

ICPD30: Policymaking Initiatives to Address National and Regional Population Trends



From
the People of Japan



New Delhi, India

22 August 2023

Opening Session

Opening remarks

Prof. P.J. Kurien, Chairperson of IAPPD, in his welcome remarks shared the context that India has surpassed China with 1.4 billion population. He stressed that this number, mostly consisting of youth, can be the country's invaluable asset if the correct attitudes and behavior towards adulthood, professional development, and societal interactions are achieved. He further stressed that the youth's energy and enthusiasm, if channeled effectively, can propel a nation to an unprecedented height. India prides itself for prioritizing programmes and initiatives that would lead to the development of adolescents and youth. However, he acknowledges that the desired outcomes for the well-being of youth cannot be solely accomplished by the government. The support of various stakeholders is essential. Electoral representatives, too, play a crucial role in shaping the youth's attitude and practice because they are being looked upon by for guidance and inspiration.

Messages

Hon. Prof. Keizo Takemi, MP Japan, Chair of AFPPD, underscored two points in his message on the importance of the workshop. First, India is the host of the G20 and has organized a series of ministers' meeting. As a host, India makes very important decisions and role on framing how AFPPD can contribute to drafting the outcome document of the G20 Summit. He shared that in April 2023, Japan hosted the Global Conference of Parliamentarians on Population and Development Toward the 2023 G7 Hiroshima Summit (GCPPD2023). AFPPD endeavored to achieve the same level of success that it had when it organized the largest meeting of its member states which yielded the declaration for the agenda on ageing, gender, and youth that was presented to the Ise-Shima Summit. The Declaration was proposed to the Prime Minister and several key sentences contained therein, particularly on the reproductive health and rights (RHR), were subsequently adopted in the Summit Leaders' Declaration. He expressed his hope that the Indian Parliamentarians can closely collaborate with AFPPD and propose AFPPD's GCPPD2023 Declaration to the Prime Minister's office. This declaration emphasized the importance of population-related issues under the context of very serious geopolitical conflicts. He stressed that the parliamentarians' network can take a very important role as a peace maker to stabilize the situation when conflict is happening all over the world.

His last point was on the results of the IAPPD's recent report which analyzed Indian youth and adolescents' population issues. A number of AFPPD member states in South Asia have very serious youth issues. It is important to discuss how AFPPD as a whole, in collaboration with UNFPA, can support these nations in addressing the said issues. Considering the very small budget, IAPPD has already done a wonderful job of analyzing the reason why youth and adolescent-related issues are happening. The goal is to find out the common areas to address these issues beyond the national boundary in the Asia and Pacific.

Ms. Andrea W. Wojnar, UNFPA Director for India and Bhutan, recognized that parliamentarians have a seminal role in passing laws that uplift the lives of people, in protecting women's and human rights, and in protecting the planet which is under threat. She said that the

United Nations Population Fund (UNFPA) immensely values this close relationship with parliamentarians at the national, regional, and international levels. The Global Conference of Parliamentarians on Population and Development Toward the 2023 G7 Hiroshima Summit and the April 2023 declaration stand as a model of excellence. AFPPD has given very strong guidance and direction through the G7 communique: invest in the sexual and reproductive health and rights (SRHR), as well as comprehensive sexuality education, towards making future societies economically dynamic and for building peaceful, inclusive, and sustainable societies.

As the 30th anniversary of the International Conference on Population and Development (ICPD) draws near, the principles of the Programme of Action that recognized gender equality and the empowerment of women must be at the heart of population and development related programmes as strongly as ever. Ms. Wojnar presented the following three propositions. First, that population per se is not the problem. Coercive or incentivizing policies that try to increase or decrease fertility rates do not work well anywhere, but ensuring effective reproductive rights and choices for all does. This was the message from ICPD Cairo in 1994 and this should be the message from Delhi in 2023. Second, women's rights are human rights and women's reproductive rights and choices must be respected. As long as women suffer, societies will not be free and they will not prosper. Early and forced marriages, spousal violence, unmet need for family planning, unintended pregnancies, and unsafe abortions are all violations of human rights. The most recent data from 68 countries show that an estimated 44% of partnered women are unable to make decisions over health care worldwide. This is a clear abrogation of women's basic human rights to decide freely and responsibly the number and spacing of their children. The 2030 Agenda for Sustainable Development includes realizing gender equality and the empowerment of women and girls.

Finally, there are mega trends that the world is facing: ageing, urbanization, climate change, and migration. These four issues can be either threats or opportunities, depending on the actions that are taken and the choices made. According to the Asian Development Bank (ADB), the population of persons over age 60 in the region will triple between 2010 and 2050, and it will reach close to 1.3 billion. While in some countries such as China, Sri Lanka, Thailand, and Vietnam, this transition will happen very rapidly, others such as Indonesia and India will experience a more gradual shift. Regardless, older persons cannot be put on the shelf. Their expertise, skills and their experience can help to raise the youth cohort to be efficient and effective quickly.

