



## **Economic and Social Council**

Distr.: General  
20 January 2014

Original: English

*Advance unedited  
version, English only*

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### **Commission on Population and Development**

#### **Forty-seventh session**

7-11 April 2014

Item 3 of the provisional agenda\*

#### **Assessment of the status of implementation of the Programme of Action of the International Conference on Population and Development**

### **Framework of Actions for the follow-up to the Programme of Action of the International Conference on Population and Development (ICPD) Beyond 2014**

#### **Report of the Secretary-General**

##### *Summary*

The present report is submitted pursuant to General Assembly Resolution 65/234, which requested the Secretary-General to submit a report based on an operational review of the implementation of the Programme of Action of the International Conference on Population and Development, on the basis of the highest-quality data and analysis of the state of population and development, and taking into account the need for a systematic, comprehensive and integrated approach, responding to new challenges and to the changing development environment, and reinforcing the integration of the population and development agenda in global processes related to development.

The evidence presented by the review overwhelmingly supports the ICPD consensus that the respect, protection, promotion and fulfilment of human rights are necessary preconditions to improving the development, dignity and well-being of all people; and that sexual and reproductive health and rights, and an understanding of the implications of population dynamics are critical foundations for sustainable development. Protecting and fulfilling the human rights of young people and investing in their quality education, effective livelihood skills, access to sexual and reproductive health services and information, including comprehensive sexuality education, as well as employment opportunities, are necessary for the development of their resilience and create the conditions under which they can achieve their full potential.

\*E.CN.9/2014/1.

The path to sustainability, outlined in the framework of actions, demands better leadership and greater innovation: to extend human rights and protect all persons from human rights abuses, discrimination and violence, in order that all may have the opportunity to contribute to and benefit from development; to invest in the capabilities and creativity of the world's adolescents and youth for their own sake and to ensure future growth and innovation; to ensure the protection, inclusion and equitable participation of older persons in society; to strengthen health systems to provide universal access to sexual and reproductive health, so that all women can thrive and children can grow in a nurturing environment; to build sustainable cities that enrich urban and rural lives alike; to harness the benefits of migration and address its challenges; and to transform the global economy towards one that will sustain the future of the planet and ensure a common future of human rights, dignity and well-being for all people in the years beyond 2014.

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## I. Introduction

1. The 1994 Programme of Action of the International Conference on Population and Development (ICPD) reflected a remarkable consensus among diverse United Nations Member States and other stakeholders that the central focus of development is human beings. It also established that increasing access to health and education, and protecting human rights, especially those of women and adolescents, including their sexual and reproductive health and rights, would ultimately secure a better social and economic future and contribute to slower population growth. The Programme of Action was structured around a set of fundamental principles, defining a new paradigm for population and development that is people-centred and permeates all relevant dimensions of the human condition. It broke new ground also by endorsing a holistic approach to development, which incorporated a strong emphasis on the nexus of human well-being and environmental sustainability.

2. The Programme of Action redefined population policies away from achieving demographic targets and towards empowering people and securing conditions for equal opportunity and accountable, transparent governance systems, so that each individual can reach the highest level of human well-being and development. The Programme of Action repositioned population in relation to development, acknowledging the interdependence of population, sustained economic growth, the environment, consumption patterns, governance, social equity and gender equality. It acknowledged human beings as ultimate actors in addressing their quality of life. Over a twenty-year period, Governments were expected to achieve the goals and objectives of the Programme of Action, by making population and development policies an integral part of comprehensive development planning premised on social equality and poverty reduction, within an equitable, human rights-based and sustainable development strategy.

3. In December 2010, the General Assembly, in its resolution 65/234 on the follow-up to the International Conference on Population and Development beyond 2014, requested an operational review of the status of implementation of the Programme of Action and its key actions, on the basis of the highest-quality data and analysis of the state of population and development, taking into account the need for a systematic, comprehensive and integrated approach to population and development. The resolution also stressed the importance of responding to the new challenges relevant to population and development and to the changing development environment, and reinforced the need to integrate the population and development agenda into global processes related to development.

4. In accordance with General Assembly Resolution 65/234 and in consultation with the General Assembly as well as other relevant partners identified in the resolution, the review was completed through a synthesis of critical inputs, including the ICPD Beyond 2014 Global Survey, undertaken by United Nations Member States and others; consultations at the global and regional levels; thematic consultations on a range of development issues, including on youth, human rights and women's health; and an evidence-based analysis of progress since 1994. The Global Survey was completed by 176 Governments and 6 territories and areas, representing all regions, and the responses were analyzed at the global and regional levels.

### *Uneven progress since 1994*

5. The evidence of the review overwhelmingly supports the validity of the ICPD consensus. Between 1990 and 2010 the number of people living in extreme poverty as a share of the total population in developing countries fell by more than half (from 47 per cent

in 1990 to 22 per cent in 2010), meaning that almost 1 billion fewer people were living in extreme poverty. Large gains in primary school completion between 1999 and 2009 were achieved, especially among girls; 158 countries now have legislation on a minimum age of marriage at or above 18 years; maternal mortality worldwide fell by 47 per cent between 1990 and 2010, and global fertility fell by 23 per cent.

6. There has been a significant correlation between growing female literacy, healthier families, and stronger GDP growth. The entry of women into the export manufacturing sector in parts of Asia has been one of the key drivers of that region's economic growth. Gains in the educational attainment of girls are contributing also to the success of Asia and Latin America in the knowledge-based economy. Many countries have experienced significant economic development, which has been accompanied by a continued decline in the global population growth rate from 1.5 per cent per year in 1990-1995 to 1.1 in 2010-2015.

7. However, progress has been unequal and fragmented, and new challenges, realities and opportunities have emerged. For example, progress towards gender equality is still far from universal, and gender-based discrimination and violence continue to plague all countries. Millions of early, forced and child marriages still take place in defiance of laws and international human rights obligations. Hundreds of millions of women live in countries where domestic violence is not a crime, or where laws against it are not enforced. While all members of the population suffer in conditions of structural poverty, the threats to the survival and well-being of women are especially acute. Lack of access to health services, particularly sexual and reproductive health services, and the burdens of food production, obtaining drinking water and unpaid labour fall disproportionately on poor women and girls. In addition to discrimination and inequalities on the basis of gender, many people still face stigma, violence, structural inequalities and other threats to their well-being because of their age, because they have a disability, are from an indigenous group, racial or ethnic minority, or on the basis of their sexual orientation or gender identity, among others factors.

8. The rise of the global middle-class has been shadowed by rising inequalities both within and between countries. Over 70 per cent of the world's poorest people live in middle- or high-income countries. Less than 1 per cent of the world's population control over 40 per cent of the world's wealth, while the poorest 69 per cent control 3 per cent of global wealth. Inequality impedes trust and social cohesion, threatens public health, and marginalizes the poor and the middle class from political influence and economic and social advancement. Current trajectories of wealth concentration threaten efforts to reduce poverty and advance human progress.

9. Similarly, the world has made important gains in health and longevity, but these gains have not been shared by all. Advances in certain aspects of sexual and reproductive health, such as maternal and child health, HIV and AIDS prevention and mitigation, and contraceptive use, have been considerable over the past two decades. Yet 800 women a day died from causes related to pregnancy and childbirth in 2010, and more than 8 million young women aged 15-24 in developing countries experienced unsafe abortions in 2008, a factor partly to blame for the high number of pregnancy-related deaths among teenage girls. The advent of antiretroviral drugs has helped to avert 6.6 million AIDS-related deaths, including 5.5 million deaths in low- and middle-income countries, yet in some places HIV incidence is rising or declines have stalled. At the same time, the incidence of non-communicable diseases is rising in all countries.

10. An estimated 1 billion people are living in the 50 to 60 countries that have seen only limited gains in health and well-being since 1994. It is in these countries, and among poorer

populations within wealthier countries, where many of the objectives of the ICPD Programme of Action remain unfulfilled.

*New realities, challenges and opportunities*

11. Global population surpassed the 7 billion mark in late 2011, marking a doubling since 1970. The dramatic decline of fertility since the ICPD has led to a decrease in the global population growth rate. Looking ahead, medium-variant projections from the United Nations anticipate a population of 8.4 billion by 2030 and 9.6 billion by 2050. Virtually all of this growth will take place in developing countries.

12. Global and regional population trends mask considerable and growing heterogeneity of demographic experiences around the world. The demographic transition associated with declining fertility and mortality, together with the transition from rural to urban areas, has produced unprecedented changes in population size, age structure and spatial distribution.

13. Declining fertility rates — driven in part by marked declines in infant and child mortality and expanded choices for women — have been providing certain low- and middle-income countries with a window of opportunity for unusually rapid economic growth known as the demographic dividend. Because the proportion of the population that is in the working age range is historically high in these countries, these cohorts can — if provided with adequate education, health and employment opportunities — help to accelerate economic growth and development. Sub-Saharan Africa will experience a particularly rapid increase in the size of the population aged 15–24 years in the coming decade.

14. Globally, the number of older persons aged 60 years or over is projected to increase from 870 million in 2014 to more than 2 billion by 2050. Older persons are the world's fastest growing population group, amid rapidly changing family and household structures and weakening family support systems. While significant advances have been made in health care over the past decades and life expectancy has increased, many older persons, especially in developing countries, are still living in poor health because they lack access to adequate and affordable health care. Due to longer life expectancy among women, older women outnumber older men in most societies, and often face greater vulnerability. Population ageing presents social, economic and cultural challenges to individuals, families and societies, but also the long-term potential for what has been described as the second demographic dividend — increased opportunity for investment in children's education and a greater accumulation of personal and collective assets as a result of longer life spans, slower labour force growth and population ageing — which can enrich both households and the larger society.

15. Marriage patterns and the ways that people organize themselves into households have gone through enormous changes in the last 20 years, resulting in more diverse types of households, including a notable rise in the proportions of people living alone, marrying late or not at all, choosing to have no children or raising children as a single parent. These changes fundamentally alter the challenges of ensuring adequate and secure housing, long-term care for older persons and social protection, while, more broadly, preventing unsustainable consumption and energy use.

