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ICPD+5 PREPCOM HIGHLIGHTS MONDAY, 28 JUNE 1999

The resumed PrepCom for the Special Session to review and appraise implementation of the ICPD POA met in morning, afternoon and night sessions to continue informal consultations on the proposals for key actions for further POA implementation. Delegates made progress in the negotiations, reaching consensus on eight paragraphs and clearing some of the brackets in other paragraphs, but were unable to reach agreement on 21 bracketed paragraphs.

INFORMAL CONSULTATIONS

POPULATION AND DEVELOPMENT CONCERNS: Changing Age Structure and Ageing of the Population: On 13(a) (plans to meet young people's needs), several delegations, including individual members of the G-77/CHINA, supported compromise text proposed by NAMIBIA, calling for: active support of parents, communities, NGOs and the private sector; prioritization of programmes such as education, income-generating opportunities, vocational training and health services, including meeting their sexual and reproductive health (SRH) needs; involvement of youth in investment in developing and implementing plans; and implementation in line with World Summit for Children commitments and the Convention on the Rights of the Child. LIBYA, IRAN, SYRIA, MOROCCO, EGYPT, SUDAN, SENEGAL, ARGENTINA, ALGERIA, MALAYSIA and the G-77/CHINA said the proposal did not reflect the position of the G-77/China as a whole as the Group did not have the opportunity to discuss it. PERU explained that since the G-77/ CHINA could not reach agreement on the numerous amendments proposed for this paragraph, they agreed that each delegation was free to express its opinion on the various proposals for this paragraph. The HOLY SEE said language on meeting young people's SRH needs must be balanced by reference to the rights, duties and responsibilities of parents. The G-77/CHINA emphasized its need for time to consider Namibia's new proposal.

International Migration: On 17ter (special attention to the needs of refugee women and children), the G-77/CHINA proposed compromise text that included, *inter alia*: adding special attention to the needs of "elderly refugees;" noting that refugees should respect asylum countries' laws and regulations; and acknowledging refugees' rights to return to their homeland. CANADA, the US and the EU preferred acknowledging the right to "repatriation." The EU proposed "sexual health services" rather than "family planning" in reference to health services. The paragraph was bracketed pending further consultations.

Population, Development and Education: On **23(a)** *bis* (sex education in school curricula), several delegates, including several individual members of the G-77/China, supported GHANA's proposal to include "education in SRH issues" in school curricula. Several other

individual members of the Group objected to Ghana's proposal, and the G-77/CHINA Chair said the Group would need to discuss the proposal.

GENDER EQUALITY, EQUITY AND EMPOWERMENT OF WOMEN: Promotion and Protection of Women's Human Rights: On 27 (ensuring respect and protection of the human rights of women and girls), delegates agreed that particular human rights (economic, social, reproductive and cultural) would not be specified and that rights should be promoted as well as respected and protected. The US, supported by CANADA and the EU, advocated encouraging governments to promote adoption of the Optional Protocol to CEDAW by ECOSOC and the General Assembly. Delegates agreed to the G-77 CHINA's proposal to promote its "consideration," and accepted the US-amended G-77/CHINA text to coordinate and harmonize measures aimed at promoting and achieving gender equality and equity in implementation.

REPRODUCTIVE RIGHTS AND REPRODUCTIVE HEALTH: Reproductive Health, Including Family Planning and Sexual Health: On 41bis (increased UN efforts on key SRH indicators), the G-77/CHINA, opposed by NORWAY, the US and JAPAN, proposed urging "new and additional financial resources from the international community" to develop common indicators on relevant programmes. NORWAY suggested, inter alia, removing the list of specific UN agencies involved and referring to WHO "in coordination with other organizations." The HOLY SEE called for inclusion of maternal "and infant" mortality and morbidity. Informal informal consultations produced a text for further consideration, calling for increased efforts by the UN system, with support from the international community, to develop and agree on common key indicators on RH programmes, and referring to maternal "and neonatal" mortality.

