



ICPD+5 PREPCOM HIGHLIGHTS TUESDAY, 29 JUNE 1999

The PrepCom for the Special Session to review and appraise implementation of the ICPD POA met throughout its final day and late into the night to continue informal consultations on the proposals for key actions for further POA implementation. Delegates reached consensus on 13 paragraphs, but could not agree on text relating to adolescent sexual and reproductive health (SRH) and abortion, and seven paragraphs remain bracketed going into the Special Session. Delegates also convened in a Plenary session to adopt the draft report of the resumed PrepCom session.

INFORMAL CONSULTATIONS

POPULATION AND DEVELOPMENT CONCERNS: Population, Economic Development and the Environment: Delegates agreed to add JAPAN's text urging reflection, as appropriate, of population-related goals and policies in international agreements in areas such as environment and trade to paragraph 10 (enabling environment to achieve sustained economic growth).

International Migration: Delegates agreed in 17ter (special attention to the needs of refugee women and children in refugee assistance activities) to call for, *inter alia*: special attention to elderly refugees; international support to meet refugee populations' basic needs, including provision of, *inter alia*, reproductive health (RH) and family planning services, as well as other basic social services; respect by refugees of the laws of their country of asylum and observance by governments of international law concerning refugees, including the principle of *non-refoulement*; and facilitation of refugees' return and integration in cooperation with relevant international organizations, acknowledging their right to repatriation.

REPRODUCTIVE RIGHTS AND REPRODUCTIVE HEALTH: Reproductive Health, Including Family Planning and Sexual Health: On 41bis (increased UN efforts on key SRH indicators), delegates agreed to a revised text which, *inter alia*: calls for increased efforts by the UN system, with international support, to develop and agree on common key indicators on RH programmes, including, *inter alia*, family planning, maternal health and sexual health; invites WHO to take the lead role, in coordination with several relevant UN agencies; and encourages provision of financial and technical assistance to developing countries to improve capacity building. The US, supported by the EU and NORWAY but opposed by the G-77/CHINA, recommended deleting text stating that indicators should be developed and agreed "for subsequent approval in the relevant inter-

governmental process," and delegates agreed to recommend that such indicators be developed and agreed "for appropriate consideration" in the relevant process.

Ensuring Voluntary Quality Family Planning Services: On 43(a) (access to information, counseling, services and follow-up on family planning and contraceptive methods), delegates reached a compromise by agreeing to withdraw proposals to elaborate on new options and underutilized methods (US and EU) and to specify "methods which are not against the law" (G-77/CHINA). Delegates agreed to compromise text on meeting the growing demand for access to such information and services on "the widest possible range" of safe, effective, affordable and acceptable family planning and contraceptive methods, including new options and underutilized methods.

Reducing Maternal Mortality and Morbidity: On 45(e) (abortion), BOLIVIA, the DOMINICAN REPUBLIC, URUGUAY, PARA GUAY, CHILE and the US supported a compromise text proposed by BRAZIL, which was based on the G-77/CHINA's formulation but incorporated US-proposed text recommending that, in circumstances where abortion is not against the law, health systems should train and equip health service providers and take other measures to ensure that abortion is safe and accessible, and that laws containing punitive measures against women who have undergone abortion be reviewed. EL SALVADOR supported Brazil's text with the deletion of the US text on review of laws containing punitive measures. SYRIA, the HOLY SEE, BULGARIA and IRAN emphasized that POA language would have to be used if consensus were to be reached. Delegates conducted informal informal consultations on this paragraph throughout the day and night but were unable to reach consensus, and the text remains bracketed pending further consultations.

Promoting Adolescent Sexual and Reproductive Health [and Reproductive Rights]: Delegates were unable to reach agreement on 52(a) (providing services to address adolescents' needs), 52(e) (adolescents making informed choices about SRH) and 52(f) (removal of barriers to information and services on SRH). Disagreement centered around whether to emphasize the need for due respect for the rights, duties and responsibilities of parents. The HOLY SEE, the G-77/CHINA, EGYPT, LIBYA and NICARAGUA supported inclusion of this text, while the EU preferred its deletion. The HOLY SEE said 52(a) and 52(f) could not be considered until agreement was reached on 52(e). ARMENIA, supported by NORWAY, proposed adding to 52(e) that information be provided to adolescents "to prevent the spread of STDs and HIV/AIDS" as well as to reduce the number of adolescent pregnancies. ISRAEL recommended broadening text that states that sexually active adolescents require family planning infor-

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mation, counseling and health services to refer to “adolescents” in general. EGYPT, supported by SUDAN, preferred that policies and programmes be implemented in accordance with “ICPD and other relevant conventions” rather than in conformity with World Summit for Children commitments and the Convention on the Rights of the Child, as advocated by the US. Delegates continued informal consultations on these paragraphs late into the night but were unable to achieve consensus.

Delegates agreed to replace **53** (increased resource allocation) and **55** (earmarking at least 20% of RH resources for adolescents’ information needs and services) with text calling on the UN system and donors to complement governments’ efforts to mobilize and provide adequate resources to respond to the needs of youth and adolescents, recognizing their growing and special needs, including SRH, and taking into account the special situations they face.