16. Since ICPD, many more people are on the move, both within and across countries. It is estimated that over three quarters of a billion people worldwide were internal migrants in 2005, living in their home countries but outside their region of birth. Increasingly, women are migrating on their own or as heads of households and principal wage earners. More than half of the world's population now live in urban areas. Most population growth is expected to occur in urban areas over the next 30 years. Despite numerous stresses within urban areas,

including evidence of heightened violence and risks associated with informal settlements, urban areas continue to attract rural populations, especially young adults seeking greater economic opportunities and social freedom.

17. Contemporary patterns of international migration are significantly more complex and varied than those of the past. In 2013, there were 232 million international migrants in 2013, benefitting both countries of destination and origin through their valuable labour and remittances. The growth and diversification of migration patterns have meant that an increasing number of countries are affected by international migration, and many countries are now simultaneously places of origin, transit and destination.

18. With global economic growth has come a worrisome increase in greenhouse gas emissions. In 2013, the concentration of CO<sub>2</sub> in the atmosphere surpassed the milestone of 400 parts per million, suggesting that the opportunity to keep climate change below tolerable levels is diminishing. Climate change also poses a particular threat to the livelihoods and well-being of the majority of the world's population, including those who have made little or no contribution to greenhouse gas emissions. The need for truly global leadership on environmental sustainability grows more pressing each day.

19. Access to cell phones and to the Internet and the spread of social media across countries and regions has made information and knowledge far more widely accessible. Connectivity has helped many people become aware of their rights and made evident the inequalities they experience as they learn how others live. The information revolution has the potential to empower people and increase their capabilities, yet many are being left behind in a globalizing, information-dependent world.

20. The Millennium Development Goals, adopted at the turn of this century, broadly reflect the ICPD consensus, and both are central for the formulation of the post-2015 agenda. The Millennium Development Goals have influenced global and national development policies, resource allocations and development accountability benchmarking for almost 15 years. However, recent reviews of the MDGs have highlighted the critical importance of overarching guiding principles such as human rights, equality and sustainability, which were missing from the MDG framework. Also missing were complementary and necessary policy areas, such as inclusive economic growth and a significantly greater and sustained investment in the social sector.

21. Investment across and within countries to redress social and economic disparities is required for inclusive economic, social and sustainable development. Support for groups that are at a structural disadvantage, including women of all ages, people living in poverty, and other marginalized and vulnerable groups, is critical for reducing such inequalities. As the United Nations considers a new, global post-2015 development agenda, the goals, objectives and vision of the International Conference on Population and Development, as well as the findings and recommendations of the review, should be integral to this dialogue.

#### *Population and development beyond 2014*

22. The operational review provides evidence that few Governments and their development partners have achieved either the deep and broad progress in specific sectors or the multi-sectoral implementation envisioned by the Programme of Action. In health, for example, few countries have made measurable progress toward integrated sexual and reproductive health services or managed to provide comprehensive education on human sexuality to all adolescents and youth. Similarly, despite decades of attention to international migration, large numbers of migrants, whether documented or in an irregular situation, continue to be excluded from full participation in their societies of destination. In numerous

examples across multiple sectors, development efforts still fail to ensure universal respect for human rights or consistent investment in the capabilities and dignity of disadvantaged individuals throughout the life-course.

23. The results of this operational review point to a way of framing action in population and development beyond 2014 that is built on five integrated thematic pillars of dignity and human rights, health, mobility and place, governance and accountability, and sustainability. While these aspirations are interlinked and re-affirm one another, they offer distinct organizing dimensions for reviewing the numerous principles, goals, objectives, and actions contained within the sixteen chapters of the ICPD Programme of Action.

24. At the centre of realizing dignity and human rights for all lay the eradication of extreme poverty, ending discrimination and human rights violations, and ensuring social inclusiveness. Current levels of economic inequality threaten future economic growth, the security of societies and the capacity of people to develop, adapt and innovate in response to changing environmental and other conditions. Discrimination against select population groups remains common in most countries, while discrimination against women is evident in all societies. The cost of discrimination is high, as it negatively affects, among other things, physical and mental health, educational attainment and productivity. Actions are needed to eliminate discrimination and marginalization, and promote a culture of respect for all. The principal message of the ICPD in 1994 — that the fulfilment of individual rights and capabilities is the foundation of sustainable development — is even more relevant today, with ample evidence that investments in substantive equality for all persons results in long-term development and population well-being.

25. Between 1990 and 2010, the global health burden shifted towards non-communicable diseases and injuries, while communicable, maternal, nutritional and neonatal conditions persisted in developing countries. Despite significant improvements in sexual and reproductive health, many people have been left behind, and continued progress will depend on sustained attention to strengthening the reach, comprehensiveness and quality of health systems. If women are to enjoy their human rights and contribute fully to the enrichment and growth of society, to innovation and to sustainable development, they must be able to decide on the number and timing of their children, free from discrimination, violence and coercion, with access to sexual and reproductive health services necessary to prevent illness, disability or death, and with confidence in the probable health and survival of their children.

26. International migration is a powerful tool for reducing poverty and enhancing opportunity for individuals and for countries of origin, transit and destination. While many migrants are able to take advantage of new opportunities, others have become victims of trafficking, exploitation, discrimination and other abuses. For those moving and for those displaced within or beyond national borders, insecurity of place represents a fundamental threat to dignity, and leads to a disproportionate risk of violence, poverty and adverse health outcomes.

27. The world has seen important shifts in the diffusion of authority and leadership since 1994, with a growing multiplicity of national, municipal, civil society and other non-State actors. International human rights protection systems have gained in authority, jurisdiction and monitoring power, and the formal participation of civil society as a political force has grown measurably since 1994, yielding important shifts in rights-based investments. Globally, the ICPD generated momentum for the creation and renewal of institutions to address population dynamics, sustainable development, sexual and reproductive health, the needs of adolescents and youth, and gender equality. As the world determines new development goals for the future, including continuing to work to achieve the goals and

objectives of the ICPD Programme of Action, the generation and use of accurate data and knowledge, expanded and effective participation by stakeholders, and strong leadership at the local, national and global levels are essential.

28. Sustainable development has become a singular challenge to humankind in the 21st century. The fact that the poor bear the brunt of environmental burdens, and that the accustomed model for improving living standards, expanding opportunities and guaranteeing dignity and human rights is proving unsustainable, is one of the major ethical quandaries in human history. The integrated and comprehensive approach to population and development based on the results of the operational review is essential for achieving sustainable development. While the objectives of the ICPD touched on many different dimensions of well-being across the life course and on many domains of population and development, they each contribute, in the main, to the fulfilment of dignity and human rights, good health, a safe and secure place to live, and mobility.

29. Given that the respect, protection, promotion and fulfilment of human rights are necessary preconditions for realizing all of the unfulfilled objectives of the Programme of Action, the elaboration and fulfilment of rights are a critical metric for determining whether, for whom, and to what extent, aspirations have been achieved.

30. The vital importance of the paradigm shift of the ICPD, subsequently affirmed by progress in the two subsequent decades, was precisely in demonstrating that individual *and* collective development aspirations benefit from a central focus on individual dignity and human rights. By updating and advancing the implementation of such principles, Governments can achieve the goals set forth in 1994, while accelerating progress towards a resilient society and a sustainable future for all. Central to this update are laws and policies to ensure respect and protection of the sexual and reproductive health and rights of all individuals.

## II. Dignity and human rights

31. The principles of the Programme of Action of the International Conference on Population and Development affirm that “all human beings are born free and equal in dignity and rights” and that “they are entitled to all rights and freedoms as set forth in the Universal Declaration of Human Rights, without distinction of any kind.” The Programme of Action calls for the eradication of all forms of discrimination, including on grounds of sex, and asserts that the principal aim of population-related goals and policies is to improve the quality of life of all people. The principles of the Programme of Action establish the link between dignity and rights and individual well-being. Addressing the underlying structural factors that shape economic, political and social realities, while ending discrimination and human rights violations, on the basis of equity and social inclusiveness, is the key to assuring dignity.

### *Poverty and inequality*

32. Poverty has many manifestations. It is the lack of income and wealth but also includes many other deprivations, such as food insecurity; lack of health care, education and other basic services; inadequate or no housing; lack of safety or means of redress; and lack of voice or access to information or political participation. Poverty is dynamic, with some trapped in it while others move in and out. Some people fall into, or deeper into, poverty as

the result of external shocks, such as poor governance, financial crises, natural disasters, conflict and health or family crises.

33. Poverty occurs in all countries and women often bear a disproportionate burden of its consequences, as do children. Because poverty has historically been measured at the household level, without measures of intra-household inequality, the differential poverty of women and men has been difficult to measure. However, where analysis of household data has been made, results indicate that women are more likely to live in a poor household than men, with larger differences observed in rural areas. Poverty among specific population groups such as persons with disabilities or older persons is also difficult to measure. Nonetheless, poverty is typically higher among those who belong to population groups that are structurally at a disadvantage or experience sustained social stigma. In this regard, poverty both results from, and is reinforced by, discrimination. Ending large social and economic disparities is at the centre of achieving dignity for all.

34. Over the past decades, great progress has been made in reducing the number of persons living in extreme poverty. About 700 million fewer people lived in conditions of extreme poverty in 2010 than in 1990, with much of the progress made in a few large countries, primarily China and India. While levels of absolute poverty have been declining, income and wealth inequality has been growing. Political, economic and social factors contribute to sustaining and at times worsening inequality. Wealth inequality threatens future economic growth, the security of societies, and the capacity of people to adapt to changing environmental conditions.

**35. Governments should develop, strengthen and implement effective, integrated, coordinated and coherent national strategies, including through equitable livelihood opportunities, to eradicate poverty and break the cycles of exclusion and inequality as a condition for achieving development, also targeting persons belonging to marginalized or disadvantaged groups, in both urban and rural areas, guaranteeing for all people an opportunity to live a life free from poverty, and to enjoy protection and full exercise of their human rights.**

*Women's empowerment and gender inequality*

36. The empowerment of women and gender equality remain unfulfilled objectives of the ICPD Programme of Action. Discrimination against women is nearly universal, and manifests in violation and abuses of their human rights, in unequal opportunities to expand their capabilities, in unequal pay, and in many other ways. Achieving gender equality is a human rights imperative and also an essential and effective means to achieve inclusive and thus more sustainable development.