The World Bank estimates that East Asia and the Pacific is the world's most rapidly urbanizing region, with an average annual urbanization rate of 3%. By 2018, half of the world's population was urban. More than 1.2 billion people or one third of the entire world's urban population is in Asia. India, too, will witness half of its population living in urban areas. As such, there is a need to plan for more urban infrastructure, jobs, and social protection.

On climate change, the Asia Pacific region is not only distinguished by its unique hazard characteristics, vulnerabilities and exposure, but also risk hotspots that have been identified across the region, which are responsible for a disproportionately high rate of disaster-related fatalities. A person living in Asia Pacific is six times more likely to be affected by disaster events. Disasters as a percentage of GDP shows that there is more damage in Asia and the Pacific than in the rest of the world and this gap has been widening.

Finally, migration is a growing phenomenon in the region. Over 62 million people living in 2017 were born outside their country of residence, which has increased by about 25% over the past 12 years. In 2017, 101 million migrants worldwide originated from countries of Asia and the Pacific. The trends in out-migration show a steady increase with 16.6 million. India has the largest number of migrants abroad. What does this mean for economies? For population issues and for the balancing of population dynamics? It is important that ageing, urbanization, climate change, and migration policies link clearly with national and regional strategies and programmes to promote sustainable development.

This is no easy task but everyone must remember that human reproduction is neither the problem nor the solution. These mega trends can either be threats or opportunities. Data and evidence on how these challenges impact vulnerable populations is needed, but rights and choices around sexual and reproductive health must remain.

Remarks

Hon. Deepender Hooda, MP India, Vice Chair of AFPPD thanked the leadership of AFPPD for agreeing to his proposal during the GCPPD2023 in April this year. The parliamentarians agreed to strive to hand over the declaration to the leadership at G20, before the heads of the states meet at G20 Summit as was done in the G7 Summit. The declaration touches on important issues related to ageing, youth, gender equality, and human security, which encompass all the issues. Hon. Hooda expressed that they had met the G20 Sherpa Mr. Amitabh Kant, one of the most high-profile bureaucrats attached with the Prime Minister. He had given his assurance to discuss the declaration with the Prime Minister

Coincidentally, this very important meeting is happening when India has overtaken China as the most populous nation in the world. While countries like India and Indonesia are a little behind the ageing curve compared to China and Sri Lanka, as the most populous nation in the world, India faces youth, gender, and ageing issues at all times. The country has more elderly people than most East Asian countries combined.

Session 1: Addressing Adolescent and Youth Issues towards ICPD30 **Presentation by: Dr. Suneeta Mukherjee, Ms. Geeta Narayan, and** **Mr. Parvin Kr. Jha, IAPPD consultants**

Dr. Suneeta Mukherjee, Ms. Geeta Narayan and Mr. Parvin Kr. Jha presented the issues of the most critical segment of society—youth and adolescents. UN defines adolescents between 10 and 19, and youth between 15 and 24. However, the Government of India takes the age of youth up to 29. India is the youngest country in the world and almost 50% of its population is young, which presents with a unique demographic opportunity. An educated, skilled and healthy young population could be a demographic bonus, but an unhealthy, uneducated, and unskilled could be a demographic liability. Parliamentarians provide a critical role in linking the youth with the government, framing the policy, and providing youth with role models.

Objective, limitations, and methodology. The objective of the thematic study is to develop a report through compilation of secondary data on current status of youth and adolescents, and to examine the programmes by which the government is addressing them. Subsequently, a

workshop with the elected representatives of the country will be held to create awareness on the issues of young people. The main limitation of the study is the completeness and availability of data. The data for the age 10 to 14 is largely not collected and latest census data is not available. Some studies are limited to certain states and often have contradictory results. The study presents the profile of adolescence, issues on health, education, skilling and employment, and recommendations. As the census and NFHS needs updating, data on age 10-14 is also rarely available. Thus, they collected and analyzed secondary data and data from government, NGOs, and academic institution.

Profile of adolescents and youth. Almost 1/5 of Indian's population are adolescents and youth for both in urban and rural areas. There are less females than males as the result of patriarchal society and other social norms. In 2011, about 86% of youth and adolescents are literate or anyone over age six who can simply read and write simple sentence and comprehend. A study in 2017 conducted by India Arm of Young Lives suggests that 76.8% of boys and 66.3% of girls completed secondary education. However, there is wide variation in retention rates. One of the challenge India has been facing is the low age at marriage. In 2005 NFHS 3, half of females in the age group 20-24 were married and more than one third (37.7%) among 18-19 were married. Low age at marriage is closely associated with poverty and it increase girls' vulnerabilities and negative impacts on the health of both the mother and her child.

