UNITED NATIONS POPULATION FUND
BACKGROUND GUIDE 2018

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Contributions by: Bianca Amira Zanella
Dear Delegates,

Welcome to the 2018 National Model United Nations New York Conference (NMUN•NY)! We are pleased to welcome you to the United Nations Population Fund (UNFPA). This year’s staff are: Directors Ismail Dogar DMD (Conference A) and Simón Arias (Conference B), and Assistant Directors Natalia Hazelwood (Conference A) and Rajadhar Reddy (Conference B). Ismail completed his B.S. in International Business and Health Sciences and obtained a Doctor in Dental Medicine. Simon completed his B.A. in International Political Economy and Diplomacy at the University of Bridgeport and is completing his M.A. at Johns Hopkins School of Advanced International Studies, specializing in Conflict Management. Natalia is completing her B.A. in International Relations at the Pennsylvania State University. Rajadhar is a senior at the University of Texas at Dallas, majoring in Neuroscience.

The topics under discussion for the United Nations Population Fund are:

1. Sexual and Reproductive Health in Humanitarian Response
2. The Impact of Climate Change on Achieving Sustainable Population Growth
3. Managing the Needs and Challenges of an Ageing World

Operating under both the General Assembly and the Economic and Social Council, the UNFPA is the leading population-focused entity within the organization. The role of the UNFPA within this framework is to promote and support the safe practice and rights of sexual and reproductive health for families and individuals. The United Nations Population Fund addresses challenges related to sexual and reproductive health in relation to socio-economic development and population growth by gathering knowledge, building partnerships, and implementing strategies and aid programs. To accurately simulate the committee, it is key for delegates to emulate the normative and best practice-setting approaches of the United Nations Population Fund and consider how decisions can impact operations on the ground.

This Background Guide serves as an introduction to the topics for this committee. However, it is not intended to replace individual research. We encourage you to explore your Member State’s policies in depth and use the Annotated Bibliography and Bibliography to further your knowledge on these topics. In preparation for the Conference, each delegation will submit a research paper on the topics to replace individual committee research. Please take note of the mandatory Expectations of Delegates on the NMUN website. They include the mandatory Conduct Expectations on the NMUN website. They include the Conference dress code and other expectations of all attendees. We want to emphasize that any instances of sexual harassment or discrimination based on race, gender, sexual orientation, national origin, religion, age, or disability will not be tolerated.

If you have any questions concerning your preparation for the committee or the Conference itself, please contact the Under-Secretaries-General for the Human Rights and Humanitarian Affairs Department, Dieyun Song (Conference A) and Dominika Ziemczonek (Conference B), at usg.hr_ha@nmun.org.

We wish you all the best in your preparations and look forward to seeing you at the Conference!

**Conference A**
Ismail Dogar DMD, Director
Natalia Hazelwood, Assistant Director

**Conference B**
Simón Arias, Director
Rajadhar Reddy, Assistant Director

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United Nations System at NMUN•NY

This diagram illustrates the UN system simulated at NMUN•NY and demonstrates the reportage and relationships between entities. Examine the diagram alongside the Committee Overview to gain a clear picture of the committee’s position, purpose, and powers within the UN system.
**Abbreviations**

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>ART</td>
<td>Anti-retroviral therapy</td>
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<td>BDPA</td>
<td><em>Beijing Declaration and Platform for Action</em></td>
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<tr>
<td>CEDAW</td>
<td><em>Convention on the Elimination of All Forms of Discrimination against Women</em></td>
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<td>CSO</td>
<td>Civil Society Organization</td>
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<td>DECA</td>
<td>Demographic Exploration for Climate Adaptation</td>
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<td>ECOSOC</td>
<td>Economic and Social Council</td>
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<td>GBV</td>
<td>Gender-based violence</td>
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<td>GIS</td>
<td>Geographic information system</td>
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<td>HRC</td>
<td>Human Rights Council</td>
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<td>IAWG</td>
<td>Inter-Agency Working Group on Reproductive Health in Crises</td>
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<td>ICESCR</td>
<td><em>International Covenant on Economic, Social and Cultural Rights</em></td>
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<td>ICPD</td>
<td>International Conference on Population and Development</td>
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<td>IDP</td>
<td>Internally displaced person</td>
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<td>IGO</td>
<td>Intergovernmental organization</td>
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<td>MDG</td>
<td>Millennium Development Goal</td>
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<td>MHTF</td>
<td>Maternal Health Thematic Fund</td>
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<td>MIPAA</td>
<td><em>Madrid International Plan of Action on Ageing</em></td>
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<tr>
<td>NGO</td>
<td>Non-governmental organization</td>
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<td>OCHA</td>
<td>Office for the Coordination of Humanitarian Affairs</td>
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<td>OECD</td>
<td>Organisation for Economic Co-operation and Development</td>
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<td>OEWG</td>
<td>Open-Ended Working Group</td>
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<td>PM</td>
<td>Population Matters</td>
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<td>PoA</td>
<td>Programme of Action</td>
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<td>PTSD</td>
<td>Post-traumatic stress disorder</td>
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<td>SDG</td>
<td>Sustainable Development Goal</td>
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<td>SRH</td>
<td>Sexual and reproductive health</td>
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<td>STI</td>
<td>Sexually transmitted infection</td>
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<td>TPI</td>
<td>Training Partner Initiative</td>
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<td>UDHR</td>
<td><em>Universal Declaration of Human Rights</em></td>
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<td>UN</td>
<td>United Nations</td>
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<td>UN DESA</td>
<td>United Nations Department of Economic and Social Affairs</td>
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<td>UNAIDS</td>
<td>Joint United Nations Programme on HIV/AIDS</td>
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<td>UNDP</td>
<td>United Nations Development Programme</td>
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<td>UNESCO</td>
<td>United Nations Educational, Scientific and Cultural Organization</td>
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<td>UNFCCC</td>
<td><em>United Nations Framework Convention on Climate Change</em></td>
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<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<td>UNIDOP</td>
<td>United Nations International Day of Older Persons</td>
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<td>WHO</td>
<td>World Health Organization</td>
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Committee Overview

Introduction

The United Nations Population Fund (UNFPA) was established in 1967 as the United Nations Fund for Population Activities and formally began its operations in 1969.1 Centered on equal rights and protections for all human beings, UNFPA plays a leading role in the UN system by promoting and supporting safe childbirth and planned pregnancies with particular emphasis on women and young people, as their rights to sexual and reproductive health are often hindered and restricted.2 To reflect its lead role in addressing population within the United Nations (UN) system, UNFPA was officially renamed the United Nations Population Fund in 1987 while retaining its original abbreviation.3 UNFPA’s key agenda incorporates three strategic core areas of work: reproductive and sexual health, gender equality, and population and development.4 These core areas include issues such as family planning and contraception, emergency and humanitarian crisis situations, obstetric fistula, HIV infection, child marriage, female genital mutilation, and poverty.5 Across the globe, UNFPA supports reproductive health care services and materials for over 150 Member States that benefit 20 million women a year and the prevention of gender-based violence and female genital mutilation, which affects 3 million girls annually.6 UNFPA also supports efforts to end the practices of child marriages and unwanted teen pregnancies.7

Governance, Structure, and Membership

In 1993, General Assembly resolution 48/162 changed the reporting mechanisms for UNFPA.8 Where it had previously reported to the United Nations Development Program (UNDP), UNFPA began reporting to the General Assembly starting in 1994, with additional policy guidance from the Economic and Social Council (ECOSOC).9 Further governance and structural shifts resulting from General Assembly resolution 48/162 included transforming the UNDP and UNFPA’s joint 48-Member State governing council into an Executive Board, with further consideration pending the outcome of the International Conference on Population and Development.10 The Board is comprised of 36 Member States on a rotating basis with representation from each regional block.11 The regional blocks consist of eight African states, seven Asia-Pacific states, four Eastern European states, five Latin American and Caribbean states, and 12 Western European and other states.12 The Board holds first and second regular sessions, annual sessions, and pre-sessional consulting.13 It is the responsibility of the Board to provide administrative, financial, and intergovernmental support, and supervision of programs and activities within its thematic areas.14

Financially, UNFPA is fully supported by voluntary contributions of donor governments, intergovernmental organizations, private sector groups and foundations and individuals; it does not receive funds from the UN regular budget and all contributions go toward core resources vital for UNFPA’s key agenda.15 In 2015, total contributions

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4 Ibid.
6 UNFPA, About Us, 2017.
7 Ibid.
9 Ibid.
10 Ibid.
11 UNFPA, Executive Board, 2017; UNFPA Members of the Executive Board, 2017.
12 UNFPA Members of the Executive Board, 2017.
13 UNFPA, Schedule of Meetings, 2017.
made to UNFPA reached approximately $979 million. Of the total, $398 million went toward UNFPA’s core resources and $581 million were reserved to be used for specific programs and initiatives. A separate $77 million of the total were reserved funds that went toward supporting the UNFPA Supplies program and the UNFPA Maternal Health Thematic Fund, which incorporates the Campaign to End Fistula. For transparency efforts, the expenses of UNFPA’s worldwide 2016 program demonstrate what core areas are being targeted and how much of the funds are being utilized. Approximately 61.7% of its expenses are related to integrated sexual and reproductive health services as the core area that receives the greatest financial allocation.

To be an effective UN development agency, UNFPA contributes to intergovernmental and inter-agency processes by participating in debate and discussion, and giving policy recommendation on some of the General Assembly’s 150 agenda items. UNFPA also participates with regional intergovernmental commissions of ECOSOC, and collaborates with other entities such as the Human Rights Council. UNFPA is one of four founding members of the UN Development Group created in 1997 by the Secretary-General to improve coherence of UN development efforts at the Member State level. UNFPA is also a member of the UN Chief Executives Board for Coordination that meets twice annually and serves as the main instrument within the UN system to coordinate the actions and policies of the numerous executive heads of various entities.

**Mandate, Functions, and Powers**

ECOSOC resolution 1084 (XXXIX) (1965), and General Assembly resolution 2211 (XXI) (1966), both highlighted that the challenges in reproductive health services in relation to socio-economic development and population growth within developing countries should be addressed through a specialized agency within the UN. In response to these observations, the Secretary-General established UNFPA to assist in population matters for the international community. Adopted in ECOSOC resolution 1763 (1973), UNFPA’s mandate calls for knowledge-gathering and capacity-building to aid national, regional, and interregional responses to global population needs and family planning. The mandate empowers UNFPA to raise awareness and provide aid to developing countries to assist in addressing population challenges and implementing strategies in accordance with national plans and priorities. The mandate also supports UNFPA’s efforts in data collection and developing context-specific approaches and programs, both of which have been recognized as crucial steps to achieving the Sustainable Development Goals (SDGs). UNFPA has been commended for its contributions to family planning, improving sexual and reproductive health and rights services, and in preventing female genital mutilation, all of which contribute to overall well-being for communities.