37. The gender gap in labour force participation has narrowed only slightly since 1990. Women continue to be paid less than men for equal work and are substantially over-represented in vulnerable and informal employment, where jobs are less secure and provide fewer benefits. Women also bear a disproportionate share of unpaid household labour. Further, they remain substantially under-represented in positions of power and decision-making in politics, business, and public life, the very arenas where norms of equality and non-discrimination would have far-reaching influence on society.

38. Child marriage — a violation of the rights of the child — remains common in many countries. If current trends continue, by 2020, an additional 142 million girls will be married before their 18th birthday. Other harmful practices, such as female genital mutilation/cutting and the many manifestations of son preference, continue to be prevalent. Despite gains in universal primary education for both sexes, adolescent girls are disproportionately excluded

from lower and higher secondary education. Investments in the education of girls produce important benefits for the girls themselves, as well as for society at large, including reductions in child mortality.

39. Violence against women and girls is one of the most prevalent forms of human rights violations worldwide, resulting in extreme insecurity and lifelong costs. An estimated 35 percent of women worldwide report that they have experienced physical and/or sexual abuse, mostly at the hands of an intimate partner. A 2013 United Nations multi-country study carried out in Asia and the Pacific found that nearly half of the 10,000 men interviewed reported using physical or sexual violence against a female partner, ranging from 26 to 80 per cent across sites. Nearly a quarter of men interviewed reported perpetrating rape against a woman or girl, ranging from 10 to 62 per cent across the sites studied. Respondents begin perpetrating violence at young ages, often in their adolescence and some even at ages younger than 14. Of those men who admitted to rape, the vast majority (from 72 to 97 per cent in most sites) had experienced no legal consequences, confirming that impunity remains a serious issue. Across all sites studied, the most common motivation that men cited for rape was a belief that men have a right to sex with women regardless of consent.

**40. Governments should facilitate and ensure equal opportunities for women to contribute to society as leaders, managers and decision-makers, granting them access to positions of power equal to that of men in all sectors of public life. As part of these efforts, it is important to address public views and values regarding sexism or other forms of discrimination, including through creative communication and education campaigns, and to monitor these on a regular basis as indicators of social development. They should also ensure the equality of men and women in law and in practice, the elimination of all forms of violence against women, and the empowerment of women to exercise all human rights, including reproductive rights.**

#### *Adolescents and youth*

41. Adolescents and youth aged 10 to 24 years, who are approaching or commencing the productive and reproductive ages, are central to the development agenda of the coming two decades, particularly in the global South, where they accounted for 28 per cent of the total population in 2010, and in Africa, where they were over 31 per cent of the population. While this proportion will decline in most regions in the coming 25 years, it will remain above 20 per cent in all regions except Europe and Northern America, and above 30 per cent in Africa until 2035.

42. Primary school enrolment rates have reached 90 per cent worldwide, although with considerable variation across regions and within countries. In 30 per cent of countries, fewer girls are enrolled than boys in primary education. Girls face even greater barriers in access to secondary education, especially in sub-Saharan Africa and Southern and Western Asia. Numerous reasons include gender discrimination both inside and outside of schools, early marriage, demand for household labour, risk of sexual harassment and assault, lack of sanitation facilities, family unwillingness to pay school fees for girls, and hazards of the daily journey to school. **Governments should ensure that every child and young person, regardless of circumstances, has access to quality pre-primary, primary and secondary education and has a rapid, safe and productive transition from school to working life and adulthood. Governments should make special efforts to address school dropout among boys and girls, create a conducive environment to enrol those who have never been to school as well as to keep girls in school, including married or pregnant girls, and ensure admission or re-entry to school after delivery.**

43. Lack of quality education and differences in quality create serious challenges at all levels of schooling. Indeed, the need to improve the quality and coverage of education were the top two priorities identified in the Global Survey by Governments in all regions. When asked to identify public policy priorities for education over the next five to ten years, over half of Governments highlighted the importance of “improving quality standards in education, including the curriculum” (61 per cent) and “maximizing social inclusion, equal access and rights” (55 per cent). Africa was the only region where a higher proportion of Governments mentioned coverage, pointing towards the unfinished agenda of universal enrolment.

44. For youth overall, Governments responding to the Global Survey prioritized economic empowerment and employment (70 per cent), and social inclusion and education (both 56 per cent). These priorities underscore the intersections between the right to productive employment and decent work, and key links to education, training, social integration, and mobility, taking into account gender equality. In addition, the ICPD Beyond 2014 regional review outcomes and the global review emphasized full and effective participation of young people, as well as the importance of investing in young people as key agents of development and social change.

45. Providing access to decent work to young people is crucial for the progression towards wealthier economies, fairer societies and stronger democracies. This is a concern for both industrialized and developing countries. Of the estimated 197 million unemployed people in 2012, nearly 40 per cent were between 15 and 24 years of age. The global economy will need to create hundreds of millions of new, productive jobs over the next decade in order to reduce current unemployment levels and provide opportunities for the anticipated 40 million labour market entrants each year over the next decade.

46. In many countries, the unemployment scenario is further aggravated by the large numbers of young people working in poor-quality and low-paid jobs with intermittent and insecure work arrangements. As many as 60 per cent of young persons in developing regions are either without work, not studying, or engaged in irregular employment and thus not achieving their full economic potential. The 49 least developed countries face a stark demographic challenge, as their collective population — about 60 per cent of which is under the age of 25 — is projected to double to 1.7 billion by 2050. For the coming decade these countries will have to create about 95 million jobs to absorb new entrants to the labour market, and another 160 million jobs in the 2020s. **Governments should invest in building the capabilities of young people and equipping them with the skills needed to meet the labour demands of current and emerging economies. They should develop labour protection policies and programmes to ensure employment that is safe, secure and non-discriminatory, and that provides a decent wage and opportunities for career development. These efforts should include a focus on productive investment in technologies, machinery and infrastructure, and the sustainable use of natural resources to create employment opportunities for young people.**

#### *Older Persons*

47. An inevitable consequence of demographic changes resulting from fertility decline and increased longevity is population ageing. Globally, in the last 20 years, the number of persons aged 60 years or over increased by 56 per cent, from 490 million in 1990 to 765 million in 2010. Populations in all regions are ageing, with more than 20 per cent of the global population projected to be above 60 years of age by 2050.

48. While population ageing poses social, economic, cultural, and other challenges to individuals, families and societies, it also presents opportunities. Many older persons continue to work and provide invaluable contributions to their families, communities and societies well into old age. As people live longer, however, concerns about the financial sustainability of public pensions, health care for older persons and old-age social care benefits, all of which need to be paid over longer periods, are leading to important debates over policy amendments. There are also concerns about the long-term viability of intergenerational social support systems, which are crucial for the well-being of both the older and younger generations. Not all older persons require support, nor do all persons of working age provide direct or indirect support to older persons. In fact, older persons in societies with generous pension schemes often provide substantial financial support to their adult children and grandchildren.

**49. Governments should ensure opportunities for flexible employment, lifelong learning and retraining, which are critical to enable and encourage older persons to remain in the labour market — for their own benefit, for that of their families, and as an essential resource for successful economies that cannot afford to lose their experience and expertise.**

50. A large majority of the world's older persons have no formal social protection. Many older persons face discrimination, abuse and violence. Older women are particularly vulnerable. **Governments should ensure the social protection and income security of older persons, with particular consideration for older women, those living in isolation and those providing unpaid care, by extending pension systems and non-contributory allowances, by strengthening intergenerational solidarity, and by ensuring the inclusion and equitable participation of older persons in the design and implementation of policies, programmes and plans that affect their lives.**

*Persons with disabilities*

51. Disability is a circumstance experienced by a majority of people in the world at some point in their lives — some throughout their lives, some for only a phase. While estimates vary, between 15 and 20 per cent of persons 15 years or older around the world are estimated to be living with a disability. Of these, between two and four per cent have significant or severe disabilities. Disability is experienced unevenly across countries, with higher-income countries less affected than poorer countries; within countries, women and older persons bear a disproportionate burden of disability. The number of disabled persons is growing as a result both of population ageing and the spread of non-communicable diseases such as diabetes, heart disease and dementia.

52. Though under-studied, available evidence suggests that disability can be both a driver and a consequence of poverty. Studies in developed and developing countries have shown that disability hampers educational attainment and limits labour market participation. **Governments should monitor and eradicate all forms of discrimination in employment against persons with disabilities and develop enabling policies and programmes to ensure employment that is safe and secure, and that provides a decent wage.**

53. Persons experiencing disabilities are more likely to experience violations of dignity and rights than able-bodied persons, including social exclusion, violence and prejudice. The implications of disability, including the need for social support, extend beyond the individual to households and families impacted by disability, as reflected in resources spent on health care, loss of income, social stigma, and the need for caregiver support systems. **Governments should monitor and eradicate all forms of direct and indirect**

**discrimination towards persons with disabilities, in order to meet their needs in education, employment, rehabilitation, housing, transportation, recreation and communal life. Governments should also design national programmes to support family caretakers and to mitigate the social isolation experienced by many persons with disabilities.**

*Indigenous peoples*

54. There are an estimated 370 million indigenous people worldwide. Many indigenous people have historically been subject to social and political marginalization. They have often been denied the opportunity to sustain their own cultural heritage as well as to fully integrate into the prevailing social, political and economic system of the countries where they reside.

55. For many indigenous peoples, structural discrimination includes the violence of forced displacements, loss of homeland and property, separation of families, enforced loss of language and culture, the commodification of their cultures and a disproportionate burden of the consequences of climate change and environmental degradation. **Governments should adopt, in conjunction with indigenous peoples, the measures needed to ensure that all indigenous peoples enjoy protection from, and full guarantees against, all forms of discrimination and violence, and take measures to ensure that their human rights are respected, protected and fulfilled. Governments should respect and guarantee the territorial rights of indigenous peoples, including those living in voluntary isolation and those in the initial phase of contact, with special attention to the challenges presented by extractive industries and other global investments, and by mobility and forced displacements. Governments should design policies that respect the principle of free, prior and informed consultation on matters that affect indigenous peoples, pursuant to the provisions of the United Nations Declaration on the Rights of Indigenous Peoples.**

*Non-discrimination applies to all persons*

56. Many individuals and groups continue to be frequently exposed to discriminatory behaviour, including stigma, unfair treatment, or social exclusion, in relation to various dimensions of their identity or circumstances. In addition to the discrimination experienced by women and girls, young and older persons, persons with disabilities and indigenous peoples, persistent inequalities are faced by other groups that are discriminated against on the basis of their race, ethnicity, migration status, HIV status, sexual orientation or gender identity, or because they are engaged in sex work. Discrimination may be compounded by laws criminalizing the behaviour that defines their group status or by the absence of social protection for all persons. The persistence of discriminatory laws, or the unfair and discriminatory application of laws, may reflect underlying stigma held by powerful sectors of society, generalized public indifference, and/or weak political leverage of those suffering discrimination.

