

Geneva Ambassadors' Briefing Report

Palais des Nations

15 February 2017



Partners in Population and Development (PPD)

**An Inter-Governmental Organization
for Promoting South-South Cooperation**



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The 13th Inter-Ministerial Conference of Partners in Population and Development (PPD)

Wednesday, 15 February 2017

Palais des Nations, Geneva, Switzerland

Hosted by:

H.E. Mr. Coly Seck, Ambassador of Senegal to the United Nations in Geneva

Chair: H.E. Mr. Coly Seck, Ambassador, Senegal

Panelists: H.E. Ms. Aya Thiam Diallo, Ambassador, Mali
H.E. Mr. Ajit Kumar, Ambassador, India
H.E. Mr. Fu Cong, Ambassador, China
H.E. Mr. Robert Matheus Michael Tene, Ambassador, Indonesia
Dr. Joe Thomas, Executive Director, PPD
Dr. Denis Broun, Ambassador, PPD Geneva

Rapporteur: Ms. Vibhu Garg, Counsellor, PPD Geneva





The 13th Inter-Ministerial Conference of Partners in Population and Development (PPD) was held in Dakar, Senegal in November 2016 with a focus on challenges for population and development issues in the context of the Sustainable Development Goals (SDGs).

In February 2016, H.E. Mr. Coly Seck, Ambassador of Senegal to the United Nations in Geneva chaired a 'Geneva Ambassadors' Briefing' on the outcome of the Inter-Ministerial Conference.

The main purpose¹ of the Geneva Ambassadors' Briefing was to follow up on the Dakar Call for Action;² show examples of actual South-South cooperation in the field

of population and development under the auspices of PPD;³ and define an agenda for mobilizing health diplomacy on these issues among the Geneva missions.

The Chair introduced PPD, a major South-South inter-governmental organization comprising member countries from Asia, Africa and Latin America with a mandate to promote South-South cooperation on issues of population. This includes reproductive health, ageing, migration, demography and other similar issues pertinent to the member countries. He said that Senegal had the honor to host the annual Inter-Ministerial Conference and the Board of PPD and his government believe it is important to follow up on the issues mentioned above.

¹ Annexes I–III for the Agenda, Concept Note and List of Participants of the Geneva Ambassadors' Briefing.

² Annexes IX and X for the Dakar Call for Action in English and in French.

³ Annexes IV–VIII for the full remarks made by the Ambassadors of Mali, Indonesia, China, India, and Kenya.

The Executive Director of PPD gave an overview of the organization, its work and achievements including a few concrete examples of responding to bilateral and multilateral needs of member countries, knowledge sharing, and technology transfer. PPD as an organization has also been instrumental in reducing regulatory barriers to improve reproductive health commodity security (RHCS), promote scholarships and exchange programs for senior policy makers, and young professionals in partnership with national institutions. PPD is honoured by the commitment from the highest-level of policy makers in member countries comprising Ministers of Health, Population and Social Development, representing nearly 4.3 billion of the world's population.

He went on to enunciate the main points from the *Dakar Call for Action* and related specific actions. Participants were briefed on the strategic direction of PPD and its openness to welcoming new members from the global South. PPD was described as a platform for exploring many significant issues, policies and programs including integration of population dynamics in the national policy; improving adolescent access to sexual and reproductive health services; promoting maternal and child

health, migration, ageing; and relationship between poverty and reproductive health. The Executive Director of PPD noted that although health diplomacy was strong in Geneva, population diplomacy is an emerging concept with PPD as its practitioner.

In their remarks, the Ambassadors of Mali, Indonesia, China, and India commended PPD. They highlighted examples of concrete South-South collaboration and knowledge sharing within PPD member countries.

The Ambassador of Mali presented challenges experienced in her country and put a special emphasis on South-South cooperation around youth and adolescent health, reproductive health, sexual violence, early marriages, communicable and non-communicable diseases. She stressed the important role of PPD as a South-South platform that was recognized in Mali for addressing these issues through its framework.

The Ambassador of Indonesia extended the invitation of the Government of Indonesia for the 14th Inter-Ministerial Conference of PPD to be held in Yogyakarta, Indonesia, 26-30 November 2017. The National Population and Family Planning Board (BKKBN) of Indonesia is



leading the preparations for this conference. The Ambassador highlighted South-South cooperation and technical assistance provided by PPD member countries and the integration of reproductive health, population and development into programs, and national and regional budgets. He noted that migration and ageing are crucial issues for Indonesia and PPD's facilitation in these areas is important.

The Ambassador of China singled out PPD as the sole inter-governmental organization of developing countries in the field of population and family planning, representing interests and voices of nearly 60 per cent of the world's population. He highlighted the valuable support PPD provides to China on these issues. He affirmed China's support to PPD by promoting communication, coordination and cooperation with all other PPD members and the international community as a whole, for the realization of the SDGs and the *ICPD Beyond 2014* agenda.