Health. Sexual and reproductive health (SRH) practices, awareness on sex and pregnancy, contraceptive-related issues, information on puberty, child marriage, childbearing, high risk sexual behavior, violence against women, maternal health practice, institutional delivery, nutritional disorders, anemia, substance abuse, mental health, and government programmes, are among the problems of youth and adolescents. UDAYA (Understanding Lives of Adolescents and Young) shows that a little over 30% of the 10-14 age group reported no awareness on menstruation. Among those who had begun menstruating, only 27.6% used sanitary pads and 51.2% used cloth. While menstrual practice is 100% in some of the union territories, it is still very low in the more populous states.

On matters related to sex and pregnancy, in both Bihar and Uttar Pradesh, over 50% of boys and girls knew that a woman cannot get pregnant after kissing or hugging. On contraception related issues, awareness is still very low. The majority of older girls reported awareness of at least one modern method. There are 85% married girls, 45% boys, and 57% unmarried girls who had heard about oral pills. On sources of information on puberty, 57% boys and 53% girls in Bihar and Uttar Pradesh had never received any information about puberty. The sources that they quoted were primarily their family members, friends, and adults in the community and less than 1% mentioned health care providers. The issue of child marriage continues to be an issue of concern in India. 1.5 million girls under 18 get married every year. Although the share of the girls who married before the age of 18 decreased in the last 15 years, the number is still very high. Since these young girls marry early, childbearing also starts during the adolescent years. The use of modern method of family planning is also very low among the 15-19 and the 20-24 years old, and the unmet need is very high amongst them. Most health-related issues in adults (almost 70%) can be traced to behaviors initiated during adolescence. HIV/AIDS and STI are high in this age group.

Another alarming issue is violence against women, including sexual assault, dowry-related violence, honor killings, female infanticide, sex selective abortion, trafficking, etc. The National Crime Records Bureau has reported 15.3% rise in crimes against women in 2021. Maternal healthcare practices data shows that only 60% women in the age group 15-19 received the four antenatal care services during their course of pregnancy. Situation regarding institutional deliveries is fairly promising with around 89.7% in the 15 to 19-year-old age group and 90.2% in 20 to 24-year-old giving birth in healthcare facilities. However, several states still have lower rates of institutional deliveries especially in the north and the northeastern states.

A recent UNICEF-NITI Aayog report points out that almost all adolescents consume unhealthy and poor diets leading to malnutrition. Over 80% suffer from deficiencies. Around 67% women 15-19 years old suffer from anemia and 61.3% of 20-24 age group of women suffer from anemia. On substance abuse, 11.8 million lives are lost to substance abuse annually. In India, alcohol and tobacco are the most widely abused substances. The age of initiation to consumption of tobacco continues to decrease. On issue regarding HIV/AIDS, 31% of the AIDS burden can be attributed to the age group 15-29 years old according to NACO. Mental health is another huge problem in India where cases start at the early age of 14. Suicide is the third leading cause of death among 15-19 years old. Young people are being pushed towards suicide due to reasons connected to their upbringing and peer pressure. The Government of India has launched several programmes to address these issues. Ministries and Departments that are also working with women, child, and social justice, and empowerment come up with several programmes. There was a landmark programme that was launched by the Government of India called the RKSK, which shifts the paradigm from clinic-based services to promotion and prevention and reaching adolescents in schools, families, and communities.

Education. The provision of free and compulsory education to all children of 6-14 years is a fundamental right. School education in rural India is mostly dependent on government. However, children from rural areas face many barriers directly impacting literacy rate. Annual Status of Education Report 2022 (ASER 2022) shows that nationally, 31.4% of children enrolled in the Std VIII in government or private schools in rural household cannot read basic texts. Barriers to learning include lack of access to advanced learning tools in rural schools. As per the ASER 2018 report, 55.5% of students have never used computers. Owing to financial constraint within families, education becomes second priority and children are forced to participate in income generating activity. Other barriers include lack of sports and coaching and other equipment limited physical activity in schools, non-availability of post-school activity centers, poor access to digital devices, and long-distance travel to get to school. ASER 2022 reports that only 68.4% of schools have usable toilets, which is one of the reasons that girls are not continuing through school. Majority of schools do not have enough classrooms and classes are conducted in the same classroom for more than one standard/class, causing low attention of students. UNESCO report shows shortage of one million teachers in schools. It is noteworthy that there is better representation of women in the teaching staff, with women accounting for about 50% of the teaching workforce with urban-rural variations. Average school attendance also improved at around 72% gross enrollment ratio. In the beginning and the primary level, there is almost 100% of registration, but when it comes to higher education level, only one fourth are continuing or completing. There are many government schemes and programmes to improve and address these issues to attain better retention rate in school and lower dropout rates.

One of the successful schemes the Government of India took is a midday meal scheme, which has impacted and improved the attendance of children in school.

Skilling of the youth. In spite of improvement in education, youth is unemployable. On one hand, there is an industry looking for skilled workers, and on the other hand, there are youth looking for jobs and there is a skill mismatch. Some people plan their own enterprise, but they lack resources. Though 8.5 million youths were employed by the government between 2016-2019 and another 15 million jobs by corporates, unemployment among 20-24 years old remain at 34%. There is gender imbalance in employment with 77% men are employed and only 32% of women. Skill India Mission was set up in 2014 and have standardized skilling programme by connecting training with industry. Student trainees were trained on an approved curriculum and then employed with industry partnership. The government is also setting up international training centers to meet the manpower shortage in European and Western countries. Mapping for the next decades and training along with the industry will go a long way.

