education and training in development budgets;

(f) Provide adequately equipped facilities by rehabilitating existing schools and building new ones.


**36.** The Programme of Action recognized that greater public knowledge, understanding and commitment at all levels, from the individual to the international, are vital to the achievement of its goals and objectives. To this end, ensuring access to and use of modern communication technology, including satellite transmission and other communication mechanisms, should be studied and appropriate action taken as a means to address the barriers to education in developing countries, in particular, the least developed countries, with assistance from the international community.

### F. Data systems, including indicators

**37.** Governments, in collaboration with research institutions and non-governmental organizations, as well as with the assistance of the international community, including donors, should strengthen national information systems to produce reliable statistics on a broad range of population, environment and development indicators in a timely manner. The indicators should include, *inter alia*, poverty rates at the community level; women's access to social and economic resources; enrolment and retention of girls and boys in schools; access to sexual and reproductive health services disaggregated by population sub-groups, including indigenous people; and gender sensitivity in sexual and reproductive health

services, including family planning. In addition, in consultation with indigenous people, Governments should establish and strengthen national statistics and data collection concerning the health of indigenous people, including sexual and reproductive health and their determinants. All data systems should ensure availability of age- and sex-disaggregated data, which are crucial for translating policy into strategies that address age and gender concerns and for developing appropriate age- and gender-impact indicators for monitoring progress. Governments should also collect and disseminate the quantitative and qualitative data needed to assess the status of male and female reproductive health, including in urban areas, and to design, implement, monitor and evaluate action programmes. Special attention should be given to maternal mortality and morbidity, as this database remains inadequate. Health and reproductive health data should be disaggregated by income and poverty status to identify the specific health profile and needs of people living in poverty and as a basis for focusing resources and subsidies on those who need them most.

**38.** The United Nations system and donors should be specifically urged to strengthen the capacity of developing countries, particularly the least developed countries, and those with economies in transition, to undertake censuses and surveys on a regular basis so as to improve vital registration systems, and to develop innovative and cost-effective solutions for meeting data requirements, especially for regular monitoring of the implementation of the goals of the International Conference on Population and Development, including improved estimates of maternal mortality.



# Gender Equality, Equity and Empowerment Of Women

## A. Promotion and protection of women's human rights

**39.** Governments should ensure that the human rights of women and girls are respected, protected and promoted through the development, implementation and effective enforcement of gender-sensitive policies and legislation. All Governments are encouraged to sign, ratify and implement the Convention on the Elimination of All Forms of Discrimination against Women<sup>6</sup> and are also encouraged to promote consideration by the Economic and Social Council and the General Assembly of the Optional Protocol thereto,<sup>7</sup> and interested States parties are encouraged to work towards removing all existing reservations that are incompatible with the objective and purpose of the Convention. In the implementation of the goals of the Programme of Action and those of other United Nations conferences, measures aimed at promoting and achieving gender equality and equity in a systematic and comprehensive manner should be coordinated and harmonized.

**40.** The implementation of population and development policies by Governments should continue to incorporate reproductive rights in accordance with paragraphs 1.15, 7.3 and 8.25 of the Programme of Action. Governments should take strong measures to promote the human rights of women. Governments are encouraged to strengthen, as appropriate, the reproductive and sexual health as well as the reproductive rights focus on population and development policies and programmes. The work of relevant United Nations bodies on indicators for the promotion and protection of the human rights of women should incorporate issues related to sexual and reproductive health. Governments should ensure the protection and promotion of the rights of adolescents, including married adolescent girls, to reproductive

health education, information and care. Countries should establish mechanisms for consultation with all relevant groups, including women's organizations. In this context, Governments are urged to incorporate human rights into both formal and informal education processes.

**41.** Governments, civil society and the United Nations system should advocate for the human rights of women and the girl child. Governments, in reporting to the human rights treaty bodies, are encouraged to consult, as appropriate, with civil society on and promote civil society awareness of the reporting process, to ensure the broadest representation in the area of human rights, including reproductive rights.

**42.** Governments should promote and protect the human rights of the girl child and young women, which include economic and social rights as well as freedom from coercion, discrimination and violence, including harmful practices and sexual exploitation. Governments should review all legislation and amend and revoke that which discriminates against the girl child and young women.

## **B. The empowerment of women**

**43.** Governments should establish mechanisms to accelerate women's equal participation and equitable representation at all levels of the political process and public life in each community and society and enable women to articulate their concerns and needs and ensure the full and equal participation of women in decision-making processes in all spheres of life. Governments and civil society should take actions to eliminate attitudes and practices that discriminate against and subordinate girls and women and that reinforce gender inequality.

**44.** Governments should take measures to promote the fulfilment of girls' and women's potential through education, skills development and the eradication of illiteracy for all girls and women without discrimination of any kind, giving paramount importance to the elimination of poverty and ill health. Governments, in collaboration with civil society, should take the necessary measures to ensure universal access, on the basis of equality between women and men, to appropriate, affordable and quality health care for women throughout their life cycle.

**45.** Governments should take every possible action to remove all gender gaps and inequalities pertaining to women's livelihoods and participation in the labour market through the creation of employment with secure incomes, which has been shown to advance women's empowerment and enhance their reproductive health. Legislation ensuring equal pay for equal work or for work of equal value should be instituted and enforced.

### **C. Gender perspective in programmes and policies**

**46.** A gender perspective should be adopted in all processes of policy formulation and implementation and in the delivery of services, especially in sexual and reproductive health, including family planning. In this regard, the institutional capacity and expertise of staff in Government, civil society, including non-governmental organizations, and the United Nations system should be strengthened in order to promote gender mainstreaming. This should be done by sharing tools, methodologies and lessons learned in order to develop and strengthen their capacity and institutionalize effective strategies for gender-based analysis and gender mainstreaming. This includes the development and availability of gender-disaggregated data and appropriate indicators for monitoring progress at the national level.

**47.** The differential impact on women and men of globalization of the economy and the privatization of basic social services, particularly reproductive health services, should be monitored closely. Special programmes and institutional mechanisms should be put in place to promote and protect the health and well-being of young girls, older women and other vulnerable groups. The provision of services to meet men's reproductive and sexual health needs should not prejudice reproductive and sexual health services for women.

**48.** Governments should give priority to developing programmes and policies that foster norms and attitudes of zero tolerance for harmful and discriminatory attitudes, including son preference, which can result in harmful and unethical practices such as prenatal sex selection, discrimination and violence against the girl child and all forms of violence against women, including female genital mutilation, rape, incest, trafficking, sexual violence and exploitation. This entails developing an integrated approach that addresses the need for widespread social, cultural and economic change, in addition to legal reforms. The girl child's access to health, nutrition, education and life opportunities should be protected and promoted. The role of family members, especially parents and other legal guardians, in strengthening the self-image, self-esteem and status and in protecting the health and well-being of girls should be enhanced and supported.



## D. Advocacy for gender equality and equity

**49.** Governments, parliamentarians, community and religious leaders, family members, media representatives, educators and other relevant groups should actively promote gender equality and equity. These groups should develop and strengthen their strategies to change negative and discriminatory attitudes and practices towards women and the girl child. All leaders at the highest levels of policy- and decision-making should speak out in support of gender equality and equity, including empowerment of women and protection of the girl child and young women.