PARTNERSHIPS AND COLLABORATIONS: On **62ter**, (the role and responsibilities of the private sector), delegates agreed that in recognizing its increasing role in providing RH information, education, services and commodities, the private sector “should” (EU), rather than “must,” ensure that: its services and commodities are of high quality; its activities are socially responsible, culturally sensitive and cost-effective and fully respect various religious and ethical values and cultural backgrounds; and basic rights are adhered to. On **63** (POA implementation by parliamentarians/members of national legislatures), delegates agreed to invite parliamentarians/members of national legislatures to ensure legislative reform and expanded awareness-raising, advocate POA implementation, including through allocation, as appropriate, of financial resources, and regularly exchange information at regional, interregional and international levels, as appropriate.

MOBILIZING RESOURCES: Delegates reached agreement on the six bracketed paragraphs in this section based on a text emerging from informal consultations. On **67** (developed country resource mobilization), delegates agreed to text urging developed countries to: strengthen their commitment to the ICPD POA, in particular its cost estimates; make every effort to mobilize agreed estimated financial resources required for POA implementation; and give priority to LDCs’ needs. On **68** (developing country resource mobilization), delegates agreed to urge developing countries “and countries with economies in transition” (BULGARIA) to strengthen their commitment to the ICPD POA, in particular its cost estimates, and continue to make efforts to mobilize domestic resources. They also agreed to urge developing and developed countries “and countries with economies in transition” (BULGARIA) to promote international cooperation and to increase technical cooperation and transfer of technology through South-South cooperation.

On **70** (increasing advocacy efforts to meet resource goals), delegates agreed to encourage legislators and other decision makers, with full regard to their respective jurisdiction and mandates, to increase support for achieving POA goals and objectives through legislation, advocacy and expanded awareness-raising and resource mobilization, and to call for an increase in advocacy efforts at all levels. On **72bis** (donor countries and international funding agencies complementing domestic efforts), delegates agreed to urge donor countries and international funding agencies to complement, at the request of countries, domestic efforts to meet growing and urgent basic health and RH needs of developing countries, LDCs, countries with economies in transition, and countries facing increasing demands for such commodities and a diminishing share of international assistance.

Delegates reached consensus on **73** (additional ways and mechanisms to increase funding) after the G-77/CHINA and LIBYA agreed to the inclusion of reference to “sexual and” reproductive health. The agreed text urges governments and the international community to encourage and promote additional ways and mechanisms to increase funding for population and development programmes, including SRH programmes, that could include, “as appropriate” (CANADA): advocacy for increased funding from international financial institutions and

regional development banks; various forms of cost recovery; and increased private sector involvement. It further recommends promotion of access to services for those living in poverty and other vulnerable groups, and consideration of improving mechanisms to address the debt problem, including reduction of the burden of external debt.

On **79** (private sector participation), delegates agreed to text calling on governments to, *inter alia*: implement policies that facilitate access to basic health services, including high quality and affordable RH and family planning services; promote effective interventions and support services, including appropriate private sector services; and review legal, regulatory and import policies to eliminate those that unnecessarily prevent greater private sector involvement. The text also states that public sector resources should “have as a priority people living in poverty” (HOLY SEE), “underserved populations” (US), and low-income sectors of the population.

PLENARY

The PrepCom convened in a brief Plenary session at approximately 10:00 pm to consider and adopt the Draft report of the resumed session (E/CN.9/1999/PC/L.4). In presenting the draft report, PrepCom Rapporteur Gabriella Vukovich (Hungary) explained that the PrepCom would not forward a draft resolution to the Special Session but would transmit the document containing the proposals for key actions for further POA implementation in its present form. Delegates adopted the report with minor amendments and authorized the Bureau to incorporate the final outcomes of further negotiations on the remaining bracketed paragraphs.

Chair Chowdhury then suggested that delegates continue informal consultations in an effort to reach agreement on bracketed paragraphs on plans to meet young people’s needs, sex education, abortion and adolescent SRH. After consulting for more than one hour, delegates were unable to achieve consensus on these paragraphs, and the Chair suggested that delegates resume negotiations in the Special Session’s Committee of the Whole later in the morning. He noted that the outgoing PrepCom Bureau would meet informally prior to the Special Session’s opening Plenary to consider the working arrangements for the remaining text, and drew the PrepCom to a close at 12:15 am on Wednesday morning.

IN THE CORRIDORS

As the resumed PrepCom drew to a close in the early hours of Wednesday morning, some delegates expressed disappointment that the PrepCom had fallen short of its desired goal of sending a bracket-free document to their ministers at the Special Session. However, most delegates left the PrepCom optimistic about a successful overall ICPD+5 outcome given the renewed momentum and pervasive spirit of compromise and goodwill demonstrated at the eleventh hour of negotiations on the final day of the PrepCom.

THINGS TO LOOK FOR TODAY

OPENING PLENARY OF THE 21ST SESSION OF THE GENERAL ASSEMBLY: The opening Plenary of the 21st Special Session of the General Assembly will commence at 10:00 am in the General Assembly Hall. The Plenary will take care of procedural matters, establish an *Ad Hoc* Committee of the Whole, and hear statements from several high-level officials on the overall review and appraisal of implementation of the ICPD POA in morning, afternoon and evening sessions. UN Secretary-General Kofi Annan is expected to deliver an opening statement.

AD HOC COMMITTEE OF THE WHOLE: The *Ad Hoc* Committee of the Whole is expected to convene at approximately 11:30 am in Conference Room 2 to continue negotiations on the remaining bracketed proposals for key actions for further POA implementation and to hear statements from governments, UN agencies and NGOs.