The Ambassador of India expressed his appreciation for this timely meeting and complimented PPD's efforts in strengthening population and health diplomacy in the era of the *2030 Agenda for Sustainable Development*. Sharing a few examples of international engagement in the global South and best practices in reproductive health, provision

“Morocco is a founding member of PPD in 1994 and supports the important work of PPD. His Majesty, King of Morocco, has articulated his vision to reinforce ties for South-South cooperation between Morocco and the African region.”

Mission of Morocco

of medicines, policies around ageing and young people, he assured that the Permanent Mission of India to the United Nations in Geneva will work closely with other Geneva-based Missions towards implementation of the *Dakar Call for Action*.

The Permanent Representative of PPD in Geneva described practical approaches and actions that could be taken by the Ambassadors on issues raised by the *Dakar Call for Action* through their participation in the governance of UN organisations in Geneva. For example, by:

- Asking for the demographic dimension to be systematically incorporated in development plans and progress reports towards the SDGs;

“A must attend’. I wish to appreciate the Mission of China and India for the practical ideas and leadership they have demonstrated on important issues within the international organizations. Let us ‘go beyond the talk’ and in particular we can jointly ‘walk the talk’ in the newly ratified TRIPS Agreement/Public Health and the flexibilities it provides.”

Ambassador of Kenya



- Encouraging dis-aggregation of demographic data for the analysis of priorities of social policies, and requiring that international organisations present data by sub-national geographies, age, sex, socio-economic grouping, etc., and that indicators be adapted to reflect such data analysis;
- Systematically requiring that reproductive health of adolescents and young women be given appropriate emphasis in the work of international organisations;
- Insisting on the importance of the issue of women in migration and the role of women in control posts, borders and camps to support female migrants;
- Requiring that work be undertaken on the adaptation of health services, insurance schemes and progress towards universal access regarding healthy ageing;
- Requesting that economic analysis of secondary demographic dividend be conducted taking into consideration the positive input of ageing populations, and not only the burden of dependency.

Following the remarks made by several Ambassadors regarding the report of the High-Level Panel on Access to Medicines, the diplomatic missions in Geneva can act on several issues. For example, by:

- Insisting WTO to address the issue of “bullying”, i.e., threats made to member countries of WTO by larger commercial powerhouses if they exercise TRIPS flexibilities;

“We congratulate PPD’s work and the practical suggestions made by PPD Geneva on essential medicines and other matters such as migration. We support the information on TRIPS and initiatives especially important for developing countries.”

Ambassador of India



- Recognizing and highlighting the importance for countries to fully adopt TRIPS flexibilities, e.g., in board and international meetings;
- Demanding for WIPO to create the database on pharmaceutical patents in all countries, as recommended by the report, and make it available to all, free of charge.

The Chair thanked the Ambassadors representing four of the 26 PPD member countries for providing their experiences on South-South knowledge exchange on related issues and achievements, enhancing partnerships and innovative policies and programmes. He said that the global South has emerged as one of the convening places for major discussions on matters of population and development. Calling for the support and concurrence from the other Geneva missions, the Chair wished to discuss the next steps on strengthening South-South cooperation and diplomacy on these matters in Geneva.

The interactive discussion that followed led to interventions from several countries including Ethiopia, Benin, Kenya, Morocco, Chad, as well as Geneva-based organizations.



Participants from the floor appreciated the initiative of Senegal to communicate about PPD and the outcome of the Inter-Ministerial Conference.

Participants shared experiences from their countries and encouraged PPD to be used as a tool to promote health and South-South cooperation to advocate for specific decisions by international organizations.

The Director for Ageing from WHO congratulated PPD as an important and effective organization and brought attention to the WHO-PPD partnership on ageing issues. He highlighted the needs of the ageing population, such as infrastructure within member countries and a gendered response. He lauded PPD for taking the lead on such issues of the global South, ascertaining that practical solutions will come from the global South.

Participants echoed the call made by panelists for practical solutions and actions on South-South cooperation efforts and committed to be more engaged with the PPD office in Geneva.

Panelists once again acknowledged and appreciated the work of PPD and its member countries and partner organizations, hoping

that diplomacy can play a catalytic role in utilization of South-South cooperation opportunities to implement the *Dakar Call for Action* in member countries.

They underscored the need to engage PPD directly as a strong platform for South-South collaboration, to enable the countries of the global South to garner their collective voice on population and development matters, beginning with the need to listen to the testimonies from the global South. A greater cooperation with the South Centre will be beneficial.

The Executive Director of PPD acknowledged the presence of member countries including Tunisia, South Africa, Kenya, Nigeria, Zimbabwe, and the presence of Canada, a leading champion for promoting South-South partnerships.

He expressed great appreciation for a large number of non-members missions present whom PPD will reach out for the possibility of membership. The Executive Director also invited the non-members to participate as observers in the upcoming annual Inter-Ministerial meeting in Indonesia, where formal discussion on new members to the PPD will take place.

Conclusion

In closing, the Chair thanked all the panelists and the participants for the rich and valuable briefing and insightful contributions. The Geneva missions are now more informed about the work of PPD.

