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UN POPULATION FUND BACKGROUND GUIDE 2014

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NATIONAL MODEL UNITED NATIONS



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THE 2014 NATIONAL MODEL UNITED NATIONS

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Dear Delegates,

Welcome to the 2014 National Model United Nations in New York (NMUN•NY) Conference!

The staff for the United Nations Population Fund (UNFPA) are as follows: Directors, Dinah Douglas (Conference A) and Sarah Walter (Conference B) and Assistant Directors Aly El Salmy (Conference A) and Robert Cahill (Conference B). Dinah holds a MA in Political Communication from American University and a BA in Political Science from the University of Maryland, Baltimore County. She works in online communications for a women's non-profit in Washington, D.C. and joins the NMUN staff for the third time. Sarah will finish her MA in Political Science with a focus on International Relations and European Policy at the University of Potsdam in spring 2014. This is her fourth year at NMUN and her second time on staff. Aly has recently completed a BS in Mechanical Engineering, from the American University in Cairo. This is his fourth year at NMUN, and his first on staff. In 2012, Robert completed his BA in International Business, Marketing, and Management, with a minor in German, from the University of Montana. Since his graduation, Robert has worked for Xbox and Microsoft Bing Team. This year embarks Robert's sixth year at NMUN and second time on staff.

This year's topics under discussion for UNFPA are:

- I. Health Priorities Post 2015: Opportunities and Challenges for Improving Maternal Health
- II. Impact of Urbanization on the Implementation of the IPCD Program of Action
- III. Strengthening the International Response to New Trends in Migration

UNFPA plays a unique role within the United Nations system by addressing population and development issues. It was established to assist countries in using population data for policies and programs promoting health and equal opportunity. We hope to see this spirit encompassed in your position papers before the Conference as well as in the resolutions you will adopt in the end.

At NMUN•NY 2014, we are simulating the UNFPA Executive Board in terms of composition and size, however delegates are not limited to the strict mandate of the Board in terms of its role as a budgetary and administrative body. On the contrary, for the purposes of NMUN•NY 2014, and in line with the educational mission of the conference, the committee has the ability to make programmatic and policy decisions on issues and topics within the mandate of UNFPA in line with the overall function of the organization.

We hope you will find this Background Guide useful as it serves to introduce you to the topics for this committee. It is not meant to replace further research and we highly encourage you explore in-depth your countries' policies as well to further your knowledge on these topics. In preparation of the conference, each delegation will be submitting a [position paper](#). Please refer to the following pages for details regarding the position paper submission process. Please take note of the [NMUN policies](#) on the website and in the [Delegate Preparation Guide](#) regarding plagiarism, codes of conduct/dress code/sexual harassment, awards philosophy/evaluation method, etc. Adherence to these guidelines is mandatory.

If you have any questions, feel free to contact the substantive staff listed below or the Under-Secretaries-General for the Department for Human Rights & Humanitarian Affairs, Meg Martin (Conference A) and Juliane Bade (Conference B) via e-mail: usg.hr_ha@nmun.org.

We wish you all the best for your preparation for NMUN•NY and look forward to seeing you at the conference!

Sincerely,

Conference A
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NMUN•NY Position Paper Guidelines

Due 1 March 2014

Each committee topic should be addressed in a succinct policy statement representing the relevant views of your assigned country, Non-Governmental Organization (NGO), or expert role. You should identify and address international and regional conventions, treaties, declarations, resolutions, and programs of action that are relevant to the policy of your country or NGO. You should also include recommendations for action to be taken by your committee. A delegate's role as a Member State, Observer State, or NGO should affect the way a position paper is written. To understand these differences, please refer to the [Delegate Preparation Guide](#). It may also be helpful to view a [Sample Position Paper](#).

A position paper should be submitted for each assigned committee.

- The two page position paper should cover all the topics in the background guide, not a separate paper for each topic.
- Do not submit papers for committees not assigned to your country/NGO (see matrix for [Conf. A](#) or [Conf. B](#)).
- No more than two delegates can represent a single country/NGO in a committee. If you assign two delegates to represent a country/NGO on a committee, they submit one position paper jointly, not separate position papers from each individual.

Please pay careful attention to the following guidelines when drafting and submitting your position papers. Only those delegations that follow the guidelines and meet the submission deadline will be eligible for [position paper awards](#).

All papers must be typed and formatted according to the standards below:

- Length must not exceed two pages
- Margins must be set at 1 inch or 2.54 cm. for the whole paper
- Font must be Times New Roman sized between 10 pt. and 12 pt.
- Country/NGO name, school name, and committee name must be clearly labeled on the first page
- Agenda topics must be clearly labeled in separate sections
- National symbols (headers, flags, etc.) are deemed inappropriate for NMUN position papers

Please note that position papers must be comprised of entirely original writing. **The NMUN Conference will not tolerate plagiarism**, including copying from Committee Background Guides. Violation of this policy may result in dismissal from the conference. Although United Nations documentation is considered within the public domain, the conference does not allow the verbatim re-creation of these documents.

How to Submit Your Position Papers

Position papers need to be submitted by email in .pdf or .doc formats. As proof of submission, include yourself as an email recipient. Please use the committee name, your assignment, Conference A or B, and delegation/school name in both the email subject line and in the filename (example: GA1_Cuba_Conf A_State College).

1. Send one complete set of all position papers for each of your country/NGO assignments to the Deputy Secretary-General for the conference you are attending:

Conference A: positionpapers.nya@nmun.org

Conference B: positionpapers.nyb@nmun.org

2. Send a copy of your position paper for each assigned committee to the corresponding committee email address listed on the [Committee Background Guides page](#).

Your delegation may wish to submit a copy of their position papers to the permanent mission of the country/NGO headquarters along with an explanation of the conference. This is encouraged if requesting a [briefing](#).

Many, many papers will be read by the Secretariat. Your patience and cooperation in adhering to the above guidelines is greatly appreciated.

Abbreviations

CPD	Commission on Population and Development
CEB	United Nations System Chief Executive Board for Coordination
ECOSOC	Economic and Social Council
EmONC	Emergency obstetric and newborn care
GA	General Assembly
GDP	Gross domestic product
GMG	Global Migration Group
GPRHCS	Global Programme to Enhance Reproductive Health Commodity Security
ICCPR	International Convention on Civil and Political Rights
ICPD	International Conference on Population and Development
IOM	International Organization for Migration
IUD	Intrauterine device
MDG	Millennium Development Goals
MHTF	Maternal Health Thematic Fund
MMR	Maternal mortality rates
NGO	Non-Governmental Organization
NMUN	National Model United Nations
PoA	Programme of Action
SGBV	Sexual and Gender-based Violence
SRH	Sexual and reproductive health
STI	Sexually transmitted infections
UN	United Nations
UNCSD	United Nations Conference on Sustainable Development
UNDESA	United Nations Department of Economic and Social Affairs
UNDG	United Nations Development Group
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNITAR	United Nations Institute for Training and Research
WHO	World Health Organization

Committee History

"We must understand the role of human rights as empowering of individuals and communities. By protecting these rights, we can help prevent the many conflicts based on poverty, discrimination and exclusion (social, economic and political) that continue to plague humanity and destroy decades of development efforts. The vicious circle of human rights violations that lead to conflicts-which in turn lead to more violations-must be broken. I believe we can break it only by ensuring respect for all human rights."¹

Introduction

In July 1967, The United Nations Fund for Population Activities was founded as the trust fund to sponsor population programs.² In 1987, the Fund evolved into the United Nations Population Fund (UNFPA), reflecting its lead role in the area of population.³ UNFPA has since then been entrusted by the United Nations Development Programme (UNDP) in General Assembly resolution 48/162.⁴ Created as a trust fund and then established as a subsidiary, UNFPA has been a key player and presence regarding international population revolution.⁵ It focuses to address: population issues, development issues, reproductive health, and gender equality.⁶ In essence, UNFPA's mission is to achieve the principles of the Millennium Development Goals (MDGs).⁷ Since the development and creation of UNFPA, the coalition of Member States, countless committee sessions, and drafts of numerous resolutions have helped to further implement strategic plans to resolve the mandate.

At NMUN•NY 2014, we are simulating the **Executive Board** of UNFPA in terms of composition and size; however, delegates are not limited to the strict mandate of the Board, as a budgetary and administrative body, during the conference. On the contrary, for the purposes of NMUN•NY 2014, and in line with the educational mission of the conference, the committee has the ability to make programmatic and policy decisions on issues within the mandate of UNFPA in line with the overall function of the organization.

Mandate

The mission of UNFPA is to "deliver a world where every pregnancy is wanted, every birth is safe, and every young person's potential is fulfilled."⁸ In order to achieve this, UNFPA puts specific emphasis on three core areas, namely reproductive health, gender equality, and population and development strategies.⁹ The purpose of the Fund was set by the Economic and Social Council in resolution 1763 to: 1) build up knowledge and capacity to respond to global needs in population and family planning; 2) promote awareness of the social, economic and environmental implications of international population problems; 3) extend systematic and sustained assistance to developing nations in dealing with population problems; and 4) play a leading role in the UN projects.¹⁰ There are still over 220 million women worldwide that lack access to effective contraception in developed and developing countries and face discrimination, gender based violence, economic discrimination, reproductive health inequities, and harmful traditions.¹¹ UNFPA's goal is to enable universal access to sexual and reproductive health, accelerate the progress on the International Conference on Population and Development agenda, and improve maternal health (MDG 5).¹²

¹ UNFPA, *Quotes on Human Rights* [Website], 2013.

² UNFPA, *What does UNFPA stand for* [Website], 2013.

³ Sullivan, *Center for Global Development Working Group on UNFPA's Leadership Transition* [Website], 2010.

⁴ UNFPA, *UNFPA in the UN System* [Website], 2013.

⁵ Sullivan, *Center for Global Development Working Group on UNFPA's Leadership Transition* [Website], 2010.

⁶ UNFPA, *UNFPA in the UN System* [Website], 2013.

⁷ UNFPA, *What is UNFPA's involvement in the Millennium Development Goals* [Website], 2013.

⁸ UNFPA, *About UNFPA* [Website], 2013.

⁹ UN System Chief Executive Board Secretariat, *United Nations Population Fund* [Website], 2013.

¹⁰ UN Population Information Network (POPIN), *Background Document on the Population Programme of the UN* [Report], 1994.

¹¹ UNFPA, *About UNFPA* [Website], 2013.

¹² Ibid.

By taking the extra step in providing services to protect reproductive health, UNFPA endorses data mining to provide detailed summaries for planning appropriate relief.¹³ The 1994 International Conference on Population and Development (ICPD) had over 170 governments sign the ICPD Program promoting universal reproductive health services, gender equality, migration, and addressing environmental issues associated to population change.¹⁴ Former UNFPA Executive Director, Thoraya Ahmed Obaid was honored for her role in advancing UNFPA based on linking gender, universal values of human rights, and values of the human worth.¹⁵ Ms. Obaid commented, “We have continued to strengthen these partnerships as we strive to cooperate seamlessly to improve public health and development effectiveness;” as UNFPA behaves as the ideal body in terms of collaboration on diverse issues and participating in multinational conferences with a clear focus on health.¹⁶ The UNFPA strategic plan, 2008-2013 (DP/FPA/2013/3), the cumulative analysis of the UNFPA strategic plan, (DP/FPA/2011/3), and the midterm review of the UNFPA strategic plan, (DP/FPA/2011/11) are three descriptive and analytical UNFPA documents describing the current status quo and how UNFPA strategizes to achieve the mandate.¹⁷

Governance, Structure and Membership

The United Nations Population Fund was a trust fund entrusted to the United Nations Development Programme (UNDP) on 11 July 1967.¹⁸ Member States began donating to the trust fund allowing for the program to begin its activities in 1969.¹⁹ The Fund is not supported by the UN regular budget, but by voluntary contributions of 180 governments.²⁰ In 2011, contributions to UNFPA totaled \$929 million, representing an increase of \$52 million from 2010.²¹ In 1972 UNFPA was placed under the authority of the General Assembly, while the UNDP Governing Council was named as the governing body subject to the Economic and Social Council’s overall policy.²² The President of UNDP/UNFPA Executive Board is elected by its members and sits 36 countries from around the globe.²³ UNFPA is one of four founding members of the UN Development Group, established by the Secretary General to improve the coherence of the UN Development at country level, and is a member of the UN Chief Executives Board for Coordination (CEB).²⁴

Powers and Functions

To be most effective, UNFPA contributes to the debate of around 150 agenda items of the General Assembly, participates in intergovernmental commissions of ECOSOC, works closely together with entities such as the United Nations Permanent Forum on Indigenous Issues and the Human Rights Council, and stays informed on the difficulties countries face in improving the lives of their societies.²⁵ UNFPA works in close collaboration with many development and humanitarian agencies such as the World Health Organization (WHO), the United Nations Children’s Fund (UNICEF), UNDP, and The Joint United Nations Programme on HIV and AIDS (UNAIDS).²⁶

The Executive Board may establish working groups if deemed necessary, and the working groups will define their functions and refer to them for any questions for study and report.²⁷ UNFPA Executive Board provides the overall guidance to UNFPA.²⁸ The functions of the Executive Board are to: (a) implement the policies formulated by the General Assembly; (b) receive information from and guide the head of each program; (c) ensure the activities and

¹³ UN System Chief Executive Board Secretariat, *United Nations Population Fund* [Website], 2013.

¹⁴ UNFPA, *ICPD – International Conference on Population and Development* [Website], 2013.

¹⁵ UNFPA, *UNFPA MDGS* [Website], 2013.

¹⁶ UNFPA, *Statement of Thoraya Ahmed Obaid UNFPA Executive Director* [Website], 2013.

¹⁷ UNFPA, *New Strategic Direction* [Website], 2013.

¹⁸ UNFPA, *UNFPA - UNFPA in the UN System* [Website], 2013.

¹⁹ UN General Assembly, *United Nations Fund for Population Activities (A/RES/2815)* [Resolution], 1971.

²⁰ UNFPA, *UNFPA in the UN System* [Website], 2013.

²¹ UNFPA, *Report to the Economic and Social Council (E/2013/5)*, 2012, p. 3.

²² UNFPA, *UNFPA in the UN System* [Website], 2013.

²³ UNDP, *Information note about the Executive Board of UNDP and UNFPA* [Website], 2013.

²⁴ UNFPA, *UNFPA in the UN System* [Website], 2013.

²⁵ *Ibid.*

²⁶ UNFPA, *UNFPA - UNFPA in the UN System* [Website], 2013.

²⁷ UNFPA, *Rules of Procedure of the Executive Board of the United Nations Development Programme, of the United Nations Population Fund and of the United Nations Office for Project Services (DP/2011/18)*, 2011, p. 10.

²⁸ *Ibid.*, p. 14.

operational strategies of each fund remain consistent with overall policy; (d) monitor the performance of the program; (e) approve projects; (f) decide on administrative and financial budgets; (g) recommend new initiatives; (h) encourage and examine new program initiatives; and (i) submit annual reports to the Council at its substantive session.²⁹

Recent Sessions

A number of recent United Nations Population Fund projects correlate to the mandate. In the 2012 session, UNFPA focused on the preparation of 7 billion individuals on the globe, expand access to maternal and newborn health, and strengthen HIV prevention, gender equality, urbanization, and migration.³⁰ For example, UNFPA understands 2,400 young individuals are infected with HIV every day, and because the world's youth lack knowledge on HIV prevention, the United Nations Population Fund has supported networks such as YouthForce.³¹ YouthForce combines youth organizations to collaborate and keep youth issues at the forefront of the International AIDS agenda.³² In 2012, UNDP and UNFPA have continued to strengthen joint assessments, analyses, and design programs, which have built resilience to better prepare for and recover from social, economic, and political shocks.³³ Compared to the previous strategic plan with three goals: increasing gender equality, universal access to reproductive health, universal access to HIV medication, and advanced women gender equality, the 2013 revised version has one goal of achieving universal access to sexual reproductive health with seven outcomes.³⁴ In 2012, on behalf of the UN, UNFPA established a secretariat to lead a global review of progress towards achieving the ICPD *Programme of Action*.³⁵ Furthermore, UNFPA developed a business plan with seven key action points: focused programming, field support and focus, communication, staff skill-building and empowerment, streamlining of management and operations, breaking organizational silos, and holding senior management accountable.³⁶ The Fund has developed the 2014-2017 strategic plan to: strengthen medium-term to long-term strategic planning on the country level, better define operational implications to target the needs of women, improve staff and organizational capacity in maternal health, provide better evaluation at the country level, and increase the focus on the generation of knowledge and learning.³⁷

Conclusion

One-quarter of the world's population is between the ages of 10-24 years old, allowing UNFPA to promote and protect the rights of this generation.³⁸ The United Nations Population Fund plays a vital role in addressing population issues, further attaining the MDGs while it stresses the correlation between gender, culture, and human rights.³⁹ Member States and international organizations have to recognize the struggle and difficult decision to balance national sovereignty and moral ethics.⁴⁰ The international community will continue to grow, and there are many humanitarian rights and other issues UNFPA has to deal with, as broad as policy reforms, or field level programs monitoring.⁴¹ Member States and international organizations must continuously coordinate, implement, and structure humanitarian assistance in order to fulfill the mandate and achieve the goals set by UNFPA.

²⁹ UN General Assembly, *Further Measures for the Restructuring and Revitalizing of the United Nations in the Economic, Social, and Related Fields (A/48/162)* [Resolution], 1994.

³⁰ UNFPA, *Delivering Results in a World of 7 Billion* [Report], 2012.

³¹ *Ibid.*, 2012.

³² UNFPA, *Promises to Keep* [Report], 2012.

³³ UNFPA, *Report to the Economic and Social Council (E/2013/5)* [Website], 2013.

³⁴ UNFPA, *Cumulative Analysis of Progress in Implementation of the UNFPA Strategic Plan 2008-2013, (DP/FPA/2013/3)*, 2013, p. 6.

³⁵ UNFPA, *Promises to Keep* [Website], 2013.

³⁶ UNFPA, *UNFPA - New Strategic Direction* [Website], 2013.

³⁷ UNDP, *Decisions adopted by the Executive Board at its first regular session 2013 (DP/2013/10)*, 2013, p. 4.

³⁸ UNFPA, *About UNFPA* [Website], 2013.

³⁹ UNFPA, *The Foundation for UNFPA's Work* [Website], 2013.