Key findings and recommendations. Developing and maintaining a strong database needs to be strengthened. Encourage volunteerism and youth participation in planning programmes for them, implementation, and evaluation. While adults can guide them, youth are the ones who know best. Introduce technical and soft skills at an early age and also start skilling in school. Gender equity and equality cannot be set aside and must begin from young boys. Participate in decision making, comprehensive sexuality education, technical and soft skills and gender equity. Giving sexuality education age-appropriate from the beginning shows that children are able to handle their sexuality better if they are given the right information. Counseling is urgently needed amongst young people, as well as encouraging health workers and facilitating personalizing environment teamwork. It is suggested that inter-ministerial interdepartmental committees be set up to help to look at multiple challenges and infrastructure. Youth should be trained accordingly by introducing skilling in schools.

Q&A for Session 1

On priority setting of population issues. **Hon. Prof. Keizo Takemi** underscored that there are plenty of issues in India: the increasing size of the population, ageing, high rate of unemployment among the youth, and in the educational system, elementary school students are dropping out. He asked how India can create the political momentum and how it can be leveraged for key agenda. Without the process of prioritization in decision making, these issues cannot be overcome in the near future. He also asked the Indian parliamentarians what they are doing in terms of priority setting?

Dr. Suneeta Mukherjee responded that in India, education, including books and uniform, is free for ages 6 to 14. Each individual has the responsibility of getting children to school. The parliamentarians in their constituencies make sure no child is out of school.

Hon. Deepender Hooda addressed Hon. Prof. Takemi that priority setting means political parties are consulting the people on political priority setting. One of the most important themes of the Indian government was inclusive growth. The midday meal scheme was meant to address the dropouts through proper meals being provided in the schools. In the state of Haryana, monthly stipend was implemented so that the economic necessity of working outside the school is offset by the scholarship and children coming from poorer backgrounds have incentive to

remain in school the study. Huge investment was made in the primary- and secondary-level schools across India during that period. We need to further invest in education and health. In current situation, priority setting has taken a backseat, which needs to be reflected on whether it is for the good of the country.

On the Right to Education Law. **Hon. Hooda** added that he is interested to know whether dropout rate is getting worse or not. While there used to be great reduction in dropout rates in previous years, he posited that might not be the case now. He cited the case of Haryana where most of the government schools are getting closed. Despite the enactment of the Right to Education Law, which states that private schools should also reserve certain seats for people for free of cost education, that has not been implemented in the states. This is a very important intervention that the government made, but that is not being implemented. Despite the agenda of inclusive growth, that has taken a backseat due to political priority setting.

A guest commented that it seems that 10 years of schooling of a girl child has critical impact on delaying child marriage and reducing other kinds of health effects. The study showed that about 40% of girl children completing 10 years of school and the Right to Education Law only covers up to only 14 years of age. He then asked if this indicator is something that should be looked at and so that girls can be supported by policy.

Dr. Suneeta Mukherjee said that the answer lies in parliamentarians' hands to make sure that there is no child in their constituency who is not going to school.

On analyzing available data and better coordination among ministries. Another guest raised that there have been a global village of information but these have not been analyzed. Right to Education Law was enacted for free education in government schools. It was passed so that women do not face violence at home, yet violence is still on the rise. She asked about skilling youth in the MSME sector, which is the backbone of economy. MSME sector makes up 89% of the industry. She thinks that with the availability of Digital India, industry needing manpower just needs to use the portal. The ministries have to use updated data to address these gaps and coordinate better with other ministries of the government.

On coming up with a common agenda. **Hon. Aroma Dutta, MP, Bangladesh**, mentioned that the research conducted in India served as a baseline and brought out the issues in the country. G20 is a great opportunity for AFPPD to take a stand within the Asia and the Pacific region on the issue of youth dividend, gender dividend, and silver dividend. The question is this can be integrated and harnessed in the face of global challenges? India has skilling programmes and digital startup programmes; Bangladesh has similar programmes as well. But what is needed is a common agenda, a clear stand and declaration of AFPPD to the G20.

Dr. Suneeta Mukherjee responded that as a former representative of UNFPA in Bangladesh, they drafted a youth charter years ago, which would cover their countries and provide better coordination. But the draft remains a draft as it does not take off. She offered to provide background support in case they would want to pursue this path of developing the youth charter.

Closing the session

Prof. P.J. Kurien, Chairperson of IAPPD highlighted that the basic question is the percentage of the budget that government allocated and invested for education and health. In Kerala, every

child goes to school because there is a school in every village within a walkable distance up to secondary level. All other issues mentioned during the discussion need budget if they are to be addressed. Unfortunately, the budget allocation for health and education may also face barriers. Budget allocation is the most important job of parliamentarians. They should ensure that more budget is allocated for education, health and family.