In 1994, Egypt hosted the International Conference on Population and Development (ICPD), the largest intergovernmental conference on the topic, with 179 governments and over 11,000 participants from governments, UN specialized agencies and organizations, intergovernmental organizations (IGOs), non-governmental

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18 Ibid.
20 Ibid.
22 Ibid.
23 Ibid.
24 Ibid.
26 Ibid.
organizations (NGOs), and the media.\textsuperscript{31} The outcome of the conference was the ICPD \textit{Programme of Action} (PoA), which focuses on improving lives of individuals through strengthened global partnerships addressing socio-economic sustainable development, and by advocating for their sexual and reproductive health and rights.\textsuperscript{32} This built upon previous initiatives, including the 1984 International Conference on Population held in Mexico City, the outcome documents from the 1992 UN Conference on Environment and Development, and the 1993 World Conference on Human Rights.\textsuperscript{33} Through a set of 15 principles, the ICPD PoA provides guiding actions for Member States that support the mandate of the ICPD on upholding human rights and gender equality, achieving sustainable living and development, and implementing appropriate population-related policies regarding economic development and poverty challenges.\textsuperscript{34}

\textbf{Recent Sessions and Current Priorities}

With the establishment of UNFPA’s 2014-2017 \textit{Strategic Plan}, the focus on overcoming the challenges and achieving the outcomes stipulated in the ICPD emphasized the need for special attention on the individual rights for sexual and reproductive health.\textsuperscript{35} The plan guides UNFPA action toward achieving universal access to sexual and reproductive health care, reproductive rights, and the reduction of maternal mortality.\textsuperscript{36} To improve the lives of youth and women as key beneficiaries, the plan emphasizes three key factors: gender equality, human rights, and population dynamics.\textsuperscript{37} UNFPA’s direction within the 2014-2017 \textit{Strategic Plan} coincides with General Assembly resolution 70/1 which created the 2030 \textit{Agenda for Sustainable Development} (2015) and the specific SDG target objectives.\textsuperscript{38} UNFPA partners its efforts with Member States and other UN entities to achieve the SDG targets and goals, with primary attention to SDG 3 on health and well-being, SDG 4 on promoting inclusive and quality education, and SDG 5 on achieving gender equality.\textsuperscript{39}

During the first regular session, held on 30 January to 3 February 2017, the Board gathered to evaluate financial conditions to applied programs, welcome the process of developing the new UNDP 2018-2021 \textit{Strategic Plan}, and express concerns regarding insufficient funding resources and a lack of triangular cooperation.\textsuperscript{40} The Board called for further efforts to explore cost reduction and maximized financial efficiency through improved measures of resource allocation to ease financial constraints.\textsuperscript{41} The Board also called for increased responsiveness to the needs and changing conditions in global and local environments.\textsuperscript{42} As finalizing the new 2018-2021 \textit{Strategic Plan} remains a high priority, to assist the most vulnerable populations UNFPA must continue to consider the ICPD principles, the 2030 Agenda, and its human rights-based approach.\textsuperscript{43} Although UNFPA’s 2018-2021 \textit{Strategic Plan} may be able to deliver transformative results to global development and humanitarian situations through evidence gathering and data collection, UNFPA still faces considerable challenges moving forward.\textsuperscript{44} UNFPA continues to face funding constraints, uncertain political conditions, massive migration and displacement, and resistance to sexual and reproductive health and rights and gender equality, all of which challenge the execution and efficacy of their work.\textsuperscript{45}

\begin{itemize}
\item \textsuperscript{34} UNFPA, \textit{Strategic Plan 2014-2017}, 2014.
\item \textsuperscript{35} Ibid.
\item \textsuperscript{36} Ibid.
\item \textsuperscript{37} Ibid.
\item \textsuperscript{38} Ibid; UNFPA, \textit{Sustainable Development Goals}, 2017.
\item \textsuperscript{40} Executive Board of UNDP, UNFPA, UNOPS, \textit{Report of the first regular session}, 2017.
\item \textsuperscript{41} Ibid.
\item \textsuperscript{42} Ibid.
\item \textsuperscript{43} Ibid.
\item \textsuperscript{44} Ibid.
\item \textsuperscript{45} Ibid.
\end{itemize}
In the second regular session of 2017, held on 5 to 11 September 2017, the agenda featured UNFPA’s 2018-2021 Strategic Plan, which is the first of three strategic plans adopted within the framework of the 2030 Agenda. As the 2014-2017 Strategic Plan set to expire, the 2018-2021 Strategic Plan reaffirms the previous 2014-2017 Strategic Plan’s objectives, which are to “achieve universal access to sexual and reproductive health, realize reproductive rights, and reduce maternal mortality, [and] improve the lives of women, adolescents and youth.” In addition to keeping the SDGs imbedded in the plan, the 2018-2021 Strategic Plan also builds upon global frameworks such as the 2015-2030 Sendai Framework for Disaster Risk Reduction, the 2015 Paris Agreement, and the 2015 Addis Ababa Action Agenda. The 2018-2021 Strategic Plan builds upon these frameworks by centering around efforts to reach specific targets within SDGs 3, 5, 10, 16, and 17, with special priority given to SDG 17, as global partnership is central to UNFPA’s strategic direction and is directly linked to achieving the 2030 Agenda.

As youth tend to be marginalized and abandoned, especially young girls, UNFPA authored its approach to the SDGs around the perspective of a 10-year-old girl. Observing their needs, their experiences, and the challenges they face, this outlook sufficiently contextualizes each of the SDGs into something tangible and connects measurable factors to the individual narrative. This approach tangibly demonstrates the interconnectedness of the SDGs. SDGs 1 and 4 on poverty and education are an example; a 10-year-old girl will not be able to receive an education and thus move out of poverty if her needs for food and water are not met first. Continuing with this scenario, if a girl cannot receive a quality education, her chances of finding decent work are greatly reduced, hindering progress on SDG 8.

By the time the SDGs expire in 2030, the status of young adults throughout the world will serve as a measure of success of UNFPA’s work in achieving the SDGs. Intensifying its focus on the potential of a 10-year-old girl and how children can contribute in the future, UNFPA moves closer to achieving its goal for universal access to sexual and reproductive health services, realizing reproductive rights, and reducing maternal mortality, all to improve the lives of women, adolescents, and youth.

Conclusion

From UNFPA’s mandate to the 2030 Agenda, leaving no one behind requires a focus on a rights-based approach to health and population, as well as providing financial support and program contributions in the areas of gender equality, population dynamics, and sexual and reproductive health. UNFPA continues to serve as the leading entity within the UN system regarding population, providing a platform for discussion and collaboration on population, sexual and reproductive health and rights, and sustainable development. Through programs and strategies, such as the 2018-2021 Strategic Plan, UNFPA will continue to support the 2030 Agenda as it provides assistance to millions of marginalized families, women, and young girls, moving toward success in UNFPA’s three strategic core areas.

Annotated Bibliography


The UNFPA Strategic Plan 2014-2017 reaffirms the strategic direction and goals created from the midterm review of the 2008-2013 Strategic Plan. The plan presents organizational changes and

47 Ibid.
48 Ibid.
49 Ibid.
52 Ibid.
53 Ibid.
54 Ibid.
55 Ibid.
59 Ibid.
reforms that include results-based framework for new business models and organization programs, and improved funding arrangements for the fund. This plan aims to improve the effectiveness and efficiency of UNFPA in working on gender, youth, and population and development issues. Delegates are encouraged to review this source to understand the progress made from the 2008-2013 plan and what challenges may emerge moving forward, keeping in mind the targets set in the 2030 Agenda.


The International Conference on Population and Development (ICPD) was held in Cairo, 5-13 September 1994, and placed the rights of all people at the center of development. Adopted from the conference was the Programme of Action of the ICPD, which also includes the “Key Actions for Further Implementation of the Programme of Action of the International Conference on Population and Development” from the 21st Special Session of the General Assembly. One key action is to ensure the well-being of society through the empowerment of women and youth to deliver inclusive, equitable and sustainable global development. Delegates are encouraged to use this source to conceptualize current trends in population growth and its impact on development and to understand how these have been incorporated within the 2030 Agenda.


UNFPA publishes annual reports that consist of the most recent data on pressing topics within UNFPA’s priority areas. The 2016 Annual Report reaffirms the call from the 2030 Agenda to have no one left behind by recognizing marginalized groups and calling for more attention to these populations. Furthermore, the report shows how finances donated to UNFPA have gone toward achieving this goal across different areas, including promoting and protecting the health and rights of millions of women and youth, which aids in them realizing their full potential in society. Delegates are encouraged to review this report and understand the different efforts made to reach marginalized groups and how to remedy the ongoing challenges they face.


The Humanitarian Action 2017 Overview examines the increasing risks of unsafe births, unplanned pregnancies, sexual violence, and gender-based violence that arise from humanitarian crises. In 2017, UNFPA will assume leadership of the Global Protection Cluster on Gender-based Violence Area of Responsibility regarding humanitarian action. This overview highlights the difficulties that programs encounter when trying to address these risks in the midst of humanitarian crises and state fragility. In addition to humanitarian efforts and gender equality, further attention is given to risk reduction, strengthening preparedness, building stronger global partnerships, and fostering resilience and supporting long-term development needs. Delegates are encouraged to use this source to understand development needs and challenges during times of humanitarian crisis and fragility, and to connect UNFPA efforts to addressing these concerns.


The UNFPA Strategic Plan 2018-2021 reaffirms the strategic direction and goals of UNFPA while incorporating adaptations in line with the 2030 Agenda for Sustainable Development. UNFPA plan is the first of three strategic plans that are to be adopted after passing the Sustainable Development Goals and prior to the completion of the 2030 Agenda. With an emphasis on individuals and their rights, this plan aims to build on the previous progress made in increasing the efficacy and efficiency of UNFPA, with updates on sustainable development targets for its priority areas such as gender, youth, and population and development. Delegates are encouraged to use this source to observe what changes were made in UNFPA’s work in order to achieve the SDGs and what challenges can be expected moving forward.
Bibliography


I. Sexual and Reproductive Health in Humanitarian Responses

Introduction

The provision of sexual and reproductive health (SRH) to vulnerable populations in humanitarian responses poses a serious public health challenge, particularly for women and girls. As humanitarian conflicts in various parts of the world have prolonged in recent years, the United Nations (UN) has striven to better align humanitarian responses with the ongoing economic and social development of affected countries. According to the Humanitarian Coalition, a humanitarian emergency is “an event or series of events that represent[s] a critical threat to the health, safety, security, or wellbeing of a community or other large group of people, usually over a wide area.” Such events include political, social, or armed conflict; natural disasters such as floods, storms, famine, and drought; man-made disasters, such as large vehicle crashes or industrial explosions; epidemics, such as the recent West African Ebola epidemic; or events resulting from a combination of various factors. The Organisation for Economic Co-operation and Development (OECD) uses the term “fragility” to refer to states that are especially vulnerable to humanitarian emergencies and that may lack the necessary stability and infrastructure to address the negative effects of these situations. UNFPA has been specifically concerned with fragile states, where many of the world’s impoverished and undernourished persons are concentrated. Such states tend to be low- and lower middle-income countries that are particularly susceptible to problems with SRH.

The prevalence of humanitarian emergencies today is the most dire since the UN’s inception; over 100 million people need services, including 25 million women and girls ages 15 to 49. In emergencies, the risk to women and girls for poor reproductive health outcomes, sexually transmitted infections (STIs), gender-based violence (GBV), and unsafe childbirth and maternal death are amplified. Two thirds of all unattended births occur in fragile states, which also have higher adolescent birth rates and a higher unmet need for family planning. Sixty percent of maternal deaths occur in emergency settings. Women and girls are also more likely to become internally displaced persons (IDPs) or refugees. Both women and men in conflict settings are at a greater risk of GBV, which can involve forced conscription and marriage, prostitution, trafficking, and STI and HIV transmission and deaths.