⁴⁰ UNFPA, *Summary of the ICPD Programme of Action* [Website], 2013.

⁴¹ Sadik, *Making a Difference: Twenty-five Years of UNFPA Experience* [Website], 2013.

Annotated Bibliography

Robinson, R. (October 2010). *Center for Global Development Working Group on UNFPA's Leadership Transition*. Retrieved 1 September 2013 from: <http://www.cgdev.org/doc/UNFPA-in-Context.pdf>

This background paper articulates the history of UNFPA extremely well, and ties UNFPA's activities over the course of 50 years. Furthermore, the paper gives a good overview of the history of population movement. The source highlights how successful the Fund has been and emphasizes the challenges that still remain. The timeline at the end will be an excellent help for delegates to get a better orientation.

United Nations Population Fund. (2012). *Delivering Results in a World of 7 Billion* [Report]. Retrieved 30 June 2013 from:

www.unfpa.org/webdav/site/global/shared/documents/publications/2012/16434%20UNFPA%20AR_FINAL_Ev11.pdf

This report provides updated information from the Fund. It tackles the general overview of the program, the mission and mandate of the United Nations Population Fund, and recognizes the struggles in the future such as improving maternal health, strengthening HIV prevention or increasing young people's access to services. The report clarifies the topics that require to be addressed by the international community rather than by single Member States. It also points out the key players in the international community that are experiencing and managing urban modifications

United Nations Population Fund. (2012). *Promises to Keep* [Report]. Retrieved 1 July 2013 from:

www.unfpa.org/webdav/site/global/shared/documents/publications/2013/AR%202012%20EN-Final.pdf

This document provided by UNFPA is the recent updated annual report. It is a great document for delegates in order to receive a better understanding of the general work of UNFPA and to get an overview of the recent initiatives. It provides facts, comments from delegations, and graphs on various specific topics such as maternal health, gender equality or harnessing the power of data. Furthermore, it offers information on the progress in different regions of the world. It is a great way to look at the focus of the United Nations Population Fund and its work towards achieving the Millennium Developmental Goals.

United Nations Population Fund. (2013). *UNFPA - New Strategic Direction* [Report]. Retrieved 1 July 2013 from:

<http://www.unfpa.org/public/about/pid/4631>

The UNFPA Strategic Plan 2014-2017 has three informational notes that address the current and potential challenges in the future for Member States. It also gives the reader a better understanding and direction of UNFPA. The 2014-2017 plan addresses the unfinished agenda in Cairo, but particularly focuses on reproductive health and reproductive rights. The document may set the foundation needed for delegates to build better strategies and get in the appropriate mindset in terms of communication.

United Nations Population Fund. (2013). *Master Plans for Development* [Website]. Retrieved 30 June 2013 from:

<https://www.unfpa.org/public/home/sitemap/icpd/MDGs>

The website further emphasizes the reason why Member States should commit strategies for women, as women and children are the solutions to developmental struggles. The link has great resources within the page to discover and read what the UN and UNFPA have developed. The website articulates why the Millennium Development Goals are important to UNFPA. The website also edifies organizations, companies, celebrities, and provides related publications for delegates to research.

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I. Health Priorities Post-2015: Opportunities and Challenges for Improving Maternal Health

“As we’ve seen, the mere fact that women and girls can drive development isn’t enough. What is needed is a system designed to put them in the driver’s seat.”⁴²

Introduction

It is impossible to deny that maternal health – fertility, reproductive rights, family planning, contraceptives, midwifery, ante- and post-natal care – are inextricably linked to the health of the global future.⁴³ Mothers are giving birth to the world’s prospects for a safe, equal, and peaceful planet. While this is a simple concept, it has proven far too easy for many States to overlook the value of providing child bearers easy access to maternal health care, and especially *good* maternal health care.⁴⁴

An essential tenet of UNFPA’s Mission Statement is: “. . .to ensure that every pregnancy is wanted, every birth is safe, every young person is free of HIV/AIDS, and every girl and woman is treated with dignity and respect.”⁴⁵ The international community recognized the importance of maternal health when developing the eight Millennium Development Goals (MDGs), naming Goal 5 “Improve Maternal Health.”⁴⁶ The 2013 evaluation of MDG 5 indicates that maternal mortality has fallen by nearly half (47%) since 1990, which is far short of the goal of a three-quarters reduction.⁴⁷ The other pillar of MDG 5, universal access to reproductive health, also falls short of the ambitious goal of improving maternal health in terms of antenatal care, contraceptive use and access, and family planning services (though figures vary regionally).⁴⁸ From a purely statistical standpoint, there is no doubt that the spotlight of the MDGs on maternal health care has been a boon to maternal health. With the 2015 MDG deadline looming, UNFPA must ask a tougher question: Will maternal health continue to receive its due attention after the 2015 deadline has passed? To go further: How can maternal health become central to global health and development policy post-2015?

International and Regional Framework

As the primary body concerned with population activities in the UN system, UNFPA provides support for efforts to improve maternal health around the world in partnership with other UN agencies, NGOs, local communities, foundations, and governments.⁴⁹ The 1994 International Conference on Population and Development in Cairo, Egypt, resulted in a Programme of Action (PoA) that guides the work of the UNFPA and includes Reproductive Rights and Reproductive Health as a major tenet.⁵⁰ The objectives of this prong of the PoA seek a world with comprehensive family planning and reproductive health care services, women’s access to information and education about fertility to aid in their family planning decision making, and meeting reproductive health needs “in ways sensitive to the diversity of circumstances to local communities.”⁵¹ The PoA is periodically reviewed and informs the mandate and work of the UNFPA and therefore the efforts of the organizations that support the efforts of the UNFPA.⁵²

The Global Programme to Enhance Reproductive Health Commodity Security (GPRHCS) is a UNFPA initiative launched in 2007 that works with 46 governments to ensure women’s access to all manner of sexual and reproductive health supplies which in turn positively affects the quality of maternal health.⁵³ Through the GPRHCS

⁴² Gates, *Bridging the Gender Gap*, 2013.

⁴³ World Federation of United Nations Associations, *2015 and Beyond: Perspectives on Global Development*, 2013, p. 22.

⁴⁴ *Ibid.*, p. 22-23.

⁴⁵ UNFPA, *Our Mission* [Website].

⁴⁶ UN Department of Economic and Social Affairs, *The Millennium Development Goals Report 2013*, 2013.

⁴⁷ *Ibid.*

⁴⁸ *Ibid.*

⁴⁹ UNFPA, *Our Mission* [Website].

⁵⁰ UNFPA, *The Programme of Action of the International Conference on Population and Development* [Report], 1994, p. 45.

⁵¹ *Ibid.*, p. 47

⁵² UNFPA, *Our Mission* [Website].

⁵³ UNFPA, *Strategic Approaches* [Website], 2013.

partnerships, local governments have access to reports with evidence of the importance of protecting maternal health through access to family planning and contraceptives, for instance, and therefore advocates have a stronger voice on a local level.⁵⁴ UNFPA, through its initiatives, also raises funds for local organizations seeking reproductive health services and contraceptive supplies.⁵⁵ Additionally, UNFPA supports the Maternal Health Thematic Fund (MHTF) that also works in regional offices to provide rapid funding where maternal health is especially imperiled, primarily through provision of emergency obstetric and newborn care (EmONC).⁵⁶ It provides support to at least 30 countries and in 2009 incorporated the work of The Campaign to End Fistula and the International Confederation of Midwives, Midwifery Programme.⁵⁷ Evaluations of the MHTF have shown that its focus areas, geographically and monetarily, have been successful so far, and will become more focused with further research into areas where maternal mortality is high and strategic long-term planning of its distribution of funds and efforts.⁵⁸

The success of international and regional maternal health efforts is hampered, however, by non-uniform logging of birth and death records around the world.⁵⁹ A World Health Organization, United Nations Children's Fund, and UNFPA report indicated that one third of countries have a complete system for registering causes of death; in order to better estimate the causes of maternal mortality and look ahead post-2015 for solutions to problems in global maternal health, these discrepancies must be addressed.⁶⁰

Role of the United Nations System

Millennium Development Goals have changed the development agenda entirely by successfully framing the campaign against poverty as one that has measurable results (goals) and can more easily keep nations accountable for progress (or lack thereof).⁶¹ The UN system has begun work to consider how to maintain the momentum the Millennium Campaign has brought to international development; researchers have asserted that “post-2015 a more explicit and shared ownership of both South and North in any new deal is essential as is attention to a changed world compared with that of the late 1990s.”⁶² Before exploring the health priorities of the post-2015 world, it is useful to examine how maternal health (MDG 5) has changed globally as a result of the Millennium Development Goals push.

Overview of Progress on Millennium Development Goal 5

To achieve the goal of reducing the maternal mortality rate by three-quarters by the ultimate goal of 2015, the international community, particularly through the work of the UN and UNFPA, must intensify funding for maternal health initiatives and push for political support for women's equal treatment and initiatives to protect mothers and children on the State level.⁶³ Additionally, there is a regional disparity that must be addressed. The 2013 report on MDG progress shows that 53% of rural births were supervised by maternal health professionals while 84% of urban births were.⁶⁴ While progress for most MDGs has been quite good (1 and 7 are likely to be met by 2015, 4 and 6 are seeing steady progress, among the others), MDG 5 has seen the slowest progress.⁶⁵ Strikingly, just 30% of countries are on track to meet the goal; the goal is 57% of the way there, but not on track overall to be met by 2015.⁶⁶

Fortunately, each global region has made progress on MDG 5, notably with Eastern Asia reducing maternal mortality by 69%, Northern Africa by 66%, and Southern Asia by 64%.⁶⁷ The three-quarters reduction target remains elusive, however, and MDG 5 is still not on target to be met.⁶⁸ This provides a great challenge for post-

⁵⁴ UNFPA, *Strategic Approaches* [Website], 2013.

⁵⁵ Ibid.

⁵⁶ UNFPA, *The Maternal Health Thematic Fund Contribution to UNFPA Support to Maternal Health*, 2012, p. viii.

⁵⁷ Ibid.

⁵⁸ Ibid., p. xi.

⁵⁹ WHO, UNICEF, UNFPA, & The World Bank, *Trends in Maternal Mortality: 1990 to 2010*, 2012, p. 1.

⁶⁰ Ibid.

⁶¹ Gates, *Bridging the Gender Gap*, 2013.

⁶² Sumner & Tiwari, *Global Poverty Reduction to 2015 and Beyond: What Has Been the Impact of the MDGs and What are the Options for a Post-2015 Global Framework?*, 2010, p. 348.

⁶³ UN Department of Economic and Social Affairs, *The Millennium Development Goals Report 2013*, 2013.

⁶⁴ Ibid.

⁶⁵ Fukuda-Parr, *Should Global Goal Setting Continue, and How, in the Post-2015 Era?*, 2012, p. 10.

⁶⁶ Ibid., p. 8.

⁶⁷ UN Department of Economic and Social Affairs, *The Millennium Development Goals Report 2013*, 2013, p. 29.

⁶⁸ Ibid.

2015. In order to further reduce maternal mortality, the 2013 UN Millennium Development Goals Report insists on “accelerated interventions, including improved access to emergency obstetric care, assistance from skilled health personnel at delivery and the provision of antiretroviral therapy to all pregnant women who need it.”⁶⁹

Blame for why MDG 5 progress lags behind all the other goals has been assigned to two primary factors: the global economic crisis of 2008 and an increase in political unrest, particularly in the Middle East.⁷⁰ Both make it difficult for governments to provide additional aid to training medical professionals or initiatives that improve access to contraceptives or antenatal screening due to instability of funding and/or consistent provision of services.⁷¹ Maternal mortality accounts for the largest public health disparity between developed and developing states.⁷² Additionally, a report by the non-governmental organization (NGO) Save the Children indicates that of the 10 lowest-ranked nations for maternal health standards, nine are currently seized by armed conflict, or have been very recently.⁷³

Universal Access to Sexual and Reproductive Health Care

The goal of universal access to sexual and reproductive health (SRH) care is an overarching theme for the post-2015 agenda.⁷⁴ Specifically, improving access to care through midwifery has been identified as crucial to bettering access to maternal health care, especially in developing nations.⁷⁵ Midwives work with women in homes as well as in clinical and traditional health care settings.⁷⁶ They act as a first line of maternal care and can attend routine births or recognize threatening conditions and alert doctors to problems or complications with mother or baby.⁷⁷ A majority of maternal and newborn deaths that occur each year are in low-income regions where there is limited access to a birth attendant, midwife, or health professional.⁷⁸ Perhaps unsurprisingly, the regions with the worst rates of maternal mortality also report the lowest level of having skilled attendants present for births.⁷⁹ Southern Asia and sub-Saharan Africa were found to have such trained attendants 50% of the time while in Eastern and Central Asia, this rate was 100% and 97%, respectively.⁸⁰ Rural women in general face disadvantages in getting proper reproductive care when compared with urban women; 53% in rural areas had skilled birth attendants at delivery while 84% of urban women did.⁸¹ This points to a need for particular attention to regional advantages and disadvantages on this topic.⁸²

Adequate access to antenatal care has been identified by the World Health Organization (WHO) as a minimum of four health care visits, which can identify possible complications or infections (including HIV) as well as provide vaccinations for the expectant mother.⁸³ Early action or preventative action on these fronts as well with regard to malaria in regions where it is widespread can help the medical provider foresee health complications for mother and baby down the line as well as mitigate problems that have been identified.⁸⁴ Of course, data monitoring and collection is central to the work of UNFPA, so ability to monitor the care provided must be considered moving forward on providing access to SRH.⁸⁵

⁶⁹ UN Department of Economic and Social Affairs, *The Millennium Development Goals Report 2013*, 2013, p. 29.

⁷⁰ ECA, & ECLAC, et. al., *A Regional Perspective on the Post-2015 United Nations Development Agenda (E/ESCWA/OES/2013/2)* [Report], 2013.

⁷¹ Ibid.

⁷² Amisi, & Austin, et. al., *Use of Facility Assessment Data to Improve Reproductive Health Service Delivery in the Democratic Republic of the Congo*, 2009, p.2.

⁷³ Save the Children, *2009 Mother's Index*, cited in Casey, Mitchell, Amisi, Haliza, Aveledi, Kalenga & Austin, *Use of Facility Assessment Data to Improve Reproductive Health Service Delivery in the Democratic Republic of the Congo*, 2009, p.2.

⁷⁴ World Federation of United Nations Associations, *2015 and Beyond: Perspectives on Global Development*. 2013, p. 22-23.

⁷⁵ UNFPA, *The State of the World's Midwifery Report: Delivering Health, Saving Lives*, 2011, p. iii.

⁷⁶ Ibid., p. 1.

⁷⁷ Ibid., p. 1.

⁷⁸ Ibid., p. iii.

⁷⁹ UNFPA, *The State of the World's Midwifery Report: Delivering Health, Saving Lives*, 2011, p. iii.

⁸⁰ UN Department of Economic and Social Affairs, *The Millennium Development Goals Report 2013*, 2013, p. 29.

⁸¹ Ibid., p. 29

⁸² Ibid., p. 29

⁸³ Ibid., p. 30

⁸⁴ Ibid., p. 30

⁸⁵ The World We Want, *The Future UNFPA Wants for All: Keys for the Post-2015 Development Agenda*, 2012, p. 5.

Before any concerns arise that such provision of care would be cost prohibitive, note that World Bank studies show that a \$4.10 *per person* investment in reproductive health care has the potential to preempt 8% of the cost of *global* disease.⁸⁶ Additionally, the World Bank finds that another 2% of the cost of global disease could be avoided with an extra \$1.70 per person investment in HIV/AIDS prevention.⁸⁷ These are convincing figures in the fight for universal SRH care access. Ultimately, the most convincing figure should be the amount of lives universal access to SRH could spare. Maternal deaths could be reduced by as much as two-thirds with investments in the developing world that bridge the gap of unmet family planning need and satisfactory maternal and newborn care.⁸⁸ Such investments are projected to be able to reduce unsafe abortions from 20 million to 5.5 million and the logical link between maternal and newborn healthcare is reinforced with the projection that newborn deaths would be reduced by more than half as well (3.2 million down to 1.5 million).⁸⁹ The monetary savings provide an important argument in addition to the humanistic aspect of the discourse on improving global maternal health through universal access to SRH care.

Addressing Cultural and Regional Differences in Family Planning Policies

Maternal health policies and programs that are safe and effective for women allow them the options to plan when, if, and how often they may have children. Balancing this with the blend of social and political cultures around the world is always a challenge, but should never be a deterrent to striving for family planning and other SRH services for everyone.⁹⁰ Not addressing preventative measures for sexually transmitted infections (STIs) or unwanted pregnancy stunts the dialog on improving access to actual treatment for these things.⁹¹ This helps explain how development assistance for contraception rests at \$400 million per year, which is 50% lower than levels in 1995.⁹²

Culturally Sensitive Perspectives on Family Planning

Bearing in mind the cultural sensitivity of discussions involving family planning, the issue of unmet need for family planning and contraceptives must not go unaddressed in the international conversation.⁹³ Globally, 140 million women who are married or committed report wanting to wait to have or not have children at all, but do not use contraception due to lack of, or impediments to, access.⁹⁴ The 2013 *UN Millennium Development Goals Report* projects that, by 2015, family planning demand just among married women will grow to more than 900 million, due to population growth.⁹⁵ Both leading up to 2015 and after, it is crucial to address ways to keep up with this demand and to consider more effective, accessible, or updated methods of contraception.⁹⁶ Because of the contentious nature of family planning services, contraceptives, and abortions, these central pillars to safe and effective SRH care are overlooked or their initiatives weakened.⁹⁷ Glasier and Gulmezoglu point out:

Politicians, religious leaders, and bureaucrats have to decide that women's lives and rights are worthwhile and not challenging to their authority. [...] Like it or not, sexuality is an essential part of human behavior and it is difficult to talk about, especially for politicians. It is much less contentious to promote abstinence and faithfulness than sex education and services for adolescents, condoms for gay men, and access to safe legal abortion – but these are what is needed.⁹⁸

⁸⁶ 7 Billion Actions, *The World at Seven Billion: Top Issues – Fact Sheets*, 2011, p. 12.

⁸⁷ Ibid.

⁸⁸ Ibid.

⁸⁹ Ibid.

⁹⁰ UNFPA, *The State of the World Population 2012*, 2012, p. 1.