“We will follow up for concrete work in Geneva, since PPD deals with cross-sectoral issues that are strategic. We will see how we can together initiate cooperation and promote better policy decisions in meetings within UN agencies in Geneva, such as WHO, ILO, WIPO, WTO, IOM and others.”

Ambassador of Indonesia

It brought attention to the *Dakar Call for Action* which reaffirms previous commitments among PPD member countries. It recognized the ever-increasing need for South-South cooperation towards comprehensive and collective achievement of the 2030 Sustainable Development Agenda.

The meeting gave opportunity to kickstart a diplomatic movement around many significant issues of population and development that require concerted efforts, including at the level of permanent missions in Geneva. The Chair

re-emphasized the need to follow up on the implementation of practical steps discussed. He suggested a follow up with the missions in the coming months.

It is hoped that this event will set the pace to strengthen the agenda for mobilizing health diplomacy and South-South cooperation in population and development issues, and that the Geneva Ambassadors' Briefing will become an annual event taking place after the Inter-Ministerial Conference of PPD.

The briefing concluded with a final thanks and applause.

“PPD has a convenor’s role in Geneva. Health is a very topical issue and has impact on the work of several organizations, including WHO, WIPO, WTO, and the Human Rights Council. China strongly supports PPD’s role in health diplomacy as a convenor among the developing countries in capacity building and making the voice of developing countries heard in all these organizations.”

Ambassador of China



Annex I

Agenda

- 10:00 Arrival of Guests.
- 10:05 Welcome remarks from the Chair – **H.E. Mr Coly Seck**, Ambassador of Senegal to the United Nations in Geneva.
- 10:10 Briefing on the Inter-Ministerial Conference of PPD and Dakar Call for Action (main points) – **Dr Joe Thomas**, Executive Director of PPD.

Reflections from some PPD member country missions in Geneva

- 10:30 **Mali** – Achievements in relation to South-South Cooperation for Population and Development issues.
- 10:40 **Indonesia** – Host of the 2017 PPD Board and Inter-Ministerial Meeting.
- 10:50 **China** (Chair of PPD) – Enhancing partnerships to support partner country efforts. Progress and achievements in South-South Cooperation.
- 11:00 **India** (Vice Chair of PPD) – Innovative policies and programmes in Population and Development issues (including sexual reproductive health).
- 11:10 Introduction of PPD Mission in Geneva – **Dr Denis Broun**, Permanent Representative of PPD to the United Nations in Geneva.
- 11:20 Interaction on South-South Cooperation and Health Diplomacy. Contributions from the Missions in Geneva. Next Steps – **All Missions**.
- 11:50 Conclusion – **H.E. Mr Coly Seck**, Ambassador of Senegal to the United Nations in Geneva.
- 12:00 End of Briefing. Coffee/Tea, Sandwich.

Participants – By invitation

Heads of Mission to the United Nations Office – Geneva

Heads of Mission of PPD Member States in Geneva

Key Directors from WHO at the Inter-Ministerial Conference in Dakar and other specific international organizations in Geneva

Annex II

Concept Note

Background

Partners in Population and Development (PPD) is an inter-governmental organization of 26 developing countries with deep commitment to promote South-South Cooperation in the field of reproductive health, population and development. It was launched at the International Conference on Population and Development held in Cairo, Egypt in 1994 to support the implementation of the Cairo Program of Action.

The organization is a Permanent Observer at the United Nations General Assembly and has Diplomatic Status in Bangladesh. It has offices in New York, Uganda, China, and a mission in Geneva.

Since inception, PPD has established itself as a key South-South player, its members representing nearly 60% of the world population. It has significantly helped its member countries improve reproductive health and family planning services, reduce maternal and child mortality, and increase the voice of the global South.

Over the past two decades the organization's annual inter-ministerial conferences have provided a platform for PPD member countries to exchange best practices, discuss specific agenda and needs on all aspects of population and development, realizing that South-South Cooperation is needed more than ever before. This year's 13th Inter-Ministerial Conference of PPD was held in Dakar, Senegal where ageing, migration, adolescents, and commodity security among others were discussed.

Objective

Geneva is an important base for policy dialogue on issues that affect the global South. The purpose of this briefing is to inform country missions in Geneva about PPD and to develop relationships for enhancing coordination and coherence on South-South Cooperation in response to the needs of the global south.

The briefing will:

1. Introduce PPD and present its history and achievements;
2. Present the Dakar Call for Action;
3. Show examples of actual South-South Cooperation in the field of population and development.
4. Define an agenda for mobilizing health diplomacy in population and development issues among Geneva missions.