Session 2

Session 2: Parliamentarians' Role to Implement ICPD PoA and 2030 Agenda

Hon. Hector Appuhamy, Chair of Session 2, opened the session on parliamentarians' role to implement the ICPD Programme of Action and the 2030 agenda.

Hon. Josephine Veronique Lacson-Noel, MP Philippines, opened her presentation with the recognition that in the last three decades, significant efforts have been made in achieving economic development, and that its impact on people was more than just about economic growth, but one that respects rights and expands one's choices. Legislators are tasked to push forward the interests of their constituents through: (1) legislative action through crafting laws that would respond to their socio-economic needs to achieve national development goals; and (2) legislative mandate to ensure that these laws are properly implemented by executing accountability and allocating adequate budget. These can create an enabling environment towards the achievement of the ICPD commitments and the SDGs.

As a global population reached the 8th billion mark, the Philippines is also in the middle of a demographic transition. Despite the growing population in the Philippines, the 2022 NDHS reports that the average number of children per woman aged 15-49 is declining below the replacement level of 2.1. In the past Congresses, the Philippines has seen an unprecedented success in legislation and policy reforms in the areas of SRHR, the prevention of gender-based violence (GBV), and women's rights and empowerment, including the landmark Reproductive Health Law, otherwise known as the Responsible Parenthood and Reproductive Health Act of 2012. Other laws that followed are the Magna Carta of Women, which seeks to prohibit discrimination through definition and promotion of the rights of Filipino women, especially those who are marginalized; the Philippine HIV and AIDS Policy Act, which aims to strengthen the Philippine National AIDS Council and end discriminatory HIV/AIDS services; the First 1,000 Days Act for early childcare interventions; the Mental Health Act on establishing programmes to treat mental health conditions; the 105-Day Expanded Maternity Leave Act; the Safe Streets and Public Spaces Act, defining gender-based sexual harassment in streets and public spaces and providing protective measures and penalties; an act for prohibiting the practice of child marriage; and the act raising the age to determining statutory rape to below 16 years old.

For the social reforms pursued in the last decade, *Pantawid Pamilyang Pilipino* Programme aims to provide adequate social services and an increased quality of life for all the Filipinos; the Universal Health Care act ensures that all Filipinos are granted equitable access to quality and affordable healthcare services and protection against financial risk; and the K to 12 (in which the K stands for kindergarten and the 12 stands for 12 years of education: grades 1-12)

curriculum intends to enhance the Philippine basic education system and increase the number of years of education, to which is now up for review. The Philippine National Congress is now prioritizing addressing gender gaps and inequalities such as addressing the adolescent pregnancy situation, providing access to SRH services, absolute divorce, and anti-discrimination based on gender orientation and gender identity and expression.

An equally important power of the legislative branch is the power of the purse to ensure equitable budget allocation for each of the government agencies. Last year, Philippine legislators were successful in putting in budget for the implementation of SRHR programmes during the final stages of the budget legislation for 2023 (US\$14.9 million for reproductive health, US\$13.8 million for the sexuality education, US\$118,000 for social protection programmes for adolescent parents and children). Parliamentarians should put the budget allocation details of each government agency under a microscope to ensure that the programmes will receive adequate funding and stay on track. Legislative oversight functions to monitor and supervise the activities of each government officer through the democratic system of checks and balances can improve efficiency and effectiveness. There are also various opportunities for parliamentarians to engage in the pursuit of ICPD and SDGs at the national, regional and international levels, such as multilateral, regional, international organizations, international aid agencies, regional bodies, and inter-parliamentary associations. These can provide platform for advocacy, capacity building and sharing of best practices.

Since the adoption of the ICPD PoA, significant progress has been made in advancing its goals, However, it is crucial to acknowledge that progress has been uneven across regions and countries. Recognizing and addressing these disparities is vital to ensure that the vision outlined in the PoA is fully realized for all populations. Moreover, multifaceted crises in recent years have brought additional challenges in advancing the ICPD and SDGs. As key stakeholders, parliamentarians play a critical role in driving legislative reforms, securing adequate resources, and holding governments accountable for their ICPD commitments. She encouraged her fellow parliamentarians to reflect on their achievements, identify gaps, and strengthen collective efforts to close remaining for remaining gaps.