As the UN entity primarily focused on SRH, the United Nations Population Fund (UNFPA) has helped millions of people maintain their human right to reproductive choice. In 2016 alone, UNFPA supplied contraceptives to 20.9 million people and prevented approximately 11.7 million unintended pregnancies, 3.7 million unsafe abortions, and 29,000 maternal deaths. Despite these advances, serious gaps in access to SRH persist, especially for individuals in humanitarian emergencies. In emergencies, the need for SRH can be neglected in favor of other relief efforts, and many individuals are at risk of losing access to family planning and reproductive health services. In humanitarian responses, UNFPA is often involved in extending access to SRH services, frequently providing contraceptives and

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63 Ibid.
66 Ibid.
67 Ibid., pp. 2-3.
68 Ibid., pp. 4-5.
69 Ibid., pp. 26-27.
70 Ibid., p. 2.
71 Ibid., p. 21.
72 Ibid.
74 Ibid.
76 UNFPA, Emergencies, 2017.
condoms, anti-retroviral therapies (ARTs) for individuals with HIV/AIDS, care for survivors of gender-based violence (GBV), and maternal, obstetric, and neonatal care. These humanitarian efforts can broadly be categorized into three areas: access to contraception and STI prevention, GBV, and maternal health.

**International and Regional Framework**

The UN has a long history of recognizing the importance of SRH at international summits and meetings. The *Convention on the Elimination of All Forms of Discrimination against Women* (CEDAW) (1979), a foundational document on women’s rights, recognized the need to focus efforts on gender equality and is notable for its affirmation of a woman’s right to reproductive choice. In 1994, UNFPA played a major role in the International Conference on Population and Development (ICPD) in Cairo, which led to the development of a *Programme of Action* (ICPD PoA). The ICPD brought together world leaders and experts in human rights, SRH, gender equality, and sustainable development to conclude that the rights of women and girls were integral to sustainable development. The tenets set forth in the ICPD PoA guided much of UNFPA’s efforts over the next 20 years; in 2014, the UN General Assembly extended the PoA’s agenda indefinitely to continue supporting UNFPA’s work. The PoA stated that reproductive health refers to the holistic well-being of a person’s reproductive system and that all persons have the right to family planning and health services to ensure their health. Additionally, the document specifically notes that reproductive health services should be provided to migrants and displaced persons, who often receive humanitarian aid. A year later, delegates at the Fourth World Conference on Women adopted the *Beijing Declaration and Platform for Action* (BDPA) (1995), which further developed ideas from the ICPD and acknowledged the need for SRH to make progress on gender equality. Recognizing the challenges posed by humanitarian emergencies, the BDPA calls for Member States to allocate resources for emergency relief to support vulnerable women, provide them with reproductive and maternal health services, and protect them from GBV.

In 2015 the UN General Assembly adopted resolution 70/1, *Transforming our world: the 2030 Agenda for Sustainable Development* setting forth 17 Sustainable Development Goals (SDGs) and associated targets to be reached by 2030. Three SDGs are especially relevant to UNFPA’s work in SRH. SDG 3 calls for universal health coverage, major reductions in maternal and child mortality, an end to the AIDS epidemic, and universal access to SRH. SDG 4 calls for the use of education to ensure that the next generation understands the principles of sustainable development, built on gender equality and human rights. SDG 5 calls for the elimination of trafficking, sexual and other exploitation, early and forced marriage, and female genital mutilation, calling for universal access to SRH. Many of the issues noted in the SDGs, including maternal and child mortality, AIDS, trafficking, and violence are exacerbated in humanitarian emergencies and are the focus for much of UNFPA’s work in these situations. These three goals explicitly align UNFPA’s efforts with the 2030 Agenda, and the inclusion of SRH in the Agenda demonstrates this issue’s importance to global sustainable development.

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78 Ibid.
83 Ibid., p. 59.
84 Ibid., p. 63.
86 Ibid., pp. 63-64.
88 Ibid., pp. 16-18.
89 Ibid., p. 16.
90 Ibid., p. 17.
91 Ibid., p. 18.
Role of the International System

Guided by the 1994 ICPD PoA, UNFPA specifically focuses on women and youth: populations whose reproductive rights are often compromised, especially in emergencies. Currently, UNFPA’s major SRH campaigns in humanitarian responses are focused on Syria, Iraq, Yemen, and South Sudan. UNFPA also coordinates campaigns to assist with the influx of refugees from the Middle East into Europe and with the rise of the Zika virus in Latin America. In all cases, UNFPA works closely with its local offices in affected countries, neighboring countries, and non-governmental organizations to provide SRH services. UNFPA provides data and analysis to governments and organizations to help them allocate resources for SRH and urge governments to support SRH campaigns in emergency settings. Additionally, in 2015 UNFPA published its annual The State of the World Population report with the theme of SRH in humanitarian responses, highlighting issues faced by fragile states, the effect of emergencies on women and girls, the need for more comprehensive SRH services, and funding for SRH in emergencies.

UNFPA works with a variety of UN agencies to achieve its goals in humanitarian response. The Joint United Nations Programme on HIV/AIDS (UNAIDS) combines the efforts of 11 UN and intergovernmental agencies, including UNFPA, the UN High Commissioner for Refugees, and the World Health Organization (WHO). By convening these stakeholders, UNAIDS serves as a mechanism for dialogue between these entities in discussing the prevention of AIDS and other STIs in emergency settings. As the UN’s leading public health agency, WHO also conducts important work on humanitarian SRH through its Emergency Risk Management and Humanitarian Response department, providing technical assistance and global health strategy in emergencies. The UN Office for the Coordination of Humanitarian Affairs (OCHA) supports UNFPA’s humanitarian work through disbursements from the Central Emergency Response Fund. UNFPA also works with OCHA to coordinate funding mechanisms, allocate pre-emptive resources to countries, train humanitarian personnel, and maintain financial accountability in emergency relief.

In 1995, UNFPA helped form the Inter-Agency Working Group on Reproductive Health in Crises (IAWG). IAWG consists of over 450 member agencies with 2,100 individual members, and focuses on issues like GBV, adolescent SRH, STI and HIV prevention, maternal and newborn health, contraception, and safe abortion care, specifically in the context of humanitarian emergencies. IAWG also runs the Training Partner Initiative (TPI), providing free online trainings and resources to frontline humanitarian SRH and maternal health workers on various topics, including clinical management for survivors of GBV and obstetric procedures. Since 2000, IAWG has held annual meetings of the steering committee and local partners to discuss ongoing issues in SRH in humanitarian settings, such as transitioning from minimal services to comprehensive SRH in emergencies and improving regional cooperation. The 2016 IAWG Annual Meeting, held in Dakar, Senegal, emphasized moving from acute to longitudinal approaches to SRH in light of prolonged conflicts, strengthening the internal capacity of fragile states.

95 UNFPA, Emergencies, 2017.
96 Ibid.
97 Ibid.
98 Ibid.
100 UNAIDS, UNAIDS Cosponsors, 2017.
101 Ibid.
104 Ibid.; UNFPA, UNFPA and UNOCHA promote better disaster preparedness in the Caucasus and Central Asia, 2013.
105 IAWG, About Us, 2017.
106 Ibid.
and increasing health system infrastructure to provide comprehensive health services in emergencies. The 2017 IAWG will be held in Athens, Greece in November, and will discuss improving the continuum of SRH delivery from initial response through conflict recovery, which may be particularly relevant considering how SRH programs can be better implemented and adapted during long-term humanitarian crises.

**Access to Contraception and STI Prevention**

In emergencies, individuals often endure periods of displacement that can last for a significant portion of their lives. In today’s crises the average time of displacement is 20 years, nearly triple the average time of seven years a few decades ago. Therefore, adults require SRH services to maintain their reproductive and sexual health and retain their reproductive rights during long periods in emergencies. Additionally, adolescents and youth may undergo periods of reproductive and sexual maturity in these settings, posing a range of issues relating to adequate reproductive education, knowledge of reproductive rights, access to family planning, and STI prevention.

Fewer than 30% of women in a marriage or union use contraception in countries affected by humanitarian crises, compared to the global use rate of 55%; this is partly because crisis-affected countries have higher rates of unmet contraception need. Humanitarian emergencies also contribute to the spread of STI, including HIV, due to lack of access to prevention and treatment and a prevalence of GBV and sexual exploitation. Additionally, while countries have made significant strides in HIV care, progress has lagged regarding other types of infection. Efforts to increase use of contraception, especially male and female condoms, are essential to reducing unintended pregnancies and STI transmission. UNFPA’s main efforts to improve access to contraception are conducted through the UNFPA Supplies program, which provides contraceptives, medications, and medical equipment to countries and assists in the creation of more robust health systems, including in emergency settings. The program also deploys mobile clinics and outreach teams to provide reproductive health services in remote areas that are often difficult to access. However, adequate funding for the acute interventions of the Supplies program is a perennial issue, which has led UNFPA to consider more long-term methods of building resilience in affected communities through domestic infrastructure and civil empowerment.

Because youth, especially adolescent girls, are particularly susceptible to unintended pregnancies and STI, UNFPA has long supported adolescent SRH efforts in humanitarian situations. In disaster and conflict, adolescent girls are especially vulnerable to coercion leading to forced sexual activity, which can result in early pregnancy and STI transmission. Additionally, very few SRH programs adequately target adolescents, and existing programs often focus on older adolescents and boys and exclude girls of similar ages. In developing countries, approximately 15 million adolescent girls aged 15 to 19 were pregnant in 2015, and approximately 13 million did not have access to contraceptives. These problems are exacerbated in humanitarian emergencies; West and Central African countries,

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112 Ibid.
114 Ibid.
117 Ibid., p. 68.
120 Ibid.
123 Ibid.
124 Ibid.
many of which are affected by crises, have the highest adolescent birth rates, with an average of 129 adolescent live births per 100,000 adolescents aged 15 to 19. Following the 2013 Haiti earthquake, 66% of pregnancies in displacement camps were unintended.\textsuperscript{127}

Engagement of adolescents, especially girls, can occur in a variety of humanitarian response activities, such as the establishment of educational facilities and the creation of youth organizations.\textsuperscript{128} The inclusion of adolescents as active leaders in interventions can empower communities and reduce risky behaviors such as unprotected sexual activity and substance use, aligning with UNFPA’s long-term efforts to build resilience.\textsuperscript{129} Through the continuing provision of SRH services with the Supplies program as well as community and youth engagement in humanitarian responses, UNFPA can continue to ensure access to family planning and prevention of STIs in a changing humanitarian landscape.\textsuperscript{130}

**Gender-Based Violence**

GBV can include sexual assault and rape; sexual harassment; sexual slavery, forced prostitution, trafficking, and other types of exploitation; domestic violence and intimate partner violence; and forced pregnancy and marriage.\textsuperscript{131} Both men and women are at a substantially greater risk for various forms of GBV in displaced settings, but women and girls face unique issues due to ingrained gender inequality.\textsuperscript{132} Because of the breakdown of existing SRH and security infrastructure during humanitarian emergencies and in fragile states, issues of gender inequality can worsen in such settings, leaving individuals in these situations more susceptible to GBV.\textsuperscript{133}