**50.** All leaders at all levels, as well as parents and educators, should promote positive male role models that make it easier for boys to become gender-sensitive adults and enable men to support, promote and respect women's sexual and reproductive health and reproductive rights, recognizing the inherent dignity of all human beings. Men should take responsibility for their own reproductive and sexual behaviour and health. Research should be undertaken on men's sexuality, their masculinity and their reproductive behaviour.

**51.** Governments, donors and the United Nations system should encourage and support expansion and strengthening of women's grass-roots, community-based and advocacy groups.

# V

## Reproductive Rights and Reproductive Health

The present section is especially guided by the principles of the Programme of Action.

## **A. Reproductive health, including family planning and sexual health**

**52.** Governments, in collaboration with civil society, including non-governmental organizations, donors and the United Nations system, should:

(a) Give high priority to reproductive and sexual health in the broader context of health-sector reform, including strengthening basic health systems, from which people living in poverty in particular can benefit;

(b) Ensure that policies, strategic plans and all aspects of the implementation of reproductive and sexual health services respect all human rights, including the right to development, and that such services meet health needs over the life cycle, including the needs of adolescents, address inequities and inequalities due to poverty, gender and other factors and ensure equity of access to information and services;

(c) Engage all relevant sectors, including non-governmental organizations, especially women's and youth organizations and professional associations, through ongoing participatory processes in the design, implementation, quality assurance, monitoring and evaluation of policies and programmes, in ensuring that sexual and reproductive health information and services meet people's needs and respect their human rights, including their right to access to good-quality services;

(d) Develop comprehensive and accessible health services and programmes, including sexual and reproductive health, for indigenous communities, with their full participation, that respond to the needs and reflect the rights of indigenous people;

(e) Increase investments designed to improve the quality and availability of sexual and reproductive health services, including establishing and monitoring clear standards of care; ensuring the competence, particularly the technical and communication skills, of service providers; ensuring free, voluntary and informed choices, respect, privacy, confidentiality and client comfort; establishing fully functioning logistical systems, including efficient procurement of necessary commodities; and ensuring effective referral mechanisms across services and levels of care, taking care that services are offered in conformity with human rights and with ethical and professional standards;

(f) Ensure that sexual and reproductive health programmes, free of any coercion, provide pre-service and in-service training and supervision for all levels of health-care providers to ensure that they maintain high technical standards, including for hygiene; respect the human rights of the people they serve; are knowledgeable and trained to serve clients who have been subjected to harmful practices, such as female genital mutilation and sexual violence; and are able to provide accurate information about the prevention and symptoms of reproductive tract diseases, as well as about personal hygiene and other factors in reproductive tract infections, in order to minimize adverse physical consequences such as pelvic inflammatory disease, infertility and ectopic pregnancy, as well as psychological consequences;

(g) Promote men's understanding of their roles and responsibilities with regard to respecting the human rights of women; protecting women's health, including supporting their partners' access to sexual and reproductive health services; preventing unwanted pregnancy; reducing maternal mortality and morbidity; reducing transmission of sexually transmitted diseases, including HIV/AIDS; sharing household and child-rearing responsibilities; and promoting the elimination of harmful practices, such as female genital mutilation, and sexual and other gender-based

violence, ensuring that girls and women are free from coercion and violence;

(h) Strengthen community-based services, social marketing and new partnerships with the private sector while working to ensure that safety, ethical and other relevant standards are met; and provide subsidies from public resources and donor funds, as appropriate, to ensure availability and access for those otherwise unable to access services.

**53.** Governments, with assistance from the international community, should develop and use indicators that measure access to and choice of family-planning and contraceptive methods and indicators that measure trends in maternal mortality and morbidity and HIV/AIDS and use them to monitor progress towards the goal of the International Conference on Population and Development of universal access to reproductive health care. Governments should strive to ensure that by 2015 all primary health-care and family planning facilities are able to provide, directly or through referral, the widest achievable range of safe and effective family planning and contraceptive methods; essential obstetric care; prevention and management of reproductive tract infections, including sexually transmitted diseases; and barrier methods, such as male and female condoms and microbicides if available, to prevent infection. By 2005, 60 per cent of such facilities should be able to offer this range of services, and by 2010, 80 per cent of them should be able to offer such services.

**54.** The United Nations system and donors should support Governments in the building of national capacity to plan, manage, implement, monitor and evaluate reproductive and sexual health services, including ensuring that all refugees and all other persons in emergency humanitarian situations, particularly women and adolescents, receive appropriate health care, including sexual and reproductive health care and information, and greater protection

from sexual and gender-based violence. They should also ensure that all health workers in relief and emergency situations are given basic training in sexual and reproductive health-care information and services.

**55.** Increased efforts are needed by the United Nations system, with support from the international community, to develop and agree upon common key indicators on reproductive health programmes, including, *inter alia*, family planning, maternal health, sexual health, sexually transmitted diseases, HIV/AIDS, and information, education and communication for appropriate consideration in the relevant intergovernmental process. Bearing in mind the efforts made by national Governments, the World Health Organization is invited to take the lead role in this area, in coordination with the United Nations Children's Fund, the United Nations Population Fund, the United Nations Development Programme, the Joint and Co-sponsored United Nations Programme on Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome, the Department of Economic and Social Affairs of the Secretariat and other relevant United Nations entities, drawing on other expertise and knowledge as appropriate. Indicators on maternal and neonatal mortality, maternal morbidity and maternal health programmes should be given a prominent place, in order to monitor progress effectively and ensure that priority is given to reproductive health care in the provision of general health services. The international community is encouraged to provide financial and technical assistance to developing countries to improve their capacity-building in terms of indicators, data collection, monitoring, and evaluation in this field.

## B. Ensuring voluntary quality family-planning services

**56.** Governments, in accordance with the Programme of Action, should take effective action to ensure the basic right of all couples and individuals to decide freely and responsibly the number, spacing and timing of their children and to have the information, education and means to do so.

**57.** The United Nations system and donors should, upon request, support Governments in:

(a) Mobilizing and providing sufficient resources to meet the growing demand for access to information, counselling, services and follow-up on the widest possible range of safe, effective, affordable and acceptable family planning and contraceptive methods, including new options and underutilized methods;

(b) Providing quality counselling services and ensuring ethical, professional and technical standards of care, as well as voluntary, free and informed choices in an atmosphere of privacy, confidentiality and respect;

(c) Strengthening programme management capacity, including logistical systems, to make services safer, more affordable and more convenient and accessible to clients and to ensure the availability and continuous supply of safe and effective contraceptives and other sexual and reproductive health supplies and, as appropriate, the raw material for them;

(d) Adequately strengthening social safety nets using resources and funds and, in the context of primary health care, ensuring the availability of and access to reproductive health services, including family planning, particularly for people most affected by poverty, the adverse impact of structural adjustment policies and financial crises, or otherwise unable to access services.

**58.** Where there is a gap between contraceptive use and the proportion of individuals expressing a desire to space or limit their families, countries should attempt to close this gap by at least 50 per cent by 2005, 75 per cent by 2010 and 100 per cent by 2050. In attempting to reach this benchmark, demographic goals, while legitimately the subject of government development strategies, should not be imposed on family planning providers in the form of targets or quotas for the recruitment of clients.