⁹¹ Glasier, & Gulmezoglu, *Putting Sexual and Reproductive Health on the Agenda*, 2006.

⁹² 7 Billion Actions, *The World at Seven Billion: Top Issues – Fact Sheets*, 2011, p. 11.

⁹³ Economic Commission for Europe, et. al, *A Regional Perspective on the Post-2015 United Nations Development Agenda (E/ESCWA/OES/2013/2)* [Report], 2013, p. 17.

⁹⁴ UN Department of Economic and Social Affairs, *The Millennium Development Goals Report 2013*, 2013, p. 28.

⁹⁵ Ibid., p. 32

⁹⁶ The World We Want, *The Future UNFPA Wants for All: Keys for the Post-2015 Development Agenda*, 2012, p. 1.

⁹⁷ Glasier & Gulmezoglu, *Putting Sexual and Reproductive Health on the Agenda*, 2006.

⁹⁸ Ibid., p. 1550.

Essentially, just because the topic of family planning and contraceptive use can be sensitive because of cultural and political behaviors, it does not mean it can be avoided in discussions on the topic of maternal health; doing so would put limits on progress and productivity on an already difficult subject.⁹⁹

Regional Differences in Use of and Access to Contraceptives:

There are geographical and regional differences in the most popular methods of contraception. In developing regions, half of all contraceptive use is accounted for in female sterilization and the intrauterine device (IUD).¹⁰⁰ Additionally, female sterilization is more prevalent in South Asia, East Africa and South Africa, injectable birth control is commonly utilized.¹⁰¹ Unintended and closely spaced pregnancies as well as unsafe abortions can be avoided through effective access to and use of contraceptives.¹⁰²

By identifying the most common and/or accessible forms of birth control in different regions, it is easier to implement initiatives allowing for better access.¹⁰³ While the benefits to contraceptives may be obvious, approaching contraception from a perspective of preventing problematic pregnancies, not pregnancies in general (though it has been established that a woman's ability to choose when, how, and if to be pregnant is essential), is helpful.¹⁰⁴ Child (before the age of 18) and forced marriages often result in childbearing that comes earlier than a girl's body can handle, which means pregnancies and deliveries are dangerous.¹⁰⁵

Although the rate of adolescent pregnancies has decreased, still more than 15 million of 135 million live births globally are among 15- to 19-year-olds.¹⁰⁶ Child marriage is still common in sub-Saharan Africa, where the birth rate among adolescent girls is the highest, at 118 births per 1,000 girls aged 15 to 19.¹⁰⁷ The adolescent birth rate is also high in Latin America and the Caribbean but is, as of recently, on the decline.¹⁰⁸ Regional differences in child marriages and adolescent birth rate aside, girls in these situations face more difficulty in accessing SRH care than adult women.¹⁰⁹ Clearly, there are impediments to providing greater access to family planning services and such a debate will require sensitivity and nuance. Yet the facts speak for themselves. There are 215 million women in developing countries who need access to effective family planning services but do not have it.¹¹⁰

Maternal Health in Conflict and Post-Conflict or Emergency Zones

Reports on the post-2015 agenda so far focus on the stagnation of progress on MDG 5, caused by uncertainty in conflict or political transition. It is imperative to explore safe childbearing and maternal health care in times of crisis or emergency.¹¹¹ Pregnancy and birth do not stop for manmade conflict or environmental disasters even though both provide precarious conditions for any person, let alone a soon-to-be or nursing mother. The emphasis on conflict and emergency protection of maternal health is necessary to grasp the reasons for stagnation on this target. The post-2015 agenda should better emphasize mitigating the impact of human insecurity.¹¹² Conflict and crises over territory, fuel, and food have continued to plague the world yet the international political agenda overlooks how to lessen such instability and keep it from creating a ripple effect for surrounding areas.¹¹³

⁹⁹ Ibid., p. 1551.

¹⁰⁰ UN Department of Economic and Social Affairs, *The Millennium Development Goals Report 2013*, 2013, p. 31.

¹⁰¹ Ibid., p. 31.

¹⁰² Ibid., p. 31.

¹⁰³ Economic Commission for Europe, et. al, *A Regional Perspective on the Post-2015 United Nations Development Agenda (E/ESCWA/OES/2013/2)* [Report], 2013, p. 100.

¹⁰⁴ Glasier & Gulmezoglu, *Putting Sexual and Reproductive Health on the Agenda*, 2006, p. 1550.

¹⁰⁵ UN Department of Economic and Social Affairs, *The Millennium Development Goals Report 2013*, 2013, p. 33.

¹⁰⁶ Ibid.

¹⁰⁷ Ibid.

¹⁰⁸ Ibid.

¹⁰⁹ Ibid.

¹¹⁰ 7 Billion Actions, *The World at Seven Billion: Top Issues – Fact Sheets*, 2011, p. 11.

¹¹¹ UN Department of Economic and Social Affairs, *The Millennium Development Goals Report 2013*, 2013, p. 33.

¹¹² Fukuda-Parr, *Should Global Goal Setting Continue, and How, in the Post-2015 Era?*, 2012, p. 19.

¹¹³ Ibid.

Access to Sexual and Reproductive Health Care in Conflict Zones

Refugees of conflict- or emergency-torn countries - are exceptionally vulnerable in all aspects, but this does not constitute a reason to put sexual and reproductive care aside while tending to other problems.¹¹⁴ Instead, SRH care should be provided in tandem with provision of emergency shelter, food, and medicine.¹¹⁵ Not only does this service the women who come to be refugees while pregnant or as new mothers, but also women who are in danger of sexual and gender-based violence based on their life circumstances.¹¹⁶ In a review of the reproductive health of women affected by war, author McGinn points out “Conditions of refugee life are particularly conducive to sexual violence, both in the early stages of a complex emergency, when rape is used by armies as a weapon of war, and later in the stable phase, when violence perpetrated by intimate partners or acquaintances may become more prevalent.”¹¹⁷ While ensuring quality access to contraceptives and maternal health care is essential anywhere, it can be too easy to focus on the settled, more predictable environments, when refugee women have as much, or greater, need for such attention.¹¹⁸

The Role of Sexual and Gender-based Violence (SGBV)

Women who have been physically or sexually abused experience an increased risk for unwanted pregnancy, STIs, and unhealthy or unsafe pregnancies.¹¹⁹ Violence of this nature can be defined to include the following acts, all directed toward women and girls specifically because of their gender: domestic abuse; “sexual assault, dowry-related murder, marital rape, selective malnourishment of female children, forced prostitution, female genital mutilation, and sexual abuse of female children;” verbal or physical force; humiliation or “deprivation of liberty ... that perpetuates female subordination.”¹²⁰ The unwanted or unsafe pregnancies and the threatening environment that situations or locations where SGBV is rampant provide is a direct threat to maternal health and must be considered as a public health priority in the post-2015 agenda.

Many factors can contribute to the perpetuation of SGBV, which broadly includes personal and sociocultural reasons for subjugating women.¹²¹ One shocking statistic illustrates that SGBV disables or takes the lives of as many women aged 15 to 44 as cancer.¹²² Coupled with a rate of 70% of women who experience violence in their lifetimes, it is clear this problem is inexcusably prevalent and unavoidable in the post-2015 health agenda.¹²³ Health care providers can play a crucial role in identifying threatened and/or abused women when properly trained to see the signs and empower the affected woman.¹²⁴ The role of the medical provider is intimate yet safe, an environment an abused woman likely does not have elsewhere, so such professionals can be a point of trust for women to seek support and even information about legal recourse.¹²⁵

Engaging the Next Generation to Prevent Sexual and Gender-based Violence

Incorporating a youth perspective for engagement in the post-2015 maternal health agenda will be necessary, as this segment of the population is rapidly growing – and no change can be sustainable without buy-in from those who will be charged with continuing to improve conditions for mothers around the world. Indeed, “stereotyping of gender roles and gender based discrimination begins in childhood, so efforts to support gender equality must start there, by addressing the roles of girls and boys and men and women in the household.”¹²⁶ Empowering women with education allows them to take charge in decision-making and resist or fight the system of abuse.¹²⁷ Educated women are able to recognize the problem with domestic abuse and societal discrimination and are better equipped to challenge the

¹¹⁴ Casey, Mitchell & Amisi, Haliza, et. al., *Use of Facility Assessment Data to Improve Reproductive Health Service Delivery in the Democratic Republic of the Congo*, 2009, p.2.

¹¹⁵ Ibid.

¹¹⁶ McGinn, *Reproductive Health of War-Affected Populations: What Do We Know?*, 2000, p.179.

¹¹⁷ Ibid.

¹¹⁸ Ibid.

¹¹⁹ Heise, Ellsberg & Gottmoeller, *A Global Overview of Gender-Based Violence*, 2002, p. S5.

¹²⁰ Ibid., p. S6.

¹²¹ Ibid., p. S7.

¹²² 7 Billion Actions, *The World at Seven Billion: Top Issues – Fact Sheets* [Website], 2011, p. 4.

¹²³ Ibid.

¹²⁴ Heise, Ellsberg & Gottmoeller, *A Global Overview of Gender-Based Violence*, 2002, p. S11.

¹²⁵ Ibid.

¹²⁶ 7 Billion Actions, *The World at Seven Billion: Top Issues – Fact Sheets* [Website], 2011, p. 7.

¹²⁷ Ibid., p. 9

traditions that harm them.¹²⁸ Beginning with one generation creates a “domino effect” and affects how the next generation is raised and how educating girls is valued – ultimately resulting in pro-women and girls policies that include better health care and outcomes.¹²⁹ Philanthropist and women’s advocate Melinda Gates puts it this way:

Investing in women and girls should justify itself. They make up half the population (and the majority of the poor), yet they've been neglected by the development community. Moreover, advocates and experts have known for years that when women and girls have the power to make basic household decisions, they prioritize education, food, and health care -- the stuff of broad-based economic and social development. In short, when we invest in women and girls, we are investing in the people who invest in everybody else.¹³⁰

Certainly, it stands to reason that investing time, effort, and resources in the future of women and girls, alongside men and boys, results in good investments elsewhere, particularly when it comes to providing environments where women can lead healthy lives and be mothers when, how, and if they want.¹³¹

Conclusion

The challenge to improving maternal health in the post-MDG world is twofold: first, how does the international community continue to address the difficulties of improving maternal health without the supportive environment created by the MDG campaign? Second, must the MDG campaign be replaced with another set of goals adapted to an ever-changing world? The clear and comprehensible goals put forward have contributed to the success of the Millennium Campaign, yet in the time since they have been set, a new collection of problems has arisen (not to mention some goals have not been seen to completion, notably the lagging progress of MDG 5)¹³².

The recent emphasis on data-based solutions should inform the future of the development agenda as a whole, and delegates should address how maternal health might be improved based on such data.¹³³ How might it be possible to collect data from the most hard-to-count populations or from governments who may be reluctant to participate or share? The success of data collection is all about sound methodology so delegates may want to consider how to find the right answers to the right questions.

The opportunities and challenges for improving maternal health even beyond the assistance of the MDG framework are many. The international community must solve the problem of how to continue to build momentum for maternal health care improvements after so much progress has already been made. What has worked, and what can be improved? How can regional differences be addressed better for an equal distribution of maternal health care practice? With an eye on the centrality of healthy mothers, healthy children, healthy pregnancies, and healthy reproductive care policies to a healthy population growth, delegates can accomplish a great deal to protect and care for the future.

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This fact sheet provides context for the work of UNFPA, focusing on the global milestone of reaching 7 billion people, 3.7 billion of whom are at reproductive age. This project, sponsored by UNFPA, provides figures for all topics related to the development and world population agenda, including empowerment of women and girls and reproductive health rights. Delegates should use this resource to gain a fuller understanding not just of the topic, but also of the usefulness of thorough data in policy development.

¹²⁸ Ibid., p. 9

¹²⁹ Ibid., p. 9

¹³⁰ Gates, *Bridging the Gender Gap*, 2013.

¹³¹ UNFPA, *Engaging Men and Boys: A Brief Summary of UNFPA Experience and Lessons Learned*, 2013, p. 2.

¹³² UN Department of Economic and Social Affairs, *The Millennium Development Goals Report 2013*, 2013, p. 31.

¹³³ The World We Want, *The Future UNFPA Wants for All: Keys for the Post-2015 Development Agenda*, 2012, p. 5.

Economic Commission for Europe, Economic and Social Commission for Asia and the Pacific, Economic Commission for Latin America and the Caribbean, Economic Commission for Africa & Economic and Social Commission for Western Asia. (2013). *A Regional Perspective on the Post-2015 United Nations Development Agenda (E/ESCWA/OES/2013/2)* [Report]. Retrieved 30 June 2013 from: <http://www.regionalcommissions.org/post2015regionalreport.pdf>

This comprehensive document explains, by region, progress on the MDGs and how that will affect how each regional commission proceeds past the deadline. The report describes challenges of data collection at the national level, particularly in Africa, but explains how setting up regional UN-led frameworks to help ameliorate this problem. The global economic downturn and regional conflict are named as primary contributing factors for why Goal 5 is the one most likely to be unmet.

Fukuda-Parr, S. (2012). *Should Global Goal Setting Continue, and How, in the Post-2015 Era?* UN Department of Economic and Social Affairs Working Paper No. 117: 1-24.

While maternal health is not the central focus of this paper, it is exceptionally useful in identifying flaws in the Millennium Development Goal framework than can be improved upon for the post-2015 global agenda. In particular, the author posits that equality of location was not emphasized enough in the setting and measurement of the MDGs. In advocating for a new set of post-2015 development goals, this article explains the utility of goals and how the relative success of re-framing the development agenda through the MDGs can be applied to future campaigns.

Heise, L., Ellsberg, M & Gottmoeller, M. (2002). *A Global Overview of Gender-Based Violence*. International Journal of Gynecology and Obstetrics 78: S5-S14.

The variation in rates of SGBV around the world point to areas for further study as to why some cultures perpetuate violence while others have succeeded in reducing or eliminating it. This article points to some of the causes of SGBV and spends ample time analyzing the impact this violence has on women's reproductive health. The explanation of how violence can affect the reproductive health of a woman who is not pregnant as well as one who is provides strong evidence for implementing initiatives that eliminate SGBV as well as training health care professionals to recognize and react to the signs.

Robinson, R.S. (2010). *UNFPA in Context: An Institutional History*. Background paper prepared for the Center for Global Development Working Group on UNFPA's Leaderships Transition. Retrieved 1 July 2013 from: <http://www.cgdev.org/doc/UNFPA-in-Context.pdf>

Providing an interesting look at the role and function of UNFPA, the author explains how institutional dynamics affect the ability of UNFPA to develop policies dealing with family planning and access to contraceptives. In addition to providing insight into the importance of those issues to the core mission of UNFPA, the article also provides a comprehensive look at how UNFPA works.

The World We Want. (2012). *The Future UNFPA Wants for All: Keys for the Post-2015 Development Agenda* [Web Site]. Retrieved 1 July 2013 from: <http://www.worldwewant2015.org/file/294167/download/318908>

This publication states the goals of the UNFPA for the post-2015 agenda and how they can be addressed and achieved. The text emphasizes that maternal health and population development are inextricable and that reproductive health choices and opportunities for women must be central to the health and development agenda. It also provides indicators of maternal health such as unmet need for family planning, maternal mortality ratio, and adolescent marriage rates that should be measured and taken into account to recommend the best solutions in the post-2015 agenda.

World Health Organization, United Nations Children's Fund, United Nations Population Fund, The World Bank. (2012). *Trends in Maternal Mortality: 1990 to 2010*. Retrieved 2 July 2013 from: http://whqlibdoc.who.int/publications/2012/9789241503631_eng.pdf

With a great deal of data on maternal mortality rates (MMR), the report is useful in its analysis of the trends of MMR which can and should inform policy for achieving MDG 5 and the maternal health agenda beyond 2015. The report evaluates what progress has been made on reducing MMR since 1990 – a decline of 47% globally. An important focus is on the recommendation of each

country having a systematic method of keeping birth and death records in order to better understand the issue in different countries.

United Nations Department of Economic and Social Affairs. (2013). *The Millennium Development Goals Report 2013*. Retrieved 1 July 2013 from:

<https://www.unfpa.org/webdav/site/global/shared/documents/publications/2013/mdg-report-2013-english.pdf>

In order to look at health priorities beyond 2015, it is crucial to understand what has and what has not worked thus far on MDG 5. With a realistic understanding of restrictions on women's access to reproductive care found in this report, delegates will be able to propose new, informed ideas for improving global maternal health both immediately and indefinitely. The latest MDG report, the document provides excellent statistics that are both useful and sobering in terms of evaluating the future of the issue of maternal health.

United Nations Population Fund. (2012). *The Maternal Health Thematic Fund Contribution to UNFPA Support to Maternal Health*. Retrieved 1 July 2013 from:

http://www.unfpa.org/webdav/site/global/shared/documents/Evaluation_branch/Maternal_health_report/MHTF%20evaluation%20report%2001.02.2013.pdf

This document is a comprehensive evaluation of the work of the Maternal Health Thematic Fund (MHTF) that goes in depth on the effectiveness of its contributions to improving a number of factors that affect the quality and access to maternal health. Particularly, the fund provides regional support to emergency obstetric and newborn care (emONC) and midwifery efforts. The report concludes with recommendations for a long-term plan to sustain the work of the MHTF, which provides a "rapid and flexible funding mechanism" for countries that face great challenges to successful and equitable maternal health care.

United Nations Population Fund. (2011). *The State of the World's Midwifery Report: Delivering Health, Saving Lives*. Retrieved 1 July 2013 from: http://www.unfpa.org/sowmy/resources/docs/main_report/en_SOWMR_Full.pdf

The topic of midwifery is important to explore in terms of working toward the goal of universal access to adequate sexual and reproductive health care. The 2011 State of the World's Midwifery Report uses data from 58 countries to help frame this importance and show that the countries that will benefit most from investments in midwife training are those that experience high rates of maternal and newborn mortality. The extensive report includes a summary of "bold steps" (Box 3.2) that delegates might consult when seeking recommendations and potential solutions to increasing the prevalence and bettering the reputation and training of midwives who can help keep low income, rural, and otherwise at-risk women safe during childbirth.