GBV can have many severe consequences on survivors. Physical effects may include injuries, STI, long-term disabilities, unintended pregnancies, unsafe abortions, poor maternal and neonatal outcomes, miscarriage, and infertility.\textsuperscript{134} Survivors of GBV can also experience psychological consequences, including various mental disorders such as anxiety disorders, depression, eating disorders, and post-traumatic stress disorder (PTSD); substance abuse; and increased feelings of fear and mistrust.\textsuperscript{135} Survivors who require support to recover from their experiences of GBV may face social stigma that prevent them from seeking further aid.\textsuperscript{136} Survivors may also face legal ramifications if they choose to report their incident and concerns for their physical safety and possible future attacks by perpetrators in retaliation.\textsuperscript{137} Multi-sectoral programming models should address the physical, psychological, and social aspects of GBV and ensure that survivors have access to adequate support to recover from GBV and protect their reproductive rights.\textsuperscript{138} Additionally, UNFPA has previously found success in collaborating with civil actors and local cultural and religious leaders to implement GBV education and prevention, especially in countries that have been slower in granting women’s reproductive rights.\textsuperscript{139}

Unfortunately, data and analysis on GBV in emergency settings is limited, especially because survivors may not be able to report incidents of GBV due to social stigma or other urgent concerns, including meeting immediate survival needs, caring for children, and acquiring food, water, and shelter.\textsuperscript{140} To address this, UNFPA has successfully provided technical assistance to conduct assessments of GBV in emergencies.\textsuperscript{141} UNFPA is also working with

\textsuperscript{126} UNFPA, *Universal Access to Reproductive Health: Progress and Challenges*, 2016.
\textsuperscript{128} UNFPA, *Adolescent Girls in Disaster Conflict*, 2016.
\textsuperscript{129} Ibid.
\textsuperscript{130} Ibid.
\textsuperscript{132} Ibid.
\textsuperscript{133} Ibid.
\textsuperscript{135} Ibid.
\textsuperscript{136} Ibid.
\textsuperscript{137} Ibid.
\textsuperscript{138} Ibid.
\textsuperscript{139} UNFPA, *Gender-based violence in humanitarian settings*, 2014.
\textsuperscript{141} UNFPA, *Gender-based violence in humanitarian settings*, 2014.
partners to create the Gender-Based Violence Information Management System, coordinated by the UNFPA-led Gender-based Violence Area of Responsibility.\textsuperscript{142} The system will serve as a database and reference for future GBV-related efforts and create a technical infrastructure for reporting and data collection on GBV incidents.\textsuperscript{143} Resources such as this can help ensure that GBV survivors are not neglected and that their complex needs are met with comprehensive services.\textsuperscript{144}

**Maternal Health**

Despite dramatic declines in maternal mortality since 1990, over 300,000 women still die of pregnancy-related causes each year, and more than 180,000 of these deaths occur in emergency settings.\textsuperscript{145} Most of these deaths are highly preventable if modern medical care is available; common causes of mortality include severe bleeding, obstructed labor, sepsis, and unsafe abortions.\textsuperscript{146} The limited nature of health services in emergency settings results in inadequate care along the maternal health continuum: prenatal care, emergency obstetric care, and postnatal care.\textsuperscript{147} This can be implicated in a wide range of morbidities and complications, including infection, miscarriage, premature delivery, stillbirths, unsafe abortions, obstetric fistula, and post-partum depression.\textsuperscript{148} Inadequate postnatal care can lead to problems in neonatal care, particularly with lactation and nutrition for newborns.\textsuperscript{149} A rise in the number of unattended pregnancies has also contributed to maternal mortality rates, as health services are much more limited in crisis-affected areas.\textsuperscript{150} For example, the ongoing civil war in Syria has resulted in a complete lack of maternal health services in some areas, decreasing the previous rate of skilled birth attendance from 96% to almost zero.\textsuperscript{151} In West African countries affected by the Ebola epidemic, the diversion of health professionals to other health threats resulted in dramatic decreases in skilled birth attendance rates.\textsuperscript{152}

These issues demonstrate that a more skilled health professionals are needed to address the wide range of maternal health problems experienced by women in emergencies.\textsuperscript{153} The use of midwives as maternal health professionals presents an opportunity to fill health infrastructure gaps in emergency settings.\textsuperscript{154} Trained midwives can perform 87% of the essential services required by mothers and newborns, and when midwives are supported by a functioning health system, they can reduce maternal and newborn deaths by 66%.\textsuperscript{155} UNFPA launched the Maternal Health Thematic Fund (MHTF) in 2008, implementing safe motherhood programs in 39 countries with high rates of maternal mortality and morbidity.\textsuperscript{156} Through MHTF, UNFPA conducts its Midwifery Programme to train and establish midwives as skilled health workers in struggling health systems, such as those in crisis-affected areas.\textsuperscript{157} UNFPA also helps coordinate the Campaign to End Fistula, an inter-organizational effort to eliminate the severe and preventable maternal complication of obstetric fistula.\textsuperscript{158} Additionally, UNFPA develops technical infrastructure to assess the availability of maternal health services and surveil emergency situations.\textsuperscript{159} In 2016, MHTF supported over 300 midwifery institutions which trained 32,000 midwives, and allocated funds to 15,000 fistula repair surgeries; in the past 11 years, UNFPA estimates that MHTF efforts have prevented almost 100,000 maternal

\textsuperscript{142} UNFPA, *Gender-based violence in humanitarian settings*, 2014.
\textsuperscript{143} Ibid.
\textsuperscript{144} Ibid.
\textsuperscript{145} Ibid.
\textsuperscript{146} Ibid.
\textsuperscript{150} UNFPA, *Universal Access to Reproductive Health: Progress and Challenges*, 2016, p. 44.
\textsuperscript{152} Ibid.
\textsuperscript{153} Ibid.
\textsuperscript{154} Ibid.
\textsuperscript{155} Ibid.
Although the constraints of health systems weakened by conflict and disaster are challenging, UNFPA investments in training skilled individuals not only serve as an immediate solution to maternal health issues, but also help build more resilient health systems in emergency settings.

**Conclusion**

With the humanitarian situation at its most severe in the history of the UN, the inclusion of SRH in humanitarian responses is essential to increasing quality of life for the over 100 million people affected. SRH is integrally involved in the UN’s work in public health, human rights, and global socio-economic development, especially in emergency settings. Despite the unfortunate nature of prolonged humanitarian emergencies today, UNFPA’s long-standing commitment to providing SRH in emergencies supports the reproductive rights of millions of vulnerable people, prevents the spread of STIs, supports adequate responses to GBV, and builds stronger health systems to combat maternal complications. However, not all persons in crisis-affected areas receive adequate care, and additional work is needed to ensure the SRH needs of these persons are met.

**Further Research**

For further consideration, delegates should explore the following questions while considering their assigned Member State’s perspective and position on SRH: What other evidence-based SRH programs and strategies could UNFPA implement in humanitarian settings? How can countries increase health sector infrastructure amid conflict or natural disaster? When engaging with civil society in these settings, what cultural and religious differences should Member States consider? How can adolescents and youth be safely educated on reproductive health, especially in low-resource settings? What challenges do crises pose to the effective training of humanitarian personnel and skilled health workers? How can UNFPA’s humanitarian work be more sustainable, especially when considering issues with funding and the prolonged nature of emergencies? What recent issues in humanitarian crises should the IAWG seek to address? With so many UN subsidiary organs and non-governmental organizations working in family planning, maternal health, and humanitarian response, how can UNFPA better serve as both a partner and a leader in this area?

**Annotated Bibliography**


Casey’s article, written for IAWG, provides a comprehensive and relatively recent overview of the types of SRH programs found in humanitarian settings. Given UNFPA’s concerns over the lack of data in humanitarian settings, Casey’s review provides critical data analysis of a wide range of SRH programs implemented from 2004-2013 in a variety of targeted areas, including maternal health, STI transmission, and family planning. Delegates should refer to this source for information on individual evidence-based SRH programs and the relative effectiveness of SRH efforts in humanitarian responses to identify best practices and formulate their own solutions to this issue.


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161 Ibid.


163 Ibid.


165 Ibid.
This handbook serves as a comprehensive look at efforts to address gender-based violence in humanitarian settings. As GBV in displaced settings is a long-standing problem that continues to occur in humanitarian settings, principles of GBV prevention from this handbook can also be applied to ongoing humanitarian crises, especially as humanitarian needs have risen. Delegates will appreciate the handbook’s discussion of specific components of GBV, including the role of UN Peacekeeping, collaboration with media, and various legal frameworks. Delegates may also want to use this handbook in conjunction with the chapter on GBV in the WHO Inter-Agency Field Manual on Reproductive Health and Humanitarian Settings to align humanitarian program planning with public health evidence.


This article considers the general role of SRH in the SDG agenda, particularly in achieving SDGs 3 (ensuring healthy lives for all), 4 (ensuring equitable educational opportunities for all), and 5 (achieving gender equality). The article also considers the importance of providing access to STI prevention and treatment services, reproductive education, and comprehensive abortion care in expanding SRH services over the course of the UN’s 2030 Agenda. The Guttmacher Institute is a leading non-governmental organization in reproductive rights; this source is particularly interesting for its rights-based perspective on SRH in development and the alignment of acute SRH efforts (such as those in humanitarian settings) with larger development initiatives.


The proceedings of the IAWG’s most recent meeting are summarized in this report, which focuses on topics including the transition from basic to comprehensive services and new funding streams. As the IAWG prepares for its next annual meeting this fall, delegates should familiarize themselves with the most recent issues in the global dialogue on SRH in humanitarian responses and understand the unique needs presented by recent humanitarian emergencies and prolonged conflicts. The report also includes summaries of various country-specific interventions and SRH programs, providing additional examples of evidence-based SRH. IAWG will be holding its next annual meeting in Greece in November 2017; delegates should consider how the recent meeting in Senegal will develop the IAWG’s agenda for the future.


This recent report from the IPPF summarizes some of the recent successes of the non-governmental organizations (NGOs) in humanitarian SRH response, such as the SPRING Initiative in partnership with Australian Aid. The report also provides statistics on the number of people aided by NGO responses, considers the opportunities that crises may hold for expanding access to health services, and sets ambitious targets for expanding SRH services over the next few years. As one of UNFPA and IAWG’s most important non-governmental partners and a leading global organization in family planning, delegates should familiarize themselves with IPPF’s work, status, and stances on preserving reproductive rights for all through the comprehensive provision of reproductive services.


The ICPD was one of the most formative events in creating an international dialogue on global SRH efforts. The resulting Programme of Action (PoA) defines reproductive rights as human rights and sexual and reproductive health as part of an individual’s holistic and personal well-being, not merely as a component of pregnancy and childbearing. Delegates should refer to the
PoA for these important definitions and for its creation of a twenty-year strategy to implement SRH programs worldwide, which has guided UNFPA’s efforts since 1994. Additionally, the PoA includes comments from individual Member States regarding their positions on various components of family planning and reproductive rights; delegates can refer to these comments when considering their Member State’s historical positions in this area.


UNFPA’s annual State of the World Population (SWOP) reports provide great resources on a wide array of SRH topics; the 2015 SWOP report focuses specifically on the theme of SRH in humanitarian responses. Published as the Sustainable Development Goals were being adopted and looking forward to the 2016 World Humanitarian Summit, the report summarizes the effect of problems in SRH on women and girls, the push toward more comprehensive SRH services, the need for psychological health response, and new funding streams for SRH resource allocation. This report is probably the most important resource concerning UNFPA’s work on SRH in humanitarian response, and delegates should refer to this when discussing how UNFPA can continue its efforts into the future.


This report is a great resource for understanding UNFPA’s emphasis on adolescents, youth, and especially girls in SRH-related humanitarian efforts. The narrow focus of the report is useful for delegates seeking to address the need for greater adolescent SRH and to achieve longitudinal gender equality through the engagement of girls. Although the report is written in the context of disaster conflict, many of the principles can be applied to a wide range of humanitarian settings, and individual case studies help contextualize how UNFPA interventions can be adapted for different communities.