**59.** Governments, with the increased participation of the United Nations system, civil society, donors and the private sector, are urged to pursue the research and development of new, safe, low-cost and effective family-planning and contraceptive methods, for both men and women, including female-controlled methods that both protect against sexually transmitted diseases, including HIV/AIDS, and prevent unwanted pregnancy. All actors must abide by internationally accepted ethical, technical and safety standards in all research and development as well as, where appropriate, by applicable standards in manufacturing practices, quality control and product design, production and distribution.

**60.** The international community and the private sector should also take the necessary measures, particularly in the transfer of technology, as appropriate, to enable countries, in particular developing countries, to produce, store and distribute safe and effective contraceptives and other supplies essential for reproductive health services in order to strengthen the self-reliance of those countries.

**61.** The United Nations Population Fund is urged to continue to strengthen its leadership role within the United Nations system in assisting countries to take the strategic action necessary to ensure availability of reproductive health services and choice of reproductive health products, including contraceptives.



## C. Reducing maternal mortality and morbidity

**62.** Governments, with the increased participation of the United Nations system, civil society, including non-governmental organizations, donors and the international community, should:

(a) Recognize the linkages between high levels of maternal mortality and poverty and promote the reduction of maternal mortality and morbidity as a public health priority and reproductive rights concern;

(b) Ensure that the reduction of maternal morbidity and mortality is a health sector priority and that women have ready access to essential obstetric care, well-equipped and adequately staffed maternal health-care services, skilled attendance at delivery, emergency obstetric care, effective referral and transport to higher levels of care when necessary, post-partum care and family planning. In health sector reform, the reduction of maternal mortality and morbidity should be prominent and used as an indicator for the success of such reform;

(c) Support public health education to create awareness of the risks of pregnancy, labour and delivery and to increase the understanding of the respective roles and responsibilities of family members, including men, as well as of civil society and Governments, in promoting and protecting maternal health;

(d) Develop appropriate interventions, beginning at birth, to improve the nutritional, health and educational status of girls and young women, so that they are better able to make informed choices at maturity about childbearing and obtain access to health information and services;

(e) Implement programmes to address the negative impact of environmental degradation, in some regions, on the high levels of maternal mortality and morbidity.

**63.** (i) In no case should abortion be promoted as a method of family planning. All Governments and relevant intergovernmental and non-governmental organizations are urged to strengthen their commitment to women's health, to deal with the health impact of unsafe abortion as a major public-health concern and to reduce the recourse to abortion through expanded and improved family planning services. Prevention of unwanted pregnancies must always be given the highest priority and every attempt should be made to eliminate the need for abortion. Women who have unwanted pregnancies should have ready access to reliable information and compassionate counselling. Any measures or changes related to abortion within the health system can be determined only at the national or local level according to the national legislative process. In circumstances where abortion is not against the law, such abortion should be safe. In all cases, women should have access to quality services for the management of complications arising from abortion. Post-abortion counselling, education and family planning services should be offered promptly, which will also help to avoid repeat abortions;

(ii) Governments should take appropriate steps to help women to avoid abortion, which in no case should be promoted as a method of family planning, and in all cases provide for the humane treatment and counselling of women who have had recourse to abortion;

(iii) In recognizing and implementing the above, and in circumstances where abortion is not against the law, health systems should train and equip health-service providers and should take other measures to ensure that such abortion is safe and accessible. Additional measures should be taken to safeguard women's health.

**64.** In order to monitor progress towards the achievement of the goals of the International Conference on Population and Development for maternal mortality, countries should use the proportion of births assisted by skilled attendants as a benchmark indicator. By 2005, where the maternal mortality rate is very high, at least 40 per cent of all births should be assisted by skilled attendants; by 2010 this figure should be at least 50 per cent and by 2015, at least 60 per cent. All countries should continue their efforts so that globally, by 2005, 80 per cent of all births should be assisted by skilled attendants, by 2010, 85 per cent, and by 2015, 90 per cent.

**65.** In order to have a basis for cost-benefit analysis for interventions aimed at reducing maternal mortality, the societal costs of maternal deaths should be calculated. This should be done in cooperation with Governments, United Nations agencies and development banks, and the research community.

**66.** The World Health Organization, in cooperation with other relevant United Nations bodies, is urged to fulfil its leadership role within the United Nations system in assisting countries, in particular developing countries, to put in place standards for the care and treatment for women and girls that incorporate gender-sensitive approaches and promote gender equality and equity in health-care delivery and to advise on functions that health facilities should perform to help guide the development of health systems to reduce the risks associated with pregnancy, taking into consideration the level of development and the economic and social conditions of countries. At the same time, United Nations agencies, including the United Nations Population Fund and the United Nations Children's Fund, and multilateral development banks, such as the World Bank, should intensify their role in promoting, supporting, advocating for and investing in action to improve maternal health.

## D. Prevention and treatment of sexually transmitted disease, including human immunodeficiency virus/acquired immunodeficiency syndrome

**67.** Governments, from the highest political levels, should take urgent action to provide education and services to prevent the transmission of all forms of sexually transmitted diseases and HIV and, with the assistance, where appropriate, of the Joint and Co-sponsored United Nations Programme on Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome, develop and implement national HIV/AIDS policies and action plans, ensure and promote respect for the human rights and dignity of persons living with HIV/AIDS, improve care and support for people living with HIV/AIDS, including support services for home-based care, and take steps to mitigate the impact of the AIDS epidemic by mobilizing all sectors and segments of society to address the social and economic factors contributing to HIV risk and vulnerability. Governments should enact legislation and adopt measures to ensure non-discrimination against people living with HIV/AIDS and vulnerable populations, including women and young people, so that they are not denied the information needed to prevent further transmission and are able to access treatment and care services without fear of stigmatization, discrimination or violence.

**68.** Governments should ensure that prevention of and services for sexually transmitted diseases and HIV/AIDS are an integral component of reproductive and sexual health programmes at the primary health-care level. Gender, age-based and other differences in vulnerability to HIV infection should be addressed in prevention and education programmes and services. Governments should develop guidelines for HIV treatment and care, emphasizing equitable access, and for wide provision of and access to voluntary

HIV testing and counselling services, and should ensure wide provision of and access to female and male condoms, including through social marketing. Advocacy and information, education and communication campaigns developed with communities and supported from the highest levels of Government should promote informed, responsible and safer sexual behaviour and practices, mutual respect and gender equity in sexual relationships. Special attention needs to be given to preventing sexual exploitation of young women and children. Given the enhanced susceptibility to HIV/AIDS of individuals infected by conventional and treatable sexually transmitted diseases and the high prevalence of such diseases among young people, priority must be given to the prevention, detection, diagnosis and treatment of such infections. Governments should immediately develop, in full partnership with youth, parents, families, educators and health-care providers, youth-specific HIV education and treatment projects, with special emphasis on developing peer-education programmes.

**69.** While one of the most important interventions to reduce HIV infections in infants is primary prevention of infection, Governments should also scale up, where appropriate, education and treatment projects aimed at preventing mother-to-child transmission of HIV. Anti-retroviral drugs, where feasible, should be made available to women living with HIV/AIDS during and after pregnancy as part of their ongoing treatment of HIV/AIDS and provide infant-feeding counselling for mothers living with HIV/AIDS so that they can make free and informed decisions.

