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Statement submitted by Planned Parenthood Federation of America, a non-governmental organization in consultative status with the Economic and Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

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* E/CN.9/2014/1.



Statement

Inclusion of universal access to sexual and reproductive health and rights in the International Conference on Population and Development process beyond 2014 and the post-2015 development agenda

The International Conference on Population and Development took place in Cairo in 1994 and was a landmark in approaching population and development from the perspective of human rights and improving sexual and reproductive health and rights across the world. A total of 179 countries pledged, among other things, to reduce maternal mortality, fight HIV/AIDS and improve people's access to family planning. Although none of the Millennium Development Goals explicitly mentions sexual and reproductive health and rights, elements are included under Goal No. 5 (maternal mortality) and Goal No. 6 (HIV/AIDS and other diseases).

Today, nearly 20 years later, the Programme of Action adopted at the International Conference is being reviewed. The coming two years are crucial to strengthen the Conference process beyond 2014 and to ensure inclusion of sexual and reproductive health and rights in the post-2015 development agenda. Despite progress in some areas, the past 20 years have shown that sexual and reproductive health and rights have to be tackled in their entirety, universally and in an integrated manner.

As a non-governmental organization working on sexual and reproductive health and rights in Africa, Asia and Europe, we advocate for the inclusion of universal access to sexual and reproductive health and rights in the International Conference on Population and Development process beyond 2014 and the post-2015 development agenda as an indispensable foundation for poverty reduction and sustainable development.

Universal access to sexual and reproductive health and rights includes access to information and services. Sexual and reproductive health and rights information refers to content made available for and delivered particularly to young people, women and marginalized groups in order to provide comprehensive and correct knowledge on sexual and reproductive health and rights and HIV, as well as to increase their capacity to gain access to services and meet their own information needs. Sexual and reproductive health services deal with prevention, diagnosis, treatment and management of sexual and reproductive health problems, both physical and mental; and information, support, counselling and health care for all people, including those who are not sexually active, young people, and unmarried and married people.

The above definition includes the following aspects:

(a) Comprehensive sexuality education covers a broad range of issues relating to both the physical and biological aspects of sexuality, as well as the emotional and social aspects. It recognizes and accepts all people as sexual beings and is concerned with more than just the prevention of disease or pregnancy. Comprehensive sexuality education programmes should be adapted to the age and stage of development of the target group; (b) Integration of sexual and reproductive health and rights in the health system is essential for achieving better access to those rights. Part of the necessary services are provided through the health system: ante- and postnatal care, skilled attendance at birth, emergency obstetric care, comprehensive abortion care, family planning services, and treatment and prevention of sexually transmitted infections. In order to improve access, particular attention should be paid to young people, women, unmarried couples, young people living with disability, the rural poor, the ageing population and marginalized groups;

(c) Youth-friendly services are those able to attract young people, respond to their needs and succeed in retaining them for continuing care. They should be comprehensive and relevant to adolescents' needs while ensuring confidentiality, respecting young people's evolving capacity, celebrating diversity, and adopting a sex-positive and rights-based approach to young people's sexual health and rights;

(d) Comprehensive abortion care should include treatment for unsafe and incomplete abortions, pre- and post-abortion counselling and care, and induced surgical and medical abortion care. National laws and policies should be adapted to end the public health problem caused by unsafe abortions by improving access to contraceptives, including for young people;

(e) Integration of sexual and reproductive health and rights with HIV programmes is important as poor sexual and reproductive health and rights outcomes and HIV infection share many root causes, including poor access to information and contraceptives, gender inequality, stigma and harmful cultural norms and practices. By investing in access to information and comprehensive sexual and reproductive health and rights services, HIV infections can be prevented and treated and the overall situation with respect to sexual and reproductive health and rights can be improved, including reducing the prevalence of sexually transmitted infections, unplanned pregnancies and maternal mortality rates.

Inadequate access to and unaffordability of contraception are key factors contributing to poor maternal health indicators. This is true especially among young people, young people living with disability, the rural poor and marginalized groups. By investing in the provision of family planning, especially long-term methods, unplanned pregnancies, maternal mortality and unsafe abortions can be reduced globally. The global population will also be manageable, hence spurring economic and social development.