UNFPA’s 2016 report on universal reproductive health discusses the current status of SRH services in a global context and in humanitarian settings. The report provides the most recent comprehensive overview of universal access to SRH and the challenges ahead for achieving this target as part of the 2030 Development Agenda. Delegates should refer to this report for updated statistics on issues relating to SRH and for quantitative information on the need for family planning and the lack of adequate adolescent SRH programming. The report also highlights the worsened conditions in humanitarian settings, which require greater resources in order to meet SRH needs. The report also includes a convenient explanation of major SRH indicators, including contraceptive prevalence rate and the unmet need for family planning, which delegates can use when developing accountability and data collection mechanisms for SRH efforts in emergencies.


Published every few years, this manual summarizes the technical guidelines for effective SRH in humanitarian responses, produced by a collaborative process with the members of the IAWG and other international stakeholders. The manual provides detail on all issues discussed in this guide, including adolescent health, maternal health, gender-based violence, and STIs, as well as more controversial areas of SRH, such as comprehensive abortion care. Delegates can refer to this manual for guidelines and processes for developing quality SRH programs and engaging in multisectoral dialogue to ensure that all aspects of SRH are adequately addressed and supported by WHO expertise.
Bibliography


II. The Impact of Climate Change on Achieving Sustainable Population Growth

“You can imagine a world in which we had made better decisions in the past. You can also imagine a future that is organized according to better decisions that we make today.”

Introduction

Climate change, as defined by the United Nations Framework Convention on Climate Change (UNFCCC), is all atmosphere alterations due to human impacts on the climate system, either “directly or indirectly” made. Climate change therefore affects all economic, social, and political activities, as well as impacting how the United Nations (UN) envisions achieving sustainable population growth, which encompasses sustainable consumption and responsible technological efficiencies. Climate change is intimately linked to severe weather and natural disaster, which in turn may cause food insecurity and conflict; the world witnesses 25.4 million displaced persons annually due to natural disaster, and the likelihood of being displaced due to climate causes is 60% higher than in 1977. Additionally, UN anticipates that populations affected by water scarcity will increase from half a billion to more than four billion in 55 years due to climate change drying up clean water, which severely threatens healthy and sustainable population growth. It’s important to note the link between climate change and sustainable population growth as the global rate of population growth is set to increase from 1.6 billion to 7.6 billion, which is over seven times the rate of growth in the past century.

The United Nations Population Fund (UNFPA) is responsible for promoting population programs, achieving access to sexual and reproductive health rights, and collecting population and demographic data to improve the lives of youth and women. As a dedicated pioneer agency working on understanding population dynamics, resilience building, and the interconnection between climate change and populations, UNFPA works with both Member States and partners across the public and private sector to achieve more effective and sustainable environmental policy. Furthermore, UNFPA acknowledges a differential impact of climate change on various populations, especially impacting vulnerable populations with a worsening scarcity of resources and discrimination against persons displaced by climate change. Facing the existing challenges, UNFPA focuses on mitigating the impact of climate change on growing populations through demographic data, resilient responses, and disaster preparedness.

International and Regional Framework

The UN is guided by the United Nations Declaration of Human Rights (UDHR) (1948), which establishes a common foundation for universal and fundamental human rights and dignities. Within these principles, Article 25 affirms individuals’ right to an adequate and sustainable standard of living and to their health and well-being, withstanding circumstances beyond their control. In 1966, the UN built upon the UDHR with the International Covenant on Economic, Social and Cultural Rights (ICESCR), which specified the importance of these particular rights. The ICESCR calls for States parties to not only uphold the articles of the UDHR, but to take the

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166 The Straddler, On Vulnerability to Climate Change, 2015.
169 Greenpeace, Climate Change, Migration, and Displacement: The Underestimated Disaster, 2017, p. 6.
174 Ibid.
175 UNFPA, About Us, 2017.
177 UN General Assembly, Universal Declaration of Human Rights (A/RES/217A (III)), 1948.
178 Ibid., Art. 25
appropriate steps toward the realization of these inalienable rights.\(^\text{180}\) To protect these rights, a safe and sustainable future is promoted by the UNFCCC (1994), which recognized the burden of climate change on humanity and called for parties to work toward stabilizing the level of greenhouse gas concentrations.\(^\text{181}\) It states such a level should be achieved within a time-frame that is conducive to the natural adaptation of ecosystems and sustainability of a country’s food production and economic development.\(^\text{182}\) Particularly, the Convention recognizes the vulnerability of all countries to the effects of climate change and established the Adaptation Committee to appropriately address the adversities associated with it.\(^\text{183}\) The UN continued its work of sustainable development through capacity building of communities and the mitigation of climate change, guided by the 2016 Paris Agreement, adopted by the Conference of the States parties to the UNFCCC.\(^\text{184}\) The Paris Agreement builds upon the UNFCCC and calls on the States parties to moderate climate change effects and to give heightened support to developing countries toward this collective goal.\(^\text{185}\) Specifically, the agreement aims to keep this century’s global temperature increase below two degrees Celsius and to “strengthen the ability of countries to deal with the impacts of climate change.”\(^\text{186}\) Article 11 addresses the goal of an enhanced capacity-building framework by calling for developed countries to support such initiatives in lesser-developed countries.\(^\text{187}\)

In 2000 the United Nations Millennium Declaration, which set eight Millennium Development Goals (MDGs), sought to reduce extreme poverty and promote sustainable development for all by 2015.\(^\text{188}\) Goal 7 of the Declaration focused on poverty reduction through the mitigation of climate change by calling for Member States to adopt an ethical and effective practice of environmental conservation.\(^\text{189}\) It also prioritized the need to protect humanity from the threat of an inhabitable planet.\(^\text{190}\) The 2030 Agenda for Sustainable Development (2015) set forth 17 Sustainable Development Goals (SDGs) that seek to build on the achievements of the MDGs.\(^\text{191}\) The SDGs address the three dimensions of sustainable development, encompassing economic, social, environmental aspects.\(^\text{192}\) SDG 11 aims to “make cities and human settlements inclusive, safe, resilient, and sustainable,” which is in response to a growing urban population that is increasingly vulnerable to disaster.\(^\text{193}\) This goal is further addressed in SDG 13, which urges Member States to prioritize the need to mitigate climate change and its impacts.\(^\text{194}\) The SDGs are an action plan built for the success of “people, planet, and prosperity.”\(^\text{195}\)

With regard for population dynamics and sustainable growth, UNFPA outlined a rights-based framework in its report Population Matters for Sustainable Development (2012), which considers country-specific needs, vulnerable populations, and social development in addressing environmental challenges.\(^\text{196}\) The report calls for an incentive-driven philosophy, rather than control-centered, that mainstreams a gender perspective and emphasizes youth empowerment in Member States’ environmental and population policies.\(^\text{197}\) This report affirms that climate change contributes to an “increasing intensity and frequency of natural disasters” and their negative effects on natural resources for communities, and particularly for vulnerable populations.\(^\text{198}\)


\(^{182}\) Ibid., p. 6.

\(^{183}\) Ibid.


\(^{185}\) Ibid.

\(^{186}\) Ibid.

\(^{187}\) Ibid.


\(^{190}\) Ibid.


\(^{192}\) Ibid.


\(^{194}\) UN DPI, *Sustainable Development Goal 13*, 2016.


\(^{197}\) Ibid., p. 11.

\(^{198}\) Ibid., p. 6.
Role of the International System

UNFPA aligns its mission with the 2030 Agenda for Sustainable Development and is currently working on several initiatives that directly address the SDGs. With regard to SDG 11, UNFPA works with partners to promote inclusive urbanization by expanding access to health care and opportunities within urban communities. In addition, UNFPA works to understand the needs of urban communities and advocates for their welfare and sustainability. In regards to mitigating climate change and SDG 13, UNFPA partners with governments to realize the effects of the changing climate on population growth and how to promote resilient and sustainable populations. UNFPA also assists in alleviating the humanitarian consequences of climate change, such as access to essential health services. Through the initiative of its Demographic Exploration for Climate Adaptation (DECA), an automated geographic information system (GIS) that centralizes population data, UNFPA is equipped to understand the spatial dynamics of population composition to maximize climate change resilience efforts at local, national, and regional levels. DECA differs from traditional GIS initiatives because it recognizes that population data is most effective in identifying the vulnerable individuals and communities and the factors that exaggerate vulnerability to climate change. Stated in its Strategic Plan 2018-2021, UNFPA aims to continue a broader application of demographic intelligence in forming population growth and its related issues to enhance national capacity-building in mitigating environmental and social risks, including climate change. Additionally, UNFPA also addresses humanitarian crises by offering “dignity kits” to women struggling to escape natural disasters or other climate change crises, which include clothes, famines products, and hygiene supplies.

As a primary organ of the UN, the General Assembly witnessed substantial and in-depth debate concerning climate change and population growth in its 71st session. General Assembly resolution 71/228, adopted on 7 February 2017 and entitled “Protection of Global Climate for Present and Future Generations of Humankind,” highlighted the importance of mainstreaming a gender perspective in political and environmental policies concerning climate change on a national level to protect women and girls, who often face more changes due to social stigma and gender-based discrimination. Additionally, the Economic and Social Council’s resolution 2017/14, adopted on 14 August 2017 on the topic of “Strengthening of the Coordination of Emergency Humanitarian Assistance of the United Nations,” called for a more attentive approach of Member States and a strengthened international collaboration, such as sharing best practices, in addressing population matters, especially migration and displacement, related to climate change.

There are also program-based UN agencies, such as the United Nations Development Programme (UNDP), which work on the ground to address the impact of climate change in sustainable population growth. For instance, droughts, floods, and strong wind caused by climate change have severely affected food production and population growth in Malawi, especially in rural areas. By cooperating with the Malawian government, the UNDP enhanced local and national capacity in regards to financial and technical means by investing in hydro-meteorological capacity for early warning systems, which empowered the local communities to be prepared for natural disasters and take safety measures in advance. Additionally, civil society organizations (CSOs) also play a pivotal role in achieving sustainable population growth facing climate change. Population Matters (PM), a CSO based in the United Nations, worked on the ground to address the impact of climate change in sustainable population growth and how to promote resilient and sustainable populations.