Annex III

Participants

Permanent Missions to the United Nations Office at Geneva; and International Organisations in Geneva

1. **Host** - Permanent Mission of the Republic of Senegal
2. **Co-organizer** - Partners in Population and Development (PPD), Geneva
3. Permanent Mission of the People's Republic of China
4. Permanent Mission of India
5. Permanent Mission of the Republic of Mali
6. Permanent Mission of the Republic of Indonesia
7. Permanent Mission of the People's Republic of Bangladesh
8. Permanent Mission of the Republic of Benin
9. Permanent Mission of Colombia
10. Permanent Mission of the Arab Republic of Egypt
11. Permanent Mission of the Federal Democratic Republic of Ethiopia
12. Permanent Mission of the Hashemite Kingdom of Jordan
13. Permanent Mission of the Republic of Kenya
14. Permanent Mission of the Kingdom of Morocco
15. Permanent Mission of the Federal Republic of Nigeria
16. Permanent Mission of the Islamic Republic of Pakistan
17. Permanent Mission of South Africa
18. Permanent Mission of Tunisia
19. Permanent Mission of the Republic of Zimbabwe
20. Permanent Mission of the Republic of South Sudan
21. Permanent Mission of the Republic of Mozambique
22. Permanent Mission of the Togolese Republic
23. Permanent Mission of the Republic of Iraq
24. Permanent Mission of Montenegro
25. Permanent Mission of the Republic of Mauritius

26. Permanent Mission of the Islamic Republic of Mauritania
27. Permanent Mission of the Republic of Djibouti
28. Permanent Mission of Canada
29. Permanent Mission of the Republic of Trinidad and Tobago
30. Permanent Mission of the Federal Democratic Republic of Nepal
31. Permanent Mission of the Republic of Azerbaijan
32. Permanent Mission of the Republic of Angola
33. Permanent Mission of the Republic of Madagascar
34. Permanent Mission of the Republic of Sierra Leone
35. Permanent Mission of the People's Democratic Republic of Algeria
36. Permanent Mission of the Republic of Kazakhstan
37. Permanent Mission of the Republic of Côte d'Ivoire
38. Permanent Mission of Brazil
39. Permanent Mission of the Republic of Botswana
40. Permanent Mission of the Gabonese Republic
41. Permanent Mission of the Dominican Republic
42. Permanent Mission of Guatemala
43. Permanent Mission of the Republic of Chad
44. Permanent Mission of Burkina Faso
45. Permanent Mission of Peru
46. Permanent Mission of the Republic of the Sudan
47. Group of Fifteen (G-15)
48. South Centre
49. The International Federation of Red Cross and Red Crescent Societies
50. Ageing and Life Course, World Health Organization (WHO)
51. Partnership for Maternal, Newborn and Child Health, WHO
52. Reproductive Health and Research, WHO
53. HIV/AIDS, Tuberculosis, Malaria and Neglected Tropical Diseases, WHO
54. Union for International Cancer Control

Annex IV

Statement by Her Excellency Ms Aya Thiam Diallo, Ambassador, Permanent Mission of Mali, Geneva

Synthese de La Presentation de L'experience Du Mali Sur Le Theme: « Aelioration de L'accès des Adolescents Aux Services de Sante Sexuelle, de Sante de La Reproduction et de Planification Familiale »

Le Mali est un pays moins avancé, sans littorale, qui intègre fortement la coopération Sud-Sud dans toute sa politique de développement.

Avec une population de plus de 18 millions d'habitants dont environ 6 millions de jeunes entre 10 et 24 ans en 2016 et un taux de croissance annuel soutenu de 3,6%, les autorités du Mali ont inscrit au cœur de leurs préoccupations la question de la santé des jeunes et des adolescents, celles de la santé de la reproduction, des violences sexuelles, des mariages précoces, des problèmes nutritionnels, des troubles mentaux, des maladies parasitaires, infectieuses et non infectieuses.

Au Mali, on relève un très faible taux de la planification familiale de 10% justifiant un indice synthétique de la fécondité des plus importants de 6,1 enfants/femme. Malgré un taux de scolarisation remarquable des filles de 66,3%, le taux de femmes non alphabétisées est de 22,4%. Le personnel sanitaire reste particulièrement insuffisant en dépit des efforts déployés par les autorités.

Face aux nombreux et énormes défis que soulèvent ces questions et aux moyens très limités dont dispose le pays, on notera aisément le sens tout particulier que le Mali réserve à la coopération Sud-Sud et à sa plateforme « Partenaires en Population et Développement » (PPD).

Ainsi, en rapport avec ses partenaires sociaux, techniques et financiers, le Gouvernement s'est doté de politiques et de structures techniques appropriées pour la mise en œuvre du plan stratégique nationale de la planification familiale 2014-2018.

Les grands défis à relever ciblés par cette stratégie nationale se résument:

1. aux barrières socio-culturelles (mariage précoce, polygamie, problèmes liés à la santé reproduction et sexuelle, réduction de l'inégalité dans les rapports sociaux de sexe);
2. à la scolarisation des filles de 15 à 24 ans et à l'alphabétisation des femmes;
3. à l'autonomisation économique des femmes et des filles en favorisant l'accès des jeunes à l'emploi et des femmes au pouvoir de décision;
4. aux questions liées à la religion;
5. à l'accélération de la transition démographique;
6. à l'atteinte du dividende démographique.