57. For ethnic and racial minorities, historic and sustained discrimination can lead to intergenerational cycles of poverty and disadvantage. Estimates of global ethnic diversity have documented 822 ethnic groups in 160 countries. In a wide range of countries, public health data illustrate persistent disparities in morbidity and mortality among racial and ethnic minorities, reflecting the collective impact of numerous overlapping discriminations in access to health care, education, paid employment, nutrition and housing; socioeconomic and wealth disparities; and limited opportunities for advancement over the life-course. **Governments should guarantee opportunities for the full and equal participation of racial and ethnic minorities in social, economic and political life; guarantee free and safe integration in housing; lead open dialogue on agreed public reconciliation and/or redress for past wrongs; and actively promote ties of mutual regard.**

58. The regional ministerial review outcomes focused particular attention on the many people throughout the world who continue to suffer from discrimination and contained commitments to address these gaps. The outcomes of the regional reviews reinforced the importance of the principles of freedom and equality in dignity and rights, as well as non-discrimination. The Global Survey and the regional review outcomes highlight the persistent gaps in fulfilling the human rights principles of non-discrimination affirmed by the ICPD. The discrimination and risks of harassment and physical violence that certain groups or individuals face remain considerable. The discrimination and structural violence that people face, including on the basis of gender, age, race, ethnicity, sexual orientation and gender identity or disability, contradict the principles of the ICPD and hinder the right of such individuals to well-being, limiting their capacity to fully contribute to and benefit from society. The commitment to individual well-being cannot co-exist with tolerance of hate crimes or any form of discrimination. **Governments and the international community should express grave concern about acts of violence, discrimination and hate crimes committed against individuals on the basis of their sexual orientation or gender identity. National leaders should advocate for the rights of all persons, without distinction of any kind.**

59. The Global Survey and the regional reviews and outcomes highlight the continuing gaps in fulfilling the human rights principle of non-discrimination affirmed by the ICPD in cases where the rights of individuals or groups remain vulnerable, with direct effects on their health, including risks of HIV and AIDS, and heightened exposure to violence including sexual violence. The regional review outcomes contain many commitments and actions to close these gaps. Addressing these gaps requires protecting the human rights of all individuals, including the right to gainful employment, residence, access to services and equality before the law. **Governments should guarantee equality before the law and non-discrimination for all people by adopting laws and policies to protect all individuals, without distinction of any kind, in the exercise of their social, cultural, economic, civil and political rights. Governments should also promulgate laws, where they are absent, and enforce laws to prevent and punish any kind of violence or hate crimes, and take active steps to protect all persons from discrimination, stigma and violence.**

*The social cost of discrimination*

60. The past 20 years have witnessed enormous leaps in the scientific understanding of how discrimination and stigma impact both physical and mental health, suggesting that a climate of discrimination curtails the well-being and productivity of persons and nations. Yet physical harassment, bullying and violence are not the only causes of compromised health and productivity. Similar effects are prompted by pervasive negative stereotypes, the experience of stigma and the fear of discrimination. The costs to society of having substantial proportions of its people undergoing a sustained struggle for protecting and upholding their dignity and well-being should be a concern for political leaders, given the evident loss of human resources to discrimination (including the loss to health and productivity) and the potential for increased social instability.

61. **Comprehensive measures are needed to ensure non-discrimination, equality and the realization of human potential for all population groups. Governments should address the multiple and overlapping forms of inequality, disempowerment and discrimination, through commitment to equality and non-discrimination for all persons, without distinction of any kind, in the exercise of their social, cultural, economic, civil and political rights, including the right to gainful employment, residence and access to services, as well as the need to promulgate and enforce laws**

that take active steps to protect people from discrimination, stigma and violence. In adopting, or where they exist, adapting legal frameworks and formulating necessary policies, Governments should facilitate the full participation of those who experience discrimination. Governments should also invite and encourage the participation of civil society throughout the process of design, implementation and evaluation of those policies.

### III. Health

62. Trends in global population health between 1990 and 2010 are striking in two ways: first, the composition of the global health burden has shifted dramatically away from communicable diseases and towards non-communicable diseases and injuries, in part due to global population ageing; and, second, communicable diseases, as well as maternal, nutritional and neonatal conditions — often referred to as diseases of poverty — have persisted as leading causes of death in sub-Saharan Africa and Southern Asia. Improvements in the quality and accessibility of health services since the ICPD have led to significant gains in many health indicators, including many sexual and reproductive health indicators. Yet aggregate improvements mask growing inequalities both within and between countries, with far too many countries exhibiting progress among households in the upper wealth quintiles, while progress is flat or marginal among poor households, and also falls short for marginalized and disadvantaged groups such as indigenous peoples.

63. The persistence of poor sexual and reproductive health outcomes among the poor particularly in Africa and Southern Asia, underscores the need to strengthen the reach, comprehensiveness and quality of health systems. The right to health obligates Governments to identify and eliminate economic, social, systemic and service-related barriers, including by protecting and promoting the right to education and information, so that individuals can enjoy the highest attainable standard of health, including sexual and reproductive health. Inequalities and inequities must also be addressed through deliberate planning and budgeting, as well as through concrete actions indicated in this section.

#### *Child survival*

64. There has been substantial progress since the ICPD towards reducing infant and child mortality. Under-five mortality declined by 47 per cent globally, from 90 deaths per 1,000 live births in 1990 to 48 in 2012. The number of under-five deaths in the world has fallen from 12.6 million in 1990 to 6.6 million in 2012. Still, preventable diseases cause most under-five deaths, more than half of which are due to pneumonia, diarrhoea and malaria. Progress in reducing deaths that occur within the first month of life (the neonatal period) has been slower. The share of neonatal deaths among deaths under age five worldwide increased from 37 per cent in 1990 to 44 per cent in 2012. **Child survival efforts must increasingly focus on newborns and care for women throughout pregnancy, delivery and postpartum. Simple, cost-effective interventions, such as postnatal home visits, have proven effective in saving newborn lives. Since one third of neonatal deaths are caused by complications from preterm birth, antenatal care, skilled attendance at birth and ready access to emergency obstetric care increase the chances of newborn survival.**

#### *Sexual and reproductive health and rights and lifelong health for young people*

65. The largest generation of adolescents ever in history is now entering sexual and reproductive life. Their access to sexual and reproductive health information, education and services is essential for their lifelong health and for achieving the goals of the Programme of

Action, which urges countries to meet the educational and service needs of adolescents in order to enable them to deal in a positive and responsible way with their sexuality, to ensure that health-care providers do not restrict adolescents' access to services and information, and to provide services that safeguard the rights of adolescents to privacy, confidentiality, respect and informed consent, free of coercion, discrimination and violence. **Governments should remove legal, regulatory and social barriers to sexual and reproductive health information, education and services for adolescents and take action on the commitment on the right of adolescents and youth to have control over and decide freely and responsibly on matters related to their sexuality, including sexual and reproductive health, free of coercion, discrimination or violence.**

66. About 70,000 adolescent girls in developing countries die annually of causes related to pregnancy and childbirth. Pregnancy and childbirth are the leading cause of death among young women aged 15-19 in low- and middle-income countries. Girls under age 15 are significantly more likely to die in childbirth than women over age 20, and they also have a higher risk of developing obstetric fistula. There are also significant health risks to children born to adolescent mothers, including stillbirth, newborn death and death before the age of one. Nine of ten births to girls below age 18 occur within marriage. In addition to reducing the health risks associated with early pregnancy, increasing the age at marriage and delaying childbearing affords girls more time to pursue education and develop skills.

67. The expanding window between the onset of puberty and the age of first marriage may leave a growing number of unmarried young persons without access to much-needed sexual and reproductive health services. Health systems must adapt to ensure that services are accessible and appealing to adolescents and young people so that their needs can be met, irrespective of their marital status.

68. Most adolescents and youth do not yet have access to comprehensive sexuality education, despite repeated intergovernmental agreements to provide it, support from the UN system, and considerable project-level experience in a wide range of countries and research showing its effectiveness. Such programmes provide both accurate information about and skills for personal growth and development; puberty; pregnancy and childbirth; contraception and prevention of HIV and AIDS and STIs; inter-personal relationships, human rights and gender equality; non-discrimination and zero tolerance for violence and coercion. Evidence shows that such comprehensive sexuality education has positive impacts on the knowledge and health-related behaviours of adolescents and youth, as well as their attitudes about gender equality and norms.

69. Most adolescents also increasingly face pressures toward other activities that threaten their lifelong health, including tobacco use, unhealthy diet, physical inactivity and the harmful use of alcohol or drugs, which can culminate in diabetes, heart disease and other major causes of premature death in adulthood. Other risk-taking that can result in injury or death, as well as mental health problems, also tends to begin during adolescence and young adulthood. Increasingly, sexuality education experts and programmes are recognizing that their programmes can be expanded to encompass these vital areas of learning, skills building and decision-making.