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II. Impact of Urbanization on the Implementation of the ICPD Program of Action

Introduction

In 2008, the global population passed a seminal marker in human history: for the first time ever, the amount of people living in urban areas matched the amount living in rural ones.¹³⁴ This trend of human movement and growth is termed urbanization and is a tenet of modernization.¹³⁵ Urbanization has both positive and negative effects on peoples' livelihoods. This will be displayed through the perspective of a specific instrument of international cooperation, reflecting the global nature of urbanization. This instrument is the 1994 Cairo International Conference on Population and Development (ICPD) *Programme of Action* (PoA).

In September 1994, participants from national governments, non-governmental organizations (NGOs) and United Nations (UN) Specialized Agencies took part in the ICPD, the largest conference on population and development to date.¹³⁶ The ICPD was held under the auspices of the United Nations and was organized by a secretariat formed from the Population Division of the UN Department for Economic and Social Information and Policy Analysis and the United Nations Population Fund (UNFPA).¹³⁷ The outcome of the conference was its *Programme of Action*, a master plan for the next twenty years of global coordinated efforts to handle issues of population and development.¹³⁸

As per the preamble of the ICPD final report, there had been a growing recognition that the capacity exists globally in knowledge, technology and resource sectors to drive economic growth and sustainable development, hampered only by political obstacles.¹³⁹ The PoA, adopted by acclamation, has detailed sections on gender equality, the family, population growth, reproductive and general health, urbanization, migration, and the links between education, technology, and development.¹⁴⁰

International & Regional Frameworks

The Programme of Action

There are three main goals of the PoA to accomplish by 2015. They are: (1) reduction of infant, child, and maternal mortality; (2) provision of universal access to education, particularly for girls; and (3) provision of universal access to reproductive health services, including family planning.¹⁴¹ The objectives of the urbanization section are twofold. They are: promoting the development of major sending and receiving areas, and reducing the role of various push factors that relate to migration flows.¹⁴²

The PoA states there need to be strategies for encouragement of "urban consolidation," which is the growth of small or medium-sized urban centers.¹⁴³ Adoption of labor-intensive projects, transport, and communication systems, is also crucial. Government decentralization would facilitate the above. Incentivizing urban-rural relocation and/or redistribution is also welcomed.¹⁴⁴ The PoA also calls upon governments to create access to land ownership/use, water resources, and establish credit, marketing, and production cooperatives.¹⁴⁵ Also, to attract investors to rural areas, governments should reduce restrictions on international trade in agricultural products.¹⁴⁶

¹³⁴ WHO, *Urban Population Growth* [Website].

¹³⁵ Kendall, *Sociology in Our Times: Ninth Edition*, 2011, p. 10.

¹³⁶ UNFPA, *ICPD – International Conference on Population and Development* [Website].

¹³⁷ *Ibid.*

¹³⁸ *Ibid.*

¹³⁹ UNFPA, *Report of the International Conference on Population and Development*, 1995, p. 10.

¹⁴⁰ *Ibid.*, p. 2.

¹⁴¹ UNFPA, *Summary of the ICPD Program of Action* [Website], 1995.

¹⁴² UNFPA, *Report of the International Conference on Population and Development*, 1995, p. 62.

¹⁴³ *Ibid.*, p. 63.

¹⁴⁴ *Ibid.*, p. 63.

¹⁴⁵ *Ibid.*, p. 63.

¹⁴⁶ UNFPA, *Report of the International Conference on Population and Development*, 1995, p. 62; Bryant-Tukalao, *Twenty Years on Poverty and Hardship in Urban Fiji*, 2012, p. 199.

One of the biggest challenges for countries facing increased urbanization is related to governance. Specifically, weak local government institutions often cannot cope with the rapid rate of urbanization and may not have a full grasp of all the different problems associated with this rapid growth.¹⁴⁷ Governments need to increase the capacity and competence of the relevant authorities to deal with urban development, protect the environment, and handle citizens' needs for personal safety and basic infrastructure. For the environment, water, waste and air management, environmentally sound energy and transport systems are essential.¹⁴⁸ In order to integrate poor rural migrants in urban areas, their income-earning capability must be improved. This entails access to employment, basic education, health, training, and transportation services. The PoA also suggested introducing cost-recovery schemes to finance needed infrastructure projects.¹⁴⁹

Whenever necessary, domestic representatives should introduce the necessary legislation to implement the above.¹⁵⁰ Regarding international cooperation, there are a host of avenues to pursue, including offering technical assistance, technology, and medical supplies.¹⁵¹ Finally, the international community as a whole has the responsibility of adopting favorable macroeconomic policies for sustained economic growth.¹⁵²

The Millennium Development Goals (MDGs)

The MDGs were eight targets resulting from the 2000 Millennium Summit and its outcome, the Millennium Declaration (A/RES/55/255) to be achieved by 2015.¹⁵³ The MDGs share several targets with the ICPD PoA, streamlining international development efforts. They are: poverty reduction; gender equality and the empowerment of women; child mortality; maternal health, including reproductive health; combating HIV/AIDS. But essentially, UNFPA is indirectly related in achieving all eight targets.¹⁵⁴

Kampala Declaration

Following the culmination of the ICPD +15 International Forum in Uganda, in 2008, Partners in Population and Development (PPD) - a South-South initiative – issued the *Kampala Declaration*. It recognized that the global economic crisis had adverse effects on efforts to achieve ICPD goals and MDGs, and that the number of people living on a dollar a day is increasing.¹⁵⁵ PPD members reiterated their commitment to the centrality of family planning in development, combatting HIV, ensuring reproductive health commodity security, and promoting sustainable development.¹⁵⁶

Role of the United Nations System

Since the conclusion of the Cairo Conference in 1994, and UNFPA has been recognized as the lead UN organization for follow-up and successful implementation of the PoA.¹⁵⁷ Through data collection, the Fund contributes to some 150 agenda items in General Assembly debates, and participates in the Economic and Social Council (ECOSOC) functional and regional intergovernmental commissions.¹⁵⁸ UNFPA is one of the founding members of both the UN Development Group (UNDG) and the Joint United Nations Programme on HIV/AIDS (UNAIDS).¹⁵⁹ The World Health Organization (WHO) is responsible for setting the health research agenda, creating health norms and standards, and providing leadership on global health issues.¹⁶⁰ It also provides technical support to countries, and

¹⁴⁷ UNFPA, *Report of the International Conference on Population and Development*, 1995, p. 62.

¹⁴⁸ *Ibid.*, p. 62.

¹⁴⁹ *Ibid.*, p. 63.

¹⁵⁰ *Ibid.*, p. 90.

¹⁵¹ *Ibid.*, p. 97.

¹⁵² *Ibid.*, p. 98.

¹⁵³ UN General Assembly, *World Leaders Adopt 'United Nations Millennium Declaration' At Conclusion Of Extraordinary Three-Day Summit [Press Release]*. (2000); United Nations Development Program, *About MDGs* [Website].

¹⁵⁴ UNFPA, *How The ICPD Program of Action Supports the MDGs* [Website].

¹⁵⁵ Partners in Population and Development, *Kampala Declaration*, 2008, p. 3.; Partners in Population and Development, *Kampala Declaration*, 26 Nov 2008, p. 4.

¹⁵⁶ Partners in Population and Development, *Kampala Declaration*, 2008, p. 2.

¹⁵⁷ UNFPA, *UNFPA in the UN System* [Website].

¹⁵⁸ *Ibid.*

¹⁵⁹ *Ibid.*

¹⁶⁰ WHO, *About WHO* [Website], 2013.

monitors existing and emerging health trends.¹⁶¹ Its 2010 – 2015 business plan, drawn from the ICPD and MDG frameworks, outlines its medium-term strategic objectives.¹⁶²

Urbanization & Urban Poverty

Often associated with modernization and industrialization, urbanization is in the strictest sense, the increase of the portion of a country's population that lives in cities.¹⁶³ The United Nations Census Division offers a subjective indicator: the degree of concentration of a population.¹⁶⁴ It is important to note that national differences exist about what constitutes a city, thus "concentration" is a more inclusive term.¹⁶⁵ Urbanization can occur in varied ways: rural-urban migration or simply existing population growth in cities.¹⁶⁶ Although it is an individual decision to move from the countryside to the city, government policies (either favoritism of cities or neglect of rural areas) indicate how urbanization is a state-level decision.¹⁶⁷ Men and women may seek better education and employment or may be escaping domestic abuse, early marriages, civil strife, or hazardous living conditions.¹⁶⁸

There are several links between the economic virtues and vices of urbanization, and overall economic and social development.¹⁶⁹ For example, on one hand, there are efficiency and cost advantages to cities, such as better access to services, in addition to some public services only becoming available after a critical mass, such as hospitals, universities, and sports stadiums.¹⁷⁰ A critical mass is essentially the amount of people using a service that deem it economically feasible to be implemented – a "break even" point of sorts.¹⁷¹ By bringing together large numbers of people, cities accelerate knowledge spillovers and sharing. It is clear that increased city size is beneficial; in terms of more productivity, higher wages, and faster growth.¹⁷² For example, in Colombia, a high rate of urbanization (75% urbanized) leads to having 50% of the GDP growth rate down to cities, in addition to having a balanced wealth distribution among some 29 of its cities.¹⁷³

On the other hand, a too rapid urbanization rate results in overcrowding.¹⁷⁴ A large part of the urban poor's income goes towards renting or buying land, which is often on the outskirts of city centers.¹⁷⁵ This means that they have little to no access to basic infrastructure and services.¹⁷⁶ In addition to little land security, having little to no storage space means the urban poor cannot purchase food in bulk, so there is little food security (as they are vulnerable to price fluctuations).¹⁷⁷ The dependence on a monetized economy is probably the single biggest distinction between an urban and rural lifestyle.¹⁷⁸ The ill health of a family's breadwinner, or the care needs of a household member (early childhood, old age, pregnancy), drastically affect an urban household's livelihood.¹⁷⁹

Gendered Perspectives of Urban Poverty

Even with the provision of better health services within a city, women's reproductive health can be worse than in rural areas.¹⁸⁰ In some 30 countries, urban maternal and newborn mortality was as bad as, if not worse than, rural

¹⁶¹ Ibid.

¹⁶² WHO, *WHO's Strategic Vision In Sexual And Reproductive Health And Rights Business Plan 2010–2015*, 2010, p. 2.

¹⁶³ Kendall, *Sociology in Our Times: Ninth Edition*, 2011, p. 11.

¹⁶⁴ United Nations. *Population Density and Urbanization* [Website]

¹⁶⁵ Ibid.

¹⁶⁶ UNFPA, *Report of the International Conference on Population and Development*, 1995, p. 61.

¹⁶⁷ Ibid., p. 63.

¹⁶⁸ UN, *Report of the International Conference on Population and Development*, 1995, p. 49; UN, *Report of the International Conference on Population and Development*, 1995, p. 62.

¹⁶⁹ Spence & Annez, *Urbanization and Growth*, 2009, p. 1.

¹⁷⁰ Ibid., p. 12.

¹⁷¹ Ibid., p. 12.

¹⁷² Spence & Annez, *Urbanization and Growth*, 2009, p. 13, Spence & Annez, *Urbanization and Growth*, 2009, p.15.

¹⁷³ Samad, *Colombia Urbanization Review: Amplifying the Gains from the Urban Transition*, 2012, p. 12.

¹⁷⁴ Spence & Annez, *Urbanization and Growth*, 2009, p. 1.

¹⁷⁵ Tacoli, *Urbanization, Gender and Urban Poverty: Paid Work and Unpaid Carework In The City*, 2012, p. 6.

¹⁷⁶ Ibid., p. 6.

¹⁷⁷ Ibid., p. 6.

¹⁷⁸ Beall, *Urban Poverty and Development in the 21st Century: Towards an Inclusive and Sustainable World*, 2006, p.7.

¹⁷⁹ Ibid.

¹⁸⁰ Magadi, & Zulu, *The Inequality of Maternal Health in Urban Sub-Saharan Africa*, 2003, p.19.

maternal and newborn mortality.¹⁸¹ In fact, access to maternal care was more similar for urban poor women to rural poor women than their urban wealthy counterparts.¹⁸² It is worth noting that whilst most modern urban growth is from natural growth, rather than migration, fertility rates compared to the countryside are lower.¹⁸³ In one example, it was found that fertility rates for women living in Greater Cairo, Egypt were lowest at the center, and highest at peri-urban areas at the edges.¹⁸⁴ This can be attributed to high upbringing costs, different lifestyles, marrying older, and better access to contraception.¹⁸⁵

Social norms set the expectation that women take primary responsibility for domestic and care activities.¹⁸⁶ As such, economic downturns have a gendered effect since women are concentrated in low-income forms of work, resulting in an “informalization” of their employment.¹⁸⁷ Untaxed, unregulated, mostly cash-based, transactions of both goods and services are a large part of the informal economy.¹⁸⁸ Informal workers can range from fruit sellers, to taxi drivers, to building contractors. Informal workers have little safety when it comes to property rights or legal protection, and face difficulties accessing insurance.¹⁸⁹ As such, they cannot manage shocks to their income in the case of illness, disability, or unemployment.¹⁹⁰ They have little access to mainstream development services, resources, or labor market institutions.¹⁹¹

A significant amount of people worldwide earn their living via informal employment; it accounts for 48% of non-agricultural employment in North Africa, 72% in sub-Saharan Africa, 65% in Asia, and 51% in Latin America.¹⁹² From a macro-economic perspective, informal workers are deigned “free riders” that accrue benefits of the system without contributing to its survival. This leads to a smaller number of businesses to tax, so to offset the decrease in tax revenues, larger businesses are taxed more, driving off investment.¹⁹³ This ultimately creates a burden on society, with fewer resources available for social services and public infrastructure, exacerbating urban poverty.¹⁹⁴

Case Study: Slums of Nairobi, Kenya

Over half (about 2 million) of Nairobi’s residents live in informal settlements.¹⁹⁵ They have very limited access to public services such as health care, education, clean water, or sanitation.¹⁹⁶ The numbers are quite distressing; up to 68 percent relied on shared toilet/latrine facilities, and only 24 percent of residents have access on a household level (as per the Nairobi Water & Sewage Company).¹⁹⁷ Most toilet facilities are latrines, which need to be emptied periodically to remain functional.¹⁹⁸ A study found that in one area, up to 150 people on average shared a latrine.¹⁹⁹ According to World Health Organization (WHO) standards, these shared latrines cannot be considered “improved sanitation.”²⁰⁰ In addition to being few in number, these latrines are usually distanced away from homes, from 100 to 300 meters and more. Community and non-governmental organization (NGO) initiatives have introduced a limited number of hygienic toilets, but these are both costly to use and are open for only part of the day.²⁰¹

¹⁸¹ Tacoli, *Urbanization, Gender and Urban Poverty: Paid Work and Unpaid Carework In The City*, 2012, p. 24.

¹⁸² *Ibid.*, p. 25.

¹⁸³ National Research Council, *Cities Transformed: Demographic Change and Its Implications in the Developing World*. 2003, p. 69.

¹⁸⁴ *Ibid.*

¹⁸⁵ Tacoli, *Urbanization, Gender and Urban Poverty: Paid Work and Unpaid Carework In The City*, 2012, p. 8.

¹⁸⁶ *Ibid.*, p. 31.

¹⁸⁷ *Ibid.*, p. 30.

¹⁸⁸ International Labor Organization, *Resource Guide On The Informal Economy* [Website], 2012.

¹⁸⁹ World Bank, *Informal = Illegal? Think Again* [Website], 2012.

¹⁹⁰ *Ibid.*

¹⁹¹ International Labour Organization, *Informal Economy* [Website].

¹⁹² International Labour Organization, *Women and Men in the Informal Economy: A Statistical Picture*, 2002. p. 7.

¹⁹³ World Bank, *Informal = Illegal? Think Again* [Website], 2012.

¹⁹⁴ *Ibid.*

¹⁹⁵ Amnesty International, *Insecurity and Indignity: Women's Experiences in the Slums of Nairobi, Kenya*, 2010, p.45.

¹⁹⁶ *Ibid.*, p.5.

¹⁹⁷ *Ibid.*, p.17.

¹⁹⁸ *Ibid.*, p.20.

¹⁹⁹ *Ibid.*, p. 18.

²⁰⁰ *Ibid.*, p. 18.

²⁰¹ *Ibid.*, p. 18.

Women's Experiences with Lack of Access to Sanitation

Women have distinct physical needs from men, and normally require more privacy when using toilets or showering.²⁰² Compared to the very limited presence of latrines, there are almost no shower stalls within lots.²⁰³ Most women have to contend between using the latrines as showers, and ordering all their household members to leave the (usually one-room) house if they want to take a shower with any degree of privacy.²⁰⁴ Also, when it comes to women's menstrual periods, they also have little to no privacy to address their needs, with constant queues to the latrines, being in the presence of their male neighbors and acquaintances.²⁰⁵ Women also have the added burden of acting as care workers to any dependents (children, the elderly) within their households.²⁰⁶ In fact, health indicators of Nairobi slums are worse in some respects than rural areas. Infant, child, and under five mortality rates were 20%, 65%, and 30% higher respectively, compared to the rural figures (according to the African Population and Health Research Centre).²⁰⁷

A general lack of policing and insecurity, coupled with women's need to traverse large distances to use toilets, sharply increases their vulnerability to rape and other forms of gender-based violence.²⁰⁸ Most accounts tell of facing sexual violence when going to toilets at night, but sometimes even during the day. In addition to rape, members of the community would harass and intimidate women using the latrines.²⁰⁹ Victims naturally find their income-generating capabilities diminished or gone.²¹⁰ Violence is both a symptom and cause of their poverty.

Government Role

The Kenyan government stated in a report that slums and settlements "lack adequate physical infrastructure [including] sewer systems, drainage, water and sanitation facilities... where such facilities exist they are in a poor state or are results of illegal connections."²¹¹ The single biggest indicator of government failing lies in how these slums are viewed and organized. Although there are minimum sanitation standards, these slums lie outside the authorities' plans, and as such, standards are rarely enforced.²¹² The Nairobi City Council still views these slums as irregular, and as such, has not properly accounted for them in urban planning, despite their existence for decades.²¹³ When it comes to the issue of latrines, Kenyan law states that sanitation responsibilities rest with private individuals and structure owners (landlords).²¹⁴ Naturally, landlords try to maximize profits by increasing the number of households on their land, and they pay little attention to providing proper sanitation facilities.²¹⁵ This selective discrimination against informal settlements runs counter to the *International Convention on Civil and Political Rights* (ICCPR), as per the Committee on Economic, Social, and Cultural Rights, "rights should not be conditional on, or determined by, a person's current or former place of residence; ... disparities between localities and regions should be eliminated in practice..."²¹⁶

Reviews of the ICPD PoA

ICPD +5

A United Nations General Assembly (GA) special session in 1999 reviewed the progress made on the PoA and highlighted the key actions moving forward.²¹⁷ First, the education and literacy goals were to ensure universal access to primary education by 2015.²¹⁸ Second, for reproductive health, governments were called upon to ensure that

²⁰² Amnesty International, *Insecurity and Indignity: Women's Experiences in the Slums of Nairobi, Kenya*, 2010.

