

RAPPORTEUR'S SUMMARY

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Introduction

The conference was remarkable for the general levels of agreement on a very broad range of topics. Throughout the high-level plenary session and the three thematic sessions many speakers endorsed the content and recommendations from each other's interventions and from several key documents that were inputs to the conference. These included:

- strong and consistent endorsement by governments and CSOs for the continued and stronger implementation of the ICPD Programme of Action and Key Actions from ICPD+5;
- endorsement of the 'UNECE Regional Youth Conference Call to Action';
- endorsement of the High-Level Task Force for the ICPD's 'Policy Recommendations for the ICPD Beyond 2014 on Sexual and Reproductive Rights';
- endorsement of the relevant sections of 'The Vienna+20 CSO Declaration', especially paragraph 11 on sexual and reproductive rights and paragraph 94 on sexual orientation; and
- endorsement of the content and recommendations contained in the 'ICPD Beyond 2014 Review in the UNECE Region: Report of the Expert Meetings'.

With only one exception,³ no clear opposition to these broad positions or to the details reported below was expressed in the meeting; however, this should not necessarily be taken as consensus, since even the Chair's Summary, while subject to some discussion and negotiation, was not a consensus document.

Several major cross-cutting issues emerged across the plenary and three thematic sessions:

- the need to enable choices and the rights to self-determination for all and to ensure lifelong equal opportunities for all;
- a strong emphasis on the importance of sexual and reproductive health and rights for all and

their interplays with broader development goals and with reducing inequalities;

- the need to overcome discrimination and stigmatization for all people and groups and to eliminate related violence;
- the need to involve stakeholders in the development and implementation of policies and programmes that affect them; and
- the need for adequate high-quality data to enable monitoring of progress.

The rights-based approach and its universality was seen as a key ingredient of enabling choices and opportunities for all, regardless of gender, class, race or ethnicity, religion, culture, poverty, disability, sexual orientation and gender identity or any other characteristic. Legal, regulatory, cultural, structural and societal barriers or constraints to equal rights, to access to opportunities and services and to enabling choices and self-determination should be removed and replaced with enabling counterparts.

The remainder of this report is structured around the three themes addressed in the substantive sessions of the conference:

- Population Dynamics and Sustainable Development;
- Families and Sexual and Reproductive Health over the Life Course; and
- Inequalities, Social Inclusion and Rights.

The report does not try to provide a verbatim record of the meeting but, rather, to summarize the key topics and recommendations that emerged. Moreover, there was often considerable overlap in some of the interventions to the different sessions, and the material is organized by the relevant thematic topic, rather than which session the intervention was made in. Relevant material from the high-level plenary session is also incorporated into the summary on each theme, as well as some of the materials presented in the background documents to the conference. This report also places some of the discussions in their broader context where this helps understanding of the issues covered, and even sometimes omitted, in the actual meeting.

³ Malta raised specific objections to the many calls for safe and legal abortion to be made more widely available.

Population Dynamics and Sustainable Development

The discussion during this thematic session was predominantly concerned with adapting to the realities of population dynamics by investing in people. The UNECE region generally has ageing populations, brought about through the combination of improving health at older ages and, often, sustained low fertility. At least as much attention was paid to the dynamics of individual people through their life course as to the more traditional macro-level aspects of population dynamics. Thus, lifelong investment in education and learning and in improving health, including sexual and reproductive health, received considerable emphasis. Providing opportunity and support for these investments was seen as key to enabling choices.

These concerns echoed and developed several themes included in the ICPD Programme of Action and the Key Actions from ICPD+5, with the emphasis on a rights-based approach, on a broad human development agenda, and on education and health. Many speakers strongly endorsed the ICPD recommendations.

Throughout the UNECE region people are living longer and have increasing healthy years of life. Even the few countries, most notably the Russian Federation, that experienced worsening adult mortality during the decade beginning around 1995 have shown recent improvements. Reducing mortality and improving health and well-being are universally valued goals that rarely bring about any tensions between individual and societal aims or policies (although some public health policies do inhibit rather than enable choice, e.g. controls on smoking or alcohol consumption). As the keynote speaker said “50 is the new 40; and 70 is the new 60”. These improvements in longevity and in healthiness have a profound impact on increasing the numbers of older people in our populations, and adapting to this new reality requires major and sometimes difficult shifts in pension provision and ‘normal’ ages of retirement. Working lives are likely to finish at an older age. Thus the meeting did not see population ageing as a threat but as a desirable outcome that has to be managed through appropriate policy responses to maintain or enhance: investment in (re-)training an ageing workforce; work–retirement balance; intergenerational solidarity; fundable pension and health provision; and investing in healthy years.