**70.** Governments, with assistance from the Joint and Co-sponsored United Nations Programme on Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome and donors, should, by 2005, ensure that at least 90 per cent, and by 2010 at least 95 per cent, of young men and women aged 15 to 24 have access to the information, education and services

necessary to develop the life skills required to reduce their vulnerability to HIV infection. Services should include access to preventive methods such as female and male condoms, voluntary testing, counselling and follow-up. Governments should use, as a benchmark indicator, HIV infection rates in persons 15 to 24 years of age, with the goal of ensuring that by 2005 prevalence in this age group is reduced globally, and by 25 per cent in the most affected countries, and that by 2010 prevalence in this age group is reduced globally by 25 per cent.

**71.** The private and public sectors should increase investments in research on the development of microbicides and other female-controlled methods, simpler and less expensive diagnostic tests, single-dose treatments for sexually transmitted diseases and vaccines. Governments, in particular of developing countries, with the support of the international community, should strengthen measures to improve generally the quality, availability and affordability of care of people living with HIV/AIDS.

**72.** In accordance with its mandate, the Joint and Co-sponsored United Nations Programme on Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome should be provided with financial resources in order to do the utmost to ensure a well-coordinated response from the United Nations system to the HIV/AIDS pandemic and to provide support to national programmes, particularly in developing countries.

## E. Adolescents

**73.** Governments, with the full involvement of young people and with the support of the international community, should, as a priority, make every effort to implement the Programme of Action in regard to adolescent sexual and reproductive health, in accordance with paragraphs 7.45 and 7.46 of the Programme of Action, and should:

(a) In order to protect and promote the right of adolescents to the enjoyment of the highest attainable standards of health, provide appropriate, specific, user-friendly and accessible services to address effectively their reproductive and sexual health needs, including reproductive health education, information, counselling and health promotion strategies. These services should safeguard the rights of adolescents to privacy, confidentiality and informed consent, respecting their cultural values and religious beliefs and in conformity with relevant existing international agreements and conventions;

(b) Continue to advocate for the protection and promotion of and support for programmes for adolescent health, including sexual and reproductive health; identify effective and appropriate strategies to achieve this goal; and develop gender- and age-based indicators and data systems to monitor progress;

(c) Develop at national and other levels, as appropriate, action plans for adolescents and youth, based on gender equity and equality, that cover education, professional and vocational training and income-generating opportunities. Such programmes should include support mechanisms for the education and counselling of adolescents in the areas of gender relations and equality, violence against adolescents, responsible sexual behaviour, responsible family planning practices, family life, reproductive health, sexually transmitted diseases, HIV infection and AIDS prevention, in accordance with paragraph 7.47 of the Programme of Action. Adolescents and youth themselves should be fully involved in the

design and implementation of such information and services, with proper regard for parental guidance and responsibilities. Special attention should be devoted to vulnerable and disadvantaged youth;

(d) Acknowledge and promote the central role of families, parents and other legal guardians in educating their children and shaping their attitudes and ensure that parents and persons with legal responsibilities are educated about and involved in providing sexual and reproductive health information, in a manner consistent with the evolving capacities of adolescents, so that they can fulfil their rights and responsibilities towards adolescents;

(e) With due respect for the rights, duties and responsibilities of parents and in a manner consistent with the evolving capacities of the adolescent and their right to reproductive health education, information and care, and respecting their cultural values and religious beliefs, ensure that adolescents, both in and out of school, receive the necessary information, including information on prevention, education, counselling and health services to enable them to make responsible and informed choices and decisions regarding their sexual and reproductive health needs, in order, *inter alia*, to reduce the number of adolescent pregnancies. Sexually active adolescents will require special family planning information, counselling and health services, as well as sexually transmitted diseases and HIV/AIDS prevention and treatment. Those adolescents who become pregnant are at particular risk and will require special support from their families, health-care providers and the community during pregnancy, delivery and early childcare. This support should enable these adolescents to continue their education. Programmes should involve and train all who are in a position to provide guidance to adolescents concerning responsible sexual and reproductive behaviour, particularly parents and families, and also communities, religious institutions, schools, the mass media and peer groups. These policies and programmes



must be implemented on the basis of commitments made at the International Conference on Population and Development and in conformity with relevant existing international agreements and conventions;

(f) Countries should ensure that programmes and attitudes of health-care providers do not restrict the access of adolescents to appropriate services and the information they need, including for the prevention and treatment of sexually transmitted diseases, HIV/AIDS and sexual violence and abuse. Countries should, in this context, and in the context of paragraph 73 (e) of the present document, where appropriate, remove legal, regulatory and social barriers to reproductive health information and care for adolescents.

**74.** Recognizing the growing and special needs of youth and adolescents, including reproductive and sexual health issues, and taking into account the special situations they face, the United Nations system and donors should complement Governments' efforts to mobilize and provide adequate resources to respond to those needs.

**75.** Governments, in consultation with national non-governmental organizations, including youth organizations where applicable, and with the required assistance of United Nations agencies, international non-governmental organizations and the donor community, should evaluate programmes and document experiences and develop data-collection systems to monitor progress, and widely disseminate information about the design and functioning of programmes and their impact on young people's sexual and reproductive health. United Nations agencies and donor countries should support regional and international mechanisms for sharing those experiences among all countries, especially among developing countries.

V

## Partnerships and Collaborations

- 76.** Governments are encouraged, in dialogue with non-governmental organizations and local community groups, and in full respect for their autonomy, to facilitate, as appropriate, the involvement of civil society at the national level in policy discussions and in the formulation, implementation, monitoring and evaluation of strategies and programmes to achieve Programme of Action objectives. Partnerships between Governments and multilateral and donor agencies and civil society need to be based, as appropriate, on delivering agreed outcomes that bring benefits to poor people's health, including reproductive and sexual health.
- 77.** Governments, where appropriate, should include representatives of non-governmental organizations and local community groups in country delegations to regional and international forums where issues related to population and development are discussed.
- 78.** Governments, civil society at the national level and the United Nations system should work towards enhancing and strengthening their collaboration and cooperation, with a view to fostering an enabling environment for partnerships for the implementation of the Programme of Action. Governments and civil society organizations should develop systems for greater transparency and information-sharing, so as to improve their accountability.
- 79.** Governments are encouraged to recognize and support the important and complementary role that civil society at the national level can play towards changing attitudes and actions for further implementation of the Programme of Action.
- 80.** Governments are also encouraged to recognize and support the important and complementary role that civil society at the national level can play in helping communities to articulate and meet their needs for health care, including reproductive health care.

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**81.** Governments and international organizations should create and support mechanisms to build and sustain partnerships with community-based organizations and non-governmental organizations committed to assisting women to establish and realize their rights, including those that relate to reproductive and sexual health, as well as other relevant organizations, the research community and professional organizations. Governments, civil society at the national level and the international community should together focus on human resources development and on building and strengthening national capacity to implement sustainable population and reproductive health programmes.

**82.** Governments and civil society organizations, where appropriate, are encouraged to design innovative approaches and build partnerships with, among others, the media, the commercial sector, religious leaders, local community groups and leaders, as well as youth, which can serve as effective advocates for the achievement of the goals and objectives of the Programme of Action.

**83.** With reference to paragraph 15.10 of the Programme of Action, Governments, international organizations and donors are encouraged to provide, in accordance with national laws and regulations and national development priorities, adequate financial and technical resources and information to build the human resources, institutional capacity and sustainability of civil society organizations, particularly women's and youth groups, in a manner not compromising their full autonomy, to facilitate their active involvement in the research, design, implementation, monitoring and evaluation of national population and development policies, programmes and activities. Like Governments, civil society organizations should also put in place transparency and accountability mechanisms to ensure that programme implementation is directly targeted to, and funds are used effectively for, national population and development programmes, as well as activities, services and evaluation procedures.