70. **Governments should ensure equitable access to quality health information and services for young people, including sexual and reproductive health information and services, starting at ages 10-14. The information provided should include attention to lifelong habits of good health and the social value of gender equality. Addressing young people's sexual and reproductive health also requires action outside the health system to change social norms and create empowering community resources. Comprehensive**

**sexuality education for in- and out-of-school young people, consistent with their evolving capacities, is integral to the achievement of the goals and objectives of the ICPD. Governments should also promote healthy behaviours among children and adolescents, including equipping them with the skills to resist tobacco use and other substance abuse, and promoting healthy eating and nutrition, movement and exercise, and stress management and mental health care.**

*Sexual and reproductive health and rights*

71. ICPD affirmed the right of all couples and individuals to decide freely and responsibly the number and spacing of their children, and to have the information, education and means to do so, and the right to have the highest attainable standard of sexual and reproductive health. In the area of sexual and reproductive health and rights, according to national responses to the Global Survey, less than two thirds of countries (63 per cent) have promulgated and enforced a law protecting the right to the highest attainable standard of physical and mental health, including sexual and reproductive health. This percentage increases to 80 per cent in the case of Europe and remains around the world average for the remaining regions (Asia, 66 per cent; Oceania, 62 per cent; Americas, 58 per cent; Africa, 55 per cent).

72. The ICPD Programme of Action recognized that sexual and reproductive health services must be designed to meet multiple and overlapping health needs for each person. Further, these services need to be available without coercion or discrimination on any grounds, irrespective of age, marital status or other circumstances. Among the sexual and reproductive health services most needed, especially by women and girls, are contraception; maternal health services throughout pregnancy, delivery and postpartum; safe abortion and treatment for the complications of unsafe abortion, including post abortion care; prevention and treatment of sexually transmitted infections and HIV and AIDS; and prevention, timely detection and treatment of cancers of the female reproductive system.

**73. Efforts to strengthen health systems, and to fulfil and protect sexual and reproductive health and rights, should prioritize and deliver this diverse mix of health services to meet the varied needs of individuals across the life course, especially of women and adolescents, and should aim to improve the quality, accessibility and acceptability of such services, including through their effective integration.**

*Contraception and unmet need for family planning*

74. Despite progress, the ability to exercise reproductive rights is neither universal nor equitable. Contraceptive prevalence among married or in-union women rose globally from 58 per cent in 1994 to 64 per cent in 2012. Nevertheless, serious gaps still exist by wealth, age, marital status and other characteristics. It is estimated that more than 200 million women worldwide are not using modern contraception even though they want to delay or stop childbearing.

75. Global unmet need for modern methods of contraception among married or in-union women declined modestly from 21 per cent in 1994 to 19 per cent in 2012. Ninety per cent of women with unmet need live in developing countries, with the greatest unmet need among those in Africa. In 28 sub-Saharan African countries, less than 25 per cent of married or in-union women use a modern method of contraception, with unmet need for modern methods as high as 40 per cent or more. **Governments should take the necessary measures to provide a full range of safe, reliable and good-quality contraceptive services to meet these and other unmet needs, particularly among currently underserved and hard-to-reach populations, including adolescents and youth, free of discrimination and**

**coercion. Governments should also ensure a full range of user-friendly family planning services that are safe, reliable, and of good quality.**

76. Quality family planning programmes require well-trained and supported personnel to ensure fully informed and free choice, based on life circumstances, about whether to use contraception and, if so, which method. Further, a selection of methods with distinct features must be available, affordable and accessible. Over the past twenty years, the diversification of modern contraceptive methods has been considerable, and product innovations have moved in the direction of making administration and removal easier, lowering doses and reducing side effects.

77. Because method preferences and needs vary across individuals and may shift over the life course, a range of distinct contraceptive method types is necessary. Moreover, adding method choices typically increases contraceptive prevalence overall. Yet many women live in countries where contraceptive delivery and use is dominated by a single method. **A mix of contraceptive methods should be available and accessible to meet the diverse needs of individuals, so that they can choose the type of method that is best for their circumstances. Programme decisions about contraceptive method mix, particularly as regards contraceptive sterilization, IUDs and hormonal implants, must be carefully considered in light of the capacities of the health system and the skills of service providers in order to ensure the highest quality of clinical care. In addition, outreach strategies and communications content must be designed to facilitate free and informed decision-making about the use of contraception.**

#### *Maternal health*

78. Since 1994, the maternal mortality ratio has declined globally by 47 per cent, from 400 maternal deaths per 100,000 live births in 1990 to 210 in 2010. All regions have made progress, with the largest reductions in Eastern Asia (69 per cent), Northern Africa (66 per cent) and Southern Asia (64 per cent). However, every day an estimated 800 women in the world still die from pregnancy or childbirth-related complications, and the differences between developed and developing regions remain stark.

79. Overall progress however masks notable socio-economic and geographic inequalities. The majority of developing countries are not on track to achieve the Millennium Development Goal 5 targets to a) reduce the maternal mortality ratio by three-quarters between 1990 and 2015; or b) achieve, by 2015, universal access to reproductive health. In no region is the gap more pronounced than in sub-Saharan Africa. The gains in maternal survival during the past two decades can be attributed, in part, to advances in the availability and use of antenatal care, skilled attendance at delivery, emergency obstetric care, as well as increased use of contraception. **To eliminate preventable maternal mortality and morbidity, Governments should strengthen health systems, including by training midwives and other skilled providers, investing more in emergency obstetric care, and delivering sexual and reproductive health services closer to where people live, especially in rural, remote and impoverished urban areas.**

#### *Safe abortion, treatment for the complications of unsafe abortion and post-abortion care*

80. The latest estimates indicate that there were 43.8 million induced abortions worldwide in 2008 (27.3 million in Asia, 6.4 million in Africa and 4.4 million in Latin America). At the global level, the overall rate of abortions declined from 35 abortions per 1,000 women of reproductive age in 1995 to 28 in 2008. Nearly half (49 per cent) of abortions in 2008 were unsafe and accounted for almost 13 per cent of maternal deaths worldwide. Deaths from unsafe abortions remain high in Africa and Asia. These deaths are largely preventable

through effective use of contraception and provision of safe abortion services. **Governments should make every attempt to reduce the need for abortion by ensuring timely, confidential and affordable access to good-quality modern methods of contraception, including emergency contraception and male and female condoms, as well as counselling to all persons in need, regardless of age and marital status; and should provide information about pregnancy and contraception through the health system, civil society groups, community outreach, and school and youth programmes that foster gender-equitable values.**

81. The ICPD Beyond 2014 Global Survey found that 50 per cent of countries addressed the issue of “providing access to safe abortion services to the extent of the law” during the past five years. A larger proportion of countries (65 per cent) indicated that they addressed the issue of “preventing and managing the consequences of unsafe abortion.” Important gains have been made in reducing deaths due to unsafe abortion since 1994, most notably in countries that have used the technical and policy guidance for safe abortion from the World Health Organization and their guidelines for post-abortion care. These countries have made changes in law and practice to address abortion as a public health concern, including through access to safe abortion and to post-abortion care and counselling. **Governments should take urgent, concrete measures to further reduce abortion-related complications and deaths by providing non-discriminatory post-abortion care that meets WHO guidelines. Governments are encouraged to remove legal barriers preventing women and adolescent girls from access to safe abortion, including revising restrictions within existing abortion laws, and where legal, should ensure the availability of safe, good-quality abortion services, in order to safeguard the lives of women and girls.**

#### *Sexually transmitted infections*

82. New cases of sexually transmitted infections increased by more than 10 percent between 2005 and 2008, due largely to a rise in trichomoniasis and gonorrhoea. The highest rates of STIs are generally found among urban men and women between the ages of 15 and 35 years, many of whom do not know about STIs and the harm they cause. Surveillance systems are poor or do not exist in many countries, and although diagnostics and effective treatments exist for many STIs, they are prohibitively expensive or otherwise not suited for weak and underfunded health systems. Because STIs are more often symptomatic in men than in women, diagnostic screening and treatment for males can be a cost-effective means to control STIs in a population. **Governments should, as a matter of urgency, address the rising incidence of sexually transmitted infections by focusing on prevention, including wider access to information and to male and female condoms, and on developing accurate, affordable and rapid diagnostic tests and treatment, particularly for use in low-resource and remote settings. Of particular importance for controlling STIs at the population level is the diagnosis and treatment of STIs among men and boys. Governments should commit to strengthening global surveillance on the incidence and prevalence of STIs.**

#### *HIV and AIDS*

83. Globally, new HIV infections have declined by 33 per cent from a high of 3.4 million per year in 2001 to 2.3 million in 2012. Declines in rates of new HIV infections among adults largely reflect a reduction in sexual transmission. Yet regional achievements in HIV prevention mask critical disparities within and between countries; some countries are experiencing a slowing rate of decline, new infections have risen in Eastern Europe and Central Asia in recent years, and new infections continue to rise in the Middle East and Northern Africa. Effectiveness of prevention approaches has differed by region. Significant

increases in the number of sexual partners and declines in condom use in some African countries are evidence of a need to catalyze HIV prevention efforts. **Governments and global health partners should address the stark disparities in the success of HIV prevention in different parts of the world and among different population groups; undertake research to understand the underlying causes of such disparities; and share proven policy lessons to reduce HIV infections in high-incidence populations.**

84. In 2012, antiretroviral treatment (ART) reached 9.7 million people in low- and middle-income countries, representing 34 per cent of treatment-eligible persons. While the scale up of prevention of mother-to-child HIV transmission (PMTCT) now reaches 62 per cent of pregnant women living with HIV, there is great variation in coverage within and across countries. Among countries with generalized epidemics, 13 countries provide ART to fewer than 50 per cent of women with HIV. Coverage for children needing ART is only about half the level of adult coverage, and scale up continues to favour adults. **Governments are called upon to ensure universal access to HIV information, education and counselling services, including voluntary and confidential HIV testing, with a particular focus on young persons, vulnerable groups and persons at increased risk. Governments should, in the shortest time possible, commit to extending universal access to antiretroviral therapy, with special emphasis on eliminating mother-to-child transmission of HIV; improving follow up of HIV-exposed infants; improving the life expectancy and quality of life of HIV-positive mothers and all people living with HIV and AIDS; and protecting the human rights of people living with HIV and AIDS by prohibiting all forms of stigma, discrimination or violence against them, including holding perpetrators accountable.**