199 UNFPA, Sustainable Development Goals, 2016.
200 Ibid.
201 Ibid.
202 Ibid.
203 UNFPA, Climate Change: Overview, 2016.
204 Ibid.; POPClimate, Demographic Explorer for Climate Adaptation: Background, 2017.
205 POPClimate, Demographic Explorer for Climate Adaptation: Background, 2017.
207 UNFPA, Nepal floods put pregnant women and new mothers at risk, 2017.
208 UN Dag Hammarskjöld Library, Resolutions Adopted by the General Assembly at its 71st Session, 2017.
212 UNDP Climate Change Adaptation, Saving Lives, Protecting Agriculture Based Livelihoods in Malawi, 2017.
213 Ibid.
Kingdom, specializes in population growth concerning environmental issues and raises awareness of the issue through research and campaigns.\textsuperscript{214} PM has been working on population policy reforms in the UK to call on the government to set an environmentally conscious population planning policy with the aim of lowering population growth to a sustainable rate.\textsuperscript{215}

\textbf{Accelerated Migration and Climate Change Mitigation}

The United Nations Educational, Scientific and Cultural Organization (UNESCO) defines migration as the crossing of political or administrative borders for a given amount of time.\textsuperscript{216} It is all-encompassing and includes those who are seeking economic opportunity, are refugees, and those that are uprooted due to natural and political hardships.\textsuperscript{217} It is estimated that by 2050 the number of people who will be forced to relocate due to climate change will be between 200 million to one billion.\textsuperscript{218} In one report published in 2009, UNFPA stated that both severe weather events and increases in global temperatures will be significant causative factors that increase human mobility and further exacerbate already present social inequalities.\textsuperscript{219} Due to such large potential changes in populations within various geographic areas, climate change poses serious roadblocks to sustainable population growth and in turn the achievement of almost all of the SDGs.\textsuperscript{220}

Climate change mitigation is the goal of limiting the magnitude and long-term effects of the changing climate.\textsuperscript{221} This is primarily related to reducing emissions and greenhouse gases.\textsuperscript{222} The goal of such reductions is to mitigate the most significant catalyst for climate change, thereby reducing its impact.\textsuperscript{223} Societies can, in turn, avoid and adequately prepare for natural disasters and migration.\textsuperscript{224} UNFPA has highlighted that a lack of comprehensive data and significant climate uncertainty are the two largest areas of improvement to address sustainable population growth in areas particularly vulnerable to climate change.\textsuperscript{225} Many national governments only see migration negatively.\textsuperscript{226} UNFPA advocates that there can be many positive things to gain from migration, and that with the correct policy that acknowledges increased mobility and provides new opportunities for income diversification, migration can lower both environmental and non-environmental risks in achieving sustainable population growth.\textsuperscript{227} UNFPA’s position is that national governments, in partnership with civil society, should work toward goals that mitigate a changing environment.\textsuperscript{228}

With an understanding of the need for global action to address international migration, as established in 1994 with the \textit{Programme of Action (PoA) of the International Conference on Population and Development (ICPD)}, the cooperation and discussion among Member States have grown into a substantial item of the international agenda.\textsuperscript{229} Although migration is not a primary expertise of UNFPA, it is extremely relevant to achieving sustainable development and should be considered a focus area as it is within the mandate of UNFPA to “accelerate progress on the ICPD agenda.”\textsuperscript{230} Adopted on 3 October 2016 in General Assembly resolution 71/1, the \textit{New York Declaration} serves as the compass in addressing migration and refugee issues in the 21\textsuperscript{st} century.\textsuperscript{231} The Declaration places focuses on gender equality, disaster response, and humanitarian assistance, which are priorities already emphasized

\begin{footnotesize}
\begin{enumerate}
\item UNESCO, \textit{Migrant/Migration}, 2017.
\item Ibid.
\item IPCC, 3.5 Interaction between mitigation and adaptation, in the light of climate change impacts and decision-making under long-term uncertainty, 2007.
\item Ibid.
\item UCAR, \textit{Climate Mitigation and Adaptation}, 2011.
\item Ibid.
\item UNFPA, \textit{Urbanization, Gender and Urban Poverty: Paid Work and Unpaid Care Work in the City}, 2012, p. 10.
\item UNFPA, \textit{Climate Change: Overview}, 2016.
\item UNFPA, \textit{International Migration and Development}, 2013, p. 22.
\item Ibid., p. 289.
\end{enumerate}
\end{footnotesize}
in UNFPA’s agenda. Through the empowerment of women, girls, and youth, and continuing efforts in improving demographic data, UNFPA’s role in addressing the key drivers of migration makes it a key actor in the fulfillment of the goals outlined by the *New York Declaration*.233

**Sustainable and Inclusive Urbanization**

Most of the world’s population currently inhabits cities, and the world continues to urbanize at a dramatic rate. The urban population has ballooned from 746 million people in 1950 to almost four billion in 2014. A significant portion of this growth is concentrated in the developing world, with China, India, and Nigeria projected to have 37% of the all-urban population growth worldwide. Climate change is expected to significantly alter the landscapes of all three of these countries, in addition to a number of human centers worldwide. UNFPA therefore strongly advocates for the creation and implementation of policies that support resilient development.

Resiliency is the convergence of four significant policy areas in the creation of a comprehensive framework of being able to adapt to a changing environment in a sustainable way. These four policy areas are redundancy, flexibility, capacity to reorganize, and capacity to learn. In order to aid in identifying resilient development, UNFPA created the Framework for the Assessment of Population Risk and Resilience to Climate Change, as well as its DECA system. The framework splits into three dimensions, which are hazards and exposure, vulnerability, and lack of capacity. Communities can use this to identify risks, and to then create plans that address these risks while also having access to census-integrated data and modeling via DECA.

UNFPA sees that this large increase in urbanization may prove to be an invaluable opportunity for action on creating sustainable populations while also addressing a changing climate. Currently UNFPA recognizes that there is a lack of information and consideration given to population dynamics when trying to address and create solutions to the challenges posed by climate change. UNFPA, along with a number of other UN organizations, created the Climate Information Action Statement as a result of the UN Climate Summit held in New York in 2014. This statement was a commitment to increase access and strengthen quality of climate related data, capacity-building efforts, and implementation of informed adaptation.

In addition to increasing the availability and quality of data, two other areas that UNFPA has advocated for in the creation of sustainable urbanization in a changing climate are energy efficiency and a commitment to long-term urban planning. In the 2013 report, *Demography of Adaptation to Climate Change*, some long-term policy areas that were highlighted included creating more compact cities, addressing the needs of coastal cities due to increasing sea levels, and water insecure urban centers. UNFPA advocates for policy that integrates population data into urban planning, increasing cooperation between Member States as well as increasing involvement with private entities, and investing in new technologies that aim to mitigate climate change and make communities more resilient.

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233 UNFPA, *Statement of Executive Director on Addressing Drivers of Migration*, 2016.
236 Ibid.
240 Ibid.
242 Ibid.
243 Ibid.
246 Ibid.
247 Ibid.
Protecting Vulnerable Populations from the Negative Impacts of Climate Change

According to the World Health Organization (WHO), “vulnerability is the degree to which a population, individual or organization is unable to anticipate, cope with, resist and recover from the impacts of disasters.” Vulnerable populations include children, pregnant women, elderly people, malnourished persons, people who are ill, and communities living in poverty and destitution. Over the last few decades, suffering and loss due to natural disasters has increased, both because the environment is more dangerous and because the vulnerable population has increased. While the general public is impacted by climate hazards, it is vulnerable populations who face the greatest risk of being unable to cope with the dangers of climate change.

The PoA of ICPD addressed some of these concerns by calling for effective interrelationships between population, sustained economic growth, and sustainable development. It acknowledged the need for actions that integrate the environment with development. Since then, the Cancun Adaptation Framework (2010) was adopted with the goal of engaging adaptation efforts to reduce vulnerability and to build resilience in developing countries. The Framework follows a gender-sensitive and transparent approach, taking into consideration vulnerable groups, communities, and ecosystems, and urges developed countries to provide lower-income countries with the resources to implement adaptable action plans. This work was continued through the Warsaw International Mechanism for Loss and Damage associated with Climate Change Impacts (2013), which focused on addressing the extreme loss and damage that can result from climate change impacts, particularly for vulnerable populations in developing countries.

Internationally, UNFPA, along with the International Institute for Environment and Development and Wolfram Research, developed and implemented DECA to better research the connection between the geography of climate hazards and population data. Regionally and locally, UNFPA has helped to promote community capacity-building among vulnerable populations by seeking to empower women and young people with the access to voluntary family planning, maternal health care, and quality education. UNFPA also recognizes that climate change increases the potency of natural disasters and works to ensure that, despite these crises, women and girls have the access to vital health services and are protected from gender-based violence.

Conclusion

UNFPA urges for governments and international agencies to implement future planning that focuses on both sustainable population dynamics and adaptable climate change initiatives. In a 2013 report, UNFPA declared “it is more important than ever that we understand how people, not just places, are vulnerable to climate change, and how they are and can become more resilient.” Mitigating the impacts of climate change to ensure sustainable population growth will require continuous collaboration within the UN system and across all sectors of the international community.

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256 Ibid.
258 Ibid.
259 UNFCCC, Warsaw International Mechanism for Loss and Damage associated with Climate Change Impacts, 2014.
261 Ibid.
262 Ibid.
263 UNFPA, The Demography of Adaptation to Climate Change, 2013, p. 20.
264 Ibid.
265 Ibid.
Further Research

A key to understanding this topic is remaining up to date on current projects undertaken by UNFPA. Delegates should be aware of the impact of climate change on achieving sustainable population growth from a macro and micro level as they relate to the topic from their assigned Member States. Some additional questions to consider include: How will current UN and Member States’ initiatives affect long-term change? How does UNFPA’s demographic data process help in the coordinated effort to combat climate change around the globe? Furthermore, how can UNFPA work on the national level with NGOs, private agencies, or regional relief efforts to implement the SDGs? How can UNFPA ensure its programs and policies are flexible and able to address emerging threats related to climate change?

Annotated Bibliography


The Paris Agreement is the most recent international treaty on climate change. Delegates should be familiar with the articles and the key principles of agreement on climate issues. With near universality, this is an important source to help delegates understand the current positions of Member States and the future direction of international climate policy. Delegates may use this source to further consider how sustainable population growth can be supported alongside these policies.


This source is a website which specializes in providing information regarding population size and environmental sustainability. This website will be useful for delegates to understand civil society organizations’ working methods and contributions to sustainable population growth in the context of climate change. Delegates should use this website to learn about direct models and for recent news on this topic.


This source is a report focusing on the Secretary-General’s 2015 report on integrating population issues into sustainable development. The report is useful to delegates as it provides an examination into the key population challenges today. Delegates should use this source to help understand the key challenges of achieving sustainable population growth and demographic trends with the current climate challenge.


The framework addresses three priorities in policy-making concerning climate change, which are comprehensive risk management planning, international dialogue, and capacity-building. Details and specific objectives are included in the source under each priority. Delegates may find helpful information in this source when considering respective Member State’s policies, as well as proposing actions to UNFPA.


This resolution directly addresses the importance of acting to mitigate the adverse effects of climate change. The source is a useful one for delegates as it highlights the key UN documents and international treaties surrounding this topic, and is a very recent representation of Member States’ consensus on this topic. Delegates may find this source helpful to further understand the importance of cooperation and joint efforts in addressing this topic.

This report begins with an overview of the international migration issue, and provides briefings on opportunities and threats facing international development concerning migration. Further, UNFPA recommendations and proposals for Member States as well as international collaboration can also be found in the document. Delegates main gain further insights on addressing population growth under the impact of climate change via the migration angle via this report.


This report includes three sections, which are “population dynamics and adaptation,” “population data for adaptation,” and “the planning and practice of adaptation,” followed by comprehensive data gathered by region and demography across the world. The report showcases UNFPA’s working methods very well, especially its focus on demographic data gathering and interpretation, and provides an in-depth briefing on the current situation. Delegates may find this source helpful in understanding the strengths and expertise of UNFPA, and in turn consider further proposals for improvement.


This framework for risk and resilience assessment is a vital model in UNFPA’s work. The flyer explicitly introduces the dimensions, categories, and components of UNFPA’s philosophies in approaching climate change related issues concerning population. This source may provide helpful information for delegates who are interested in improving the current working methods of UNFPA, as well as revising national policies.


This document is the first of three UNFPA strategic plans of the 2030 Agenda. With an emphasis on joint efforts, this Plan will be useful to delegates as it outlines the direction of UNFPA in relation to sustainable development and effectively achieving the SDGs. Delegates may find this source helpful to understand the current work of UNFPA and learn lessons on methods of coordination and integration to achieve sustainable population growth.