²⁰³ *Ibid.*, p. 19.

²⁰⁴ *Ibid.*, p. 19.

²⁰⁵ *Ibid.*, p. 20.

²⁰⁶ *Ibid.*, p. 20.

²⁰⁷ *Ibid.*, p. 20.

²⁰⁸ *Ibid.*, p. 5.

²⁰⁹ *Ibid.*, p. 20.

²¹⁰ *Ibid.*, p. 5.

²¹¹ *Ibid.*, p. 28.

²¹² *Ibid.*, p. 31.

²¹³ *Ibid.*, p. 28.

²¹⁴ *Ibid.*, p. 43.

²¹⁵ *Ibid.*, p. 31.

²¹⁶ *Ibid.*, p. 32.

²¹⁷ UN General Assembly, *Key actions for the further implementation of the Programme of Action of the International Conference on Population and Development. (A/S-21/5/Add.1)* [Report], 1999, p. 1.

²¹⁸ *Ibid.*, p. 8.

primary health care centers were capable of providing “family planning and contraceptive methods; & prevention of sexually transmitted diseases.”²¹⁹ Third, for maternal mortality, the goals were that of by 2015, 90% all births should be assisted by skilled attendants.²²⁰ Finally, for HIV/AIDs, the key action was providing information and services necessary for 15- to 24-year-olds to reduce AIDs prevalence among them, by 25% in the most affected countries by 2005, and the same percentage globally by 2010.²²¹

ICPD +10

The 37th session of the Commission on Population and Development (CPD) of the Economic and Social Council (ECOSOC) convened 10 years after the ICPD, in order to review the progress made.²²² A report presented by the Secretary General of the United Nations highlighted three interrelated factors that affect implementation of all the recommendations of the PoA. They are: the availability of financial and human resources, institutional capacities, and finally, partnerships of relevant state and non-state Actors.²²³ Whilst the global growth rate dropped from 1.7% to 1.3%, 95% of population growth was in less developed countries, highlighting the significance of family planning programs.²²⁴ The report also brought up that when surveyed in 2001, 39% of governments were concerned at their current population distributions, and were unsure whether they would be able to increase cities’ capacities to absorb rapid population growth.²²⁵

ICPD +15

As per the outcome of ECOSOC Plenary CPD resolution 2006/1, UNFPA composed a report to review the progress made after 15 years of the ICPD.²²⁶ It reaffirmed that population, reproductive health and gender issues are central to development and to the achievement of the Millennium Development Goals.²²⁷ The report noted that not enough progress has been made on Goal 5.²²⁸ The report also highlighted the essentiality of including population issues when discussing the effects of climate change and it noted the work done at the UN Climate Change Conference.²²⁹ When it comes to achieving Goal 1 on “Poverty Reduction,” family planning plays a big role. It was observed that the poorest countries have the highest fertility and population growth rates.²³⁰ Eliminating gender inequality in education, plus improving access to reproductive care, results in women finding better paying jobs, and leads them to have fewer children, and invest more in their children’s health and education.²³¹ This ultimately leads to a better chance of families escaping poverty.²³²

Financial Aid

A recent report, presented to the CPD by the UN Secretary-General, examines recent levels of domestic and donor expenditure on population activities.²³³ Its data was collected through surveys distributed to governments and

²¹⁹ Ibid., p. 13.

²²⁰ UNFPA, *Key Actions for the Further Implementation of the Program of Action of the ICPD -- ICPD+5* [Website]

²²¹ Ibid.

²²² UN Economic and Social Council, *Review and appraisal of the progress made in achieving the goals and objectives of the Program of Action of the International Conference on Population and Development*, 2004, p. 1.

²²³ Ibid., p. 4.

²²⁴ Ibid., p. 33.

²²⁵ Ibid., p. 33.

²²⁶ UN, Commission on Population and Development. *Methods of work of the Commission on Population and Development (E/CN.9/2006/9)*, 2006.

²²⁷ UN Economic and Social Council, *Monitoring of population programs, focusing on the contribution of the Program of Action of the International Conference on Population and Development to the internationally agreed development goals, including the Millennium Development Goals*, 2009, p. 2.

²²⁸ Ibid., p. 9.

²²⁹ Aldred, J., *Q & A: Bali Climate Change Conference* [Website], 2007.

²³⁰ UN Economic and Social Council, *Monitoring of population programs, focusing on the contribution of the Program of Action of the International Conference on Population and Development to the internationally agreed development goals, including the Millennium Development Goals*, 2009, p. 5.

²³¹ Ibid.

²³² Ibid.

²³³ UN General Assembly, *Report of The International Conference on Population and Development (A/RES/49/128)*, 1994; UN General Assembly, *Implementation of the Program of Action of the International Conference on Population and Development (A/RES/50/124)* [Resolution], 1996.

national NGOs.²³⁴ Donor aid/government allocation of resources for population programs has been increasing steadily, but MDG targets will not be met unless there is significant extra financial outlay and political will.²³⁵ (Healthcare costs have increased substantially).²³⁶ For example, infant, child and maternal mortality remains unacceptably high.²³⁷ Financial targets fixed some 15 years ago naturally do not meet current needs.²³⁸ Domestic expenditure, mostly by governments, accounts for the highest percentage of funds needed to reach objectives.²³⁹ Most of the money is spent on family planning, reproductive health, and sexually transmitted disease and HIV treatment.²⁴⁰

Conclusion

Urbanization can have both profoundly benign and destructive effects on people's livelihoods. It is an undeniable engine of economic growth, and an amazing opportunity for human advancement. As Jane Jacobs put it, "Cities, not countries, are the constituent elements of a developing economy, and have been so since the dawn of time."²⁴¹ Urbanization does necessarily not exacerbate poverty.²⁴² However, the fact remains that nearly one billion people live in slums today.²⁴³ Poverty is not just about lack of income; it is also about the lack of opportunity. And with 80% of the world's poor made up of women and children, there is always the concern that poverty may pass from one generation to the next.²⁴⁴

The challenge therefore is how best to manage urbanization, and its impact on issues of population and development in today's world, with the effects of the economic crisis still being acutely felt by the entire international community. The fundamental question, therefore, with urbanization and the world population only on an ever-increasing trajectory, is what are the priorities? What is the role of municipal authorities, federal governments, domestic legislators, and international actors? Which population activities should be given more attention? And are there technological or logistical innovations that would aid delivery of said programs?

A significant amount of effort and attention has been spent on handling issues of population and development since the inception of the ICPD PoA.²⁴⁵ But the fact remains that this is a fundamentally different world than the one in which the 1994 Cairo conference took place. There is a "race against time" for countries to achieve the targets set since then, with some 66 states set to miss MDG 5a of reducing the maternal mortality rate, for example.²⁴⁶

The UN stresses the importance of sound family planning, access to education, and gender equality as driving factors behind development worldwide. When states, NGOs, and UN agencies work together on achieving the ICPD's goals, these actions leave a palpable effect on the lives of people who may in this way escape poverty, enjoy a better quality of life, and ultimately contribute to national and international society with purpose and dignity.

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Bryant-Tukalao, J. (2012). *Twenty Years on Poverty and Hardship in Urban Fiji*. Royal Netherlands Institute of Southeast Asian and Caribbean Studies, 168 (2/3): 195-218.

²³⁴ UN Economic and Social Council, Commission on Population and Development, *Flow of financial resources for assisting in the implementation of the Program of Action of the International Conference on Population and Development: Report of the Secretary-General*, 2009, p. 11.

²³⁵ *Ibid.*, p. 19

²³⁶ *Ibid.*, p. 19.

²³⁷ *Ibid.*, p. 14.

²³⁸ *Ibid.*, p. 19.

²³⁹ *Ibid.*, p. 13.

²⁴⁰ *Ibid.*, p. 12.

²⁴¹ Spence & Annez, *Urbanization and Growth*, 2009, p. 13.

²⁴² *Ibid.*, p. 8

²⁴³ *What Are Slums And Why Do They Exist?*, 2007, p. 1.

²⁴⁴ United States of America, *Statement by Mrs. Thoraya Obaid, UNFPA Executive Director at the UN General Assembly Commemoration of the International Conference on Population and Development*, 2009.

²⁴⁵ *Ibid.*

²⁴⁶ The Guardian, 'Race Against Time' As 50 Countries Set To Miss Health-Related MDGs. [Website], 2012.

This source provides an account of the negative effects of urbanization from an individualistic perspective, which is important as it is in line with UNFPA's ethos. It draws upon reports from sources as varied as the UNDP and the Asian Development Bank for economic indicators, which once again lends it as a good place for further research. It also features an environmental perspective on the impact of urbanization on peoples' livelihoods. Delegates wishing to understand the role of culture with regards to modernization will find this an informative source, since as the source indicates, the Pacific region may be the least connected area globally, even if it is catching up.

United Nations, Commission on Population and Development, Forty-second session. (2009, January 21). *Flow of financial resources for assisting in the implementation of the Program of Action of the International Conference on Population and Development: Report of the Secretary-General*. Retrieved 29 July 2013 from: <http://www.unfpa.org/webdav/site/global/shared/documents/publications/2009/N0921567.pdf>

This is an excellent report detailing the data behind financial aid, with a breakdown on how the money is spent. The report also discusses the methodology behind obtaining the data, which serves both as verification of the report's findings and as insight into UN data collection mechanisms. Data was collected via survey questionnaires submitted by state governments. As such, it provides delegates with the chance to find their country's specific expenditures on population activities, both domestically and as aid. However, there were issues of insufficient information, plus the report was mostly on the national level, not region-specific (if there was a decentralized state system).

United Nations, Economic and Social Council. (2004). *Review and appraisal of the progress made in achieving the goals and objectives of the Program of Action of the International Conference on Population and Development*. Retrieved 25 July 2013 from: <http://www.unfpa.org/webdav/site/global/shared/documents/N0420670-2.pdf>

This is the ICPD +10 review, as seen through the lens of the United Nations Secretary General. It has a unique relevance in being the first review after the Millennium Summit. This means that it references the MDGs, and gives a pretty good example of how inter-agency coordination can take place. This is a second opportunity to look at how the actual review of the ICPD PoA implementation takes place.

Samad, T., et al. (2012). *Colombia Urbanization Review: Amplifying the Gains from the Urban Transition*. Washington, DC: World Bank Publications.

Providing recent examples in a developing country, this book, published under the auspices of the World Bank, is a good source. It details the steps taken to improve the city system in Colombia, which is over 80% urbanized. It looks at things from a mainly economical perspective, which is useful for quantitative analysis. It mostly focuses on municipal or federal authorities as the main actors.

Spence, M & P. Annez. (2009). *Urbanization and Growth*. Washington, DC: The World Bank.

This is a book commissioned by the Commission on Growth and Development, which is a body under the authority of the World Bank. It offers a different perspective; where most of the sources in this paper focus on the micro-, human element, it extolls the virtues of urbanization and sound population policy at a macroeconomic level. This is a technical read, and offers historical examples.

Tacoli, C. (2012). *Urbanization, Gender and Urban Poverty: Paid Work and Unpaid Carework In The City*. New York.

This source offers a thorough look at the downside of urbanization, (for example; squatters, high rape incident rates, or poor maternal and infant mortality). This working paper, commissioned by UNFPA, is a very good place to pick up an understanding of what both urbanization, and urban poverty entail. It does not, however, offer satisfactory quantitative data on its own. However, it does reference many detailed studies to support its claims.

United Nations Population Fund. (2009). *Healthy Expectations: Celebrating Achievements of the Cairo Consensus and Highlighting the Urgency for Action* [Report]. New York. Retrieved 6 November 2013 from: <http://www.unfpa.org/webdav/site/global/shared/documents/publications/2009/chartbook.pdf>

This report, published 15 years after the ICPD, is an internal look at the achievements of the PoA. Seeing as it is published by UNFPA, there is the possibility of an overly positive outlook, in order to burnish the agency's efforts. It does, however, offers a wealth of references of the data that is compiled within it. It also provides recommendations and suggestions going forward for governments and other parties.

United Nations Population Fund. (1994). *ICPD – International Conference on Population and Development*. [Website]. Retrieved 24 July 2013 from <http://www.unfpa.org/public/home/sitemap/icpd/International-Conference-on-Population-and-Development>

This Website serves as a suitable and accessible starting point to trace ICPD influence on the formulation and attainment of the MDGs. It smartly uses the more easily identifiable/researchable MDGs as the point of comparison. The Web page is expansive, and features a lot of links to further research. This document is once again, a very good starting point, and despite being just a Web page, makes a clear connection between draws the ICPD and MDGs link very nicely.

United Nations. (1994). *Report of the International Conference on Population and Development*. New York, United Nations. Retrieved 27 July 2013 from:

http://www.unfpa.org/webdav/site/global/shared/documents/publications/2004/icpd_eng.pdf

This is the guiding report on the proceedings of the ICPD, and as such, serves as the starting point for most of the research regarding the motivations behind, and the actual Program of Action. An official United Nations document, it is a reputable source and extremely expansive. Every section of the Program of Action is divided into three parts; basis for action, objectives, and actions. As such, it shows delegates the process behind determining the rationale, goals, and strategies for implementing the PoA.

United Nations. (2012). *Report of the United Nations Conference on Sustainable Development*. Retrieved 10 November 2013 from:

<http://www.uncsd2012.org/content/documents/814UNCSD%20REPORT%20final%20revs.pdf>

This source contains the United Nations Conference on Sustainable Development proceedings. The conference was held in 2012 and provided a timely reminder, reaffirmation and examination of the goals and progress made of the 1994 Cairo conference. It also provides a thorough list of the international frameworks concerning environmental sustainability and sustainable development. This can essentially be viewed as a blueprint for how delegates approach committee work, as in their ambitions for the conference.

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III. Strengthening the International Response to New Trends in Migration

“Despite the many positive contributions migration makes to the development of countries of origin and destination, it is essential that migrants are seen not solely as agents of development. They are human beings with rights that States have an obligation to protect”²⁴⁷

Introduction

Every country in the world is affected by migration, in one way or another: as a country of origin, transit or destination, or both.²⁴⁸ The impact of migration on each country, however, differ significantly. While it can be an empowering experience for some migrants, especially for women, there are others, who face abuse, exploitation and discrimination, either during their migration journey or in the country of destination.²⁴⁹ Furthermore, migration can either contribute to the economic and social development of a country, or confront its governments with new challenges.²⁵⁰ The pervasive impact of migration means that it is a high priority for the entire international community.

The International Organization for Migration (IOM) defines migration as “the movement of a person or a group of persons, either across an international border, or within a State.”²⁵¹ Migration is not limited to a certain group of people, but includes refugees, displaced persons, economic migrants, and persons moving for other purposes, including family reunification.²⁵² Today, there are approximately 214 million international migrants across the globe.²⁵³ They either enter the bordering country of their country of origin, or travel long distances in the search for a better life.²⁵⁴ As much as the reasons for migration have changed, so have the challenges States are facing concerning migration trends.²⁵⁵ Recently, the United Nations has acknowledged the importance of understanding migration more in-depth in order to relate migration flows to international development.²⁵⁶ The General Assembly has stressed this topic repeatedly in a number of resolutions such as General Assembly resolutions 49/127, 50/123, 54/212, 59/241, 60/227, and 60/206.²⁵⁷

Causes of Migration

Poverty, lack of employment, human rights violations, poor governance and conflict in countries of origin are the main causes for people to migrate.²⁵⁸ While the specific triggers for migration vary, demographic reasons, climate change, and economic crises are among the most common reasons for present migration flows.²⁵⁹ The prospect of finding a better life through work in another country has always been one of the main motivations.²⁶⁰ Labor migrants thus remain the fastest growing group of migrants.²⁶¹

International Framework

While there is no one common international migration law, laws governing States obligations and the rights granted to migrants is comprised of a variety of principles and rules at both the international, regional and national level.²⁶² Many branches of international law, such as human rights law, humanitarian law, and labor law are important

²⁴⁷ Global Migration Group, *International Migration and Human Rights*, 2008.

²⁴⁸ *Ibid.*, p. 1.

²⁴⁹ *Ibid.*, p. 1.

²⁵⁰ *Ibid.*, p. 1.

²⁵¹ International Organization for Migration, *Key Migration Terms* [Website], 2013.

²⁵² *Ibid.*

²⁵³ UN Department for Economic and Social Affairs, *Interview with the Director of the Population Division of the United Nations Department of Economic and Social Affairs, John Wilmoth*, 2013.

²⁵⁴ UNFPA, *International Migration and the Millennium Development Goals*, 2005, p. 7.

²⁵⁵ World Economic Forum, *Global Agenda Council on Migration 2012-2014*, p. 1.

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²⁵⁹ World Economic Forum, *Global Agenda Council on Migration 2012-2014*, p. 2.

²⁶⁰ UNFPA, *International Migration and the Millennium Development Goals*, 2005, p. 7.

²⁶¹ UNFPA, *Meeting the Challenges of Migration Progress since the ICPD*, 2004, p. 8.

²⁶² International Organization for Migration, *Migration Law* [Website], 2013.

components of international migration law.²⁶³ Member States have adopted these principles in varying degrees up to the level of the *International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families* (1990).²⁶⁴ The Convention has not entered into force yet, and like other migration laws, improvement of the situation highly depends on the willingness of each State to commit to common principles.²⁶⁵ Nevertheless, the importance of coordinating migration laws has been recognized by the international community and worked on continuously.