Low levels of fertility in most of the UNECE region are largely a result of enabling choice. Following the ICPD it is no longer regarded as acceptable for governments to set targets for overall levels of fertility. However, choices about parenthood are taken under varying constraints, and government policies can alter such constraints but must never do so coercively. For example, enabling parental leave, providing financial support for children, and investing in child-care provision are all examples of where governments can alter the opportunities and constraints under which choices about parenthood are made. Such policies would contribute to raising fertility through enabling choice but should fully respect the rights of both parents and children.

Levels of international migration have grown in the UNECE region, partly as a result of freedom of movement agreements enabling such choices, especially within the EU, but also in response to changing opportunities. Sustained net emigration from the less developed countries of the region, which is also selective for the better qualified, presents difficulties in development and is only partially offset by remittances. Within countries similar migration patterns to the more developed (and urban) areas present developmental difficulties for rural or poorer urban areas. However, such trends are long-standing and again require adaptation, since these movements of people are usually through choice. However, migration often contributes to or exacerbates growth in inequality between and within countries.

A further macro-level issue in the UNECE region is the result of the recent economic recession. Again this has tended to exacerbate existing inequalities, both at the country and regional level but also between individuals. A particular stress in the meeting was the need to address the differentially high levels of unemployment for young people.

The major recurring theme of the discussions in this session was investing in people throughout their lives. Various terms were used in this context: the human resource base; human capital; capability; empowerment; human development; and education. However, a common theme emerged of the need to enable and empower individuals to make choices and have opportunities: education in the broadest sense was seen as the crucial enabler, although the importance of health also received emphasis. Without doubt people who are better educated have more opportunities to realize their

potential and make real choices through their lives; they also adopt sustainable behaviours more easily, are more adaptive in work and are healthier. Raising levels of education for all results in significant macro-level gains in productivity and health, as well as directly benefiting the lives of the individuals concerned.

Various speakers endorsed the need for investment in: parenting and childcare during the early years; improving formal schooling and ensuring opportunities for more advanced education; and lifelong learning both in the workforce and outside.

In the context of the rights-based approach of the ICPD great emphasis was placed on ensuring equal access to broad educational opportunities for all, regardless of gender, ethnicity or race, health status, religion or culture, sexual orientation or gender identity, or any other characteristic.

Moreover, a number of speakers raised the need for comprehensive sexual and reproductive health and rights education to be part of the formal curriculum. Related to this were concerns to prevent (early) gender discrimination limiting opportunities for girls, through gender-based violence, early or forced marriage, and familial control resulting, for example, in early withdrawal from education.

Broadly this session stressed the need for policies to respond to realities and to endorse a rights-based, non-coercive, anti-discriminatory approach. Enabling choices and providing opportunities for all throughout their lives is good for individuals and for societies. Crucial to this is investment in developing human potential through health and well-being and especially through lifelong education (construed broadly to include enhanced capacities and skills, motivation, social behaviour and the ability to exercise choice).

Families and Sexual and Reproductive Health over the Life Course

A series of broad issues emerged from the discussion under this topic. First, the crucial need for a rights-based approach was emphasized, incorporating both sexual and reproductive rights, to frame approaches to sexual and reproductive health. Second, the need to consider both individuals and their grouping in families was made clear, and potential conflicts of interest drawn out. Examples of such conflicts include familial gender-based violence and control over rights to self-determination or choice by

other family members. Discrimination against or stigmatization of individuals on any grounds, including their choice of sexual partners and family forms, should be a target for strong educational or legal and regulatory interventions.

There was also an overarching strong commitment to ensuring the continued implementation and realization of the ICPD Programme of Action, as well as grasping the opportunities to address issues of growing importance or emerging greater emphasis, such as zero tolerance to gender-based violence, sexual rights including rights to safely exercise choices on sexual orientation and gender identity, and enabling access to safe and legal abortion.