This source is an action statement for Climate Action from the 2014 Climate Summit, and was jointly proposed by several states and international organizations. This statement highlights key areas to strengthen action in addressing this topic, with a particular focus on using data to improve resiliency. Delegates should use this source as a starting point to further explore ideas and projects outlined in this statement.

Bibliography


III. Managing the Needs and Challenges of an Ageing World

“Population ageing—the increasing share of older persons in the population—is poised to become one of the most significant social transformations of the twenty-first century, with implications for nearly all sectors of society.”

Introduction

The world is ageing at an incredibly quick pace. The United Nations (UN) Department of Economic and Social Affairs (DESA) concluded that in 2015 alone, persons over the age of 60 represented 12.5% of the global population, compared to 11.5% in 2012. However, by 2050 that number is estimated to swell to 20%, which would include approximately two billion people. By 2020 there will be more people aged over 65 than those under the age of five, which is an unprecedented population shift. The shift is largely due to a decrease in mortality rates with the advent of modern medicine, better quality of life, and decreasing fertility rates, which has resulted in a greater number of people living longer and representing a larger portion of the global population.

As a result of this newfound demographic shift, most societies around the world are not prepared to support the growing needs of older persons and ageing. The European Commission defines vulnerable population groups as those that often have the most risk of falling into poverty and social isolation in comparison to the overall population. Elderly persons are often at a higher risk to be associated with this group due to the specific needs of their demographic. Old age often brings new health care and mobility challenges, which require robust health delivery systems and age inclusive environments. Ageing populations often also undergo significant changes in economic and employment status, which can threaten financial security and increase susceptibility to social exclusion and poverty. These groups often face discrimination in the form of ageism, as well as many types of physical, social, economic, and psychological abuse. Additionally, women can also be more vulnerable in older age due to gender discrimination and gender-based violence.

In recent years, the United Nations Population Fund (UNFPA) and other UN agencies have come together to address various facets of this complex dilemma. The Sustainable Development Goals (SDGs) specifically incorporate targets to include the needs of the elderly as a measure of achievement of almost all goals. While there are many areas where policy can address these needs, healthcare and well-being, age inclusive environments, and human rights are three specific policy areas that UNFPA has defined as fundamental in managing the needs and challenges of an ageing world.

International and Regional Framework

The changing population dynamic was first formally recognized in 1968, when Malta brought it as a concern for debate to the UN. The next decade sustained continued interest regarding the issue of ageing, which prompted the
UN to call for a World Assembly. The document listed seven policy area recommendations, which included health and nutrition, housing and environments, social welfare, and income security. The document calls upon governments to create, implement, and review national policies targeting ageing issues and collectively share information to meet the changing needs of the ageing population. Many of the ideas incorporated in Vienna and its subsequent documents are founded on the values engrained in the Universal Declaration of Human Rights (UDHR) (1948). These include that all people are born free and equal with rights to social, cultural, and economic rights, equal and fair employment, and a standard of living. Other key international human rights documents that have guided the discussion regarding the elderly include the International Covenant on Economic, Social and Cultural Rights (1966) and the Convention on the Elimination of All Forms of Discrimination Against Women (1979).

In 2002, the World Assembly on Ageing convened for a second time in Madrid, Spain. The result of this conference was the creation of the Program of Action of the ICPD, a framework that became one of the steering documents of UNFPA. Within the Plan of Action, three objectives were set regarding elderly populations, including creating environments that foster quality of life and the ability to live and work independently, developing health care and social security mechanisms, and establishing support systems for the care of the elderly within families. The actions recommended within the ICPD called on governments to recognize the growing elderly population when constructing all socio-economic policy, create social security systems, promote policies of self-reliance and full participation within society, and collaborate with both the private and public sectors to strengthen safety nets to eliminate violence and discrimination.

In 2002, the World Assembly on Ageing convened for a second time in Madrid, Spain. The resulting Madrid International Plan of Action on Ageing (MIPAA) serves as the foundation of current policies drafted by UNFPA, UN agencies, and many Member States regarding elderly populations. The overall goal of MIPAA was to “create a society for all ages.” The plan breaks down recommendations into three broad directives that include ageing and development, health and well-being, and creating age friendly environments. These recommendations sought to address age discrimination, neglect, violence, and abuse. The resulting policy goals included ideas such as equal opportunity to work, social safety nets, healthcare access and rights, and equal participation in various aspects of society. This also led to the creation of the UN Programme on Ageing, which is an initiative through the UN DESA Division of Social Policy and Development.

The ideas set forth in all of these resolutions, plans of actions, and initiatives were again re-emphasized with the adoption of the 2030 Agenda for Sustainable Development, which established the SDGs in September 2015.

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285 Ibid.
286 Ibid.
288 Ibid.
290 UN ICPD, Programme of Action, 1994, p. 59.
293 Ibid., p. 40.
295 Ibid.
296 UN DESA DSD, United Nations for Ageing, 2016.
297 Ibid.
298 Ibid.
299 Ibid.
301 UN DPI, Unanimously Adopting Historic Sustainable Development Goals, General Assembly Shapes Global Outlook for Prosperity, Peace, 2015.
While these goals are broad in spectrum, almost all goals encompass the needs of older persons. Goal 2 addresses the eradication of all forms of malnutrition by 2030 through addressing the needs of pregnant women, teenagers, and older persons. Goal 3 promotes the access to healthcare and overall well-being to all population groups. Additionally, Goals 5, 8, 10, 11, and 16 call for the eradication of all forms of discrimination in all aspects of the society, especially integrating older persons further in politics, human settlements, and employment. It is therefore imperative to note that the realization of a sustainable future requires the various challenges faced by the elder population to be addressed, in which UNFPA plays a vital role.

Role of the International System

UNFPA is one of the key UN agencies in addressing ageing. It primarily raises awareness of the issue and contributes substantial research and data collection for policy recommendations that align with goals set in initiatives like the SDGs and the ICPD. UNFPA’s primary goal is to make information available to governments and interested parties, so that ageing issues can be effectively addressed within national policies. Ageing in the Twenty-First Century: A Celebration and a Challenge, published in 2012, serves as an example of the agency’s work and collaboration. The data collected regarding ageing is divided into three policy umbrellas, which include income security, healthcare, and age inclusive environments. The report evaluates national actions by region and transforms all of the collected information into concrete policy recommendations. UNFPA also served as a leader in the 20-year follow-up of the ICPD, which occurred in 2014. The agency published reports, held panels, and collaborated with many organizations both inside and outside the UN to try to achieve the goals set in the ICPD Programme of Action.

As the ageing demographic continues to grow, there are an increasing number of other UN agencies that address the various challenges faced by older persons. The General Assembly adopted resolution 45/106 of 1990, which officially designated 1 October of every calendar year as the United Nations International Day of Older Persons (UNIDOP). This day commemorates those over the age of 60 and serves as a platform to advance national, regional, and global policy needs of this population demographic. Previous policy themes of UNIDOP have focused around healthcare, social welfare, and human rights. In 2016, UNIDOP focused on combatting ageism, which is the discrimination of an individual due to their age. The General Assembly also adopted resolution 46/91 of 1991, which outlines the five principles of older persons, including the rights to independence, participation, care, self-fulfillment, and dignity. Additionally, resolution 65/182 of 2010 established the Open-Ended Working Group (OEWG) on Ageing. The mandate of the group is to look for gaps in human rights as pertaining to older persons further in politics, human settlements, and employment. It is therefore imperative to note that the realization of a sustainable future requires the various challenges faced by the elder population to be addressed, in which UNFPA plays a vital role.

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303 UN General Assembly, Transforming our world: the 2030 Agenda for Sustainable Development (A/RES/70/1), 2015, p. 15.
308 Ibid.
311 Ibid.
312 Ibid.
316 UN, International Day of Older Persons 1 October: Background, 2017.
317 Ibid.
318 Ibid.
dialogue between governments, policy experts, and non-governmental organizations (NGOs), and produces a number of reports regarding the human rights associated with ageing.\textsuperscript{322} Additionally, the Human Rights Council (HRC) has addressed challenges of elderly populations, and in 2014 appointed its first independent expert on the enjoyment of all human rights by all older persons, whose role is to assess and report national and international standards being implemented in regards to the rights of older persons.\textsuperscript{323} HRC further adopted resolution 33/5 of 2016 that created a three-year mandate for this independent expert.\textsuperscript{324} Most recently, the work of the independent expert has called on Member States to curb elderly abuse that originates from relatives, and to create mechanisms that can better report these forms of abuse.\textsuperscript{325}

Civil society has partnered extensively with the UN system in addressing the needs of elder persons. HelpAge International has been one of the most prominent organizations advocating for the rights of elderly persons throughout the world.\textsuperscript{326} They advocate these rights by lobbying on behalf of the elderly population to institute national policies, and they also directly manage a number of projects in the field.\textsuperscript{327} The NGO has worked in 65 countries on projects that encompass all areas of ageing.\textsuperscript{328} For example, in South Africa HelpAge assists in getting transportation to health appointments for 8,000 elderly persons.\textsuperscript{329} In Bolivia, Help Age helped 10,000 older persons access benefits, such as pensions.\textsuperscript{330} The work of this group is broken down into five policy areas, including health, rights, emergencies, climate change, income, and older women.\textsuperscript{331} HelpAge International also publishes and collaborates with the UN and other organizations on various publications.\textsuperscript{332} For example, many NGOs served as a major contributor to UNFPA’s 2012 report Ageing in the Twenty-First Century: A Celebration and a Challenge.\textsuperscript{333} In 2017 alone, HelpAge released publications regarding aspects of human rights of the elderly, well-being in old age, and attaining the SDGs as they pertain to older persons.\textsuperscript{334} Other major organizations include The NGO Committee on Ageing, Stakeholder Group on Ageing, American Association of Retired Persons International, and the Agewell Foundation.\textsuperscript{335} These partnerships offer a plethora of benefits to the mission of UNFPA in areas such as information sharing, field data collection, and serve as the catalyst for transforming UNFPA policy recommendations into concrete action.\textsuperscript{336}

**Health in Old Age**

Good health poses one of the most significant challenges to elderly populations around the world.\textsuperscript{337} The World Health Organization (WHO) reports that in the sixth decade of life most major causes of death and disability relate to age, because certain aspects of ageing are inevitable due to the physiological loss of sight, hearing, and motor function.\textsuperscript{338} Additionally, there is an increased risk of non-communicable diseases, such as heart disease, arthritis, diabetes, stroke, chronic respiratory disease, cancer, Alzheimer’s disease, and dementia.\textsuperscript{339} The result of these changes and morbidities is some form of disability, which UNFPA estimates to affect more than 46% of individuals over the age of 60.\textsuperscript{340}

\textsuperscript{323} UN OHCHR, *The Independent Expert on the enjoyment of all human rights by older persons*, 2014.
\textsuperscript{326} HelpAge USA, *About Us, Who We Are*, 2017.
\textsuperscript{327} Ibid.
\textsuperscript{330} HelpAge USA, *Latin America*, 2017.
\textsuperscript{331} HelpAge USA, *What We Do*, 2017.
\textsuperscript{333} Ibid.
\textsuperscript{335} The NGO Committee on Ageing, *Member Organizations*, 2017.
\textsuperscript{336} UNFPA, *Partnering with Civil Society*, 2017.
\textsuperscript{338} Ibid., p. 26.
\textsuperscript{339} Ibid., p. 6.
Most healthcare systems are unprepared to meet the needs of elder persons, even in industrialized states, due to the varying needs of individual patients. Geriatric care is particularly resource intensive, which can limit access to adequate care. In less developed countries, these health burdens are often thrust onto entire families, either in the form of lost wages from an affected earner who stays home to support the older person, or in healthcare costs associated with a catastrophic event, such as a stroke or heart attack. The drop in fertility rates worldwide is further aggravating this issue by creating shortages of caregivers and young healthcare providers. UNFPA states that the lack of adequate financing is one of the main underlying factors for most issues related to elderly healthcare. The agency promotes policies that incorporate investment in prevention and emerging technologies that lower costs and increase access. Furthermore, UNFPA strongly advocates for policies that expose more healthcare providers to geriatric care during their training in order to meet the needs of this growing demographic.