Ensuring Voluntary Quality Family Planning Services: On 43(a) (sufficient resources to provide access to information, counseling services and follow-up on family planning and contraceptive methods), delegates agreed to the G-77/CHINA's proposal for "mobilizing and providing" rather than "allocating" sufficient resources. Delegates disagreed on whether to support methods "which are not against the law" (G-77/CHINA, HOLY SEE and PAKISTAN) or "within the framework of national legislation" (NORWAY, MEXICO, the EU and JAPAN). The US, EU, ISRAEL, MEXICO and NORWAY preferred elaborating new options "including women-controlled methods such as female condoms, emergency contraception" and underutilized methods "such as vasectomy and male condoms," but the G-77/CHINA and the HOLY SEE objected. The text remains bracketed pending further consultations.

Reducing Maternal Mortality and Morbidity: Delegates agreed to amend 46ter (WHO's leadership role in assisting countries to establish standards for care) to urge WHO, in cooperation with relevant UN bodies, to take its leadership role in assisting countries, "in particular

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developing countries" (G-77/CHINA), in putting in place standards for care and treatment that incorporate "gender sensitive approaches and gender equality" (CANADA) "and equity" (US) in health care delivery, "taking into consideration the level of development and economic and social conditions of countries" (G-77/CHINA).

Promoting Adolescent Sexual and Reproductive Health [and Reproductive Rights]: On 52(a) (providing services to address adolescents' needs), the HOLY SEE, stressing the need to balance the text by specifying the Convention on the Rights of the Child and recognizing parental rights, duties and responsibilities, proposed deleting 52(a) and amending 52(e) and 52(f). The EU objected, noting that this concern was addressed in the chapeau. Informal informal consultations produced a revised text for further consideration, which states that services should, *inter alia*, address adolescents' SRH needs, safeguard their rights to privacy, confidentiality and informed consent, respect their cultural values and religious beliefs, and conform with relevant existing international agreements and conventions.

On 52(e) (adolescents making informed choices about SRH), the G-77/CHINA and the HOLY SEE opposed deleting text stipulating that adolescents receive information and services "with due respect for the rights, duties and responsibilities of parents" and proposed adding that this be consistent with adolescents' evolving capacities and their rights to RH education, information and care, respecting cultural values and religious beliefs. The EU proposed "with the active support of parents" as a compromise. The G-77/CHINA objected to proposals by CANADA that such services be, "inter alia, sensitive to gender and race," and by the EU that "all" sexually active adolescents will require special family planning information, "confidential" counseling and services. The EU and GEORGIA supported US-proposed text recommending that these policies and programmes be consistent with World Summit for Children commitments and the Convention on the Rights of the Child. Delegates proposed several minor amendments to 52(f)(removal of barriers to information on SRH). They did not agree on the G-77/CHINA formulation stating that "countries should, in the context of paragraph 52(e), where appropriate, remove legal, regulatory and social barriers to RH information and care to adolescents," as 52(e) was not agreed. The HOLY SEE proposed urging countries to provide services which safeguard adolescents' rights to privacy, confidentiality, respect and informed consent, respecting cultural values and religious beliefs. Informal informal consultations produced for further consideration a revised text based on the G-77/CHINA position.

On 53 (increased resource allocation), the EU and US opposed the G-77/CHINA's proposal emphasizing the need for international support for developing countries in mobilizing and providing new and additional resources. The G-77/CHINA proposed deleting 55 (earmarking at least 20% of RH resources for adolescents' information needs and services). The text of these two paragraphs was bracketed pending further consultations. Delegates agreed on 54 (programme documentation and evaluation), based on G-77/CHINA-proposed compromise text stating that governments, in consultation with national NGOs, including youth organizations, where applicable, should evaluate programmes, document experiences and develop datacollection systems to monitor progress and disseminate information about programmes and their impact on young people's SRH. Delegates agreed to amended text urging UN agencies, "international" (EU) NGOs and donor countries to support mechanisms for sharing experiences "among all countries" (US), "especially among developing countries" (G-77/CHINA).