**84.** Governments, international organizations and civil society organizations at the national level, including non-governmental organizations, should encourage partnerships with the private and, where appropriate, the informal sector to strengthen their engagement and collaboration in the implementation of the Programme of Action. The private sector may assist the efforts of Governments, but it cannot substitute for the Government's responsibility to ensure and provide quality, full, safe, accessible, affordable and convenient health services, including reproductive health, family planning and sexual health services. Governments are encouraged to review relevant national laws, standards and regulations, as appropriate, to facilitate private-sector involvement and to seek to ensure that all health-care products and services, including reproductive health products and services, meet internationally accepted standards.

**85.** Implementation of key elements of the Programme of Action must be tied closely to a broader strengthening of health systems. The public sector plays an important role in this regard and should be encouraged to define its role and to work more closely with the private and informal sectors to monitor and improve standards and to ensure that services are available and that their delivery is of good quality and affordable.

**86.** Recognizing its increasing role in providing reproductive health information, education, services and commodities, the private sector should ensure that its services and commodities are of high quality and meet internationally accepted standards; that its activities are conducted in a socially responsible, culturally sensitive, acceptable and cost-effective manner; that it fully respects various religions, ethical values and cultural backgrounds of each country's people; and that it adheres to basic rights recognized by the international community and recalled in the Programme of Action.

**87.** Parliamentarians and members of national legislatures are invited to ensure the legislative reform and expanded awareness-raising necessary for implementing the Programme of Action. They are encouraged to be advocates for the implementation of the Programme of Action, including through the allocation, as appropriate, of financial resources. There should be regular exchanges of experiences among parliamentarians at the subregional, regional, interregional and international levels, where appropriate.

**88.** External funding and support, from donor countries as well as the private sector, should be provided to promote and sustain the full potential of South-South cooperation, including the South-South initiative “Partners in Population and Development”,<sup>8</sup> in order to bolster the sharing of relevant experiences, and the mobilization of technical expertise and other resources among developing countries. Updated information on institutions and expertise available within developing countries in the area of population and development, including reproductive health, should be compiled and disseminated.

**89.** All relevant bodies and entities of the United Nations system should continue to clarify, within existing mechanisms, their specific leadership roles and responsibilities and continue to strengthen their efforts to promote system-wide coordination and collaboration, especially at the country level. The intergovernmental work of the Commission on Population and Development should be reinforced, as should also the inter-agency coordination role of the United Nations Population Fund, in the field of population and reproductive health.

**90.** Governments, civil society organizations at the national level and the United Nations system are urged to consult youth organizations in the design, implementation and evaluation of policies and programmes for youth.

# VI

## Mobilizing Resources



- 91.** Increased political will from all Governments and reaffirmation of the commitment for mobilization of international assistance, as was agreed at Cairo, are urgently needed to accelerate the implementation of the Programme of Action which, in turn, will contribute to the advancement of the broad population and development agenda.
- 92.** All developed countries are urged to strengthen their commitment to the goals and objectives of the Programme of Action, in particular its cost estimates, and to make every effort to mobilize the agreed estimated financial resources required for its implementation; in so doing, the needs of least developed countries should receive priority.
- 93.** All developing countries and countries with economies in transition are urged to strengthen their commitment to the goals and objectives of the Programme of Action, in particular its cost estimates, and to continue to make efforts to mobilize domestic resources. Developing and developed countries and countries with economies in transition are urged to promote international cooperation and to increase technical cooperation and transfer of technology through South-South cooperation, in order to implement fully the Programme of Action.
- 94.** Donor countries and international funding agencies are urged to support the inclusion of South-South components in development cooperation programmes and projects so as to promote cost-effectiveness and sustainability.
- 95.** Translation of commitment to the goals of the International Conference on Population and Development into commensurate levels of donor funding has not been forthcoming, and there is an urgent need for donor countries to renew and intensify efforts to meet the need for complementary external resources required to implement the costed elements of the Programme of Action,

namely, in 1993 United States dollars, \$5.7 billion in 2000, \$6.1 billion in 2005, \$6.8 billion in 2010 and \$7.2 billion in 2015. Donor countries are also urged to increase significantly official development assistance funding for other elements of the Programme of Action as contained in chapter XIII thereof, in particular, improvement in the status and empowerment of women, basic health care and education, emerging and continued health challenges, such as malaria and other diseases identified by the World Health Organization as having a major impact on health, including those having the highest mortality and morbidity rates; and to intensify efforts to help countries to eradicate poverty. Donor countries are therefore urged to take the necessary action to reverse the current decline in overall official development assistance and should strive to fulfil the agreed target of 0.7 per cent of gross national product for overall official development assistance as soon as possible.

**96.** With full regard to their respective jurisdiction and mandates, legislators and other decision makers are encouraged to undertake measures to increase support for achieving the goals and objectives of the Programme of Action through legislation, advocacy and expanded awareness-raising and resource mobilization. Advocacy efforts should be increased at all levels, both national and international, to ensure that the resource goals are met.

**97.** Since the HIV/AIDS pandemic is having a more severe impact than was originally projected, special attention should be given to providing promptly the necessary resources, as has been called for in the Programme of Action, for the prevention of sexually transmitted diseases and HIV. Particular attention should be given to vulnerable populations, especially children and young people. All countries affected by the pandemic must continue to make efforts to mobilize domestic resources from all sources in order to combat it. The international community is called upon to assist developing countries and countries with economies in transition

in their efforts. Additionally, Governments and the donor community should intensify efforts to provide resources for care and support to those affected by HIV/AIDS and for specialized prevention needs.

**98.** The international community should provide the necessary financial and technical assistance to support developing countries and countries with economies in transition committed to implementing the goals and objectives of the Programme of Action. Special attention should be paid to the needs of Africa and the least developed countries, countries facing or suffering from emergency humanitarian situations and financial and economic crises, and those developing countries suffering from low commodity prices, as well as countries facing long-term and large-scale environmental problems.

**99.** Donor countries and international funding agencies, including the World Bank and the regional development banks, are urged to complement, at the request of countries, the domestic efforts made to meet the growing and urgent basic health and reproductive health needs, including reproductive health commodities, of the developing and the least developed countries, countries facing increasing demands for such commodities and a diminishing share of international assistance and countries with economies in transition.

**100.** Governments and the international community should encourage and promote additional ways and mechanisms to increase funding for population and development programmes, including sexual and reproductive health programmes, in order to ensure their sustainability. These could include, as appropriate: (a) advocacy for increased funding from international financial institutions and regional development banks; (b) selective use of user fees, social marketing, cost-sharing and other forms of cost recovery; and (c) increased involvement of the private sector.

These modalities should facilitate access to services and should be accompanied by adequate social safety net measures to promote access to services by those living in poverty and other members of vulnerable groups. Consideration should also be given to more efficient and coordinated mechanisms to address the debt problem, including the reduction of the burden of external debt through various measures such as debt cancellation and debt swaps for population, health and other social sector investment to promote sustainable development.

**101.** Governments of recipient countries are encouraged to ensure that public resources, subsidies and assistance received from international donors for the implementation of the goals and objectives of the Programme of Action are invested to maximize benefits to the poor and other vulnerable population groups, including those who suffer disproportionately from reproductive ill health.

