

**Statement to the Commission on Population and Development  
Acting as Preparatory Committee for the Special Session  
of the General Assembly**

**As written**



**International Planned Parenthood Federation**

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**IPPF Statement  
to the Commission on Population and Development  
acting as the Preparatory Committee for the  
Special Session of the General Assembly for the Review and  
Appraisal of the Implementation of the Programme of Action of  
the International Conference on Population and Development**

**Presented by Mr Francis Ekon  
Togo, Chairperson of IPPF Central Council  
25 March 1999**

**CHECK AGAINST DELIVERY**

**Honorary Officers; President: Dr (Mrs) Attiya Inayatullah (Pakistan) • Chairperson, Central Council: Mr M Francis Ekon (Togo)  
Chairperson, Central Executive Committee: Mr Gay Swee Poh (Singapore) • Treasurer: Ms Sophia Apostolopoulou (Greece)  
Secretary General: Mrs Ingar Brueggemann**

## **Working in Partnerships**

The International Planned Parenthood Federation works with national member family planning associations (FPAs) in over 140 countries. The Federation seeks opportunities to collaborate and work closely in partnerships with other NGOs, sectors of civil society (including community institutions, religious leaders, private and business sectors), and governments. IPPF believes such partnerships are fundamental to creating an enabling environment to carry out the ICPD Programme of Action.

Whilst NGOs have the human resources and the motivation, to make these partnerships work we need government support. We appreciated the support expressed by governments in The Hague, particularly the Netherlands' firm commitment to continue to fulfil promises made at Cairo. And here yesterday, Japan's pledge to continue their support for sexual and reproductive health programmes was most welcome.

Such government support is vital if we are to address the sexual and reproductive health needs of women and men around the globe and if we are to implement the key actions identified in the Cairo+5 review process. The priority key actions include addressing;

- The sexual and reproductive health and rights of young people
- The mortality and morbidity caused by unsafe abortion
- Effective programming of sexual and reproductive rights

## **Sexual and reproductive rights of young people**

IPPF believes that increased investment in programmes addressing the sexual and reproductive health needs of young people should be seen as an investment for the future; they will be the parents of tomorrow, and the survival of the planet is in their hands. IPPF endorses the Nordic resolution on the sexual and reproductive rights of young people, which is supported by over 20 FPAs throughout the world. This, among other things, calls on governments to: -

- Honour their commitment to increase funding for sexual health care with sufficient allocations to the special needs of young people;
- Adopt policies and legislation which ensure that young people have the same rights and access to sexual health care as married couples or adults, and are protected from all kinds of sexual abuse;
- Provide reliable and effective sexuality education in schools as a mandatory part of the school curriculum, and outside schools; and accessible, affordable sexual health services of high quality for young people, which respect human

rights and diversity, as well as gender equity, privacy and confidentiality, and which make available suitable and affordable contraceptive methods.

### **Addressing the mortality and morbidity caused by unsafe abortion**

Paragraph 8.25 of the ICPD Programme of Action recognized the public health impact of abortion; more action is needed to reduce the numbers of women dying from unsafe abortion, not only through the provision of family planning services, but also by increasing access to abortions which are safe. Beijing, in 1995, urged a review of laws containing punitive measures against women – now, in 1999, as a strategy to accelerate the implementation of paragraph 8.25, maybe the ICPD review process could endorse this Beijing recommendation.

Unsafe abortion is one of several factors contributing to the 585,000 deaths of women each year from causes related to pregnancy and childbirth, which are identified in the IPPF Charter on Sexual and Reproductive Rights as violations of the Right to Life, principally because the vast majority of these deaths are preventable. Many of the technologies needed to save these lives are not expensive. Urgent action is needed to address maternal mortality and morbidity within a reproductive health and rights framework; women are entitled to the right to health protection when they risk their lives to give life.

Wider use of emergency contraception could also play an important role in reducing the incidence of unsafe abortion. As the World Health Organization has stated, emergency contraception does not interrupt pregnancy or cause abortion.

### **Effective programming of sexual and reproductive rights**

Evidence suggests that successful rights-based work in the field of sexual and reproductive health and rights includes the following elements; access to services for all – i.e. an element of social justice which does not discriminate against disadvantaged groups; freedom from violence, discrimination and coercion, and the participation of communities in the design and delivery of services.

Where there are rights, there are responsibilities to protect them, and duties to fulfil them. Governments should clarify which part of their administration is responsible for the implementation of various rights, and for different sections of the Programme of Action.

NGOs have a critical role to play in calling governments to account for their human rights commitments. The preparation of shadow reports to treaty bodies monitoring adherence to the various covenants and conventions has proven to be an effective way of doing this.

Governments should remove legal barriers to implementing the Programme of Action, for example the anti-conception laws still in force in many francophone African countries. Positive legislative change is also necessary, particularly to outlaw female genital mutilation and early marriage.

Effective human rights education is needed to empower more and different social groups to identify how human rights relate to the realities of their own lives and needs. Where they have rights, education about their entitlements, and how to claim them assists the process of closing the gap between the rights to which people are entitled, and the extent to which they experience these rights as realities in their daily lives.

Advances in HIV/AIDS treatment and medicines must be equitably shared within and between countries. The rights of people to information and prevention of sexually transmitted diseases including HIV/AIDS must be guaranteed.

### **Empowerment of Women**

In all of this, women must be put at the centre -their empowerment is key. The ICPD Programme of Action emphatically recognized that population and development programmes are more effective when they centre on improving the education, rights and status of women. Yet what we have achieved since 1994 is nothing compared to what there is still left to do. In many parts of the world men continue to have the same attitude towards women's status and until that fundamentally changes, progress will be restricted. I urge you to continue in your efforts to make gender equality, equity and the empowerment of women a meaningful reality.

Thank you, Mr Chairman.