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HIGHLIGHTS FROM THE HAGUE FORUM THURSDAY, 11 FEBRUARY 1999

On Thursday, 11 February, delegates at The Hague Forum met in the Main Committee to consider "Mobilization of Required Resources for POA Implementation" in the morning. The Plenary met throughout the day to hear statements by governments, civil society and international organizations on the operational review and assessment of POA implementation at the country level. The Bureau met all day and into the evening to complete the drafting of the final Forum report.

MAIN COMMITTEE

MOBILIZATION OF REQUIRED RESOURCES FOR IMPLEMENTING THE ICPD POA: Dr. Steve Sinding,

Director of Population Science of The Rockefeller Foundation, introduced this topic, highlighting: the costed ICPD reproductive health (RH) package and response of donors and developing countries; the roles of the private sector, NGOs and private foundations; sector investment programmes and sector-wide approaches; resources for the broader ICPD goals; and recent advances in development partnerships. He stated that there would be grave consequences if these issues were not addressed and noted a lack of accurate data. He highlighted the poor record of most donor countries in fulfilling their ICPD POA commitments.

Many delegates underscored the need for more funding and resources from donor countries in order to meet ICPD goals. MEXICO said donor countries should restate their commitment to POA contributions. JAPAN called for stronger contributions to UNFPA and IPPF activities. VIETNAM called for additional assistance from donors to achieve the ICPD goals. BANGLADESH also supported resource allocation beyond ICPD figures. CYPRUS said donors have a moral obligation to increase assistance as agreed in Cairo and, with JAPAN, SWEDEN and others, stressed the need for political will. CUBA noted that some donors have strengthened commitments at this meeting and called on others to follow suit. BRAZIL said the distribution of assistance from donors was distorted because funding to countries experiencing fertility rate declines has been reduced. He said this approach was too simplistic.

The NETHERLANDS identified the possible need to update the Cairo cost projection and stressed the need to observe priorities, the 0.7% ODA target, and, with others, the 20/20 Initiative. JAPAN reaffirmed the central role of ODA pursued through dedicated programmes. DENMARK stressed an integrated approach rather than a vertical "numbers game" approach. MALAYSIA called for funders and donors to respond to the impacts of the recent economic crisis.

BELGIUM urged donors to earmark funds for basic services. GHANA emphasized resources for multi-sectoral and adolescent education programmes. PERU recommended assigning priority to education of youth in RH and said recipients should emphasize training. The FEDERATION FOR WOMEN AND FAMILY PLANNING FOR POLAND urged increased allocation of funding to integrated and equitable RH services and gender-sensitive training, and recommended simplifying procedures for financial support. EL SALVADOR proposed that financial institutions make their financing mandates more flexible. NORWAY lauded UNFPA's new results-based budgeting approach as a means to mobilize more resources by demonstrating programme effectiveness.

On behalf of youth participants, the NGO DUTCH COUNCIL ON YOUTH AND POPULATION, supported by the NETHER-LANDS and TUNISIA, called for funding from donors for reproductive and sexual health projects to be conditional on allocation of at least 20% to initiatives for adolescents. INDIA called for increased funding for adolescent and youth programmes and voluntary earmarking but expressed reservations on conditionalities in this regard.

Numerous delegates emphasized the need for efficient and effective use of resources. Several speakers highlighted the need to develop innovative financial mechanisms. HEALTHWATCH INDIA suggested introducing a tax on financial transactions. VIETNAM noted that integrating services at the grassroots level could promote increased efficiency. CYPRUS advocated prioritizing use of existing resources. The UK said there will never be sufficient funds to meet everyone's expectations and recommended maximizing resources going to the poor. FRANCE stressed demand-driven policies, noting that ODA reduction may sacrifice some sectors at the expense of others. LITHUANIA stated that many countries continue to concentrate spending on diagnostic and palliative care and emphasized the importance of prevention programmes. SOUTH AFRICA noted that tertiary training institutions for the development of local skills need to be supported in order to move away from high-cost donor provision of skilled personnel.

A number of delegations highlighted better coordination between agencies. UGANDA and the GAMBIA urged cooperation among donors to avoid duplication. The YOUTH FORUM highlighted reevaluation of structural adjustment programmes. The WORLD BANK noted that a majority of primary health care spending goes to salaries and thus staff duplication is a problem. He said integration of personnel, support services and other expenditures would encourage cost-effectiveness. He said it is also essential that funds be allocated to high-risk, low-income groups rather than middle- and high-income groups in urban areas.

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Several delegates, including INDIA, TUNISIA and NGO PARTNERS IN POPULATION AND DEVELOPMENT recommended South-South cooperation. TUNISIA called for donor support for South-South cooperation.

A number of delegates called for domestic mobilization of resources. JAMAICA stressed the need to increase resources at the country level for programme operation. UGANDA called for government accountability and innovative means to mobilize local private sector funds. CYPRUS called on recipients to increase resources to population activities, levy small user fees on services to recoup costs, mobilize private sector resources, and target the needs of the most vulnerable. SUDAN, highlighting difficulties for developing country investment, stressed an integrated programme approach rather than a short-term project approach. The WORLD BANK said decision-makers, particularly finance ministers, need to be targeted. CANADA suggested that the role of the regional development banks be expanded.