One salient fact debated by the international community for decades is the linkage between migration and development.²⁶⁶ The *World Population Plan of Action* (1974) was one of the first documents to consider population growth, development, and migration in relation to each other.²⁶⁷ It was substituted by the *Recommendations for Actions* as agreed upon at the 1984 International Conference on Population.²⁶⁸ Both conferences stressed the need for global cooperation to address the challenges resulting from international migration such as protection of migrant workers, irregular migration, forced displacement, and the relationship between migration and economic and social development.²⁶⁹

In 1994, the International Conference on Population and Development (ICPD) held in Cairo adopted the *Programme of Action*, which until today remains one of the most comprehensive texts on international migration.²⁷⁰ Chapter X of the Programme lays down the basis for international action regarding migration, especially actions that need to be taken for each group of migrants to address their challenges and improve their status, both in their countries of origin and destination.²⁷¹ In 2012, the United Nations Conference on Sustainable Development (UNCSD), also referred to as Rio +20, was held in Rio de Janeiro, for the purpose of developing a global plan of action to advance sustainable development, in the context of the expiration of the Millennium Development Goals (MDGs) in 2015.²⁷² The outcome document, entitled *The Future We Want*,²⁷³ was endorsed by the General Assembly with its adoption in the annex to resolution 66/288.²⁷³ This outcome reaffirms the goals of the ICPD already achieved and stresses the commitment of the international community to further efforts to use migration as a chance for development.²⁷⁴

Role of the United Nations System

International migration has serious implications for demographic dynamics and thus for the core mandate of the United Nations Population Fund (UNFPA).²⁷⁵ UNFPA is responsible for global advocacy, capacity-building, policy dialogue, data and research and awareness rising to meet the challenges of international migration today.²⁷⁶ To carry out this function, the Fund works together with a number of international organizations and UN agencies. The Global Migration Group (GMG) and IOM are two influential bodies within which UNFPA carries out its work.²⁷⁷ GMG consists of the heads of sixteen UN agencies that work together promoting the application of all relevant international and regional instruments and norms relating to migration, while they encourage more coherent, comprehensive and better coordinated approaches to the issue of international migration.²⁷⁸ IOM is an intergovernmental organization through which 151 Member States and UN agencies with observer status, coordinate

²⁶³ International Organization for Migration, *Migration Law* [Website], 2013.

²⁶⁴ UN General Assembly, *International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families (A/RES/45/158)*, 18 December 1990; UN Office of Legal Affairs, *International Convention on the Protection of the Rights of All Migrant Workers and Members of their Families: Status* [Website], 2013.

²⁶⁵ UN Department for Economic and Social Affairs, *International Migration Report 2009*, 2011.

²⁶⁶ UN Department for Economic and Social Affairs, *International Migration and Development at the United Nations*, 2011.

²⁶⁷ United Nations World Population Conference, *World Population Plan of Action*, 1974.

²⁶⁸ UN Department for Economic and Social Affairs, *International Migration and Development at the United Nations*, 2011.

²⁶⁹ *Ibid.*

²⁷⁰ International Conference on Population and Development, *Programme of Action*, 1994; United Nations, *Report of the International Conference on Population and Development (A/CONF.171/13/Rev.1)*, 1994.

²⁷¹ *Ibid.*

²⁷² United Nations General Assembly, *The future we want (A/RES/66/288)* [Resolution], 2012.

²⁷³ *Ibid.*

²⁷⁴ UNFPA, *ICPD central to achieving the future we want* [Website], 2013.

²⁷⁵ Global Migration Group, *International Migration and Human Rights*, 2008, p. 112.

²⁷⁶ UN Commission on Population and Development, *Monitoring of population programmes focusing on new trends in migration: demographic aspects: Report of the Secretary-General (E/CN.9/2013/4)*, 2013.

²⁷⁷ *Ibid.*

²⁷⁸ Global Migration Group, *What is the GMG?* [Website], 2013.

their efforts in migration politics and processes.²⁷⁹ Within both structures, UNFPA is working closely together with States to improve their migration policies and help them adapt to new trends in migration.²⁸⁰ IOM works on a number of issues such as health, migration and gender, migration and climate change, labor migration, migrant training, migrant integration, immigration and border management, and many more.²⁸¹

UNFPA supports countries in using their financial resources efficiently to develop policies, collect data and undertake research via the conduct of censuses in countries to gain an overview over population flows.²⁸² UNFPA's approach towards policy and programmatic interventions in migration policies is rights-based as well as culture and gender sensitive.²⁸³ UNFPA further briefs the Secretary-General on migration issues and helps prepare his annual reports to the General Assembly.²⁸⁴ UNFPA is committed to providing directed policy, advocacy, and technical support to ensure that international migration is recognized as a crucial factor in development.²⁸⁵

New Trends in Migration

International migration has serious implications for demographic dynamics and development, thus it is crucial to understand its reasons and how migration changes over time.²⁸⁶ While the global inter-connectivity increases steadily, new challenges for the international community arise.²⁸⁷

New Patterns of Migration Flows

The world today experiences the highest level of human mobility and connectivity in history.²⁸⁸ While in the past, preferred countries of destination were those developed nations of the global North, recent statistics show a shift of this trend.²⁸⁹ Today, as former developing countries like China, Brazil, India, South Africa, and others have emerged economically, South-South migration is almost as common as South-North migration.²⁹⁰ This poses new challenges on countries of the South, which have often no, or only small experience with managing migration flows.²⁹¹

In 2004, it was estimated that developing countries would add 700 million young people to the economies of developed countries within this decade.²⁹² Nevertheless, UNFPA estimates population ageing is taking place at a faster rate in developing countries than their economies are growing.²⁹³ Recent figures predict that by 2050, between 200 million and 1 billion people will be forced to migrate because of climate change.²⁹⁴ Extreme weather events such as storms, floods, heat waves, rising temperatures and sea levels, will lead to higher population flows.²⁹⁵ Finally, economic reasons have always played an important role in migration processes. On the one hand, people decide to work abroad in search of better wages and lifestyles; on the other hand, when economic crises hit, migrants are often the first to suffer from the effects of the crises, such as the loss of their jobs or decrease of their wages.²⁹⁶ With the current economic crisis, that former voluntary decision is often the result of the urgent need of people to provide for their families.²⁹⁷

²⁷⁹ International Organization for Migration, *About IOM* [Website], 2013.

²⁸⁰ International Organization for Migration, *What we do* [Website], 2013; UNFPA, *About UNFPA* [Website], 2013.

²⁸¹ International Organization for Migration, *What we do* [Website], 2013.

²⁸² UNFPA, *Promises to Keep. Annual Report 2012*, 2012, p. 3.

²⁸³ UNFPA, *About UNFPA* [Website], 2013.

²⁸⁴ *Ibid.*

²⁸⁵ Global Migration Group, *International Migration and Human Right*, 2008, p. 112.

²⁸⁶ World Economic Forum, *Global Agenda Council on Migration 2012-2014*, p. 1.

²⁸⁷ *Ibid.*, p. 2.

²⁸⁸ *Ibid.*, p. 2.

²⁸⁹ UN Department for Economic and Social Affairs, *Migrants by origin and destination* [Fact Sheet], 2012.

²⁹⁰ *Ibid.*

²⁹¹ UN Department for Economic and Social Affairs, *Interview with the Director of the Population Division of UN DESA, John Wilmoth*, 2013.

²⁹² UNFPA, *Meeting the Challenges of Migration Progress since the ICPD*, 2004, p. 14.

²⁹³ UNFPA, *Annual Report 2010*, 2010, p. 5.

²⁹⁴ Tacoli, *Crisis or Adaptation? Migration and Climate Change in a Context of High Mobility*, 2009, p. 104.

²⁹⁵ *Ibid.*, p. 104.

²⁹⁶ UN Institute for Training and Research, *Summary Report, Migration and Development Series 2009*, p. 3.

²⁹⁷ World Economic Forum, *Global Agenda Council on Migration 2012-2014*, p. 4.

Challenges of Migration

Irregular migration is an ongoing challenge for the international community leading to a number of risks and insecurity for migrants.²⁹⁸ Irregular migration describes migration without documents or false documents leaving migrants with no legal status in the country of destination.²⁹⁹ Irregular migrants include also those that have entered the country legally, but whose legal stay has expired.³⁰⁰ Besides the many positive implications of migration for countries of destination, which benefit from work forces, human development, and the empowerment especially of women, migration poses many challenges on the countries of origin.³⁰¹ One of them is that not only uneducated people leave to work abroad, but also highly educated personnel that are seeking a better future in a more developed country.³⁰² This “brain drain” then slows down the development of the home country.³⁰³ Another pattern that UNFPA is observing especially in some Central Asian States is the stagnation of the use of modern contraceptives, hormonal and long-term methods.³⁰⁴ As migration rates in Central Asian States are rising, governments try to increase fertility rates again to make up for population lost to migration.³⁰⁵

Benefits of International Migration

Besides the existing challenges, there are a number of possible benefits for countries of origin and destination if migration is handled properly.³⁰⁶ Policy-makers often fear that brain drain will harm their public services and economies due to the emigration of skilled personnel.³⁰⁷ While this is a legitimate concern, migration also holds many chances for countries.³⁰⁸ Migrants who have been trained and qualified abroad, can add to their home country’s development on their return, given that the transition is made easy for them and they are reintegrated into society.³⁰⁹ At the same time, research shows that when the number of people leaving the country rises, there is also a rise in the number of people that wish to gain skills in their home country.³¹⁰ Thus, policy-makers must establish incentives and services, especially but not only for young people to receive education and training at home instead of migrating.³¹¹ Another benefit for home countries is remittances send back by emigrants to support their families.³¹² These remittances are prime sources of foreign exchange earnings for some countries and an indispensable addition to their gross domestic product (GDP).³¹³ However, one must pay attention that remittances might also add to inflation and foster inequalities between households benefiting from remittances and those that do not.³¹⁴ Furthermore, remittances can only have a positive effect when they reach their destination.³¹⁵ The latter is not always the case due to insufficient infrastructure in a migrant’s home country, which hinders financial aid to reach the respective families.³¹⁶

Migration and Human Rights

There remain several key obstacles for migrants in getting into a position to be able to contribute economically, socially and culturally to their host country’s society.³¹⁷ However, there are still countries where migrants’ rights are

²⁹⁸ UNFPA, *Meeting the Challenges of Migration Progress since the ICPD*, 2004, p. 8-9.

²⁹⁹ *Ibid.*, p. 16.

³⁰⁰ *Ibid.*, p. 16.

³⁰¹ *Ibid.*, p. 8-9.

³⁰² UNFPA, *State of the World Population 2006*, 2006, p. 3.

³⁰³ UNFPA, *Meeting the Challenges of Migration Progress since the ICPD*, 2004, p. 34.

³⁰⁴ UNFPA, *Annual Report 2012*, p. 34.

³⁰⁵ *Ibid.*, p. 34.

³⁰⁶ International Organization for Migration, *Mainstreaming Migration into Development Planning*, 2010, p. 12.

³⁰⁷ *Ibid.*, p. 13.

³⁰⁸ UN Department for Economic and Social Affairs, *Interview with the Director of the Population Division of UN DESA, John Wilmoth*, 2013.

³⁰⁹ International Organization for Migration, *Mainstreaming Migration into Development Planning*, 2010, p. 13.

³¹⁰ *Ibid.*, p. 13.

³¹¹ UNFPA, *Annual Report 2010*, 2010, p. 5.

³¹² UN General Assembly, *Summary of the High-level-Dialogue on International Migration and Development: Note by the President of the General Assembly (A/61/515)*, 14 October 2006, p. 3.

³¹³ UNFPA, *Meeting the Challenges of Migration Progress since the ICPD*, 2004, p. 25.

³¹⁴ International Organization for Migration, *Mainstreaming Migration into Development Planning*, 2010, p. 17.

³¹⁵ UNFPA, *State of the World Population 2006*, 2006, p. 14.

³¹⁶ *Ibid.*, p. 14.

³¹⁷ Global Migration Group, *International Migration and Human Rights*, 2008, p. 2.

disregarded, especially those of irregular migrants without legal status.³¹⁸ The *International Convention on the Protection of the Rights of All Migrant Workers and Members of their Families* (1990) is an important milestone regarding the protection of migrants' rights, however, so far only 46 States are party to the Convention with only 35 signatories.³¹⁹ UNFPA is developing programs and supporting States in making sure that migration is neither caused by nor results in the inability of States to ensure nationals and migrants the execution of their rights.³²⁰

Human Trafficking

Trafficking remains one of the core challenges in international migration.³²¹ The issue is linked to irregular migration where migrants agree to be smuggled from one State to another because they do not have the chance to migrate legally.³²² Once they arrive in the country, traffickers force or coerce migrants into exploitive situations.³²³ Since there are no official records of migrants that enter a country illegally, human trafficking is often not revealed which leaves trafficked persons without any protection in the country of destination.³²⁴ Furthermore, human trafficking often leads to further human rights violations, such as rape, physical abuse or unlawful confinement.³²⁵

Human Rights Situations of Migrants in Recipient Countries

While most migrants are seeking a better life abroad, they often face severe human rights violations in their countries of destination.³²⁶ Visa policies often allow migrants only to enter a country once in order to work there.³²⁷ Migrants thus often do not return to their home countries, because they fear that they will not be able to return to their country of destination to work there again.³²⁸ This means that migrants cannot contribute to their home country's development the way they potentially could, but also that families often get separated months, if not years.³²⁹ Migrants' access to social services, such as housing, education or health, including reproductive health (family planning, maternal health) in their countries of destination is often limited, too.³³⁰ Countries of destination must secure the respect for migrants' human rights and equal treatment under the law as well as granting access to employment, housing, education, and health including reproductive health.³³¹ Special attention must be paid to avoid women's social isolation and encourage family reunification.³³²

Migration and Health Challenges

Migrants are exposed to significant health risks during the migration process, both in terms of physical and psychological risks.³³³ Once they have reached their country of destination the access to medical treatment can also be blocked because migrants do not possess the legal rights to receive treatment or are simply unable to communicate their health issue, because they do not speak the language.³³⁴ Keeping health services up for their citizens is a challenge for countries of origin, too.³³⁵ When a large number of health professionals emigrate, it can place detrimental pressures on national healthcare systems.³³⁶ The intention to migrate is especially high among health workers, which are often facing many difficulties within the health care systems of their home countries.³³⁷

³¹⁸ Global Migration Group, *International Migration and Human Rights*, 2008, p. 2.

³¹⁹ UN Office of Legal Affairs, *International Convention on the Protection of the Rights of All Migrant Workers and Members of their Families: Status* [Website], 2013; UN General Assembly, *International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families (A/RES/45/158)* [Resolution], 1990.

³²⁰ Global Migration Group, *International Migration and Human Rights*, 2008, p. 4.

³²¹ UNFPA, *State of the World Population 2006*, 2006, p. 3.

³²² Global Migration Group, *International Migration and Human Rights*, 2008, p. 11.

³²³ *Ibid.*, p. 11.

³²⁴ UNFPA, *State of the World Population 2006*, 2006, p. 3.

³²⁵ Global Migration Group, *International Migration and Human Rights*, 2008, p. 11.

³²⁶ UNFPA, *State of the World Population 2006*, 2006, p. 4.

³²⁷ UN Department for Economic and Social Affairs, *Interview with the Director of the Population Division of UN DESA, John Wilmoth*, 2013.

³²⁸ *Ibid.*

³²⁹ UNFPA, *Meeting the Challenges of Migration Progress since the ICPD*, 2004, p. 52.

³³⁰ UNFPA & International Organization for Migration, *Women on the Move*, 2006.

³³¹ *Ibid.*

³³² *Ibid.*

³³³ UNFPA, *Meeting the Challenges of Migration Progress since the ICPD*, 2004, p. 17.

³³⁴ *Ibid.*, p. 17.

³³⁵ *Ibid.*, p. 17.

³³⁶ *Ibid.*, p. 17.

³³⁷ UNFPA, *State of the World Population 2006*, 2006, p. 2.

Studies show that countries with high HIV/AIDS rates suffer from emigration of their health workers, who criticize the lack of medical infrastructure to treat their patients at home and thus migrate to another country with better health systems.³³⁸ High mobility does not only weaken the health care systems of those countries that are already troubled, it can also result in a growing transmission of infectious diseases, either because migrants lack access to health services in their host countries or due to the process of migration itself.³³⁹ The importation of diseases through migrants is not only alarming in regards to human health itself; it also challenges societies, as governments must invest more of their resources in healthcare instead of investing in economic development.³⁴⁰

Female Migration

Within the group of migrants, female migrants are still the most vulnerable group.³⁴¹ The share of female migrants of all international migrants today lies at almost 50%.³⁴² Still, women are more likely to become victims of trafficking and irregular migration.³⁴³ Migration data have not been gender-specific, thus hindering to identify the specific role and needs of female migrants.³⁴⁴ Women today migrate often to be economically independent, which makes migration a crucial factor to achieve gender equality and change the role of women, especially in developing countries.³⁴⁵ However, women still lack equal opportunities to migrate since recruitments often aim at male-dominated employment in construction or agriculture.³⁴⁶ Thus, women have different opportunities than men to take their equal share in the global economy as women are found predominantly in the service and welfare sectors.³⁴⁷ They are often found in gender segregated and unregulated sectors of the economy.³⁴⁸ At the same time, it is important to ensure that women are not forced to migrate only in order to support their families back home, but women must rather be enabled to improve their own lives through migration.³⁴⁹ It is crucial to support countries of origin and countries of destination through the life cycle of female migration and make sure that all structures, such as border policies, security, and general administration are respecting women's rights and their needs.³⁵⁰ As important as it may be to secure safe emigration for female migrants, attention should also be directed towards those women returning to their home countries.³⁵¹ Women, who have been victims of human trafficking or abduction often suffer from stigma or they are rejected by their former community once they return.³⁵² Female migrants thus need continuous support on their return and governments need to provide services to help women overcome stigma.³⁵³

Collecting Migration Data to Develop Effective Population Programs

While changes in population dynamics and decreasing populations in developed countries and certain regions are undeniable, it is exceedingly difficult to predict these developments due to a significant lack of data.³⁵⁴ One of the most important areas of UNFPA's work regarding migration is thus to collect significant migration data that deliver information on reasons for and numbers of international migrants to make sure that migration dynamics serve as a benefit for States and not as a further challenge to their development.³⁵⁵ Until now, international collaboration in this field has been weak, leading to legal and political loopholes that not only fail to protect migrants' rights but also

³³⁸ UNFPA, *State of the World Population 2006*, 2006, p. 2.

³³⁹ *Ibid.*, p. 16-17.

³⁴⁰ UNFPA, *By Choice, not by Chance Family Planning, Human Rights and Development*, 2012, p. 63.