Generally there has been progress following the ICPD Conference in 1994. Greater emphasis has been given to a rights-based approach to sexual and reproductive health. Barriers to accessing family planning are being reduced, and explicit or implicit coercive reproductive and sexual health policies substantially reduced. Progress is being made in integrating sexual and reproductive health services into broader health care reform packages and improving access. There is evidence from several countries that establishing high-quality rights-based sexual and reproductive health care, including improved access to family planning, combined with sexual and reproductive health and rights education and improved legal access to safe abortion actually lowers the frequency of abortion and certainly leads to significant reductions in maternal mortality and morbidity.

There has also been some progress in combating gender-based violence, with moves towards a zero tolerance approach. There have been a number of moves to reduce discrimination or stigmatization for many individuals with minority characteristics, such as disability, being HIV-positive, or on grounds of sexual orientation and gender identity, and race or ethnic group.

There has also been progress in enabling choices for families. Policies to enable and encourage both men and women to have rights to and financial support for parental leave and to assist in achieving a desired work–family life balance have been receiving growing emphasis. The key role of parents in nurturing early development of children during the pre-school years is attracting policy support to enable informed parenting. The increasing variety of family and partnership forms is gradually

being incorporated into regulatory, financial and legal systems, including acceptance of same-sex partnership or marriage.

Ensuring further progress in implementing the ICPD Programme of Action and beyond requires political will, sustained action and increased accountability. Altering long-standing restrictive gender norms, cultural constraints, discrimination and prejudice, and regulatory and legal environments is a challenging process. A key is to recognize and ensure that human rights, including sexual and reproductive rights, are universal and apply equally regardless of gender, age, generational position in the family, sexual orientation and gender identity, ethnic or racial identity, religious affiliation or beliefs, health or disability status (including HIV/AIDS), class or occupation.

Many speakers emphasized the special implications of universal sexual and reproductive rights for young people. Policies must ensure that youth are enabled to make their own informed choices on sexuality, partnership and reproduction free from control by others, whether within the family or outside. The roles of family, culture and religion in limiting autonomy and informed choice and in reinforcing harmful practices and gender-based violence need changing. In particular, all forms of gender-based inequities in sexual and reproductive rights and health need to be eliminated; among the worst of these violations are forced marriage, female genital mutilation/cutting and 'honour' killings. The right to access high-quality legal and safe abortion was strongly advocated by all who spoke on the subject, except the delegation from Malta, and denial of such services seen by many as a form of gender-based violence. All young people, especially girls, also need protection from sexual exploitation or sexual and reproductive coercion.

The need for young people to receive high-quality, evidence-based, comprehensive sexuality education both in and out of school was also strongly supported. This was expected to cover age-appropriate, non-judgemental education about human rights, human sexuality, gender equality, relationships, and sexual and reproductive rights and health. It would provide an efficient and effective method of empowering young people to make informed choices about sexuality, partnership and reproduction. To realize their informed choices, young people also need access to a full range of affordable, non-judgemental sexual and reproductive information and health

services, including all types of contraception, safe and legal abortion, treatment of STIs and infertility, and referral services.

Sexual rights include the right to express sexual orientation and gender identity and to have societal support to enable such choices, with recognition of rights to partner and become parents. Laws, policies and programmes are required to ensure such rights and to prevent violence based on actual or perceived sexual orientation and gender identity or expression.

Comprehensive sexual and reproductive health services need to be made accessible and affordable to all, regardless of gender, age or any other characteristic. Implementation of sexual and reproductive rights means that access to all such services should be a matter of informed individual choice, and all spousal, parental and other gatekeeper controls should be prohibited. Equally, no other person or body should have the power or ability to force individuals to undergo sexual activity, sterilization, abortion, marriage or reproduction: all are a matter for individual choice. A core right for all, including young people, is to have control to determine their own sexuality and all sexual and reproductive choices and behaviours.

The framing of laws and regulations and of service provision on sexual and reproductive health should always involve stakeholders, including sex workers, HIV-positive individuals, young people, CSOs or poor people, as appropriate. In addition it is crucial to ensure gender equity in such involvement.

Two key dimensions of the family were distinguished: partnership behaviour (horizontal) and parenting (vertical). However, vertical relationships encompass reciprocal intergenerational transfers and obligations across the generations, including grandparents.