A ce jour, on citera quelques réalisations importantes au Mali dans la résolution des difficultés évoquées dont:

- création d'une trentaine de Centres d'Autonomisation des Femmes (CAFE) au niveau national;
- construction de 10 Maisons de la Femme avec des centres de santé communautaires et centres d'accueil des victimes de violences conjugales;
- large distribution à base communautaire des implants et des pilules au niveau national pour une meilleure planification familiale;
- réalisation du Centre National Awa Kéita pour contribuer à l'autonomisation des femmes par des formations professionnelles; et
- adoption de la Loi 02-044 relative à la santé de la reproduction

Ces réalisations sont loin de pouvoir relever tous les défis énumérés plus haut mais ont le mérite de souligner la détermination des pouvoirs publics à ne rien ménager pour préserver l'accès des adolescents aux services de la santé sexuelle, de la santé de la reproduction et de la planification familiale.

La Loi sur la santé de la reproduction participe à l'épanouissement de la femme qui ne doit plus être considérée comme une machine à tout faire. Elle mérite tout notre soutien et toute notre aide même si elle ne l'a pas sollicitée.

Pour y parvenir, quoi de mieux indiqué qu'une solidarité forte dans la coopération Sud-Sud comme celle du cadre des PPD.

Je vous remercie de votre aimable attention.

Annex V

Main points raised by His Excellency Mr Robert Matheus Michael Tene, Ambassador, Permanent Mission of Indonesia, Geneva

- Conveys the invitation of the Government of Indonesia for the upcoming 14th Inter-Ministerial Conference of Partners in Population and Development to be held in Yogyakarta, Indonesia on 26-30 November 2017;
- The National Population and Family Planning Board (BKKBN) will lead the Inter-Ministerial Conference in Yogyakarta;
- Highlights the strategic importance of PPD for population growth, reproductive health, and maternal & child health, where Indonesia puts great importance in these activities;
- Supports the South-South Cooperation and technical assistance provided by member countries of PPD and the integration of reproductive health, population and development into programs and budgeting in line with national and regional policies;
- Highlights 3 main areas of discussion that can be considered during the upcoming Inter-Ministerial Conference including:
 1. Migration issues related to gender and health (currently most of the migrant workers from Indonesia are women who work in the informal sector).
 2. Ageing in the population, linked to the preparedness initiatives (Indonesia is a young population, discussions on ageing is important).
 3. Concrete works in Geneva, since PPD deals with cross-sectoral issues that are strategic, therefore how to initiate cooperation and promotion of better policies within UN-related agencies in Geneva (WHO, ILO, WIPO, WTO, IOM, etc.).

Annex VI

Statement by His Excellency Mr Fu Cong, Ambassador, Permanent Mission of China, Geneva

Ambassador Seck, Doctor Thomas, Doctor Broun, Excellencies and Colleagues,

Good morning!

It's a great pleasure to attend this briefing on Partners in Population and Development. I wish to thank Ambassador Seck and the Permanent Missions of Senegal and PPD for convening this briefing. A vibrant international alliance, PPD is the sole inter-governmental organization of developing countries in the field of population and family planning, representing the interests and voices of nearly 60% of the world's population. It plays an important role in South-South cooperation on population, and renders valuable support to China's work on population and family planning.

China shares many of the challenges and priorities of other PPD members, such as an aging society, migration, the health of women and children, and reproductive health. As the chair of PPD Executive Committee, China will fully discharge its responsibilities and strengthen communication, coordination and cooperation with all other PPD members and the international community as a whole, in order to promote the agenda and goals of the PPD as part of the efforts to realize the Sustainable Development Goals and the ICPD Programme of Action Beyond 2014. Together, we will deliver a stronger PPD and contribute to the well-being of people all over the world.

2016 was a fruitful year for PPD. In March, the Chinese government, together with the United Nations Population Fund and PPD, held in Beijing a ministerial dialogue on South-South Cooperation on population and development. The Beijing Action Plan adopted by the meeting charted a roadmap of South-South Cooperation on population for the next five years. In November, Senegal hosted the 13th International Inter-Ministerial Conference for Population and Development. There, productive discussions took place under the theme of "achieving the objective of sustainable development and proactively responding to the challenges in population and development". The Dakar Call for Action was issued, giving a further boost to South-South cooperation in the field of population and development.

Ladies and gentlemen,

Now is a critical time for attaining the sustainable development goals and a golden era for South-South cooperation. Deeper south-south cooperation on population and development is of particular importance for realizing the SDGs. At the High-level Roundtable on South-South Cooperation held in the UN headquarters in September 2015, Chinese President Xi Jinping pointed out that South-South cooperation is a great initiative for developing countries to seek strength through unity. He also pointed out that as a framework of cooperation featuring equality, mutual trust, mutual benefit, unity and mutual assistance, South-South Cooperation will blaze a new trail towards prosperity for us all. As developing countries are growing stronger as a whole, South-South Cooperation will surely play a bigger role in promoting the rise of developing countries and fostering a world economy that is strong, sustainable, balanced and inclusive.