³⁴¹ UN General Assembly, *Summary of the High-level-Dialogue on International Migration and Development: Note by the President of the General Assembly (A/61/515)*, 2006, p. 3.

³⁴² *Ibid.*, p. 4.

³⁴³ *Ibid.*, p. 4.

³⁴⁴ UNFPA, *Female Migrants: Bridging the Gaps throughout the Life Cycle*, 2006, p. iii.

³⁴⁵ Global Migration Group, *International Migration and Human Rights*, 2008, p. 30.

³⁴⁶ UNFPA, *Meeting the Challenges of Migration Progress since the ICPD*, 2004, p. 13.

³⁴⁷ UNFPA, *Female Migrants: Bridging the Gaps throughout the Life Cycle*, 2006, p. 25.

³⁴⁸ *Ibid.*, p. 25.

³⁴⁹ *Ibid.*, p. 25.

³⁵⁰ *Ibid.*, p. 25.

³⁵¹ *Ibid.*, p. 9.

³⁵² *Ibid.*, p. 9.

³⁵³ *Ibid.*, p. 9.

³⁵⁴ UNFPA, *Annual Report 2010*, 2010, p. 6.

³⁵⁵ UN Commission on Population and Development, *Monitoring of population programmes focusing on new trends in migration: demographic aspects: Report of the Secretary-General (E/CN.9/2013/4)*, 2013.

hinder the possibility to use migration to the benefit of all States affected.³⁵⁶ On the one hand, States lack the capacity to handle migration properly and have not yet formulated laws to protect migrants.³⁵⁷ On the other hand, States that are destinations for migrants and countries of origin lack structures helping them to pool their data and formulate policies to improve migration flows between their countries.³⁵⁸ UNFPA is working together with partners on different levels, including IOM, the United Nations Institute for Training and Research (UNITAR), and the MacArthur Foundation to fund seminars and raise awareness about the challenges and benefits of migration, which shall also help to build partnerships among States affected by migration.³⁵⁹ The goal is to support countries in developing evidence-based policies concerning migration.³⁶⁰ Since migration affects at least two countries (more if one also counts the countries of transition), it is crucial for States to work together, conduct studies together, and find ways to address shared interests.³⁶¹ At the same time, it is necessary to not only assess the issue, but also analyze what impact certain policies have on migration trends.³⁶² In 2012, UNFPA joined the “Global Knowledge Partnership on Migration and Development” under the auspices of the World Bank with the goal to set up a platform that generates and exchanges knowledge, and provides governments with policy choices to best address migration related issues.³⁶³ Through the platform, UNFPA seeks to work on developing a core set of indicators for migration profiles, a multiple indicator cluster survey, as well as setting up web-based training materials and capacity-building.³⁶⁴ In order to build these indicators, shared and comparable data and capacity-building by Member States to ease the collection of data are crucial.³⁶⁵ Developing a global census program with standardized questionnaires has been one initiative by the United Nations Department of Economic and Social Affairs (UNDESA) to further partnerships and research in this field.³⁶⁶

Case Study: Ghana

Migration has become an increasingly critical issue for Ghana and in response, the government has taken action to address the particular needs of migrants, making it an interesting case study for this topic. An estimated number of three million Ghanaians are living abroad sending an amount of about \$ 4.5 billion in remittances back to Ghana.³⁶⁷ In February 2006, the government decided to establish a Migration Unit within the Ministry of Interior “to coordinate the activities of all governmental institutions whose activities affect or are affected by migration.”³⁶⁸ The same year, UNFPA together with IOM, the Ghana Immigration Service, and the Department of Sociology of the University of Ghana launched a study about female cross-border migration in Ghana.³⁶⁹ The goal of the study was to identify motives for women to migrate in and out of Ghana including their pre-migration situation.³⁷⁰ Finally, the results helped to recommend policies and strategies in order to prevent irregular migration of women while “enhancing the positive potential of migration of women with emphasis on migration and development (remittances, investments in local projects, access to credit, and building of local human resource capacity through transfer of skills).”³⁷¹ The study further analyzed how many agents, brokers, employers, social networks, families, friends, traffickers and smugglers influence and determine a woman’s decision to migrate.³⁷² Data was collected and analyzed between September and December 2006 and forwarded to the Ghana Immigration Service as well as to

³⁵⁶ UN Commission on Population and Development, *Monitoring of population programmes focusing on new trends in migration: demographic aspects: Report of the Secretary-General (E/CN.9/2013/4)*, 2013.

³⁵⁷ *Ibid.*

³⁵⁸ *Ibid.*

³⁵⁹ UNFPA, *Annual Report 2010*, 2010, p. 6.

³⁶⁰ UN Commission on Population and Development, *Monitoring of population programmes focusing on new trends in migration: demographic aspects: Report of the Secretary-General (E/CN.9/2013/4)*, 2013, p. 11.

³⁶¹ *Ibid.*, p. 11.

³⁶² *Ibid.*, p. 17.

³⁶³ World Bank, *Prospects Global Knowledge Partnership on Migration and Development* [Website], 2013.

³⁶⁴ UN Commission on Population and Development, *Monitoring of population programmes focusing on new trends in migration: demographic aspects: Report of the Secretary-General (E/CN.9/2013/4)*, 2013, p. 17.

³⁶⁵ UN Department for Economic and Social Affairs, *Data Collection on Migration and Development* [Website], 2010.

³⁶⁶ *Ibid.*

³⁶⁷ Ghana, Ministry of the Interior, *Migration Unit*, 2013.

³⁶⁸ *Ibid.*

³⁶⁹ EC-UN Joint Migration & Development Initiative, *Study into Female Cross-Border Migration in Ghana* [Website], 2006.

³⁷⁰ *Ibid.*

³⁷¹ *Ibid.*

³⁷² *Ibid.*

UNFPA and IOM to further programming with stakeholders in Ghana.³⁷³ The results and the support of the international community and IOM helped to set up the Migration Unit in 2008; the Unit is now supporting the Ghanaian government in its efforts to integrate migration into the national development framework.³⁷⁴

Conclusion

Migration not only affects migrants themselves, but also their families and the societies of their home countries and countries of destination. While the efforts to put migration into a broader development context have increased, many challenges remain.³⁷⁵ Human rights of migrants are still too often violated in countries of destination, where women face an even greater risk to be victims of human rights violations.³⁷⁶ It is also necessary to be aware of the fact that migration is interlinked to a number of other issues, among them family planning, economic development, gender equality, and human rights.³⁷⁷ If migration shall benefit societies, governments of countries of destination and origin must establish legal frameworks that protect migrants' rights and help them integrate in a new society. This also includes training for government workers to respect these laws.³⁷⁸ Important questions for delegates of UNFPA include: what contribution, training, and guidance can UNFPA provide to improve the human rights situations of migrants in countries of destination? How can migration and return migration, be made easier for migrants, and how can data collection and best practice examples lead to common strategies for countries to handle return flows? Female migrants continue to play an increasingly pivotal role. What can be done to strengthen the role of female migrants in economic and social development?³⁷⁹ How can UNFPA support governments to meet this growing need for education and training in home countries to provide young people with an alternative to migration? What actions can the international community take in the face of economic crises and demographic changes to better mainstream migration into development planning? International migration is a multilayered topic that States cannot address individually. Only by working together can the international community make use of the benefits of migration and ensure that migrants, in fact, find the better life they are seeking.

Annotated Bibliography

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This publication does not only deal with the human rights' perspective on migration in general, it provides a comprehensive collection of issues interlinked between migration and development including the sub-topics of the Background Guide. In addition, the publication explains which UN bodies, IGOs, and non-governmental organizations (NGOs) are working together on what fields as well as what has been accomplished through this cooperation. This may help delegates to understand the mandate of their own committee in contrast to other committees. Furthermore, the bibliography of the publication is an important resource for delegates' further research on the topic, which will be of enormous help for delegates when preparing for the conference.

International Organization for Migration. (2013). *International Organization for Migration: Home* [Website]. Retrieved 19 July 2013 from: <http://www.iom.int/cms/home>

This website entails many information and resources on migration. It is a good starting point to get detailed information on international cooperation in the fields of migration. As mentioned in the Background Guide, UNFPA, as a member of the International Organization for Migration, is closely working together with the organization on various issues. The website will be immensely helpful for delegates to get first information on migration activities and policies today and will provide delegates with many resources related to this topic, such as UN resolutions and reports

³⁷³ EC-UN Joint Migration & Development Initiative, *Study into Female Cross-Border Migration in Ghana* [Website], 2006.

³⁷⁴ Ghana, *Migration Unit* [Website], 2013.

³⁷⁵ World Economic Forum, *Global Agenda Council on Migration 2012-2014*, p. 5.

³⁷⁶ UNFPA, *State of the World Population 2006*, 2006, p. 4.

³⁷⁷ UN General Assembly, *Summary of the High-level-Dialogue on International Migration and Development: Note by the President of the General Assembly (A/61/515)*, 2006, p. 2.

³⁷⁸ UNFPA, *Female Migrants: Bridging the Gaps throughout the Life Cycle*, 2006, p. 8.

³⁷⁹ *Ibid.*, p. 16.

and other official statements. Delegates will find the website particularly helpful to look up certain terms or find out more about UNFPA's work in regions of the world.

International Organization for Migration. (2010). *Mainstreaming Migration into Development Planning. A handbook for policy-makers and practitioners*. Retrieved 30 June 2013 from:

http://www.globalmigrationgroup.org/uploads/UNCT_Corner/theme7/mainstreamingmigration.pdf

This publication deals with one of the main issues that will be discussed in the guide and since published in 2010, it contributes to the topic's topicality. The handbook furthers the understanding of what efforts have been made in order to include migration into the overall development programming by UN bodies as well as Member States. The handbook provides its readers with country specific examples that will help delegates understand what activities lie within their committees mandate.

United Nations, Commission on Population and Development, Forty-sixth session. (2013). *Monitoring of population programmes focusing on new trends in migration: demographic aspects: Report of the Secretary-General (E/CN.9/2013/4)*. Retrieved 29 June 2013 from:

<http://www.un.org/esa/population/cpd/cpd2013/CPD%202013%20UNFPA%20Migration%20report%20advance%20unedited%20version.pdf>

This recent report by the Secretary-General provides delegates with a first yet comprehensive overview of the activities of UNFPA in the area of international migration. The report introduces delegates to a number of sub-topics to the issue, thus helping them to understand the overall importance of the topic. Furthermore, the report shows in which fields and how UNFPA is cooperating with other UN bodies, regional, and international organizations. The report summarizes what activities UNFPA has undertaken in different regions of the world, for example supporting authorities with undertaking surveys, data collection, or developing programs based on research results. The report shows how important it is to collect data in order to develop strategies that fit each individual country. Delegates may find this source helpful to get familiar with the topic and most recent developments.

United Nations, Department of Economic and Social Affairs. (2013, April 19). *Interview with the Director of the Population Division of the United Nations Department of Economic and Social Affairs, John Wilmoth on Focusing on new trends in migration on 19 April 2013, in New York* [Video]. Retrieved 1 July 2013 from:

<http://www.un.org/en/development/desa/news/population/cpd46-trends-in-migration.html>

This interview with John Wilmoth helps to understand new trends and challenges of international migration. The reader learns about the current situation, new patterns in migration flows and necessary actions the international community should take in order to address the issue. The interview is an excellent starting point to further work on the topic, and its timeliness helps to put the topic into current processes. Delegates will find this source helpful to get a first understanding of the topic from an official point of view and might find further orientation for the conference.

United Nations Population Fund. (1995). *International Conference on Population and Development - ICPD - Programme of Action: Report of the International Conference on Population and Development (A/CONF.171/13/Rev.1)*. Retrieved 30 June 2013 from:

http://www.unfpa.org/webdav/site/global/shared/documents/publications/2004/icpd_eng.pdf

Adopted in 1994, the Programme of Action remains the essential blueprint for the work of the United Nations Population Fund. The report explains different types of migration and the challenges facing migrants. It analyzes which root causes for migration can and should be addressed through international cooperation and where individual country strategies have to be strengthened so that countries of origin and destination can benefit from migration flows. The Programme lays down the objectives of UNFPA, which will be helpful for delegates to define their goals for the conference. While already an older source, the ICPD remains a valuable document and delegates are encouraged to familiarize themselves with it. It can also be a helpful resource when preparing for the other topics.

United Nations Population Fund. (2006). *Female Migrants: Bridging the Gaps throughout the Life Cycle. Selected Papers of the UNFPA-IOM Expert Group Meeting*. Retrieved 30 June 2013 from: http://www.unfpa.org/upload/lib_pub_file/658_filename_migration.pdf

This publication analyzes pertinent questions regarding female migration and the risks women are facing when migrating. The publication analyzes the situation of female migrants before, during, and after migration, and takes a look at the effects on countries of origin and destination, too. Thus, the publication provides a comprehensive basis for understanding the subject in-depth. Furthermore, the publication introduces the reader to some best practice examples of the Funds' work on that subject as well as its cooperation with other bodies.

United Nations Population Fund. (2006, September 6). *State of the World Population 2006*. Retrieved 29 July 2013 from: http://www.unfpa.org/swp/2006/pdf/en_sowp06.pdf

This report focuses a lot on migration challenges in the twenty-first century, especially on irregular migration, migration and health, migration and human rights and the challenges female migrants are facing. It is a comprehensive report that also puts the different challenges in context to each other. The report is supported by figures and short summaries that help to grasp the developments in migration flows. It also shows the different challenges different regions of the world have to face, such as brain drain of health personnel or the impacts migration has on family planning. It is thus a good resource to understand the linkages between migration and other areas of UNFPA's involvement. Delegates will find this source extremely helpful to get detailed information on relevant sub-topics.

United Nations Population Fund. (2012). *Promises to Keep. Annual Report 2012*. Retrieved 30 June 2013 from: <http://www.unfpa.org/webdav/site/global/shared/documents/publications/2013/AR%202012%20EN-Final.pdf>

Together with the Annual Report 2010, this report is the most recent UNFPA document that presents UNFPA activities related to migration. The report explains UNFPA's involvement in international migration policies in general as well as giving quick summaries on important sub-topics relevant to migration. Annual reports also provide an overview of UNFPA's involvement in the regions of the world, which might be helpful for delegates when preparing their country's position.

World Economic Forum. (n.d.). *Global Agenda Council on Migration 2012-2014 - White paper for the United Nations General Assembly High Level Dialogue on International Migration and Development 2013*. Retrieved 30 July 2013 from: <http://www.gfmd.org/documents/sweden/HLD-Submission-GAC-Migration.pdf>

This resource provides an overview of the most recent, present and upcoming challenges on the subject. It provides the reader with principles of the High Level Dialogue on Migration and Development that will further discuss how to mainstream migration into development planning in October this year. The website the source is retrieved from also links to further initiatives and activities related to migration and how to mainstream migration into development planning. Delegates will find the source and the website helpful to get a better overview of the various programs and initiatives currently in place or planned to better coordinate migration policies.

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Rules of Procedure of the United Nations Population Fund

Introduction

1. These rules shall be the only rules which apply to the Executive Board of the United Nations Population Fund (hereinafter referred to as “the Board”) and shall be considered adopted by the Board prior to its first meeting.
2. For purposes of these rules, the Director, the Assistant Director(s), the Under-Secretaries-General, and the Assistant Secretaries-General, are designates and agents of the Secretary-General and Deputy Secretary-General, and are collectively referred to as the “Secretariat.”
3. Interpretation of the rules shall be reserved exclusively to the Deputy Secretary-General or her/his designate. Such interpretation shall be in accordance with the philosophy and principles of the National Model United Nations (NMUN) and in furtherance of the educational mission of that organization.
4. For the purposes of these rules, “President” shall refer to the chairperson or acting chairperson of the Board, which can be any member of the Secretariat or their designate.
5. The practice of striving for consensus in decision-making shall be encouraged. NMUN also acknowledges it may sometimes be necessary for a Member State to abstain or vote against a resolution it cannot support for policy reasons.

I. SESSIONS

Rule 1 - *Dates of convening and adjournment*

The Board shall meet every year in regular session, commencing and closing on the dates designated by the Secretary-General.

Rule 2 - *Place of sessions*

The Board shall meet at a location designated by the Secretary-General.

II. AGENDA

Rule 3 - *Provisional agenda*

The provisional agenda shall be drawn up by the Deputy Secretary-General and communicated to the members of the Board at least sixty days before the opening of the session.

Rule 4 - *Adoption of the agenda*

The agenda provided by the Deputy Secretary-General shall be considered adopted as of the beginning of the session. The order of the agenda items shall be determined by a majority vote of those present and voting.

The vote described in this rule is a procedural vote and, as such, observers are permitted to cast a vote. For purposes of this rule, those present and voting means those Member States and observers, in attendance at the meeting during which this motion comes to a vote. Should the Board not reach a decision by conclusion of the first night's meeting, the agenda will be automatically set in the order in which it was first communicated.

Rule 5 - Revision of the agenda

During a session, the Board may revise the agenda by adding, deleting, deferring or amending items. Only important and urgent items shall be added to the agenda during a session. Debate on the inclusion of an item in the agenda shall be limited to three speakers in favor of, and three against, the inclusion. Additional items of an important and urgent character, proposed for inclusion in the agenda less than thirty days before the opening of a session, may be placed on the agenda if the Board so decides by a two-thirds majority of the members present and voting. No additional item may, unless the Board decides otherwise by a two-thirds majority of the members present and voting, be considered until a commission has reported on the question concerned.

For purposes of this rule, the determination of an item of an important and urgent character is subject to the discretion of the Deputy Secretary-General, or his or her designate, and any such determination is final. If an item is determined to be of such a character, then it requires a two-thirds vote of the Board to be placed on the agenda. The votes described in this rule are substantive votes, and, as such, observers are not permitted to cast a vote. For purposes of this rule, —the members “present and voting” — means members (not including observers) in attendance at the session during which this motion comes to vote.

Rule 6 - Explanatory memorandum

Any item proposed for inclusion in the agenda shall be accompanied by an explanatory memorandum and, if possible, by basic documents.

III. SECRETARIAT

Rule 7 - Duties of the Secretary-General

1. The Secretary-General or her/his designate shall act in this capacity in all meetings of the Board.
2. The Secretary-General, in cooperation with the Deputy Secretary-General, shall provide and direct the staff required by the Board and be responsible for all the arrangements that may be necessary for its meetings.