*Cancers of the female reproductive system*

85. More than half a million women each year develop cervical cancer, the second most common cancer among women of reproductive age globally, and over 275,000 women die of cervical cancer every year, the great majority (242,000) in developing regions. While cervical cancer is preventable through regular screening by Pap smear or HPV (human papilloma virus) test, as well as early treatment of pre-cancerous lesions, these are still a substantial challenge for weak health systems. The HPV vaccine has significant promise for curtailing cervical cancer. Breast cancer remains the most common cancer among women in high-income countries, currently affecting 70 per 100,000 women, where incidence is more than twice that in low-income countries. However, because of poor access to diagnosis and treatment, mortality in the developing world is similar to that in developed countries. **Governments should recognize and address the growing burden of reproductive cancers, especially breast and cervical cancers, the need for greater investments in prevention, routine screening at the primary care level, and referrals to higher levels of care.**

*Non-communicable diseases (NCDs)*

86. In all regions of the world except Africa, deaths from non-communicable diseases exceed those caused by maternal, perinatal, communicable and nutritional conditions combined. In developing countries where communicable diseases continue to account for a sizable proportion of deaths, NCD-related mortality is occurring at earlier ages than in developed countries, taxing health systems with a double burden of communicable and non-communicable diseases. Cardiovascular diseases, cancers, diabetes and chronic respiratory diseases are responsible for the majority of deaths from non-communicable diseases, while mental health disorders account for a substantial burden of disability as well. The growing burden of NCDs reflects population growth and ageing, as well as significant changes in risk

behaviours, including tobacco use, harmful use of alcohol, physical inactivity, poor nutrition and obesity. Recent intergovernmental agreements have emphasized the paramount importance of prevention in both national and international efforts to address NCDs. **Governments should promote health literacy at all ages, focusing on the prevention of non-communicable diseases, healthy eating and nutrition, stress management and mental health care, the risks of tobacco and other substance abuse, as well as the benefits of physical activity and exercise.**

*Health system strengthening*

87. Despite decades of unprecedented medical advances and innovations in healthcare, stark inequalities persist in the accessibility and quality of health systems across and within countries. Sub-Saharan Africa and Southern Asia continue to have some of the least accessible and most fragile health systems, as measured by indicators such as health worker density, coverage of critical services, health information systems, commodity stock-outs and quality assurance. Within many middle- and high-income countries, pockets of weak and poor health system coverage or low-quality services abound for certain areas or populations, such as for the poor, older persons, rural residents and residents of urban slums, and for uninsured or undocumented persons.

88. Further progress in the realization of health for all persons, and of sexual and reproductive health in particular, can only be achieved with sustained attention to strengthening the reach, affordability, comprehensiveness and quality of services and information delivered by health systems. **Governments, with the support of donors, should give the highest priority to strengthening the structure, organization and management of health systems, for all levels of health care, as well as the development and maintenance of necessary infrastructure such as roads and clean water.**

89. There is a strong link between low health worker density and poor health outcomes, impeding progress towards achieving the MDGs. Globally, health workforce shortages are estimated to number 7.2 million, with the most serious shortfalls in countries of sub-Saharan Africa and Southern Asia. The global distribution of health workers is such that countries with the highest disease burdens typically have the fewest health workers per capita. Shortages are exacerbated by sub-optimal spatial distribution within countries, with a greater proportion of health workers, especially the most highly skilled, concentrated in urban centres. **Governments, with their development partners, should review and improve policies and funding for training, recruiting and rewarding health care workers, including sexual and reproductive health service providers, midwives and other skilled birth attendants; increase their numbers, strengthen their capacity and enable them to respond to changing health needs, with particular attention to equitable geographic distribution; and ensure a sustainable health workforce that is responsive to the changing needs of the population.**

#### **IV. Mobility and Place**

90. Place has both social and spatial dimensions. A secure place is essential for human development, just as human security — freedom from hunger, fear, violence and discrimination — is a precondition for the development and well-being of all persons. A secure place for people on the move is also essential, underscoring the importance of giving attention to international migration and to planning for rapidly growing cities that can integrate and support rural-urban migrants as well as the urban poor. The core international human rights instruments protect both rights related to human security, through the “right of

everyone to an adequate standard of living ... including adequate food, clothing and housing, and to the continuous improvement of living conditions,” and those rights related to mobility, including a person’s “right to liberty of movement and freedom to choose his residence” and the freedom to “leave any country.”

91. The scale of the human population living without a safe home underscores the urgency of enhancing global attention to human security. At the end of 2012, at least 10 million persons were stateless and some 45 million persons had been displaced within countries or across international borders. In addition, an estimated 863 million persons were living in slums, meaning that they lacked access to improved sources of water or sanitation, durable housing or secure tenure. Further, millions of persons worldwide were homeless. **To address these challenges, Governments should abide by their international obligations and redouble their efforts to find durable solutions for displaced persons. Governments should also promote inclusive land use planning, linked urban and rural health systems, and address the need for safe and secure housing.**

#### *Internal migration*

92. Whether people move within or across international borders, be it permanently, temporarily or cyclically, their underlying motivations remain the same: to improve their well-being and life circumstances, to seek employment, to form or maintain a family, or to find security. While accurate estimates of internal migration are difficult to obtain, analysis of available data suggests that in 2005 over three quarters of a billion people worldwide were living in their home countries but outside their region of birth. Increasingly, women are migrating on their own or as heads of households and principal wage earners. Migration tends to be selective as migrants from the poorer strata of rural society often lack the resources necessary to move. However, in situations of mass displacement, due to war, famine, or natural disasters, entire population are affected.

93. With most people moving for a variety of reasons, it is difficult to make a strict distinction between voluntary migration and forced displacement. Movement associated with natural disasters is often short-term and local, whereas displacement due to political crises or conflict is more likely to be international and long-term. Movement, whether short-term or long-term, whether voluntary or not, demands resources: resources that the poor are often lacking. **Governments should support people’s right to move within their country as a means of improving their lives and adapting to changing social, economic, political and environmental conditions; should prevent and find lasting solutions for situations of forced displacement; and should provide all internal migrants with equal opportunities and access to social protection.**

#### *Urbanization*

94. The world’s urban areas are currently growing at a rate of more than 1.3 million people each week. Globally, most population growth will occur within urban areas over the next 30 years. Since 2008, for the first time in history, more than half of the world’s population has been living in urban areas. Urban settlements vary widely in size: over 50 per cent of urban residents live in cities or towns with fewer than half a million inhabitants, 40 per cent of all urban dwellers reside in cities with half a million to 10 million inhabitants, and about 10 per cent of the urban population is living in megacities with populations over 10 million. Between 1990 and 2010, 90 per cent of the growth in the urban population occurred in developing countries, where the population of urban dwellers increased from 35 per cent to 46 per cent of the total population. The world’s urban areas are projected to gain

2.6 billion inhabitants by mid-century. Meanwhile, the rural population globally is projected to start decreasing, with an expected 300 million fewer rural inhabitants in 2050 than today.

95. The sheer scale of urbanization in the coming decades ushers unprecedented opportunities and challenges, and requires innovative responses. The benefits of proximity, concentration and economies of scale in urban areas facilitate the delivery of basic health, welfare and education services, while at the same time maximizing energy and resource-use efficiency. Cities provide major economic advantages for work and entrepreneurship, and similar advantages for social and political participation and empowerment. Yet the rise of urban inequality has also led to increased marginalization in cities, including through the expansion of urban slums, has exacerbated urban sprawl, and has limited the ability of government to ensure the safety of urban residents. As cities grow, urban management, including traffic, service provision and housing, is increasingly under strain. The poorest residents are often the most heavily impacted. Whether urbanization will meet the needs and aspirations of urbanizing populations, particularly the poor, greatly depends on the policy choices Governments make regarding urban population growth, land use, housing, service delivery and infrastructure. **Governments should capitalize on the opportunities that urbanization provides for inclusive, sustainable development, by extending the full set of potential benefits of urban life to all current and future urban residents, especially the urban poor, through ensuring access to land and essential services, including affordable housing, water, sanitation and transportation, with particular attention to matters of security and safety.**

#### *Homelessness and internal displacement*

96. Millions of people around the world go to sleep every night without a roof over their head or without assurance that they will have one the next day. One of the most basic of needs — a foundational aspect of human dignity — is having land and housing security. People without a secure place of residence and adequate registration are often unable to access basic services or decent work, which contributes to their precarious living conditions and increases their risk of being exploited and abused. Insecurity of place, therefore, is a threat to human dignity and leads to a disproportionate risk of exposure to violence, poverty and adverse health outcomes. As new approaches to address insecurity of place, including forced evictions, are being developed, there is a need to improve data collection on homelessness, to address its causes and to provide social protection to those affected. **Greater public policy attention should be given to those without security of place, including those displaced by conflict or natural disasters, stateless persons, those living in areas of conflict, or in temporary or insecure housing, and the homeless.**

97. Although most countries allow property ownership, and many do not legally differentiate between men and women, in practice women are often denied the right of access to land and property ownership. Where they do not have or are unable to exercise a right to own land, women are at heightened risk of eviction following widowhood. Furthermore, as access to formal credit often depends on the possession of assets, borrowers who do not own resources are at a disadvantage, limiting their economic opportunity. Lack of, or disputes over, property rights also undermines the process of return migration following displacement. **Governments should ensure that women have equal access to security of tenure, to owning land and other property, and to inheritance, as well as to credit, capital and markets.**

#### *International migration*

98. The estimated number of international migrants in the world increased from 154 million in 1990 to 232 million in 2013. Today, there is as much international migration

between developing countries as there is from developing countries to developed countries. The increase in mobility and the diversification of migration patterns means that many countries are now concurrently countries of origin, transit and destination. Today's migrants come from a broad spectrum of cultural, economic and social backgrounds. Approximately half of all international migrants are women, who increasingly migrate on their own or as heads of households. Since women often live longer than men, they tend to be overrepresented among older migrant populations. The call for increased international, regional and bilateral cooperation in the field of international migration, made at the ICPD in 1994, is still relevant today, given the continuing need to promote and protect the human rights and fundamental freedoms of international migrants regardless of their migration status. **Governments should increase international, regional and bilateral cooperation with a comprehensive and balanced approach to ensure orderly, regular and safe processes of migration, and promote policies that foster the integration and re-integration of migrants and ensure the portability of acquired benefits.**

99. Recorded financial transfers in the form of remittances, sent by migrants to their family members in low- and middle-income countries, reached US \$401 billion in 2012. Remittances are often invested in health and education and thus contribute to the achievement of internationally agreed development goals.