The GAMBIA emphasized improvement of enabling environments for fulfilling of commitments. NIGERIA said sanctions have impeded efforts to implement population activities. BANG-LADESH stressed an expanded knowledge base, appropriate communication and sharing mechanisms and enhanced programme capacity.

On the question of debt, TANZANIA underscored the burden of debt and called on donors to contribute to debt relief funds. HEALTHWATCH INDIA said donors should accelerate the debt relief process. The YOUTH FORUM highlighted debt reduction and cancellation. JAMAICA supported debt forgiveness for implementing the 20/20 Initiative and "debt for programme swaps." An African NGO proposed redirecting funds from debt forgiveness to social services, particularly RH.

Concerning strengthening partnerships to mobilize resources, MALAYSIA highlighted partnerships with civil society, including the private sector. SUDAN called for resource allocation for partnerships. A Mexican NGO urged creation of mechanisms for cooperation between governments and NGOs, including for access to documents related to budgetary matters.

A number of participants highlighted tracking and monitoring of resource flows. The UK called for monitoring by socioeconomic status as well as by gender and said countries should be able to track their success and monitor performance annually. SWEDEN said there must be agreement on methods for measuring resource use and outcomes. The FEDERATION FOR WOMEN AND FAMILY PLANNING FOR POLAND supported monitoring by governments and women's and family planning NGOs. UGANDA stressed the need for improved data on where resources are being channeled.

On the role of NGOs, LITHUANIA and the IPPF said NGOs suffer from a lack of resources. A Yemeni NGO stressed NGO independence, collaboration and information-sharing. SOUTH AFRICA said NGOs are not income-generating, but pressure to be self-sustaining is distracting them away from their core activities. NGOs need support but also autonomy, and there should be a code of conduct for donors. The US said private foundations should be encouraged to play a greater role. An African NGO called for increased funding of population NGOs' operations, particularly for HIV/AIDS-related activities. The WORLD POPULATION FUND said the delay between acceptance of NGO funding proposals and their reception of the funds is too long, making programmes less effective.

Participants also discussed the role of the private sector. The NETHERLANDS highlighted strategic implications of private sector and World Bank funding initiatives. JAMAICA supported national private sector participation in affordable service provision. PERU emphasized private sector mobilization for RH and family

planning at international and local levels. EGYPT urged dialogue with pharmaceutical companies to ensure supplies of contraceptives to adolescents and to accelerate HIV/AIDS prevention. IRAN highlighted the potential improvements in quality of RH services that could be realized by mobilizing the private sector. INDIA called for direct private sector funding to community-based organizations and NGOs.

Concerning resources for the broader ICPD goals, NORWAY said the Cairo agenda must not be viewed in isolation from the other global conferences of the 1990s, noting that poverty, the right to development and social investment apply to all these agendas and that the percentage of funding to the population sector is less important than that channeled to development. MEXICO supported funding for the full range of population and development issues and stressed poverty as a criterion for assistance. JAMAICA recommended avoiding bureaucratic expansion by rationalizing implementation of the recent global conference recommendations. TUNISIA said cumbersome bureaucratic procedures discourage programme development. TANZANIA called for assistance to examine causes of refugee influx.

PLENARY

Plenary heard statements by governments, civil society and international organizations on the operational review and assessment of POA implementation at the country level throughout the day. Several countries reported progress in implementation and highlighted setbacks due to economic crises, increases in the spread of STDs including HIV/AIDS, limited financial resources and inadequate institutional capacity. Progress was reported in provision of better maternal health care, increased school enrolment of girls, empowerment of women through micro-enterprise activities and better collaboration between governments and civil society. The effects of natural disasters, conflicts and economic crises on fertility rates and migration were highlighted. Civil society representatives stressed: elimination of legislative barriers; eradication of corruption; transparency; improvement of maternal health care; development of proper curricula in education; effective involvement of youth, NGOs, women and other groups in decisionmaking; and prioritization of education and health service provision.

IN THE CORRIDORS

While the Bureau worked into the night to fine-tune the Forum's final report of the Main Committee's findings and conclusions on the substantive issues, delegates speculated on how the report would be received in the final Plenary. Reflecting on the draft version circulating Thursday, some felt the final report will not contain anything particularly new or controversial and thus predicted it would be adopted by the Plenary without much ado. The fact that the Bureau drafting meetings were transparent and open to NGO observation also eased delegates' concern that they'd be burning the midnight oil on the last night of the Forum. Others said the report does table new and pressing issues that have emerged since Cairo, such as the need to address adolescent sexual and reproductive health, and so anticipated a protracted Plenary debate and submission of reservations on these areas.

THINGS TO LOOK FOR TODAY

PLENARY: Plenary is expected to convene at 10:00 am to consider and adopt the draft report of the Forum's findings and conclusions.