**102.** Utilizing existing coordinated mechanisms at the national level, as appropriate, donor countries, international agencies and recipient countries should continue to strengthen their efforts and their collaboration, so as to avoid duplication, identify funding gaps and ensure that resources are used as effectively and efficiently as possible.

**103.** Governments, in cooperation with the United Nations Population Fund as appropriate, should seek to ensure full and regular monitoring of resource flows, paying particular attention to transparency and accountability for the costed population and reproductive health package included in the Programme of Action. Non-governmental organizations may provide the necessary information, as appropriate, in this regard.

**104.** Countries, especially developed countries, are urged to increase substantially their voluntary contribution to the United Nations Population Fund, as well as to other relevant United Nations programmes and specialized agencies, so that they will be in a better position to assist countries to implement further the goals and objectives of the Programme of Action, including reproductive health programmes.

**105.** Governments of developed and developing countries are encouraged to give thorough consideration to the implementation of the 20/20 initiative, a voluntary compact between interested donor and recipient countries, which can provide increased resources for broader poverty eradication objectives, including population and social sector objectives.<sup>9</sup>

**106.** Governments should implement policies that facilitate increased access to basic health services, including high-quality and affordable reproductive health and family planning services; promote effective interventions and support services, including private sector services, as appropriate; set standards for service delivery; and review legal, regulatory and import policies to identify and eliminate those policies that unnecessarily restrict or prevent the greater involvement of the private sector. Public sector resources and subsidies should have as a priority people living in poverty, under-served populations and low-income sectors of the population.

# Notes

- 1 *Report of the International Conference on Population and Development, Cairo, 5-13 September 1994* (United Nations publication, Sales No. E.95.XIII.18), chap. I, resolution 1, annex.
- 2 Resolution 45/158, annex.
- 3 United Nations, *Treaty Series*, vol. 189, No. 2545.
- 4 *Ibid.*, vol. 606, No. 8791.
- 5 *Ibid.*, vol. 75, No. 973.
- 6 Resolution 34/180, annex.
- 7 *Official Records of the Economic and Social Council, 1999, Supplement No. 7 (E/1999/27)*, chap. I, sect. A.
- 8 *Official Records of the Economic and Social Council, 1996, Supplement No. 13 (E/1996/33)*, part one, chap. XV, para. 198, decision 96/09.
- 9 See *Report of the World Summit for Social Development, Copenhagen, 6-12 March 1995* (United Nations publication, Sales No. E.96.IV.8), chap. I.

# Statements in Explanation of Position and Reservations



**Explanatory Note** *The following statements are not part of the Key Actions for the further Implementation of the ICPD Programme of Action. They are part of the official records of the proceedings of the twenty-first special session of the United Nations General Assembly (document A/S-21/PV.9). They are placed in this booklet for ease of reference.*

## **Oral statements in explanation of position, of reservations and of a general nature on the Key Actions**

*At the 9th plenary meeting of the twenty-first special session of the General Assembly, the representatives of several States made statements before the adoption of key actions for further implementation of the Programme of Action of the International Conference on Population and Development. The statements are set out below.*

### **The representative of Sudan stated the following:**

"The delegation of the Sudan is pleased to join the rest of the international community, represented in this Assembly, in the adoption by consensus of the final document of this special session.

"In doing so, the Government of the Sudan will continue to implement the recommendations contained in the document in conformity with paragraph 5, which states:

'The implementation of the recommendations contained in the Programme of Action and those contained in the present document is the sovereign right of each country, consistent with national laws and development priorities, with full respect for the various religious and ethical values and cultural backgrounds of its people, and in conformity with universally recognized international human rights.' [A/S-21/5/Add.1, para. 5]

"In the view of my Government, the provisions of paragraph 63 (iii) address circumstances where abortion is not against the law. In this context, my Government emphasizes that in no case should abortion be promoted as a method of family planning."

**The representative of Guatemala stated the following:**

"My delegation also has a brief reservation, the text of which it will submit to the Secretariat, as follows:

'In the course of the adoption of the Cairo Programme of Action of the International Conference on Population and Development, Guatemala submitted certain reservations with respect to its implementation at the national level. As regards proposals on key actions for the further implementation of the Programme, to be adopted at this twenty-first special session of the General Assembly, our delegation joins the consensus, but without agreeing to anything in the document that does not accord with our reservations.'

**The representative of Nicaragua stated the following:**

"The Republic of Nicaragua wishes to join in the consensus on the document and requests that our delegation's reservations to the Cairo Programme of Action be incorporated into it. Our delegation also wishes to state the following reservations.

"First, when the report uses the terms 'female-controlled methods', 'new options', 'underutilized methods' and 'widest achievable range of family planning', we can accept them only so long as they do not imply abortion or pregnancy interruption.

"Secondly, in Nicaragua, the comprehensive education of children is a priority right of parents, in conformity with our political Constitution and article 26 of the Universal Declaration of Human Rights.

"Thirdly, we accept the term 'gender' if it is understood exclusively to indicate the sexual and biological identity of men and women."

**The representative of the Libyan Arab Jamahiriya stated the following:**

"The delegation of the Libyan Arab Jamahiriya confirms its commitment to the objectives of the International Conference on Population and Development (ICPD), especially an improved

quality of human life and well-being; enhanced human development through the recognition of the interrelationship between development and population programmes and policies aimed at eliminating all forms of poverty; continued economic growth for sustainable development; the provision of health care and education services; the continuity of patterns of consumption and production; the achievement of food security; and the enjoyment of all fundamental human rights, including the right to development, in full respect for the characteristics and sovereignty of each State consistent with its national laws and development priorities and for the ethical and religious values and cultural backgrounds of peoples and in conformity with human rights and international instruments.

“However, we should like to make the following reservations and ask that they be included in the report of the Ad Hoc Committee of the Whole of the Twenty-first Special Session of the General Assembly.

“First, the delegation of the Libyan Arab Jamahiriya wishes to make a general reservation on any provision in this document that runs counter to the Islamic *shariah* or any national law of our country. We also wish to reaffirm the reservations we expressed in the Cairo report and to recall them here.

“Secondly, we express a particular reservation to paragraph 41 of document A/S-21/5/Add.1 and to any reference to reproductive rights as international human rights. The only human rights we recognize are those explicitly set out in binding and internationally agreed human rights instruments. No other human rights may be established through interpretation or implication.

“Thirdly, as to paragraph 73 (a) on the rights of adolescents, our delegation adheres to the formulation adopted by the ICPD, in particular to the statement on respect for various religious and ethical values and cultural backgrounds. We oppose the new

formulation of paragraph 73 (a) in the present document, which represents a departure from the ICPD report.

*After the Assembly's adoption of the key actions, several other States made statements in explanation of position. The statements are set out below:*

**The representative of Kuwait stated the following:**

"The delegation of the State of Kuwait would like to reaffirm its support for the contents of the document just adopted on key actions for the further implementation of the Programme of Action of the International Conference on Population and Development, contained in A/S-21/5/Add.1. We support the positive elements of the document, which are aimed at caring for the human person. At the same time, we should like to reaffirm that we have certain reservations: our commitment to any actions or policies with regard to population will be contingent upon the requirement that they do not run counter to the provisions and texts of the Islamic *shariah*, the norms of Kuwaiti society or the Constitution and laws of Kuwait. Implementation of the recommendations of the final document will take place on the basis of paragraph 5 of the text of the document relating to the key actions.

