**Midterm Review of the Asian and Pacific Ministerial Declaration on Population and Development**

**Bangkok, 26-28 November 2018**

Consolidated CSO Statement

**Agenda Item 3: Emerging issues and gaps in the implementation of the ICPD PoA:**

*Honorable Chair, Distinguished Delegates, Government Representatives, and fellow Advocates,*

My name is Matelita Seva, and I am speaking on behalf of more than 52 CSOs from 24 Asia and the Pacific countries that attended the CSO\(^1\) preparatory forum held in advance of the MidTerm Review.

A number of constituencies were represented at the forum, including but not limited to: women and girls, LGBTIQ\(^2\) people, migrants, young people and adolescents, aging, people living with and affected by HIV, people with disabilities, rural people, indigenous and tribal peoples.

In many countries in Asia and the Pacific, there is a trend of increasing conservatism and authoritarianism. We are extremely concerned that the spaces for CSOs, women human rights defenders, and whistle blowers are shrinking; those who dare to make a stand against injustice and defend human rights are under attack. Increasing restrictions are being placed on CSOs that work on issues such as SRHR. We underscore that a safe and enabling environment in which CSOs are effectively protected and human rights fulfilled is critical to sustainable and equitable development.

Honourable Chair, as we know, Asia-Pacific is the most disaster-prone region in the world. Increasingly extreme climate events disproportionately impact women, girls and marginalized groups. Yet, sexual and reproductive health and rights (SRHR) is often neglected in the context of climate change and humanitarian responses.

We call on governments to ensure that the human rights and SRHR of marginalized and vulnerable groups receive increased attention during the humanitarian response to crisis and post-crisis situations through access to timely, safe, high-quality, gender sensitive, affordable and comprehensive information and services. SRHR, including minimum initial service package and prevention and response to GBV, should be integrated into disaster risk management mechanisms at country level.

To ensure effective policy-making for enhanced disaster preparedness and management, the collection, availability and use of high-quality data, disaggregated by sex, age, gender, disabilities, geographical settings, ethnicity, religion, marital, economic status, migrant and social status is needed.

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\(^1\) “Charting the way forward- Progress Gaps, and Actions” forum was held in advance of the Mid-Term Review (MTR) of the ministerial declaration from the 6th Asian and the Pacific Population Conference (6APPC) and the International Conference on Population and Development Programme of Action (ICPD PoA) in Asia-Pacific in from 24-25 November 2018 in Bangkok, Thailand.

\(^2\) Lesbian, Gay, Bisexual, Transgender, Intersex, and Queer
Where countries can no longer support the lives of people due to adverse changes in their environment resulting from climate change, adaptation should be supported and facilitated with dignity and respect for peoples’ lives. Local and traditional knowledge on mitigation and adaptation should be utilized and promoted.

A strong regulatory framework is needed to ensure corporate and government entities are held accountable for actions that increase degradation of the environment. Conducting and publishing regular environmental impact assessments should be obligatory, especially in high risk areas and industries. And stronger regulations and policies are needed to halt global carbon dioxide and greenhouse gas emissions without resorting to geo-engineering and other techno-fixes.

We also express concern that reliance on private sector and external funding allows States to shift the burden and responsibility of Universal Health Care (UHC) to the private sector. Combined with a lack of regulatory mechanisms this perpetuates corruption and capitalization of health resources and commodities. A lack of transparent and accountable health financing structures also exacerbates the non-alignment of national policies with resource allocation.

Health financing policy frameworks need to be aligned with health priorities, keeping in mind a rights-based perspective to ensure inclusion of the needs of marginalized and vulnerable groups and encourage an enabling environment.

We call on Member States to ensure engagement of CSO in the development of budgets and to review health budgets regularly, based on the findings from need assessments in consultation with CSOs to ensure appropriate resource allocation.