Hon. Dr. Jetn Sirathranont, MP Thailand, Secretary General of AFPPD opened his presentation with the European Commission's confirmation that July 2023 is the hottest month ever in the planet. Natural disasters also increased all over the world. When combined with the COVID-19 pandemic, economic slowdown and the Ukraine war would impact on vulnerable group, children, elderly person, with disability, women and girls, migrant, and refugees. These catastrophic events could delay the ICPD ad SDGs. In November last year, the world population hit eight billion and the most populous country are both in Asia - China and India. Elderly population is increasing in all counties due to several factors, including decline in fertility, improvement in public health, and increase in life expectancy. Active ageing is one of the three pillars of AFPPD, together with youth and gender. The ICPD in 1994 highlighted the relationship between population development and individual life and well-being. Population is not about the number, but about socio-economic and political equality, including SRHR as basic individual wellbeing, individual dignity, and human rights, placing the right to plan one's family at the heart of development. Thirty years after the ICPD, the world has seen remarkable progress. The adoption of the ICPD PoA cemented the people-centered effort to population and development policy, respect for human life, and a strong emphasis on environmental

sustainability. Parliamentarians can have possibility to support and monitor the implementation of the 17 SDGs and safeguard the integrity of 2030 Agenda on peace and good governance. There has been remarkable progress in the past of the PoA. We are closer to achieving our goal of ensuring that every pregnancy is wanted and young persons' potential is fulfilled. Many countries have extended the list of essential health care services to more than two-thirds of the population free of charge. As a result, the out-of-pocket expenditure have fallen. More women have access to SRHR, empowering them to make choice about their body, their life and their family. Adolescent fertility has fallen across the region.

There are also indications of demographic change for the implementation of the 2030 Agenda and SDGs. The Population Division of UN Department of Economic and Social Affairs convened an expert meeting on 19 and 20 July 2023. The expert group meeting assessed the status of implementation of the ICPD PoA and its contribution to the follow-up and review of the 2030 Agenda during the decade of action and delivery for sustainable development. The key topics addressed include population issues since Cairo, and prospects for 2054, regional perspective on population and development, population growth and sustainable development, leaving no one behind in an ageing world, urbanization and international mobility in an increasing interconnected world, and policy priority for population and development 2054.

Parliamentarians will be involved in assessing opportunity and priorities for action during the formulation of the new development agenda through global, regional, and national cooperation. This will input into the final production of agenda 2054. Parliamentarians have to play a central role in the implementation of the ICPD as they can ascertain national priorities and identify resources, and work with the private sector for their successful implementation. The parliamentarians also have to pay attention to planning, budgeting, implementing, and monitoring towards achieving the SDGs to assess its impact on the marginalized and disadvantaged. This demographic change brings more challenge and opportunity. The World Bank has put Thailand in an upper middle-income category. Its healthcare system is still fundamentally strong especially for ageing along with universal health coverage for all Thai people. Delayed marriage in Thailand played an important role. Women do not normally want to marry or become pregnant and these are the main causes of low fertility. The problem in the future for population and development of Thailand with low fertility will be lack of labor force. The COVID-19 had impact on mortality and ageing population over the world. 6.9 million people, mostly the aged, die from this catastrophe. Health care system proved to be not adequately prepared to handle the growing number of the elderly population. Thus, parliamentarians need to improve management and control, and monitor the government to prepare for new emerging diseases in the future.

Only one year left till ICPD30 and only seven years till the SDGs, but it is a long way to go. It is his hope that countries are working towards the right direction.

Q&A for Session 2

*On identifying the role of parliamentarians beyond the national boundaries. **Hon. Prof. Takemi** expressed appreciation to the presentation of Hon. Lacson-Noel as she clearly classified the role of the parliamentarians. Legally, parliamentarians know the process and the budget, and they are the catalyst for new ideas and targets from the ICPD, SDGs, and their respective*

constituency. Hon. Dr. Jetn mentions the role of parliamentarians' network beyond the national boundaries. Hon. Prof. Takemi said that AFPPD as a parliamentarians' network always tries to seek the role of parliamentarians beyond the national boundaries and try to find a common subject for collaboration. The three foci of AFPPD: gender-related issues (e.g., reproductive health and rights), youth (e.g., adolescent-related issues), and active ageing. Even in India, a large size of the elderly population is emerging. By 2050, nearly 70% of the ageing population over 65 will live in Asia. As a result of those demographic changes, there will be social impact. There could also be infectious diseases that are serious threat to human health. How can the world cope with it? He cited the example of vaccines to the COVID-19. Most of the outcomes of research and development in the advanced nations has been delivered to the people in those high-income countries. Thus, there is a huge gap between people in advanced nations and those in low- and middle-income countries. Equity is one of the points that parliamentarians have to consider as the basis of collaboration. Currently, the Global South is emerging and India is one of the top leaders. How can India take the role as the leader of the Global South in the context of geopolitical conflicts? India can take that role and utilize its own comparative advantage. India, Sri Lanka, Bangladesh, and those in the South Asia can more closely collaborate with each other and find out how to collaborate with each other. Japan and other high-income countries can efficiently collaborate through spaces like this to exchange ideas among parliamentarians.

On SRHR in the Philippines. Dr. Suneeta Mukherjee shared that contraceptive used to be illegal in the Philippines. Divorce is still illegal while contraceptives are now being distributed as a result of advocacy efforts. She asked on the progress of contraceptives use in the Philippines and the situation of women who are not getting along with their husband in the face of prohibition of divorce. She also raised her observations that women in the Philippines are choosing not to get married because they are well educated and could not find a matching partner; yet some still want to have children. She asked how the parliamentarians are working to solve this situation.