As a developing country with the largest population in the world, China sees delivering a better life for its 1.3 billion people as its ultimate goal of modernization. In the past 15 years, the Chinese government attached great importance to and was among the first to have realized the UN Millennium Development Goals. It has also made remarkable achievements in such fields as poverty reduction, health care and education. Orienting towards the future, China has already started implementing the 2030 Agenda for Sustainable Development in its various aspects, and has released its National Plan on Implementation of the 2030 Agenda for Sustainable Development. Conscious of the need to align the national plan with the Agenda, we have incorporated all the targets in the Agenda into our plan and laid out detailed arrangements for their attainment. To support the implementation of the plan, we have put in place well-developed systems and institutions, and we are mobilizing the whole society to increase input to strengthen monitoring and assessment mechanisms.

China is a developing country that takes its responsibilities seriously. While carrying out our own plan in implementing the 2030 Sustainable Development Agenda, China stands ready to participate in the cooperation with international institutions, and step up its input in South-South cooperation. We will fulfil President Xi's pledge to carry out 100 maternal and child health projects and build 100 hospitals and clinics in developing countries, especially in Africa; to provide at least 300 short-term scholarships and a certain number of long-term scholarships to other developing countries in the next five years; to promote institutionalized South-South Cooperation between China and Africa, and support the establishment of an international forum on South-South Cooperation in population and development, with a view to enhancing practical cooperation on population and reproductive health among developing countries.

Ladies and Gentlemen,

Last month at the Palais des Nations, President Xi delivered an important keynote speech entitled "Work Together to Build a Community of Shared Future for Mankind". In his speech, President Xi reiterated that China remains unchanged in its commitment to common development, partnership, and multilateralism. In the same spirit, China will work hard to push forward and deepen South-South cooperation on population, reproductive health and family planning with the other PPD members and the whole international community, within the framework of the ICPD Programme of Action Beyond 2014 and the 2030 Agenda for Sustainable Development. We look forward to making greater contributions to the health and well-being of mankind, especially the health and well-being of every woman, every child and every adolescent.

Thank you!

Annex VII

Statement by His Excellency Mr Ajit Kumar, Ambassador, Permanent Mission of India, Geneva

Excellencies, Distinguished Delegates, Ladies and Gentlemen,

At the outset allow me to put on record our sincere appreciation for Ambassador Coly Seck for taking this initiative in organising this timely briefing as a follow up to the Inter-Ministerial Conference of Partners in Population and Development (PPD), which deliberated on the Challenges and solutions on Reproductive Health, Population and Development issues in Dakar last year. If I am not wrong, this is perhaps the first briefing of PPD in Geneva for diplomatic mission. If this is so then it is a welcome addition to the number of briefings we have here in Palais de Nations and it should become a regular feature.

As we know, in Senegal a document - Dakar Call of action was adopted by the 26 partner countries of the PPD. The aim of this document is to singularly focus on improving reproductive health and family planning services, reduce maternal and child mortality, and increase the voice of the Global South. India firmly believes that South-South Cooperation has the potential to be an effective collaboration mechanism and has become even more pertinent in the post SDGs era.

The issues of population and development which were discussed at the Inter-Ministerial Conference require our concerted efforts, including at the level of Permanent Missions based in Geneva. While the dialogue has revolved around reproductive health, ageing and demographic dividend, migration is emerging as one of the most pressing humanitarian issue, today.

The Dakar Call for Action is indeed a step forward in building our collective and natural expression of intent in promoting South-South cooperation. It is therefore important that we propose to mobilize health diplomacy towards these issues in Geneva.

In terms of innovative policies and programs in population and development issues, I believe evidence from India is very relevant as well as topical in the current context.

India has the largest annual birth cohort of 26 million babies in the world spanning through a wide array of geographical, climatic and socio-cultural conditions. We also have the additional challenge of dealing with significant sub-national disparities.

On the one hand 27.5% of our population is in the age group of 15-29 years while on the other the number of elderly persons is expected to be 20% of the projected population by 2020.

The Government of India (GoI) currently invests more than 14 billion US Dollars per annum through a wide range of programmes of different Ministries through Targeted and Non-Targeted Programmes.

As far as targeted programmes are concerned, the focus is on higher education, skill development, healthcare etc. and non-targeted programmes deal with issues such as food subsidies, employment.

Let me enumerate some of the programmes for clarity - In last few years government of India has launched - Rashtriya Kishor Swasthya Karyakram (National Adolescent Health Programme), Make in India, Digital India, Skill India (PM Kaushal Vikas Yojna), Start up India, Stand up India. The common thread linking these programmes is the young India, the youth.

Similarly, the concerns of the elderly are being addressed on a priority basis. For example, the National Program for Health Care of Elderly (NPHCE) - providing Community-based primary health care and dedicated facilities for the elderly, strengthening geriatric health services as well as Integrated Program for Older Persons (IPOP) and providing financial assistance for old age homes are a few of the noteworthy initiatives.

The issue of population and development lies at the crux of all dialogue on public health. India recognizes the challenges posed by the unmet needs in the arena of contraception, maternal and child health, women's status, employment and literacy, India aims to accord them the highest priority. Equity and Quality are the cornerstones of our strategy.

Let me give you an example, our new strategic approach emphasizes continuum of care and integrated action. Reproductive health has now been anointed as a major pillar of our Reproductive, Maternal, Newborn, Child and Adolescent Health Strategy. RMNCH+A strategy as it is commonly known - is aimed to improve survival and health of women and children with special focus on delaying the first birth and spacing between births.