100. Migration is a key enabler for social and economic development in countries of origin and destination. It is also important for the human development of migrants and their families, enlarging their capabilities, opportunities and choices. Migrants are also important for the transmission of "social remittances" including the transfer of new ideas, information and technology. However, there are also social costs related to migration, including for children and older persons who remain in countries of origin, as well as the challenge of the so-called "brain drain". The migration of highly educated or skilled segments of the population can have negative impacts on development, especially in small developing countries. In destination countries, the skills of migrants are often underutilized due to difficulties in obtaining legal documentation and recognition for qualifications acquired abroad. **Governments should embrace the contributions that migrants and migration make to countries of origin and destination, address the challenges associated with migration, and improve data collection and dissemination on the contributions of migration and migrants.**

101. As the number of international migrants continues to rise, destination countries are confronted with the challenge of promoting their social, political and economic integration. Integration is often best achieved at a young age, underscoring the importance of education, services and full participation for young migrants in host societies. Racism and xenophobia, fuelled by the global economic crisis, have strained relations between migrant and non-migrant communities in a number of countries. **Governments should promote and effectively protect the human rights and fundamental freedoms of all migrants, regardless of their migration status. Governments should also provide social protection to all migrants, combat discrimination, hatred and other crimes perpetrated against migrants, safeguard their physical integrity and dignity, and the exercise of their beliefs and cultural values in conformity with human rights principles.**

#### *Refugees*

102. The number of refugees worldwide, which peaked in 1992 at almost 18 million, was 15 million people in 2012. The countries from where the largest numbers of refugees originated in 2012, as reported by UNHCR, include: Afghanistan (2.6 million), Somalia (1.1 million) and Iraq (750,000). The three main developing countries hosting refugees were

Pakistan (1.6 million), the Islamic Republic of Iran (870,000) and Kenya (565,000). Jordan and Lebanon have been particularly affected by the recent influx of refugees from the Syrian Arab Republic.

103. In 2012, more than eight of every ten refugees in the world lived in the developing regions. Western Asia, in particular, is bearing a disproportional responsibility in hosting refugees, including approximately five million refugees under the care of the United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA). In relation to their national capacity, Pakistan, followed by Ethiopia and Kenya, shouldered the highest refugee burden in 2012.

104. Refugees experience many of the same vulnerabilities as internally displaced persons, including the double vulnerability of displacement and loss of livelihoods in points of settlement. As refugees face persecution and lack protection from their own state, countries of destination have the responsibility to provide asylum and assistance in order to ensure the basic human rights and dignity of refugees. The continued presence of large, protracted refugee situations is a stark reminder of the need to redouble the efforts of the international community to provide durable solutions to the plight of refugees. **Governments, supported by the international community, should strengthen the protection and assistance of refugees through the granting of temporary asylum as well as the provision of food, shelter, health, education and social services, and should promote their local integration, voluntary repatriation or resettlement in third countries.**

## V. Governance and accountability

105. As a cornerstone of good governance, accountability requires national leadership, effective state institutions, and enabling laws, policies, institutions and procedures for the free, active, informed and meaningful participation of people without discrimination. Accountability represents a shift from needs to rights, to which all individuals are entitled. This shift has the potential to transform power relations between men and women, service providers and users, and Governments and citizens. The ICPD generated momentum in the creation and renewal of institutions, in particular those addressing population and sustainable development, the needs of adolescents and youth, and women's empowerment and gender equality. Critical to effective governance are data and information systems, yet many existing data remain under-utilized and are not adequately brought to bear on development planning, budgeting or evaluation. The past 20 years have seen a measureable increase in the formal participation of intended beneficiaries in the planning and evaluation of investments related to the ICPD, via recognition and integration of wide networks of civil society and non-governmental organizations.

### *Integrating population dynamics into development planning*

106. Population data document how the characteristics of people affect the potential for development, how they interact with their environment, where they are living or moving, whether or not they are well or living with fear and insecurity, and what social protections and public services they may need. Population dynamics today reflect the world's dramatic demographic disparities and varied trends: rising numbers of older persons worldwide, especially in Europe and parts of Latin America and Asia; young populations and continued high fertility in Africa; and the changing nature of households in many regions, with increasing proportions of one-person and single-parent households. The capacity to monitor and project changing population dynamics and evolving demographic age structures must be a core investment for development, informing the response of Governments to where and

how best to invest development resources and protect human rights and dignity. **Governments should integrate population dynamics into the planning and implementation of development initiatives within all sectors, at both national and sub-national levels, creating or strengthening institutions for this purpose if necessary. Governments should also commit to gathering, analyzing and disseminating data on population, disaggregated by key characteristics relevant to development, in order to monitor progress, address gaps in implementation and assure public accountability.**

*Strengthening the knowledge sector*

107. Considerable weaknesses exist in the knowledge sector related to population and development in countries of the global South, including incomplete or unreliable data from civil registration, sample surveys and censuses, limited use of innovations such as geographic information systems, and, more generally, an underdeveloped capacity for using data for development. There is a pressing need to strengthen capacity in demographic studies and related social sciences, and to improve productive linkages between population and health researchers and development planners and policymakers, allowing population data to foster knowledge-driven governance at the national and sub-national levels.

108. Since 1994, new institutions related to ICPD objectives have been created, particularly in the areas of population dynamics and sustainable development, gender equality and women's empowerment, and adolescents and youth. New types of data have begun to be collected, and new methodologies and technologies have been adopted for the collection of conventional data. While there is important potential yet to be realized, particularly with respect to upgrading systems of data collection, processing and dissemination for greater efficiencies and cost savings, progress in many countries has not yet been sufficient to foster effective knowledge-driven governance and development planning and strategies. **Governments must urgently strengthen their leadership in overall planning for the knowledge sector, including resource allocation and investments in human resources.**

109. Pressing needs in the ICPD-related knowledge sector include increasing the number and quality of human resources, strengthening civil registration and other administrative data sources, as well as migration statistics; integrating new methods and technologies; circulating and disseminating data and democratizing data use; and ensuring that population data inform policy decisions. A shift should be made from dependence on survey data to a balanced use of all relevant data sources, including civil registration and other administrative data sources. **Governments and international institutions should strengthen efforts to improve data availability, quality and accessibility and also place more population, health and development data in the public domain in order to facilitate sharing and use of knowledge. Governments should strengthen national and civil society capacity to utilize national and sub-national data for planning and accountability. Governments should spearhead the introduction of social architecture that makes data and knowledge accessible to all persons, so that it can form the basis of public debate and policy, across and between all sectors of society without exclusion.**

*Systematic and inclusive participation*

110. The responsibility for ensuring the dignity and rights of the individual, which are cornerstones of sustainable development, lies with Governments, as well as institutions that operate on the local, national, regional and international levels. All people — men and women, from youth to old age, as individuals and as members of diverse communities — need to be free and able to participate socially, politically and economically in the discourse and activities surrounding development, and to monitor government actions. It is essential

that women and youth in particular should be able to participate in the formulation, implementation and monitoring of public policies, including through elected positions in parliaments or other assemblies at various levels of government, and that women have opportunities to serve in legal institutions as lawyers and judges.

111. Since ICPD, several countries have established separate chambers with female judges for adjudicating cases of violence against women. When law enforcement jobs are open to women, they can play important community roles and can serve as focal points for women facing abuse. **Governments should guarantee and facilitate active participation of all people, including through non-governmental actors, in the development, implementation, monitoring and evaluation of policies and programmes, and in the quality delivery of basic social and health services to all. Representatives of those living in poverty, of groups who frequently experience discrimination, exclusion or marginalization, and of other intended beneficiaries of development programmes should be intentionally included and empowered. Institutions, including international organizations, should devise mechanisms to enable such groups to be part of the development, implementation, monitoring and evaluation of policies and programmes.**

*Building better accountability systems*

112. Multilateral collaboration and effective partnership building has proven essential for the implementation of the ICPD Programme of Action, and is critical to ensuring effective global development processes. At the national level, attention has moved towards building broad-based partnerships for governance. Internationally, multilateral, regional, South-South and triangular cooperation have become critical mechanisms for convening global actors and Governments, developing effective and harmonized global leadership, and transmitting best practices between countries facing similar population and development challenges. But effective cooperation must be grounded in principles of coherence and accountability to ensure that development aid and new global partnerships harness development potential, rather than increasing fragmentation and duplicating efforts.

113. As a cornerstone of good governance, systems of accountability provide a foundation for realizing rights-based development objectives; ensure that quality data and knowledge are accessible to the public and to all decision-makers; and create enabling environments that allow all citizens, their informed representatives and civil society actors to exercise a check on the actions of Governments and other key actors and public authorities. National and international law, administrative practices, and protection systems are needed to ensure equal access to programmes and quality services, prevent abuses, address systemic gaps and failures, and provide opportunities for redress and remedy. **Governments should assure effective mechanisms of review and oversight of government administration, including national human rights protections systems, courts, administrative review bodies, standing parliamentary procedures and forums for community participation.**

## **VI. Sustainability**

114. The current development paradigm is predicated on a social and economic model that favours the production, accumulation and consumption of goods and services in ever-greater amounts. Increasing consumption is critical for improving well-being of the poor, yet at high income levels the benefits of further consumption increases are far more limited. While global population growth is slowing, levels of production and consumption have risen and are expected to continue to rise as long as natural resources can sustain them. Ever-rising levels of consumption by the wealthiest, coupled with a rapid expansion in the number of

persons with sufficient resources to consume at levels that adversely impact the environment, threaten to destabilize essential environmental systems, in particular those related to climate.