Hon. Josephine Veronique Lacson-Noel, MP Philippines, responded that women are now empowered; hence, choosing whether to get married or not, or to have a child or not, is no longer considered as a problem. Regarding contraceptives, because of the RPRH law, contraceptives are now being distributed by local government units. There is comprehensive sexuality education in schools and sufficient annual budget allocation - steps taken to improve contraceptive use and access. Abortion is still illegal and the Philippine legislative are working on the proposed divorce measure.

Prof. P.J. Kurien asked if abortion is illegal in the Philippines, what would be the policy for pregnancy that resulted from rape.

Hon. Lacson-Noel said that it is unfortunately illegal and therefore still not allowed under that circumstance because of the huge influence of the Church. Even for those who followed other religions, abortion is still not allowed and the parliamentarians cannot do anything about it at the moment.

On necessary support to increase regional collaboration. Ms. Andrea W. Wojnar reiterated the question on the kind of support parliamentarians need in order to be able to increase

collaboration. Knowledge sharing can take place as the Philippines is not the only country struggling with the issues raised. Many others have gone through it before and they know some tactics and strategies that could be useful to the Philippines.

Hon. Prof. Keizo Takemi responded that it is a very simple but the difficult question. The important thing is that parliamentarians should have occasions to exchange ideas to enable them to understand the differences in each region. For example, on the issue of abortion, Catholics totally denied abortions; yet in the U.S. it became a very serious political issue. In the case of Asia and the Pacific, how can this issue be handled in a much more improved manner? He underscored that parliamentarians can talk honestly in spaces such as in the parliamentarians' network. This will also prevent unnecessary conflict.

On use of social media and technology. **Hon. Hector Appuhamy, MP Sri Lanka**, raised that while in the rural area there are still children who are not going to school, mobile phones and social media are present. There is a lot of wrong information that children can pick up from them. While there are efforts on training and investing on providing information to the youth, false information from social media must be addressed.

Ms. Andrea W. Wojnar responded that UNFPA has been doing a lot of work in India with the government on using technology to reach youth for comprehensive sexuality education, including OMG2. She requested parliamentarians to set aside the issues of censorship and focus on the real message of giving youth the information they need to make the right choices and to maintain their good physical and mental health. Worldwide evidence shows, in over 80 countries, when young people have proper comprehensive sexuality education, the age of sexual debut is delayed. There would be fewer unintended pregnancies and fewer sexually transmitted diseases.

On capacity building of parliamentarians. **Mr. Parvin Kr. Jha** suggested to UNFPA to engage parliamentarians in getting sensitized on these issues so there will be stronger coordination and cooperation.

Closing

Hon. Hector Appuhamy closed Session 2 and thanked the speakers of the session.

Appendix 1: Program

21 August 2023, Arrival of the AFPPD ExCom members	
22 August 2023, Day -1, Meeting	
09:30-10:10	<p>Emcee: Dr Usmonov Farrukh, interim Executive Director of AFPPD</p> <p>Opening Session:</p> <ul style="list-style-type: none"> • Welcome Remarks Prof. P.J. Kurien <i>Chairperson of IAPPD</i> • Message Hon. Prof. Keizo Takemi <i>MP Japan, Chair of AFPPD</i> • Message Ms. Andrea W. Wojnar <i>UNFPA Director for India and Bhutan</i> • Remarks Hon. Deepender Hooda <i>MP India, Vice Chair of AFPPD</i>
10:10-10:20	Group Photo
10:20-11:30	<p>Session 1: Addressing Adolescent and Youth issues towards ICPD30 - (AFPPD supported- Survey by IAPPD)</p> <ul style="list-style-type: none"> • Presentation Dr. Suneeta Mukherjee, Ms. Geeta Narayan and Mr. Parvin Kr. Jha <i>IAPPD consultants</i> <p>Chair: Prof. P.J. Kurien, <i>Chairperson of IAPPD</i></p>
11:30-11:40	Coffee-break
11:40-12:50	<p>Session 2: Parliamentarians' role to Implement ICPD PoA and 2030</p> <p>Agenda</p> <ul style="list-style-type: none"> • Hon. Josephine Veronique Lacson-Noel <i>MP Philippines</i> • Hon. Dr. Jetn Sirathranont <i>MP Thailand, Secretary General of AFPPD</i> <p>Chair: Hon. Hector Appuhamy, <i>MP Sri Lanka</i></p>
12:50-13:50	Lunch
14:00-15:30	95 th ExCom meeting of AFPPD
23 August 2023, Day 2, Visit	
10:40	Meeting at the lobby
10:30-11:00	Travel to IAPPD office
11:00-13:00	Meeting with IAPPD members and officers
13:00-13:30	Return to hotel
	Departure of the delegates