One condition seen almost exclusively in elderly populations is dementia. Currently UNFPA estimates that 35.6 million people live with dementia, and that figure is expected to double over the next 20 years. Dementia is defined as a “syndrome in which there is deterioration in memory, thinking, behavior and the ability to complete everyday activities.” Persons with dementia have much higher risks of fall injuries and require around-the-clock monitoring and care, which is estimated to cost $604 billion annually globally. UNFPA has been monitoring the status of dementia within the global population, and has highlighted this as being one of the leading causes of lost years of life. In India, UNFPA authored Caring for Our Elders: Early Responses, which discussed some aspects of dementia and highlighted successful programs that are addressing this challenge that other countries can look into and possibly pursue. One such highlighted organization was the Alzheimer’s and Related Disorders Society of India, a voluntary organization established in 1992. This organization has created numerous initiatives that help those with dementia, including the creation of day care centers for the elderly, the creation of over 100 memory clinics, organization of national conferences, and certificate programs in geriatric care and care-giving.

**Age Inclusive Environments**

Over the last century, industrialization and the concentration of jobs into cities has led to migration from rural communities to urban centers, with more than 50% of all people living in cities currently. Due to this rapid growth of urban centers where the population is much younger, experts have concluded that the current design of urban spaces is exclusionary to the elderly. Cities have been designed mainly for cars, and there is a need to create spaces for walking and social activity. Additionally, many cities require significant investment in safe, reliable, and affordable public transit projects that allow for better ease of movement for older persons. Current housing standards and design also fail to take into account the needs of the elderly. Multistory homes tend to make transition between the stories very difficult and unsafe without the use of an aid like an elevator or lift chair. This

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346 Ibid., p. 70.
354 Ibid.
355 Ibid.
357 Ibid., p. 3.
358 Ibid., pp. 8-9.
361 Ibid.
is especially important as 10% of older persons aged 65-74 years of age experience some degree of mobility challenges, and that figure doubles for those 75 and above. Additionally, many homes in the developing world lack access to plumbing and sanitation. This results in bathroom facilities being located outside the home and difficult to reach for persons with mobility issues.

UNFPA believes that everyone has a right to adequate housing, and lobbies policymakers to evolve housing design to meet the needs of the growing ageing demographic. It advocates for creating cities that promote participation of elderly populations within society, and creating sustainable cities that integrate citizens at every stage of life. UNFPA recognizes that older persons who lack freedom of movement or outlets to participate within society often are at a greater risk of social isolation and depression. In 2015, UNFPA called on policymakers and urban planners on the UNIDOP to make cities more inclusive regarding transportation, housing, and social services.

**Human Rights of Older Persons**

Despite the universality of international agreements, such as the UDHR, elderly persons experience many gaps in human rights, including abuse and discrimination. Abuse in old age manifests in various forms, including physical, emotional, sexual, financial, and psychological abuse. In order to raise awareness of this issue, the General Assembly adopted resolution 66/127 of 2011, which designated 15 June as World Elder Abuse Awareness Day. While there has been an increase in education and awareness around elderly abuse, it is still considered a social taboo in many cultures. In particular, UNFPA has conducted significant research on ageing women and the challenges they face within the demographic. The ICPD stated that women represent the majority of the elderly population, and that women often fare worse socioeconomically in comparison to elderly men. Women often face life events that increase their vulnerability in older age, including being unable to receive equitable work due to gender bias in the workforce, domestic violence, widowhood, and various cultural expectations around the role of women within society. Additionally, elderly women often endure two forms of discrimination, ageism and sexism. In 2007, UNFPA and WHO published the report: Women Ageing and Health: A Framework for Action, which call for a reform in policies to streamline a gender perspective in ageing. The agencies recommended that policy be drafted through a life-course perspective, where investments are made during significant life transitions when women are most likely to be vulnerable, including adolescence, motherhood, menopause, and widowhood. Furthermore, in its 20-year review of the ICPD, UNFPA recognized that empowering women and girls is often the most effective method of improving society as a whole as women play a large role in upbringing future generations and are also a catalyst for many aspects of development.

Discrimination and ageism often prevent older persons from seeking gainful employment, thereby decreasing income and financial insecurity. The participation of elderly persons within their community is also often

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362 Statistics Netherlands (CBS), One in five elderly have mobility problems, 2004.
364 Ibid.
366 UNFPA, Statement: Sustainable Cities for All Ages, 2015.
367 Ibid.
368 Ibid.
370 UN, World Elder Abuse Awareness Day 15 June, 2017.
376 Ibid., p. 3.
377 Ibid., pp. 1, 4-10.
378 Ibid., p. 5.
380 UN DESA, Taking a Stand Against Ageism, 2016.
suppressed, which can lead to depression, loneliness, and self-neglect. Additionally, society often views the elderly as dependent; however, many of these individuals contribute to society in the form of unpaid work, such as taking care of grandchildren. Many of these stereotypes arise from perceptions established within mass media, which often portray older persons negatively. In the ICPD 20-year review, Member States committed to adopt and implement measures that promote equality and non-discrimination for all people. While there has been a large increase in awareness and education related to ageism through the work of both UNFPA and civil society, much work is still needed to reverse these stereotypes, end discrimination and abuse, and to positively and accurately portray this group in the media. UNFPA advocates for the creation of lifelong learning and retraining initiatives, as well as policies that allow for flexible employment for the elderly. These positions are guided by international agreements, such as ICPD and MIPAA, to gather research and advocate for policies that encourage elderly populations to participate within society, fight discrimination, address gender inequalities, and curb abuse. Additionally, the organization is quite active around taking a stand against ageism, which was the theme of the 2016 IDOP.

Conclusion

An ageing world is often considered one of the greatest triumphs of human development. It indicates that individuals have been able to attain a sufficient level of well-being in order to live longer. Never before has the world experienced this shift in population dynamics. As a result, these changes pose new opportunities for societies across the world to create policies and mechanisms that focus on ageing populations. UNFPA has been one of the main UN agencies addressing the needs of elderly populations through the collection and dissemination of research, creation and advocacy of policy recommendations, raising awareness, and establishing partnerships with national governments and civil society. The body has been guided by key international agreements which include UDHR, ICPD, MIPAA and the SDGs. Successful policy will not only address elements of health, inclusive environments, and human rights, but is multifactorial in nature and comprehensive in approach. Addressing these needs is imperative if the world wishes to achieve the SDGs.

Further Research

It is important for delegates to remain up to date on the work UNFPA is conducting as it pertains to ageing. Delegates may consider the following questions in their research: How can UNFPA further its policy to attain the goals laid out in these international agreements as it relates to ageing? As the demographic continues to shift and the needs of older persons evolve, how will UNFPA’s role in advocacy, leadership, and collaboration change? Additionally, how can UNFPA work with the private sector, regional actors, and NGOs to further address the needs and challenges of elderly persons?

381 HelpAge International, Entitled to the Same Rights, 2017.
386 UNFPA, Statement: Sustainable Cities for All Ages, 2015.
388 UN DPI, Take a stand against ageism, says UN on International Day of Older Persons, 2016.
391 Ibid.
394 Ibid.
**Annotated Bibliography**


This document does an excellent job illustrating many of the challenges that cities face in order to accommodate the needs of ageing residents. The report effectively delivers many key points related to urban design, housing, and public transport policy. Like many of HelpAge’s reports, there are many different perspectives shared throughout the report in order to bridge the policy with either the change needed or to advocate for programs already in place. Delegates will find this resource useful during research, especially policy recommendations for age inclusive environments.


This document was published in 2017 and serves as a current amalgamation of issues related to human rights of older persons. Abuse and discrimination issues are specifically highlighted in the report. Additionally, numerous programs and challenges in different regions of the world are showcased, as well, which brings various world perspectives. These highlights can come in the form of opinions or details related to programs being implemented and statistics.


This document is a cornerstone of all ageing related policy in the international community. Though the framework is now over a decade old, many citations of this key international plan of action in resolutions, reports, and articles both within the UN and through NGOs. The Plan of Action builds upon the Vienna International Plan of Action and had the goal of creating a society for all ages. Understanding this document is essential to creating next generation policy as it pertains to ageing.


This website discusses the work that is being done by the Open-ended Working Group on Ageing for the purpose of strengthening the protection of the human rights of older persons. The website includes useful information of what the body is completing, and serves as a good place to see how the various problems elderly persons face are also gaps in human rights. This perspective is paramount to UNFPA’s mandate, and also addresses the issue as it related to human rights. Delegates will get a better understanding of how the international system has been collaborating to address this topic through reading this source.


This report serves as a barometer of what ageing demographic trends look like currently. It presents numerous demographic trends, breakdowns, and statistics of what ageing looks like today and where the trends are going. This is a good resource to see what a represented country or associated region looks like in terms of ageing, older persons, and regional strengths and opportunities.


The document is one of the key agreements that UNFPA has used as a guide for much of the work that the Agency has completed on ageing and the rights of the elderly. The objectives spell out the rights of that elderly populations should be entitled to and what actions are recommended to attain these goals. While the document encompasses population as a whole, specific sections are
related to those of elderly people. Delegates should be familiar with this framework and note its importance to the issue as it is at the same level as the SDGs and MIPAA. There has also been a lot of follow-up work that UNFPA has spearheaded in 2014.


This report had contributions from many UN agencies and several NGOs, and serves as an excellent resource to understand some of the various aspects of ageing within society. It paints a macro-level picture and splits the issues in a similar way the background guide is sorted. It discusses aspects of financial security, healthcare, and human rights. This is a well-balanced resource in beginning to understand the topic.


This resource is a summary of all policy, legislation, and research in regards to older persons. Published by UNFPA, this report is an excellent source in being able to find, valuable, balanced, and factual information on both the national and international level. It lists many programs that are in place so that delegates can gain a better understanding on what both the UN and civil society have completed regarding the issue. Delegates who are having trouble looking for information about ageing policies within their respective countries may find significant guidance within this report.


This report was jointly created by UNFPA and WHO and is an important source to understanding the needs and challenges ageing women face. This report sets to explain some of these challenges and provides policy recommendations for what should be done to resolve these gaps in human rights. The background guide discusses the rights of ageing women in particular within the section related to human rights and abuse, and would serve delegates well in understanding an area of the issue that UNFPA focuses a lot of energy on.


This report does an excellent job illustrating the current health and well-being status of older persons. In addition to painting a very detailed picture, the report also discusses at length many of the challenges currently faced as it pertains to the healthcare environment. Additionally, many policy recommendations are also found within the document. Delegates will find this resource to be helpful in their research on health-related issues of the ageing population.

Bibliography