Rule 8 - Duties of the Secretariat

The Secretariat shall receive and distribute documents of the Commission to the Members, and generally perform all other work which the Board may require.

Rule 9 - Statements by the Secretariat

The Secretary-General or her/his designate, may make oral as well as written statements to the Board concerning any question under consideration.

Rule 10 - Selection of the President

The Secretary-General or her/his designate shall appoint, from applications received by the Secretariat, a President who shall hold office and, *inter alia*, chair the Board for the duration of the session, unless otherwise decided by the Secretary-General.

Rule 11 - Replacement of the President

If the President is unable to perform her/his functions, a new President shall be appointed for the unexpired term at the discretion of the Secretary-General or her/his designate.

IV. LANGUAGE

Rule 12 - Official and working language

English shall be the official and working language of the Board during scheduled sessions (both formal and informal) of the Board.

Rule 13 - Interpretation (oral) or translation (written)

Any representative wishing to address any body or submit a document in a language other than English shall provide interpretation or translation into English.

This rule does not affect the total speaking time allotted to those representatives wishing to address the body in a language other than English. As such, both the speech and the interpretation must be within the set time limit. The language should be the official language of the country you are representing at NMUN.

V. CONDUCT OF BUSINESS

Rule 14 - Quorum

The President may declare a meeting open and permit debate to proceed when representatives of at least one-third of the members of the Board are present. The presence of representatives of a majority of the members of the Board shall be required for any decision to be taken.

For purposes of this rule, members of the Board means the total number of members (not including observers) in attendance at the first night's meeting (session).

Rule 15 - General powers of the President

In addition to exercising the powers conferred upon him or her elsewhere by these rules, the President shall declare the opening and closing of each meeting of the Board, direct the discussions, ensure observance of these rules, accord the right to speak, put questions to vote and announce decisions. The President, subject to these rules, shall have complete control of the proceedings of the Board and over the maintenance of order at its meetings. He or she shall rule on points of order. The President may propose to the Board the closure of the list of speakers, a limitation on the speakers time and on the number of times the representative of each member may speak on an item, the adjournment or closure of the debate, and the suspension or adjournment of a meeting.

Included in these enumerated powers is the power to assign speaking times for all speeches incidental to motions and amendment. Further, the President is to use her/his discretion, upon the advice and at the consent of the Secretariat, to determine whether to entertain a particular motion based on the philosophy and principles of the NMUN. Such discretion should be used on a limited basis and only under circumstances where it is necessary to advance the educational mission of the Conference and is limited to entertaining motions.

Rule 16 - Authority of the Board

The President, in the exercise of her or his functions, remains under the authority of the Board.

Rule 17 - Voting rights on procedural matters

Unless otherwise stated, all votes pertaining to the conduct of business shall require a favorable vote by the majority of the members "present and voting" in order to pass.

For purposes of this rule, the members present and voting mean those members (including observers) in attendance at the meeting during which this rule is applied. Note that observers may vote on all procedural votes; they may, however, not vote on substantive matters (see Chapter VI). Every delegation must cast a vote in procedural votes. Further, there is no possibility to abstain or pass on procedural votes

Rule 18 - Points of order

During the discussion of any matter, a representative may rise to a point of order, and the point of order shall be immediately decided by the President in accordance with the rules of procedure. A representative may appeal against the ruling of the President. The appeal shall be immediately put to the vote, and the President's ruling shall stand unless overruled by a majority of the members present and voting. A representative rising to a point of order may not speak on the substance of the matter under discussion.

Such points of order should not under any circumstances interrupt the speech of a fellow representative. They should be used exclusively to correct an error in procedure. Any questions on order arising during a speech made by a representative should be raised at the conclusion of the speech, or can be addressed by the President, sua sponte (on her/his own accord), during the speech. For purposes of this rule, the members present and voting mean those members (including observers) in attendance at the meeting during which this motion comes to vote.

Rule 19 - Speeches

No representative may address the Board without having previously obtained the permission of the President. The President shall call upon speakers in the order in which they signify their desire to speak. The President may call a speaker to order if his remarks are not relevant to the subject under discussion.

In line with the philosophy and principles of the NMUN, in furtherance of its educational mission, and for the purpose of facilitating debate, the Secretariat will set a time limit for all speeches which may be amended by the Board through a vote if the President, at his or her discretion, decides to allow the Board to decide. In no case shall the speakers time be changed during the first scheduled session of the Board. Consequently, motions to alter the speaker's time will not be entertained by the President. The content of speeches should be pertinent to the agenda as set by the Board.

Rule 20 - List of Speakers

Members may only be on the list of speakers once but may be added again after having spoken. During the course of a debate, the President may announce the list of speakers and, with the consent of the Board, declare the list closed. Once the list has been closed, it can be reopened upon by a vote of the Board. When there are no more speakers, the President shall declare the debate closed. Such closure shall have the same effect as closure by decision of the Board.

The decision to announce the list of speakers is within the discretion of the President and should not be the subject of a motion by the Board. A motion to close the speakers list or reopen (if the list has already been closed) is within the purview of the Board and the President should not act on her/his own motion.

Rule 21 - Right of reply

If a remark impugns the integrity of a representative's State, the President may permit that representative to exercise her/his right of reply following the conclusion of the controversial speech, and shall determine an appropriate time limit for the reply. No ruling on this question shall be subject to appeal.

For purposes of this rule, a remark that impugns the integrity of a representative's State is one directed at the governing authority of that State and/or one that puts into question that State's sovereignty or a portion thereof. All interventions in the exercise of the right of reply shall be addressed in writing to the Secretariat and shall not be raised as a point of order or motion. The reply shall be read to the Board by the representative only upon approval of the Secretariat, and in no case after voting has concluded on all matters relating to the agenda topic, during the discussion of which, the right arose. The right of reply will not be approved should it impugn the integrity of another State.

Rule 22 - Suspension of the meeting

During the discussion of any matter, a representative may move the suspension of the meeting, specifying a time for reconvening. Such motions shall not be debated but shall be put to a vote immediately, requiring the support of a majority of the members present and voting to pass. Delegates should not state a purpose for the suspension.

This motion should be used to suspend the meeting for lunch or at the end of the scheduled board session time. Delegates should properly phrase this motion as "suspension of the meeting," and provide a length of time when making the motion.

Rule 23 - Adjournment of the meeting

During the discussion of any matter, a representative may move to the adjournment of the meeting. Such motions shall not be debated but shall be put to the vote immediately, requiring the support of a majority of the members present and voting to pass. After adjournment, the Board shall reconvene at its next regularly scheduled meeting time.

As this motion, if successful, would end the meeting until the Board's next regularly scheduled session the following year, and in accordance with the philosophy and principles of the NMUN and in furtherance of its educational mission, the President will not entertain such a motion until the end of the last meeting of the Board.

Rule 24 - Adjournment of debate

During the discussion of any matter, a representative may move the adjournment of the debate on the item under discussion. Two representatives may speak in favor of, and two against, the motion, after which the motion shall be immediately put to the vote. The President may limit the time to be allowed to speakers under this rule.

Rule 25 - Closure of debate

A representative may at any time move the closure of debate on the item under discussion, whether or not any other representative has signified her/his wish to speak. Permission to speak on the motion shall be accorded only to two representatives opposing the closure, after which the motion shall be put to the vote immediately. Closure of debate shall require a two-thirds majority of the members present and voting. If the Board favors the closure of debate, the Board shall immediately move to vote on all proposals introduced under that agenda item.

Rule 26 - Order of motions

Subject to Rule 18, the motions indicated below shall have precedence in the following order over all proposals or other motions before the meeting:

1. To suspend the meeting;
2. To adjourn the meeting;
3. To adjourn the debate on the item under discussion;
4. To close the debate on the item under discussion.

Rule 27 - Proposals and amendments

Proposals and amendments shall normally be submitted in writing to the Secretariat. Any proposal or amendment that relates to the substance of any matter under discussion shall require the signature of twenty percent of the members of the Board [sponsors].

The Secretariat may, at its discretion, approve the proposal or amendment for circulation among the delegations. As a general rule, no proposal shall be put to the vote at any meeting of the Board unless copies of it have been

circulated to all delegations. The President may, however, permit the discussion and consideration of amendments or of motions as to procedure, even though such amendments and motions have not been circulated.

If the sponsors agree to the adoption of a proposed amendment, the proposal shall be modified accordingly and no vote shall be taken on the proposed amendment. A document modified in this manner shall be considered as the proposal pending before the Board for all purposes, including subsequent amendments.

For purposes of this rule, all proposals shall be in the form of working papers prior to their approval by the Secretariat. Working papers will not be copied, or in any other way distributed, to the Board by the Secretariat. The distribution of such working papers is solely the responsibility of the sponsors of the working papers. Along these lines, and in furtherance of the philosophy and principles of the NMUN and for the purpose of advancing its educational mission, representatives should not directly refer to the substance of a working paper that has not yet been accepted as a draft resolution during formal speeches. After approval of a working paper, the proposal becomes a draft resolution and will be copied by the Secretariat for distribution to the Board. These draft resolutions are the collective property of the Board and, as such, the names of the original sponsors will be removed. The copying and distribution of amendments is at the discretion of the Secretariat, but the substance of all such amendments will be made available to all representatives in some form. Should delegates wish to withdraw a working paper or draft resolution from consideration, this requires the consent of all sponsors.

Rule 28 - Withdrawal of motions

A motion may be withdrawn by its proposer at any time before voting has commenced, provided that the motion has not been amended. A motion thus withdrawn may be reintroduced by any member.

Rule 29 - Reconsideration of a topic

When a topic has been adjourned, it may not be reconsidered at the same session unless the Board, by a two-thirds majority of those present and voting, so decides. Reconsideration can only be moved by a representative who voted on the prevailing side of the original motion to adjourn. Permission to speak on a motion to reconsider shall be accorded only to two speakers opposing the motion, after which it shall be put to the vote immediately. The President may limit the time to be allowed to speakers under this rule.

Rule 30 - Invitation to silent prayer or meditation

Immediately after the opening of the first plenary meeting and immediately preceding the closing of the final plenary meeting of each session of the General Assembly, the President shall invite the representatives to observe one minute of silence dedicated to prayer or meditation.

VI. VOTING

Rule 31 - Voting rights

Each member of the Board shall have one vote.

This rule applies to substantive voting on amendments, draft resolutions, and portions of draft resolutions divided out by motion. As such, all references to member(s) do not include observers, who are not permitted to cast votes on substantive matters.

Rule 32 - Request for a vote

A proposal or motion before the Board for decision shall be voted upon if any member so requests. Where no member requests a vote, the Board may adopt proposals or motions without a vote.

For purposes of this rule, proposal means any draft resolution, an amendment thereto, or a portion of a draft resolution divided out by motion. Just prior to a vote on a particular proposal or motion, the President may ask if there are any objections to passing the proposal or motion by acclamation, or a

member may move to accept the proposal or motion by acclamation. If there are no objections to the proposal or motion, then it is adopted without a vote. Adoption by “acclamation” or “without a vote” is consistent not only with the educational mission of the conference but also the way in which the United Nations adopts a majority of its proposals.

Rule 33 - Majority required

1. Unless specified otherwise in these rules, decisions of the Board shall be made by a majority of the members present and voting.
2. For the purpose of tabulation, the phrase “members present and voting” means members casting an affirmative or negative vote. Members which abstain from voting are considered as not voting.

All members declaring their representative States as “present and voting” during the attendance roll-call for the meeting during which the substantive voting occurs, must cast an affirmative or negative vote, and cannot abstain on substantive votes.

Rule 34 - Method of voting

1. The Board shall normally vote by a show of placards, except that a representative may request a roll-call, which shall be taken in the English alphabetical order of the names of the members, beginning with the member whose name is randomly selected by the President. The name of each member shall be called in any roll-call, and one of its representatives shall reply “yes,” “no,” “abstention,” or “pass.”

Only those members who designate themselves as present or present and voting during the attendance roll-call, or in some other manner communicate their attendance to the President and/or Secretariat, are permitted to vote and, as such, no others will be called during a roll-call vote. Any representatives replying pass must, when requested a second time, respond with either a yes or no vote. A pass cannot be followed by a second pass for the same proposal or amendment, nor can it be followed by an abstention on that same proposal or amendment.

2. When the Board votes by mechanical means, a non-recorded vote shall replace a vote by show of placards and a recorded vote shall replace a roll-call vote. A representative may request a recorded vote. In the case of a recorded vote, the Board shall dispense with the procedure of calling out the names of the members.
3. The vote of each member participating in a roll-call or a recorded vote shall be inserted in the record.

Rule 35 - Explanations of vote

Representatives may make brief statements consisting solely of explanation of their votes after the voting has been completed. The representatives of a member sponsoring a proposal or motion shall not speak in explanation of vote thereon, except if it has been amended, and the member has voted against the proposal or motion.

All explanations of vote must be submitted to the President in writing before debate on the topic is closed, except where the representative is of a member sponsoring the proposal, as described in the second clause, in which case the explanation of vote must be submitted to the President in writing immediately after voting on the topic ends. Only delegates who are sponsors of a draft resolution that has been adopted with an unfriendly amendment, whom subsequently voted against the draft resolution may explain their vote.

Rule 36 - Conduct during voting

After the President has announced the commencement of voting, no representatives shall interrupt the voting except on a point of order in connection with the actual process of voting.

For purposes of this rule, there shall be no communication among delegates, and if any delegate leaves the Board room during voting procedure, they will not be allowed back into the room until the Board has convened voting procedure. Should a delegate who is also serving as Head Delegate leave the room, they may reenter but they may not retake their seat and participate in the vote.

Rule 37 - Division of proposals and amendments

Immediately before a proposal or amendment comes to a vote, a representative may move that parts of a proposal or of an amendment should be voted on separately. If there are calls for multiple divisions, those shall be voted upon in an order to be set by the President where the most radical division will be voted upon first. If an objection is made to the motion for division, the request for division shall be voted upon, requiring the support of a majority of those present and voting to pass. Permission to speak on the motion for division shall be given only to two speakers in favor and two speakers against. If the motion for division is carried, those parts of the proposal or of the amendment which are approved shall then be put to a vote. If all operative parts of the proposal or of the amendment have been rejected, the proposal or amendment shall be considered to have been rejected as a whole.

For purposes of this rule, most radical division means the division that will remove the greatest substance from the draft resolution, but not necessarily the one that will remove the most words or clauses. The determination of which division is most radical is subject to the discretion of the Secretariat, and any such determination is final.

Rule 38 - Amendments

An amendment is a proposal that does no more than add to, delete from, or revise part of another proposal. Permission to speak on the amendment shall be given only to two speakers in favor and two speakers against.

An amendment can add, amend, or delete entire operative clauses, but cannot in any manner add, amend, delete, or otherwise affect preambular clauses or sub-clauses of operative clauses. The President may limit the time to be allowed to speakers under this rule. These speeches are substantive in nature.

Rule 39 - Voting on amendments

When an amendment is moved to a proposal, the amendment shall be voted on first. When two or more amendments are moved to a proposal, the amendment furthest removed in substance from the original proposal shall be voted on first and then the amendment next furthest removed there from, and so on until all the amendments have been put to the vote. Where, however, the adoption of one amendment necessarily implies the rejection of another amendment, the latter shall not be put to the vote. If one or more amendments are adopted, the amended proposal shall then be voted on.

For purposes of this rule, furthest removed in substance means the amendment that will have the most significant impact on the draft resolution. The determination of which amendment is furthest removed in substance is subject to the discretion of the Secretariat, and any such determination is final.

Rule 40 - Order of voting on proposals

If two or more proposals, other than amendments, relate to the same question, they shall, unless the Board decides otherwise, be voted on in the order in which they were submitted.

Rule 41 - The President shall not vote

The President shall not vote but may designate another member of her/his delegation to vote in her/his place.

VII. CREDENTIALS

Rule 42 - Credentials

The credentials of representatives and the names of members of a delegation shall be submitted to the Secretary-General prior to the opening of a session.

Rule 43 - Authority of the General Assembly

The Board shall be bound by the actions of the General Assembly in all credentials matters and shall take no action regarding the credentials of any member.

VII. PARTICIPATION OF NON-MEMBERS OF THE COMMITTEE

Rule 44 - Participation of non-Member States

The Board shall invite any Member of the United Nations that is not a member of the Board and any other State, to participate in its deliberations on any matter of particular concern to that State.

A sub-board or sessional body of the Board shall invite any State that is not one of its own members to participate in its deliberations on any matter of particular concern to that State. A State thus invited shall not have the right to vote, but may submit proposals which may be put to the vote on request of any member of the body concerned.

If the Board considers that the presence of a Member invited, according to this rule, is no longer necessary, it may withdraw the invitation. Delegates invited to the Board according to this rule should also keep in mind their role and obligations in the Board that they were originally assigned to. For educational purposes of the NMUN Conference, the Secretariat may thus ask a delegate to return to his or her board when his or her presence in the Board is no longer required. Delegates may request the presence of a non-member of their board simply by informing the President that this is the desire of the body, there is no formal procedural process.

Rule 45 - Participation of national liberation movements

The Board may invite any national liberation movement recognized by the General Assembly to participate, without the right to vote, in its deliberations on any matter of particular concern to that movement.

National liberation movements are only represented at NMUN in two ways: (1) if their delegation has been assigned explicitly the national liberation movement itself; or (b) should the Security Commission wish to hear from a representative of the movement in their deliberations, the Secretariat shall provide the appropriate representative.

Rule 46 - Participation of and consultation with specialized agencies

In accordance with the agreements concluded between the United Nations and the specialized agencies, the specialized agencies shall be entitled: a) To be represented at meetings of the Board and its subsidiary organs; b) To participate, without the right to vote, through their representatives, in deliberations with respect to items of concern to them and to submit proposals regarding such items, which may be put to the vote at the request of any member of the Board or of the subsidiary organ concerned.

NMUN does not assign delegations to Specialized Agencies.

Rule 47 - Participation of non-governmental organization and intergovernmental organizations

Representatives of non-governmental organizations/intergovernmental organizations accorded consultative observer status by the Economic and Social Council and other non-governmental organizations/intergovernmental organizations designated on an ad hoc or a continuing basis by the Board on the recommendation of the Bureau, may participate, with the procedural right to vote, but not the substantive right to vote, in the deliberations of the Board on questions within the scope of the activities of the organizations.

NMUN will assign delegations an NGO instead of a Member State upon request.