"My delegation requests that my reservations be reflected in the report."

**The representative of Malta stated the following:**

"Malta is committed to the overall goal of the document, namely, the promotion of the full dignity of the human person, with special emphasis on women and children, who continue to be those most in need of State intervention and the intervention of concerned international agencies to promote and secure their human rights. In joining the consensus, the delegation of Malta, consistent with its national legislation, which considers the termination of pregnancy to be illegal, would like to reiterate its reservations with respect to those sections of the document that directly or

indirectly relate to induced abortion. The Maltese Government has no intention of legalizing any health measures that directly or indirectly lead to induced abortion.

“We request that this statement be reflected in the report.”

**The representative of China stated the following:**

“The current special session of the General Assembly has just adopted the key actions for the further implementation of the Programme of Action of the International Conference on Population and Development. That document will further promote the implementation of the Programme of Action and affect the conduct of international collaboration.

“On behalf of the Chinese delegation, and on my own behalf, I should like to express my sincere thanks and appreciation to the Secretary-General; the President of the General Assembly at its special session, the Foreign Minister of Uruguay, Mr. Didier Operti; the Chairman of the preparatory committee and of the Ad Hoc Committee, the Permanent Representative of the People’s Republic of Bangladesh to the United Nations, Ambassador Chowdhury; and the Chairman of the Group of 77, the Permanent Representative of Guyana to the United Nations, Ambassador Insanally, for their efforts and the skill they demonstrated, which led to the adoption of the document. My thanks also go to the other members of the Bureau, as well as to the staff of the Secretariat involved in the special session, for their hard work.

“Population and development was the theme of the Cairo Conference, and it is the theme of the current special session. The further implementation of the Programme of Action will require a holistic approach and the correct implementation of the Principles established by the Cairo Conference. It will also require full respect for State sovereignty. The effective implementation of the Programme of Action not only requires active efforts on the part of the various countries concerned, but it also warrants wide

international collaboration, especially in honouring commitments to international assistance.

"In October this year, the world population will reach 6 billion, which will have a huge impact on the social and economic development of the world and on its environment.

"In the implementation of the Programme of Action, all countries should respect universally recognized human rights. For developing countries that should mean, first and foremost, their rights to survival and development. Human rights will not be truly protected, and the population issue will not be effectively tackled, until development is achieved.

"The Chinese delegation has participated in the special session of the General Assembly in a positive and constructive manner. On the eve of a new century China, which is the most populous developing country in the world, is willing to further strengthen its collaboration with other countries and international organizations so that it can contribute to the effective implementation of the Programme of Action.

"In conclusion, I should like to request that my statement be reflected in the record."

**The representative of Egypt stated the following:**

"At the 1994 International Conference on Population and Development, my delegation submitted a written statement relating to the use in the Programme of Action of the phrase 'couples and individuals'. While recognizing that this expression was adopted by consensus at the three previous population conferences of 1974, 1984 and 1994, my delegation reiterated its call for the deletion of the word 'individuals', since it has always been our understanding that all the questions dealt with by the Programme of Action in this regard related to harmonious relations between couples united by the bond of marriage in the context of the concept of the family as the primary cell of society.

"My delegation requests that this statement be reflected in the report of the special session."

**The representative of Qatar stated the following:**

"My delegation joined the consensus on this document, but we should like to express our understanding and interpretation of several elements. First, we did so in the context of paragraph 5 of the addendum to the report of the Ad Hoc Committee of the Whole of the Twenty-first Special Session of the General Assembly, which states:

'The implementation of the recommendations contained in the Programme of Action and those contained in the present document is the sovereign right of each country, consistent with national laws and development priorities, with full respect for the various religious and ethical values and cultural backgrounds of its people, and in conformity with universally recognized international human rights.'

"Secondly, we also affirm that we cannot accept any recommendations contained in this document, or any interpretation of it, that run counter to the Islamic *shariah* or to our national law or national constitution. Thirdly, Qatar's understanding of subparagraph (iii) of paragraph 63 is that it applies to those cases in which abortion is not against the law; it should not be interpreted as promoting abortion, and the right to life should be affirmed.

"Fourthly, we understand that the word 'gender', wherever it appears, simply refers to men and women and to nothing else.

"We request that these reservations be reflected in the records of this session."

**The representative of Yemen stated the following:**

"The delegation of the Republic of Yemen would like to applaud the great efforts made to achieve consensus, and my delegation would like to thank the Executive Director of the United Nations Population Fund, Mrs. Nafis Sadik, and the Chairman of the Ad Hoc Committee, Ambassador Chowdhury, for their efforts. We

would also like to reaffirm our support for the final document, and the positive aspects included in for the service of humankind and development.

“My delegation would like to reiterate the reservations it expressed at the time of the adoption of the Programme of Action of the International Conference on Population and Development in 1994 in Cairo. We would like to state that our joining the consensus on the document that has just been adopted is in the context of our conviction that the commitment of the Republic of Yemen to any population policies, goals or actions included in the document depends on their non-violation of the texts and principles of the Islamic *shariah*, our Constitution and the norms and customs of Yemeni society.

“My delegation requests that our position be included in the records of the meeting.”

**The representative of the Islamic Republic of Iran stated the following:**

“Let me take this opportunity to express, on behalf of the delegation of the Islamic Republic of Iran, our sincere thanks and appreciation to you, Sir, for successfully leading the special session, and to Ambassador Chowdhury, the distinguished Chairman of the PrepCom and the Committee of the Whole, for his excellent work in steering the long, difficult negotiations towards the final consensus.

“While joining this valuable consensus on the final outcome of the twenty-first special session of the General Assembly, on population and development, and supporting its implementation at both national and international levels, I would like to enter our reservation regarding any provision in the text that condones or encourages, explicitly or otherwise, sexual relations outside the framework of marriage and the family, as defined exclusively as the heterosexual union between man and woman.

“The delegation of the Islamic Republic of Iran would like to request that its reservation be included in full in the report of



the special session. The text of the reservation will be submitted subsequently to the secretariat of the special session."

**The representative of Jordan stated the following:**

"The delegation of Jordan highly appreciates the efforts by the Ad Hoc Committee of the Whole of the Twenty-first Special Session of the General Assembly, efforts aimed at achieving formulations that reflect common principles among the States and that respect the convictions and characteristics of States. This reflects our profound belief that the international community should respect our values, our national laws, our norms and traditions, and the sovereign right of every nation to establish its own population policy in conformity with its laws, as indicated in the section on principles in the Programme of Action of the International Conference on Population and Development and paragraph 5 of the present document. We in Jordan will respond to the provisions of this document in the context of these factors.

"I request that this intervention be included in the records of the meeting."

**The representative of the United Arab Emirates stated the following:**

"We emphasize our reservations with regard to all provisions which contravene our Islamic faith and the *shariah*, our Constitution and laws and our principles. We therefore request the Secretariat to note and record our reservations regarding paragraph 5 of the present document."

**The representative of Morocco stated the following:**

"I would like, on behalf of the Kingdom of Morocco, to say that we approve and we welcome this very important work which has been accomplished under your guidance, Sir, and with the help of many people. It is a very fine piece of work, of the utmost importance for human development.