India has already developed indigenous capacity, in public and private sector, to manufacture the entire range of reproductive health commodities, many of which are now being exported.

We have specifically costed plans not just at the national level but also at the regional and district levels with substantially scaled up investments in lesser developed districts. The government has also launched "Mission Parivar Vikas" - Mission for Family Development. It is a programme on mission mode in select high fertility districts to improve access to contraceptives.

India is committed to mobilizing its own domestic resources without dependence on external aid. We are making massive and strategic investments in the National Health Mission which is the largest public health program in the world. Over 30 billion dollars have already been invested under this mission to strengthen health systems and rejuvenate reproductive and child health agenda.

As a result of these measures, India has shown an impressive decline of more than 70% in maternal mortality from 1990 level to 2010 against the global average of 44% during the same period. Similarly, Infant Mortality too has shown a decline of 55% against a global decline of 49%.

Building on the phenomenal progress of this safe motherhood scheme, we have added another major intervention to eliminate out-of-pocket expenses for both pregnant women and sick neonates which we have now expanded to sick infants also.

Large scale creation of physical infrastructure including state of the art Maternal and Child Health wings, major augmentation of human resources at all levels, free drugs and diagnostics, mobile medical units to take health services to remotest areas and mainstreaming of Indian systems of medicine are among key achievements under the National Health Mission.

All these interventions have been made possible by a positive political atmosphere. Prime Minister of India, Mr. Narendra Modi is a strong champion for the cause of Maternal, Children and Adolescents' Health.

The investments in reproductive health go beyond information, supplies and services. Society needs to recognize the irrefutable link between poverty and capabilities. Good health enhances their capabilities to participate productively in social and economic spheres. They also invariably lead to the socio-economic empowerment of women. Education, Health and skilling are the three most important instruments to empower our women. We all have to work harder to empower our populations especially women and girls.

Internationally India's engagement with Africa in the Health Care is worth taking cognisance of. Government of India has taken a number of initiatives such as Focus Africa, Team-9 Initiative and Pan-African e-Network Project with significant investment in Public Health. The telemedicine initiative has enabled a number of super-specialty hospitals in India to be connected with doctors based in Africa and partnering in building capacity in Africa through continuing medical education (CME) credits.

Another good example is the Triangular cooperation where India and US, are working together to promote global progress and achieve shared development goals around the world. In 2016, USAID launched the Global Linkages project to facilitate the transfer and adoption of 20 Indian innovations and best practices in family planning, child, and maternal health care to select African and Asian countries.

Each country can learn from the experiences of other countries as to how they address various Population and development issues. More South-South cooperation and mutual understanding would help us to build a better world, free from diseases, social strife and poverty.

I take this opportunity to compliment PPD's efforts in strengthening population and health diplomacy in the era of 2030 Agenda for Sustainable Development and assure that the delegation of India will closely work with the Missions based in Geneva towards implementation of the Dakar Plan of Action.

With these words, I thank you for the opportunity for conveying my thoughts.

Annex VIII

Statement by His Excellency Dr Stephen Ndung'u Karau, Ambassador, Permanent Representative, Republic of Kenya

I thank the Mission of Senegal for the invitation to the meeting. Our two Missions work very cordially and for me this was a “must attend”.

I also wish to appreciate the Mission of China and India for the practical ideas and Leadership they have demonstrated on important issues within the International Organization. I have noted with interest their mentioning the following issues:

- Access to medicines
- Health care support – Hospitals and scholarships among others.

I have also learnt of the existence of a PPD Mission here in Geneva and their challenge on Let us “go beyond the talk” and in particular we can jointly “walk the talk” in the newly ratified “Trips Agreement/Public Health and the flexibilities it provides”.

My Mission will do all it can to collaborate in Geneva activities.

Thank you!!

Annex IX

Dakar Call for Action (English)

XIII International Inter-Ministerial Conference on Population
and Development

28-29 November 2016

Dakar, Senegal

South-South Cooperation to drive the achievement of Sustainable Development Goals

1. **Recalling** our commitments made at the ICPD, MDG and SDG high level platforms, including ICPD Plan of Action (PoA) adopted in 1994, reviewed in 1999;
2. **Reaffirming** the commitments of the Head of the States and Governments at the Millennium Summit 2000 on the MDGs and those agreed upon at the General Assembly in 2005, 2010 and 2015, PPD's 12th International Inter-Ministerial Conference in Dhaka, 2015 called for consolidating our commitments to action plans, and the "Beijing Call for Action" adopted by the Ministerial Dialogue on South-South Cooperation for Population and Development held in Beijing, March 2016.
3. Today, 29th November 2016, We, the delegates assembled here in Dakar, Senegal reaffirm our willingness and commitments; to accord highest urgency to post 2014 ICPD engagement and Sustainable Development Goals (SDGs) achievement through redoubled efforts to collectively address the priority population and development challenges in the context of SDGs.
4. The Dakar Call for Action aims at translating these commitments into concrete actions for strengthening inclusive national resiliencies and enhanced quality of human life in the global south. Despite daunting challenges, Partners in Population and Development (PPD) has been able to demonstrate that South-South Cooperation has the best potential to accomplish the unfinished development agenda.
5. PPD as an intergovernmental organization of countries from the global south accounting for nearly 60% of the world's population has emerged as the main platform fostering consensus for South-South Cooperation towards SDGs.