Enabling partnership choice, where two or more individuals freely engage in a sexual or co-residential sustained relationship, was seen as important. The rights to form partnerships of choice that are legally recognized, regardless of sexual orientation or gender identity, and ensuring that the diversity of such partnerships is accepted without discrimination were seen as important. Within any partnership there is a need to establish equity, equal rights and mutual tolerance and respect, regardless of gender or sexual orientation. Such a position reinforces,

but also extends, the emphasis on gender equity in heterosexual partnerships that was part of the ICPD Programme of Action. Establishing equitable sharing of household tasks, parenting responsibilities and mutual work–life balance is essential.

In exercising reproductive choice, individuals and couples can choose to become parents. Once they do become parents, they have a long-term responsibility for rearing and nurturing their child. Societies increasingly recognize the importance of early childrearing by providing rights to paid parental leave, which needs to be equitable between partners, usually the mother and father but whoever they are. Parents should be enabled to ensure that they provide an upbringing that helps all children to realize their full potential. In particular, it is crucial that all children are treated equitably and empowered to make their own choices, regardless of gender or other characteristics. All parents should ensure that their children are protected from harmful practices, especially by their parents, and strive to ensure that if their own parental partnership breaks down, it has limited consequences for the child.

There was broad recognition that full realization of sexual and reproductive rights and health for all individuals often requires strong legislative and regulatory support to enforce rights, to combat control or violence, to ensure equitable and accessible service provision and to bring about requisite cultural and societal change. Such enforcement is often needed to complement the more positive approaches to changing attitudes and practices through education and training.

In summary, the extensive discussion on this topic very strongly endorsed the need to continue to press the agenda from the ICPD Programme of Action and ensure that those parts which have not been fully realized continue to be a high priority on the international development agenda after 2015. However, there was also very strong support for making progress on a range of emerging issues that were not fully part of the Programme of Action, such as enabling legal safe abortion, recognizing the diversity of family forms, strengthening language on sexual rights, and accepting rights to freely choose sexual orientation and gender identity without stigmatization or discrimination.

Inequalities, Social Inclusion and Rights

Much of the discussion in this session focused on achieving equal rights and opportunities for all.

Discrimination against any individual on the basis of their gender, of their sexual orientation and gender identity or expression, of their age, race, ethnicity, occupation (including sex workers), class, religion, culture, health status (including disability), migrant status or any other attribute, status or characteristic should not be tolerated: human rights and equal opportunities must apply to all people everywhere. The need to combat discrimination of any kind and to ensure that societal structures, laws and regulations enable choices and ensure equal opportunities for all received much attention. Changing cultures and practices in families and at all levels of society towards encouraging and enabling all individuals to make choices and have the opportunities to realize their potential free from discrimination or unequal treatment was seen as crucial. However, it was also recognized that achieving these levels of equity often requires strong reinforcement through laws and regulations. Social inclusion is stronger in more equal societies, and such societies typically have greater social mobility and fewer poor outcomes for adults and children.

While many speakers recognized that there has been some progress towards improving gender equity and equality and empowering women since the ICPD, it is clear that much remains to be done. Achieving positive, non-discriminatory gender roles and attitudes among both men and women is essential throughout the life course. All governments were urged to ratify the convention on zero tolerance of gender-based violence. Discrimination and inequitable treatment by gender often begins early in life: sex-selective abortion, unequal access to health care and education, sexual and gender violence, and more pervasively the familial transmission of inequitable gender roles and attitudes. As girls enter adolescence other forms of discrimination need to be combated: early and forced marriage, female genital mutilation/cutting, so-called ‘honour’ killings and violence, and more broadly gender-inequitable levels of parental control over dress, sexuality and behaviours. The roles of culture, religion and societies in reinforcing and maintaining these harmful or gender-discriminatory practices also need to be addressed.

Sexual and reproductive rights are a crucial part of achieving gender equity. Enabling informed choices about partnership and reproduction and having the means to achieve such choices is critical to providing an environment in which young women can achieve their potential by completing their

education and making informed career choices. The ability to avoid early and unwanted pregnancies and to choose whether and when to partner and to bear children is an essential prerequisite for moving towards gender equity.

It is important to enable choices for parents as to how to combine their family responsibilities with their working lives by providing parental leave, child-care opportunities and, more generally, structures that enable the appropriate choices for the individuals concerned about their work–life–family balance. Employment laws and practices need to ensure that there is gender equity and equality in the workplace in terms of pay, job security and avoidance of all forms of gender discrimination, as well as protecting the rights and opportunities of pregnant women and of men and women regarding parental leave.

