

Statement on the occasion of the 54th Session of the Commission on Population and Development (CPD)
April 2021

The International Planned Parenthood Federation Western Hemisphere Region (IPPFWHR) together with its partners FUSA (Argentina), Fundación Huésped (Argentina), Católicas por el Derecho a Decidir Colombia (CDD-Colombia), Católicas por el Derecho a Decidir México (CDD-Mexico), Católicas por el Derecho a Decidir (CDD-Bolivia), CIES (Bolivia), Profamilia (República Dominicana) and Iniciativas Sanitarias (Uruguay), have the honour to address the 54th session of the Commission on Population and Development. As an intersectional feminist ecosystem centred around the rights and needs of women and girls, we strongly advocate for the full, effective, and accelerated implementation of the Programme of Action (ICPD PoA) of the International Conference on Population and Development and the outcomes of its review conferences, including the regional outcomes. Furthermore, we deem the Commission as a critical space for enabling discussions and reaching agreements on sexual and reproductive health and rights (SRHR), which is essential in the implementation of the Cairo agenda and the 2030 Agenda.

This year's theme *Population, Food Security, Nutrition and Sustainable Development*, provides an opportunity for highlighting critical linkages between these issues and sexual and reproductive health and rights.

The intersections of population policies, nutrition, food security, sustainable development and sexual and reproductive health and rights (SRHR) play fundamental roles in the lives of women, girls and adolescents, which can have deep impacts on their development and future. According to data from 2017, a third of the world's women of reproductive age suffered from anaemia, a condition associated to iron-deficient diets that affects their overall health and the health and nutrition of their children.¹ Anaemia is a contributing or sole cause of 20-40% of maternal deaths globally, and anaemic women are twice as likely to die during or shortly after pregnancy as non-anaemic mothers.² In addition, breastfeeding, one of the most effective ways to ensure child health and survival,³ is reliant on mothers' access to sexual and reproductive health care and to nutrition. Poor diet quality is also evident in the feeding of infants and young children.

As recognized in Agenda 2030 target 2.2, adolescent girls' nutrition is of particular importance, as adolescence represents a critical stage of physical and mental development and can have an impact on maternal and child health in cases of early childbearing. Due to gender discrimination, stereotypes, and harmful social and cultural norms, women, girls and adolescents are the most likely to suffer from unequal access to food and quality nutrition as well as barriers to access necessary sexual and reproductive health services,⁴ which have compounding and mutually reinforcing consequences for their lives.

¹ FAO, IFAD, UNICEF, WFP and WHO. (2018). The State of Food Security and Nutrition in the World 2018.

² World Bank (2004). Anaemia at a Glance. http://web.worldbank.org/archive/website01213/WEB/0_CO-50.HTM

³ https://www.who.int/health-topics/breastfeeding#tab=tab_1

⁴ Nutrition International, *Bringing nutrition and sexual and reproductive health together for women and girls* (Oct 2019) <https://www.nutritionintl.org/2019/10/bringing-nutrition-and-sexual-and-reproductive-health-together-for-women-and-girls/>

Mr. Chairman,

Women are the backbone of the rural economy, especially in the developing world.⁵ In Latin America and the Caribbean, rural women are responsible for more than half of food production but hold only 30% of land titles and receive only 10% of credit.⁶ Empowering and investing in rural women has shown to significantly increase productivity, reduce hunger and malnutrition and improve rural livelihoods, for everyone.⁷

Gender disparities in food security are more pronounced for people with intersectional identities such as Indigenous and Afro-descendant women, rural women, women living with disabilities, and refugees and migrants. For instance, food insecurity and malnutrition, which is exacerbated by climate change, is a contributing factor of poor maternal outcomes among indigenous women.⁸ While indigenous women play a vital role in traditional and non-traditional means of livelihood, unpaid care work, and food security, they often face discrimination from within and outside their communities.

Mr. Chairman,

The COVID19 pandemic has disproportionately affected the lives of women and girls and exacerbated pre-existing inequalities, who are facing increased difficulties accessing nutritious, safe food. As women generally earn less, have fewer stable jobs and live close to poverty, the economic impact of the pandemic has widened inequalities. Across Latin America and the Caribbean, women have reported skipping meals, or depriving themselves of nutritious foods, so that they have more available for their children and families.⁹ In fact, the region has seen an almost three-fold rise in the number of people requiring food assistance.¹⁰

In times of crisis, such as the COVID19 pandemic, poor households face asset losses and lower incomes, and in these contexts, it is women who often face severe time burdens, given their household food-security roles.¹¹ As they usually have a weak bargaining position with regard to household income due to unequal power relations and traditional gender roles, they frequently must reduce spending on nutrition and family well-being. As households shift to cheaper, less diverse diets, or when confronted with food scarcity, women are more likely to reduce their meal intake to feed others and tend to buffer the impact through diverse strategies and negative coping

⁵ <http://www.fao.org/gender/resources/infographics/the-female-face-of-farming/en/>

⁶ <https://www2.unwomen.org/-/media/field%20office%20americas/documentos/publicaciones/2020/05/enlac%20rga%20report%20english%20final%20junio2%201 comprimido.pdf?la=en&vs=250>

⁷ FAO: STRENGTHENING SECTOR POLICIES FOR BETTER FOOD SECURITY AND NUTRITION RESULTS (2017) <http://www.fao.org/3/a-i7218e.pdf>

⁸ https://www.un.org/development/desa/indigenouspeoples/wp-content/uploads/sites/19/2018/04/factsheet_print_Mar27.pdf

⁹ <https://www2.unwomen.org/-/media/field%20office%20americas/documentos/publicaciones/2020/05/enlac%20rga%20report%20english%20final%20junio2%201 comprimido.pdf?la=en&vs=250>

¹⁰ https://unsdg.un.org/sites/default/files/2020-07/EN_SG-Policy-Brief-COVID-LAC.pdf

¹¹ <https://reliefweb.int/sites/reliefweb.int/files/resources/bp-gender-inequalities-food-insecurity-150719-en.pdf>

mechanisms such as collecting wild food, migrating or selling assets, transactional sex and child, early and forced marriage.¹²

COVID-19 has had major impacts in access to sexual and reproductive health services and on the delivery of social protection programmes. Malnutrition has likely increased owing to health-care failures in the context of the pandemic. For women in reproductive age and pregnant women, such impacts are expected to lead to poor dietary intake, higher disease incidence with longer durations and higher risk of intergenerational transfer of poor outcomes owing to compromised maternal health. As indicated by the Secretary General in his report, maternal deaths have been predicted to increase, mainly owing to the interruption of life-saving interventions during childbirth and to interruptions in family planning services and micronutrient supplementation.¹³ Therefore, there is a need to strengthen sexual and reproductive health services instead of suspending or limiting them in the midst of lockdown and stay-at-home orders due to COVID19.

In closing, today we firmly recommit to accelerated efforts to the full implementation of the ICPD and 2030 Agenda, advancing progress, and continuing to leave no one behind. We emphasize the importance of partnerships for implementation with civil society, including women, feminist, and youth organizations.

Thank you.

¹² United Nations. *Global Humanitarian Overview* (2021)
https://reliefweb.int/sites/reliefweb.int/files/resources/GHO2021_EN.pdf

¹³ [https://www.thelancet.com/journals/langlo/article/PIIS2214-109X\(20\)30229-1/fulltext](https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(20)30229-1/fulltext)