"I would like simply to refer to paragraph 5 of the present document. Based on the essential principles of Morocco and, indeed, on the very nature of Morocco and its civilization, I would like to say that it must be very clear that a family is defined by a marriage that binds the two parties, and any ambiguity must be removed. That is why I would like to enter a reservation and to have my reservation noted in the official records of this meeting."

*Some States also made general statements, which are set out below:*

**The representative of the United States of America stated the following:**

"On behalf of the United States delegation, I would like to thank our Chairman, Ambassador Chowdhury, for guiding us through this review effort. It is because of his leadership that we are all able today to adopt a comprehensive, well-balanced, action-oriented and very specific set of actions to help all countries further implement the International Conference on Population and Development Programme of Action. In creating the document we have adopted today, we have drawn on our individual national experiences and efforts since 1994, and we have collectively agreed on how we can build on these experiences and make our efforts more effective.

"Among other things, we have set five-year benchmarks to better measure these efforts in the fundamental areas of education, maternal mortality, family planning and HIV/AIDS prevention. We have asked Governments to meet the needs of youth by developing and investing in plans that will ensure that young people will lead healthy and productive lives. To guide this process, we have called for the involvement of young people and the active support, guidance and participation of parents, supported by families and communities. We have encouraged Governments to build partnerships with non-governmental organizations, especially those committed to women's rights. We have proposed to develop and

expand integrated community-based approaches to sustainable development. And we have undeniably reaffirmed the political will and commitment agreed to in Cairo to carry us through our ambitious 20-year agenda.

"We know that this renewed commitment must come with resources. And while I note that the United States has not agreed to the targets for overall development assistance set forth in paragraph 69 of the preparatory committee's report (A/S-21/2/Add.2), we fervently hope that we can increase our assistance in the years to come.

"Cairo laid out a global framework that addresses the aspirations of people today. It sets a course to ensure the future quality of life for our children. Governments participating in this five-year review have overwhelmingly agreed to stay true and steady to the course Cairo set us on. Cairo is working. Our collective efforts here this week worked. And we all go back home renewed and rededicated to continue our work for women and their families everywhere in the world."

**The representative of Australia stated the following:**

"Australia strongly supports the principles and Programme of Action on population and development adopted at the International Conference on Population and Development (ICPD), held at Cairo in 1994. We also welcome and have joined the consensus on the overall review and appraisal of the Programme of Action of the ICPD.

"We are concerned at the text put forward in paragraph 63 (iii) of document A/S-21/5/Add.1. We do not see that this elaboration on the Cairo text is necessary. As stated, we welcome the consensus and do not oppose the agreements reached. However, existing Australian aid programme policy is not to provide assistance through the Australian aid programme which involves abortion training or services, or services, trials or activities which directly involve abortion drugs.

“Australia commends the diligence and skill of the Chairman of the preparatory committee, Ambassador Chowdhury, in guiding Member States to this welcome agreement. We also acknowledge with appreciation the contributions of Mrs. Sadik.”

**The representative of the Observer Mission of the Holy See stated the following:**

“The Holy See welcomes the progress that was made over the past few months in the preparatory process for this special session of the General Assembly.

“From the outset, my delegation has constantly reiterated its compliance with the guidelines set out in resolution 53/183. As members know, the Holy See, as a participant, was able to join, with serious reservations, in the consensus on the Programme of Action adopted at the Cairo International Conference on Population and Development (ICPD). The Holy See continues to hold those reservations.

“Nothing that the Holy See has done in this process should be understood or interpreted as an endorsement of concepts it cannot accept for moral reasons. Especially nothing is to be understood to imply that the Holy See endorses abortion or has in any way changed its moral position concerning abortion, contraception or sterilization.

“The intention therefore of the Holy See is to welcome the consensus decision of the Assembly and accordingly to offer the following statement of interpretation.

“The Holy See, in conformity with its nature and its particular mission, by welcoming the adoption of the final document, wishes to express its understanding of the document just adopted.

“Regarding the terms ‘sexual health’, ‘reproductive health’ and ‘sexual and reproductive health’, the Holy See considers these terms as applying to a holistic concept of health which embraces the person in the entirety of his or her personality, mind and body, and which fosters the achievement of personal maturity in

sexuality and in the mutual love and decision-making that characterize the conjugal relationship in accordance with moral norms. The Holy See does not consider abortion or access to abortion as a dimension of these terms.

"With reference to the terms 'contraception', 'family planning', 'reproductive rights', 'female-controlled methods', 'the widest possible range of family-planning services', 'new options', 'underutilized methods' and any other term regarding family-planning services and regulation of fertility, the Holy See's welcoming the consensus decision should in no way be interpreted as constituting a change in its well-known position concerning those family-planning methods which the Catholic Church considers morally unacceptable or on family-planning services which do not respect the liberty of the spouses, human dignity and the human rights of those concerned.

"With reference to all international agreements, in particular to any existing agreements mentioned in this document, the Holy See reserves its position in this regard, consistent with the Holy See's acceptance or non-acceptance of them.

"With reference to the term 'couples and individuals', the Holy See understands that this term is to mean married couples and the individual man and woman who constitute the couple. The document, especially in its use of this term, remains marked by an individualistic understanding of sexuality which does not give due attention to the mutual love and decision-making that characterize the conjugal relationship.

"The Holy See interprets references to 'family' and 'families' in the light of principle 9 of the Programme of Action, that is, in terms of the duty to strengthen the family, the basic unit of society, and in terms of marriage as an equal partnership between man and woman, that is, husband and wife.

"With regard to the term 'gender', the Holy See reserves its position with the understanding that this is grounded in biological sexual identity, that is, the two sexes, male and female.

"The Holy See reaffirms that the education of 'young people', including 'children', 'adolescents', 'young men', and 'young women', including education on sexual and reproductive health, is primarily and fundamentally the right, duty and responsibility of parents, in accordance with the Universal Declaration of Human Rights.

"With regard to the access of 'young people', including 'adolescents', 'young men', and 'young women', to family-planning services and reproductive health services, the Holy See considers that this is to mean married couples and the individual men and women who constitute such couples. In this the Holy See wishes to give emphasis to the particular aspect of mutual love and decision-making that characterize the marital relationship.

"Specifically as regards paragraph 73 (a), the Holy See interprets 'the rights of adolescents to privacy, confidentiality and informed consent' in the context of issues surrounding, *inter alia*, sexual abuse, violence or incest. In order for parents to assume their rights, duties and responsibilities to guide their children, their prior human rights in the choice of the education of their children must not be abrogated, and every effort must be made by Governments and by civil society to assist parents in fulfilling this essential role. In this regard the Holy See further interprets 'respecting their cultural values and religious beliefs' to refer to the cultural values and religious beliefs of their parents, that is until the adolescent attains the age of majority. The Holy See requests that this interpretation be noted in paragraph 73 (a).

"With respect to paragraph 63, the Holy See affirms that human life begins at the moment of conception and that life must be defended and protected. The Holy See can never condone abortion or policies which favour abortion. The Holy See further affirms that the right of conscience of health-service providers is assured by, *inter alia*, article 18 of the Universal Declaration of Human Rights. The Holy See requests that this interpretation be noted in paragraph 63."

## **Withdrawal of reservations to the Key Actions for the Further Implementation of the Programme of Action of International Conference on Population and Development**

The Government of Argentina withdrew its reservations to the Key Actions for the Further Implementation of the Programme of Action of International Conference on Population and Development on 13 September 2013 through a letter to the Secretary General.

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