PARTNERSHIPS AND COLLABORATIONS: Delegates agreed to amend 58bis (civil society's role in inducing behavioral change) to state that governments "are encouraged to" (G-77/CHINA) recognize "and support" (US) the "important" (US) and "complementary" (G-77/CHINA) role that civil society "at the national level" (G-77/CHINA) can play "towards changing attitudes and actions" (G-77/CHINA) for further POA implementation. Agreement was also reached on 58ter, further encouraging governments to recognize and support the important role that civil society "at the national level" (the G-77/CHINA) can play in helping communities articulate "and meet" (US) their needs for "health care, including" (G-77/CHINA) RH care. Delegates agreed on 62bis based on the G-77/CHINA's formulation, emphasizing that POA implementation must be tied closely to a broader strengthening of health systems. EU and US amendments to the G-77/CHINA text encourage the public sector to "define its role"

and work more closely with the private and informal sectors to monitor and improve standards and ensure that services "are available and that their delivery" is of good quality and affordable. On **62ter** (the private sector and adherence to basic rights), the G-77/CHINA opposed the EU and US proposal to delete the paragraph, and it was bracketed pending further consultations.

On **63** (POA implementation by parliamentarians/members of national legislature), delegates agreed to encourage them to be advocates of the POA, including through legislation and expanded awareness raising. JAPAN objected to the G-77/CHINA's proposal to call for exchanges of experience at regional, interregional and international levels "as appropriate," and delete reference to The Hague International Forum of Parliamentarians. This paragraph remains bracketed pending further consultations. On **65bis** (involvement of youth in decision-making on policies and programmes for youth), delegates agreed to text based on the G-77/CHINA's proposal urging governments, civil society "organizations" (EU) "at the national level" (the G-77/CHINA), and the UN system to "consult" (NORWAY) youth organizations in the design, implementation and evaluation of policies and programmes for youth. The HOLY SEE said youth organizations holding different views should be equally involved.

MOBILIZING RESOURCES: The EU and US suggested merging 67 (donor country resource mobilization) with 68 (developing country resource mobilization). The G-77/CHINA said differences in meeting POA commitments in developed and developing countries should be reflected in the text, and proposed that 67 urge developed countries to renew their commitment to the POA, in particular financial targets, and mobilize agreed financial resources from all sources, giving priority to LDCs' needs. Delegates reached no agreement on these two paragraphs. On 70 (increasing advocacy efforts to meet resource goals), the US supported the G-77/CHINA's proposal to increase efforts at "all" levels. The US reserved its position on legislators and other decision makers increasing support "with full regard to their respective jurisdiction and mandates." The provision was bracketed pending further consideration. On 72bis (donor countries and international funding agencies complementing domestic efforts), MEXICO, with the EU, proposed specifying the World Bank and regional development banks and preferred efforts to meet "urgent basic health commodity needs, including RH commodities." The text was bracketed pending further discussion.

On 73 (additional ways and mechanisms to increase funding), the EU stressed focusing on SRH programmes and supported G-77/CHINA text specifying "the context of intensifying broader development efforts and the strengthening of health systems." JAPAN said the G-77/CHINA text on reducing the burden of external debt should be included in a broader reference to solving the debt problem. The text remains bracketed pending further consultations. On 79 (policies that facilitate greater private sector participation), the EU proposed "focusing public sector resources and subsidies on the poor and the vulnerable" and suggested deleting reference to shifting those who can pay to private sector service. The paragraph was bracketed pending G-77/China consideration.

IN THE CORRIDORS

Some delegates were expressing consternation in the corridors late Monday night following the unexpected tabling of proposals from individual members of the G-77/China regarding two paragraphs in the controversial section on adolescent sexual and reproductive health. Observers speculated on the implications of several G-77/China members voicing individual country positions separate from the Group. Some noted that the agreement by a significant faction of G-77/China countries on these contentious paragraphs signified that differences between the Group and other delegations might be bridged, while others were concerned that this could further complicate the negotiations.

THINGS TO LOOK FOR TODAY

INFORMAL CONSULTATIONS: The PrepCom will convene at 10:00 am in Conference Room 2 to continue negotiations on proposals for key actions for further POA implementation. It is expected that delegates will meet in morning, afternoon and night sessions.