115. The risks of ignoring the planet's environmental constraints in pursuit of ever-rising production and consumption levels are becoming more apparent. Some experts have suggested that anthropogenic activities have already or will soon surpass ecological thresholds with respect to critical Earth systems and natural cycles. Among the most urgent concerns are threats to biodiversity, the nitrogen cycle and climate change, with other serious concerns including degradation of land and soils, excess production of phosphorus, depletion of stratospheric ozone, ocean acidification, depletion and degradation of freshwater resources, changes in land use and land cover, and air and chemical pollution. **A fundamental change to more sustainable patterns of production and consumption is required to slow the depletion and degradation of natural resources, to refocus development aspirations on achieving human rights and dignity for all, and to enrich and sustain prospects for economic and social well-being for all future generations.**

116. Technology has historically been relied upon to relieve natural resource constraints and environmental impacts. Technological progress can, and should, contribute to efforts aimed at reconciling economic growth, consumption and environmental resources. While certain technologies are proven and being deployed widely, innovation to develop new technologies will be critical to achieving the ambitious reductions in environmental impacts that will be required in coming decades. Improvements in both energy efficiency and conservation are necessary for a sustainable future. **Governments should remove all barriers to sustainability through increased use of clean technology and innovation, and should promote and develop sustainable production and consumption patterns through research on clean technologies and technical cooperation between countries and regions, including mutually agreed sharing of all relevant technologies.**

117. Change in consumption begins at the societal level. Governments should ensure efficient basic public infrastructure and services, including: clean water; a strong, functioning public health system accessible to all; universal public education; energy-efficient public transport systems; regulated, reliable utilities; and affordable housing. Similarly, Governments should ensure the provision of incentives to facilitate a transition to greener production systems while reducing subsidies for non-renewables. The provision of these services and incentives can contribute to reducing overall consumption and to achieving dignity, opportunity and changes in individual behaviour. **Governments can influence the trajectory of consumption while enhancing dignity and social sustainability by investing in universal public services, which ensure that the fruits of development are distributed to all, without discrimination.**

118. Individuals also bear responsibility for changing consumption patterns. While the poor have little or no choice regarding consumption, and indeed consume comparatively little, they bear most of the environmental costs of industrial waste and by-products, as well as the current and future impacts of climate change. At higher incomes people have significant choices, and too often choose unsustainable consumption behaviours.

#### *Inter-linkages between population and the environment*

119. An inaccuracy often made in discussing demographics and climate change or other environmental impacts is to equate one population unit with one consumption unit and to assume that fertility decline in poor, high-fertility countries is the primary solution to the environmental quandary. One study indicates that only 35 per cent of the global population

— around 2.5 billion people — has consumption profiles that contribute even minimally to global emissions. Of this total, less than one billion consume enough to have a significant impact on emissions and an even smaller minority is responsible for an overwhelming share of the damage.

120. While an immediate stabilization of population size would improve the situation in the long term, it would have a limited impact on the global ecological predicament in the short run. With few exceptions, countries displaying higher rates and levels of consumption have fertility levels that are already low or below replacement. On the other hand, higher-fertility countries tend to be mired in poverty and have low levels of consumption. Poor countries and their populations have the right to development and to improve their living standards, a feat that requires economic growth. Economic growth brings increases in consumption; unless this increase happens in a radically different manner than has been the case for wealthier countries, it will have a further adverse impact on the environment and undermine sustainability. A paradigm shift is required that recognizes that well-being is not and must not be based solely on increasing consumption. **A collective shift should be made towards well-being derived from modes of living and livelihoods that are more equitable and have less impact on the environment, with a focus on innovation and more effective collective action on global challenges.**

## VII. Financing the ICPD Programme of Action

121. At the ICPD in 1994, the international community agreed that US \$17 billion would be needed in 2000, \$18.5 billion in 2005, \$20.5 billion in 2010 and \$21.7 billion in 2015 to finance four core programmes in the area of population and development: family planning; basic reproductive health; prevention of sexually transmitted diseases, including HIV/AIDS; and programmes that address the collection, analysis and dissemination of population data. Two thirds of the required amount would be mobilized by developing countries themselves and one third would come from the international community.

122. The immediate post-ICPD period saw a significant increase in the flow of financial resources for these population activities — in 1995, assistance stood at \$2 billion. The momentum of Cairo did not last, however, and the level of funding hovered around \$2 billion per annum for a few years. Partly due to advocacy efforts as a result of the five-year review of the ICPD Programme of Action, assistance increased to almost \$2.6 billion in 2000 and reached \$3.2 billion in 2002. After that, it began to increase at a more rapid pace, reaching \$7.3 billion in 2005 and \$10.5 billion in 2008. Subsequently, the funding level increased much more slowly, in part due to the lingering effects of the global financial crisis. Assistance stood at \$11.4 billion in 2011, nearly \$9 billion short of the level agreed in 1994.

123. Although funding for population activities has been rising, it was not meeting the growing needs in developing countries. To ensure adequate funding for these components of the ICPD Programme of Action, in 2009 the United Nations Population Fund reviewed the existing estimates for the four categories of the ICPD-costed population package (ICPD paragraph 13.14) and revised them to reflect current needs and costs. The revised estimate for 2010 was \$64.7 billion, which was expected to rise to \$69.8 billion by 2015. The revised estimates were much higher than the original ICPD estimates agreed upon in 1994 because the new estimates took into account both current needs and current costs, and because they included interventions such as AIDS treatment and care and screening and treatment for reproductive cancers, that were not part of the original costed population package. The

revised costs are considered minimum estimates to meet growing needs in these four categories. Further revisions may now be warranted based on the findings of this review.

124. The largest proportion of population assistance — 66 per cent in 2011 — went to activities related to prevention of sexually transmitted infections/HIV/AIDS, the majority of which was allocated to HIV/AIDS. A total of 8 per cent of population assistance was expended for family planning services, 22 per cent for basic reproductive health services and 4 per cent for basic research, data and population and development policy analysis. Over the years, the percentage of funding for STI/HIV/AIDS increased from 9 per cent of total population assistance in 1995 to a high of 75 per cent in 2007. During the same period, the share of assistance decreased significantly for the other three costed ICPD components: it decreased from 55 to 5 per cent for family planning services, from 18 to 17 per cent for basic reproductive health services, and from 18 to 3 per cent for basic research, data and policy analysis. In absolute terms, funding for family planning services, which had plummeted to \$393.5 million in 2006, had begun to increase, reaching a new high of \$992.5 million in 2011. Funding for basic reproductive health services decreased in 2011 both in absolute terms and as a percentage of the total.

125. Domestically generated financial resources, which include Government, national NGO and private out-of-pocket expenditures, account for the majority of funding of the costed components of the ICPD. Although much harder to measure, it is estimated that developing countries and countries in transition mobilized \$55 billion for population activities in 2011, the largest amount ever. The considerable increase from previous years is due in part to the large expenditures reported for family planning in China, but the latest numbers may not be entirely comparable to past estimates due to the inclusion of new data on out-of-pocket expenditures from the World Health Organization.

126. The global figure for domestic expenditures reflects the commitment of developing countries, regardless of the amount mobilized, and masks significant variations among countries in their ability to mobilize resources for population activities. Most domestic resources originate in a few large countries. Many developing countries, especially the least developed countries, are not able to generate the necessary resources to finance their own population and development programmes. They rely to a large extent on donor assistance.

127. As the international community moves beyond the original twenty-year time line for the Programme of Action of the ICPD, there is an urgent need to: **1) Re-commit to mobilize adequate resources to fully implement the ICPD agenda, and undertake a revised costing based on the findings of this review; 2) Strengthen collaboration and coordinate donor financing policies and planning procedures to avoid duplication, identify funding gaps and ensure that resources are used as effectively and efficiently as possible; 3) Increase the role of the private sector in the mobilization of resources for population and development; and 4) Monitor population expenditures and ensure that financial targets are met.**

## VIII. ICPD Beyond 2014

### *ICPD Beyond 2014 monitoring framework*

128. The review of 20 years of ICPD implementation reveals the need for a more systematic approach for monitoring progress and achievements in ICPD-related goals. In the two decades since 1994, many efforts have been made to develop ways to measure the extent of human rights protections, progress toward gender equality and women's empowerment,

appraise the quality as well as the quantity of sexual and reproductive health services, and design indicators for other dimensions of human development, such as those to measure progress towards the MDGs.

129. The operational review of ICPD Beyond 2014 has included initial work to develop a monitoring framework. This work will continue as Member States design a new post-2015 global development agenda. The proposed framework will provide readily available inputs for any monitoring of population and development under the new agenda. It will also provide a basis for national and global reporting on progress, including reporting against commitments related to the ICPD in treaty bodies as well as in the intergovernmental bodies of the United Nations, and enhance the review and appraisal of implementation of the Programme of Action.

*ICPD Beyond 2014 in relation to the post-2015 development agenda*

130. The imperative of the post-2015 development agenda is to bring social, economic and environmental aspects of sustainable development together within one set of global aspirations. The findings and conclusions of the operational review of the status of implementation of the Programme of Action of the ICPD provide an illustrative roadmap for integrating these often-disparate aims. Evidence from the last 20 years overwhelmingly supports the ICPD consensus that the respect, protection, promotion and fulfilment of human rights are necessary preconditions to improving the dignity and well-being of people and to empowering them to exercise their reproductive rights; and that sexual and reproductive health and rights, and an understanding of the implications of population dynamics, are critical foundations for sustainable development. In addition, safeguarding the rights of young people and investing in their quality education, decent employment opportunities, effective livelihood skills, and access to sexual and reproductive health and comprehensive sexuality education strengthen young people's resilience and create the conditions under which they can achieve their full potential. Building a world that ensures the dignity of people therefore creates a solid foundation for the achievement of the global collective goal of sustainable development. By updating and advancing the human rights-based agenda laid out in the Programme of Action, Governments can achieve the goals set forth in 1994, while building a stronger foundation for integrated and sustainable development into the future.

*Follow-up actions*

131. Effective collective action on the global challenges outlined in the framework, on the basis of the findings of the review, will require the leadership of the General Assembly, in cooperation with the governing bodies of the UN system, to undertake a review of the existing institutional and governance mechanisms for addressing global issues with a view to ensuring effective coordination, integration and coherence at national, regional and global levels consistent with the scale of the comprehensive response required to ensure rights-based sustainable development.

132. The Special Session of the General Assembly on the Follow-up to the International Conference on Population and Development beyond 2014 has the defining opportunity to act on the findings and recommendations of this report on the operational review for the further implementation of the Programme of Action beyond 2014. The sixty-eighth session of the General Assembly is invited to consider ways to integrate the findings and recommendations of this review into the initial consideration of the Post-2015 development agenda, as well as in the preparations towards the Special Session, in order to fully extend the principles of equality, dignity and rights to future generations and ensure sustainable development.