There is a need to combat widespread discrimination on the grounds of sexual orientation and gender identity and expression. Individuals have the right to make informed choices about their sexuality and partnership behaviours without negative stereotyping, hostility or violence. Governments were urged to introduce and implement laws, policies and programmes to protect rights in relation to sexual orientation, gender identity and expression in line with the Yogyakarta Principles.

The financial crisis has led to rising unemployment, which particularly affects the more vulnerable: those who are young, poor or disabled, and other marginalized groups. Long periods of youth unemployment have been shown to have lasting ‘scarring’ effects on outcomes in later life. Inclusive societies develop policies and programmes that ameliorate such inequalities, but vibrant economies are also essential.

Lastly, there was strong support for ensuring the availability of high-quality data that enables monitoring of inequalities and outcomes at a disaggregated level. Moreover, support was expressed for having longitudinal data for large, representative samples across the adult age range, such as the Generation and Gender Surveys, to enable such monitoring and to help in understanding the drivers of social inclusion and inequality.

In summary, a rights-based approach requires equity for all individuals in society, regardless of their attributes or characteristics. Discrimination in any form on the grounds of gender, sexuality, HIV status, pregnancy or partnership status, or occupation as a

sex worker is an unacceptable violation of human rights. More broadly, discrimination on the grounds of other attributes or group membership, such as race, ethnicity, religion, culture, class, age, disability, migrant status or other minority characteristics is a violation of human rights. Discrimination takes many forms ranging from violence through to more subtle mechanisms. This discrimination is often reinforced by structures in society, including religion, culture and family. Sustained commitment by governments, CSOs and individuals to achieving the legislative and cultural environments that establish and maintain equal rights for all is required.

Conclusion

There was perhaps a surprising degree of consistency in the discussions that took place during the meeting. There was virtual unanimity on most broad issues under each of the three themes. There was also very strong support for the continued implementation of the ICPD Programme of Action, with a further strong endorsement of the need to strengthen such commitments and to ensure they form a key part of the post-2015 agenda.

The primacy of individual rights and the need for governments to adapt to the consequences of reproductive choices for ageing societies was a key theme in the first session. The need for societies to invest in lifelong education and training of all individuals so as to enable empowerment and choice was also strongly endorsed.

Extending and reinforcing sexual and reproductive rights and health to enable all individuals to make informed choices about control over their own bodies and lives was seen as critical to achieving the Cairo agenda. There was strong endorsement of the ‘Bali Youth Forum Declaration’, the ‘UNECE Regional Youth Conference Call to Action’ and the High-Level Task Force for the ICPD’s ‘Policy Recommendations for the ICPD Beyond 2014: Sexual and Reproductive Health and Rights for All’. There were powerful calls to strengthen or move beyond the 1994 ICPD Programme of Action agenda, including, for example: zero tolerance of gender-based violence; enabling access to safe and legal abortion; and ensuring rights to choose sexual orientation and gender identity free from stigma or discrimination.

Principles of equity, equality and empowerment of all individuals regardless of any attributes or characteristics were strongly emphasized in the third

session. The need for societies to protect against discrimination on any such characteristic was also extensively endorsed. Such attributes included gender, age, race/ethnicity, culture, religion, class, health (especially disability or HIV status), economic or occupational status (extended to voluntary sex workers), migrant status or sexual orientation and gender identity.

The need for high-quality data covering diverse and large populations across the life course was emphasized in all sessions. Longitudinal data such as the Generation and Gender Programme, which covers large samples across the broad adult age range, are crucial for enhancing understanding and monitoring progress on the diverse groups and topics elaborated for intervention. Without good information we cannot assess progress.

More broadly, progress on these agendas requires strong endorsement and implementation by national governments, reinforced by CSOs.

Continued international cooperation and support from international organizations is essential in ensuring that development goals include the key concerns raised in this conference and in fostering their implementation. It is clear that there is a need to achieve more uniform commitment, both within the UNECE region and worldwide, to goals of: reducing inequalities and eliminating discrimination; achieving universal human rights, including sexual and reproductive rights; and educating and empowering all individuals to make their own informed choices.

The meeting conveyed a real sense of enthusiasm and commitment to achieving progress on the broad range of topics that were discussed. The international community needs to reinforce or grasp these agendas and work towards their increased implementation, especially in the context of the post-2015 development goals.