Appendix 2: Participants list

No		Name	Country	Position	
Participants from Asia and the Pacific Countries					
1	Hon.	Aroma Dutta	Bangladesh	MP	online
2	Hon.	Abdua Shahid	Bangladesh	MP	online
3	Hon.	Karma Lhamo	Bhutan	MP	online
4	Hon.	Lork Kheng	Cambodia	MP	online
5	Prof.	P.J. Kurien	India	Chairperson of IAPPD	
6	Hon.	Deepender Hooda	India	MP; Vice Chair of AFPPD	
7	Hon.	Amee Yajnik, MP	India	MP	
8	Hon.	Bhubaneswar Kalita	India	MP	
9	Hon.	Ananda Bhaskar Rapolu	India	MP	
10	Hon.	Arjunlal Meena	India	MP	
11	Mr.	Avinash Rai Khanna	India	Former MP	
12	Hon.	Pradip Bhattacharya	India	MP	
13	Hon.	Dheeraj Prasad Sahu	India	MP	
14	Hon.	Pradeep Kumar Balmuchu	India	MP	
15	Mr.	Prem Mittal	India	MP	
16	Mr.	Manmohan Sharma	India	Executive Secretary of IAPPD	
17	Hon. Prof.	Keizo Takemi	Japan	MP, Chair of AFPPD	
18	Mr.	Yoshiharu Makino	Japan	Secretary to MP	
19	Hon.	Noraini Ahmad	Malaysia	MP	online
20	Mr.	Azri Norfikri	Malaysia	NC officer	online
21	Hon.	Dil Kumari Rawal Thapa 'Parbati'	Nepal	MP	
22	Mr.	Ram Guragain	Nepal	NC officer	
23	Hon.	Josephine Veronique Lacson-Noel	Philippines	MP	
24	Mr.	Stephen Viste	Philippines	Parliamentary officer	
25	Hon. Mr.	Hector Appuhamy	Sri Lanka	MP	
26	Hon. Dr.	Jetn Sirathranont	Thailand	MP; Secretary General of AFPPD	online
27	Dr.	Nguyen Van Tien	Vietnam	Former MP	online
Resource persons and partners					
28	Dr.	Suneeta Mukherjee	India	TAC member, IAPPD	
29	Ms.	Geeta Narayan	India	TAC member, IAPPD	
30	Mr.	Parvin Kr. Jha	India	TAC member, IAPPD	
31	Dr.	Prem Talwar	India	TAC member, IAPPD	
32	Prof.	R.P.Tyagi	India	TAC member, IAPPD	
33	Prof.	Sudesh Nangia	India	TAC member, IAPPD	
34	Dr.	J.S.Yadav	India	TAC member, IAPPD	
35	Dr.	Deepak Gupta	India	TAC member, IAPPD	
36	Dr.	Saramma Mathai	India	TAC member, IAPPD	
37	Dr.	Abhay Kumar	India	TAC member, IAPPD	
38	Dr.	J.P.Narain	India	TAC member, IAPPD	
The United Nations Population Fund (UNFPA)					
39	Ms.	Andrea W. Wojnar	India	Director for India and Bhutan	
40	Dr.	Sanjay Kumar	India	Deputy Director for India and Bhutan	

41		Sriram Haridas	India		
42	Mr.	Khondker Zakiur Rahman	Bangladesh	Technicl officer	
The Asian Forum of Parliamentarians on Population and Development (AFPPD)					
43	Dr.	Farrukh Usmonov	Japan	Interim Executive Director	
The Indian Association of Parliamentarians on Population and Development (IAPPD)					
44	Mr.	Ravi Tewari	India	Programme Officer, IAPPD	
45	Mr.	Harish Ajwani	India	Accounts Officer, IAPPD	
46	Ms.	Sangeeta Thawani	India	Programme Associate, IAPPD	
47	Ms.	Maya Raturi	India	Programme Associate, IAPPD	
48	Mr.	Ratan Lal	India	Assistant, IAPPD	
49	Mr.	Moti Lal	India	Assistant, IAPPD	
Secretariat officers of the National Committees attending online					
50	Ms.	Sheila Ngoc Pham	Australia	APGPD	online
51	Mr.	Kamal Billah	Bangladesh	Parliamentary officer	online
52	Mr.	A.K.M Abdur Rahim Bhuyain	Bangladesh	Parliamentary officer	online
53	Ms.	Mithchan Linda	Cambodia	CAPPD	online
54	Mr.	Samidjo	Indonesia	IFPPD	online
55	Ms.	Hitomi Tsunekawa	Japan	APDA	online
56	Ms.	Eri Osada	Japan	APDA	online
57	Ms.	Mio Fuke	Japan	APDA	online
58	Ms.	Ayaka Haga	Japan	APDA	online
59	Mr.	Ram Guragain	Nepal	NFPPD	online
60	Ms.	Alicia Clifton	New Zealand	NZPPD	online
61	Ms.	Aurora Quilala	Philippines	PLCPD	online
62	Ms.	Nenita Dalde	Philippines	PLCPD	online