

***Statement submitted by Action Canada for Population and Development, Amnesty International, Center for Reproductive Rights, Center for Women's Global Leadership, DAWN, Family Care International, Federation for Women and Family Planning, Human Rights Watch, International Alliance of Women, International Planned Parenthood Federation—Western Hemisphere Region, International Women's Rights Action Watch Asia Pacific (IWRAP Asia Pacific), Ipas, and Physicians for Human Rights, all civil society organizations with ECOSOC status.***

1. As civil society organizations concerned with women's health and human rights, we welcome the theme for the 42<sup>nd</sup> session of the Commission on Population and Development on "The contribution of the Programme of Action of the International Conference on Population and Development (ICPD) to the internationally agreed development goals, including the Millennium Development Goals."
2. For the past decade and a half, the ICPD Programme of Action has provided guiding principles for a global agenda on family planning, reproductive and sexual health, sustainable development, women's empowerment, and gender equality, as these issues relate to population and development policies. The principles set out in the Programme of Action, which are grounded in international human rights law, are highly relevant to the fulfillment of the commitments made through the United Nations Millennium Development Campaign, which sets out specific goals and indicators in many of the areas covered by the Programme of Action. As a first and general recommendation, the organizations submitting this statement therefore urge UN Member States to renew their focus on non-discrimination and autonomy as human rights. The conception and implementation of all population and development policies should be permeated by a concern for the guarantee of these rights.
3. This statement is specifically concerned with the elimination of preventable maternal mortality and morbidity. The organizations submitting this statement recommend detailed attention to the 15 Principles spelled out in the Programme of Action as relevant to the fulfillment of Millennium Development Goal 5 (MDG 5) on improving maternal health. In this connection, we call particular attention to principles 1, 3, 4, and 8, which reaffirm the interconnections between human dignity and rights; the need to eliminate all kinds of violence against women and to ensure women's ability to control their own fertility; the importance of guaranteeing universal access to reproductive health services; and the fact that lack of development may not be invoked to justify the abridgement of human rights. A human rights-centered approach is imperative to ensure effective, equitable, sustainable, empowering, participatory and adequately resourced programs and policies to reduce maternal mortality and morbidity. Human-rights violations underlie the magnitude and global distribution of preventable maternal morbidity and maternal mortality, which is estimated at half a million annual deaths worldwide.

4. Our experience and research tell us that several factors—beyond those linked to MDG 5 as formal indicators—have contributed to stagnating or deteriorating progress towards reduction of maternal mortality and morbidity. These factors include various forms of social exclusion, discrimination, inadequate human and budgetary resources for health, lack of access to high-quality sexual and reproductive health care and information, armed conflict, violence against women, a failure to adequately train health-care providers to provide safe abortions as allowed by law, and a high HIV burden. All of these factors are recognized in the Programme of Action and the Key actions for the further implementation of the Programme of Action of the International Conference on Population and Development, presented at the 1999 General Assembly review. They should be adequately addressed in the policies and programs aimed at fulfilling MDG 5, and should be highlighted in the outcome document of the Commission's 42<sup>nd</sup> session.
5. In this connection, we also urge UN Member States to reaffirm their commitment to achieving the MDG target on universal access to reproductive health, which includes, based on the concept of informed choice, the availability of accessible, affordable, appropriate, and high-quality reproductive health services, particularly in the context of primary health care; appropriate education and information on sexual and reproductive health, including family-planning; focused and effective prenatal care; maternal nutrition programs; control of infectious diseases; adequate delivery assistance that avoids excessive recourse to caesarean sections, episiotomy, administration of oxytocin, and other medical procedures, and provides for obstetric emergencies; referral services for pregnancy, childbirth and abortion complications; and post-natal care and family planning.
6. More specifically, we believe the Commission on Population and Development at this, the 15<sup>th</sup> Anniversary of the Programme of Action, and considering the special attention to accountability and human rights in the Programme, should include in the outcome for its 42<sup>nd</sup> session a commitment to the following key components:
  - a. A recognition that maternal mortality and morbidity is a global health emergency and a serious public health problem;
  - b. A recognition that systemic failure to prevent maternal deaths constitutes a failure to respect and protect women's right to life; a reiteration of the understanding that the causes of maternal mortality and morbidity also involve violations of other human rights, including the right to the highest attainable standard of physical and mental health and integrity as well as the right to equality and non-discrimination in access to basic health care; and a call to the Human Rights Council to discuss the obligations related to this essential human rights issue before the end of 2009;
  - c. An explicit recognition of the need to close the disparity between maternal mortality and morbidity rates in industrialized and developing countries, and also within countries, including through devoting the maximum available resources to

increase the investment to enlarge and improve human resources for health; fulfilling financial commitments on international cooperation, and greater resources; and committing to strengthen comprehensive primary health systems and basic health infrastructure, including allocations for monitoring, supervision, basic national health-system functions, accessibility and affordability of essential drugs, community monitoring and other necessary support functions;

- d. A reaffirmation of the interdependence between development and population policies, and of the importance of developing programs and policies to address the underlying determinants of health that are essential to prevent maternal mortality and morbidity, such as women's and girls' participation in health-related decision-making processes, information on sexual and reproductive health, including comprehensive sexuality education, literacy, stable livelihoods, nutrition, eradication of violence against women and girls, non-discrimination and gender equality, as well as the need to modify the social and cultural patterns of conduct of men and women with a view to the elimination of prejudices and customary and all other practices which are based on the idea of the inferiority of the superiority of either of the sexes or on stereotyped roles for men and women;
- e. An urgent call to all UN Member States to ensure the regular collection of reliable and timely data, disaggregated at least on the basis of age, race, ethnicity, socio-economic status and residence (urban/rural), to guide implementation and evaluation of national action plans and global strategies for addressing all causes of maternal mortality and morbidity; to use established indicators and benchmarks for reducing maternal mortality and morbidity; and to ensure reporting on in-country and ODA-based measures to achieve these benchmarks;
- f. An urgent call to all UN member States to guarantee the existence of accessible, transparent and effective monitoring and accountability mechanisms at the national and international level that could lead to a constant improvement of the existing policies and programs to reduce maternal mortality and morbidity;
- g. An urgent call to all UN member States to adopt and enact policies and legal frameworks to reduce incidence of unwanted pregnancies and unsafe abortion, as well as to provide safe and accessible comprehensive abortion services to the fullest extent of the law;
- h. An urgent call to the international community and to UN agencies to provide cooperation and assistance to Member States to support them in implementing effective and comprehensive programs and policies to combat all causes of maternal mortality and morbidity;

- i. A recognition that the full implementation of the Millennium Development Goals—and of MDG 5 in particular—requires a more directed and independent accountability and oversight effort at the international level; and
- j. A request to the Secretary-General that he present a report to the 43<sup>rd</sup> Commission on Population and Development with a detailed recommendation for such systematic, human rights based, accountability and oversight.

*( received from Hélène Sackstein January 19, 2009 /LP)*