Preamble

6. South-South Cooperation is at the core of PPD's work. PPD's action is guided by the current six priority areas as encapsulated in the PPD's strategic plan 2015-19 across five cross cutting linkages, based on extensive consultation with the member countries. The new paradigm focuses on sustainability and inclusiveness to accomplish the SDG priorities. These linkages are a) evidence based advocacy; b) enhanced global dialogue for inclusive development responses; c) facilitating need based and demand driven capacity building; d) robust information and experience sharing through improved South-South protocols; e) Strengthening capacity building within South-South Cooperation to achieve SDGs.
7. **We, the delegates of** the 2016, 13th International Inter-Ministerial Conference;

8. **Recognizing** the importance of sharing experience and knowledge as a critical pillar of South-South Cooperation for enhancing country capacities towards comprehensive and collective achievement of 2030 Sustainable Development Agenda;
9. **Expressing deep appreciation** to the Government of the Republic of Senegal for hosting the XIII International Inter-Ministerial Conference on Population and Development;
10. **Recommit** ourselves to support and strengthen the national, regional and global efforts to fast-track population and development priority actions in the context of achieving sustainable development goals and targets by:
11. **Calling upon** our national governments to accord greater importance to advancing population dynamics and mainstreaming them into national development plans;
12. **Recognizing** that population dynamics are central to all development action, we urge our governments to capture the subtle and complex interdependence of population dynamics vis-à-vis health, education and access to social amenities, in their planning endeavors;

Modernize, strengthen and streamline census data collection, vital registration system, collation, storage and utilization through better data flow and consumption from designated real-time digital population data hubs

Review the population component of national development plans to align with emerging data trends related to fertility, mortality and morbidity.
13. **Identify** the old age cohorts in the population pyramids and integrate these emerging trends in the population and development plans;
14. **Scale up** analysis and utilization of disaggregated data related to Urbanization and Migration, in the national planning process as they directly influence the infrastructure sector, agriculture sector as well as basic services in health sector including paid and unpaid caregivers. These outcomes are bound to guide the course of national development.

We agree on,

15. **Integrating population dynamics into national development plans**

Partnership with UNFPA and other stakeholders to establish an 'International Forum on South-South Cooperation and 'Centres of Excellence' in population and development for increasing evidence based advocacy to influence the review of national development plans in accordance with population dynamics; exchange of expertise and sharing of knowledge in conducting census including customization of Data application packages and adaptation of new technology among the Member Countries; and

Review of the software programs being used for collection and analysis of population data including population projections. Partnership with PPD Members Countries to strengthen 'National Taskforce for South-South Cooperation' focused on responding to country needs.

16. **Emphasizing** the provision of SRH information and services with additional innovative strategies to facilitate attitudinal shift and create educational, social economic and legal structures in a specific cultural context.
17. **Recognizing** the UN Resolution on Child, Early and Forced Marriage as a practice that severely impairs girls and women's human rights and is a threat to their health, education, economic and social status; barrier to development perpetuating the cycle of poverty.

18. **Improving adolescent population's access to Sexual and Reproductive Health**

Strengthening South-South partnerships on exchanges of successful experiences and good practices; RH commodity supplies and RH services for accelerating reproductive health commodity security in developing countries. Review legal barriers of sexual and reproductive health. Address the family planning needs of adolescents.

19. **Further addressing** the unfinished agenda related to maternal and child health requires greater investments and partnerships;

20. **Review** national and sub national maternal and child health programmes to align with EWEC components and SDGs. Advocate budget support for strengthening the maternal and child health programmes;

21. **Unfinished agenda of Improving Maternal and Child health**

Leverage the resources from donors and member countries to plan, implement and support maternal and child health projects in developing countries; Acknowledging China's initiative of 100 maternal and child health projects in the developing countries and exploring the possibility of expanding and replicating the community clinics program funded and supported by India for Bangladesh.

22. **Noting** the need for **Social cohesion of the migrant population** pursuant to the UN resolutions on human rights.

23. **Undertake** an assessment of the migration patterns- internal, external, seasonal and permanent--and draw up plans for the inclusion of migrant populations especially women; Initiate policy dialogue both at the international level as well as the cross-border level to foster inclusion of the women at check posts, migration exit and entry points and resettlement camps. PPD member countries are encouraged to address discriminatory attitudes and norms, particularly within the health sector; **Ensure** greater access to reproductive health and family planning services, through better inclusion and social cohesion, particularly of the women as the migrant population groups are vulnerable and marginalized. Strengthen partnership with organizations such as WHO, IOM, ILO, UNFPA and other bilateral organizations to address SRHR need of migrant women in developing countries.

24. **Recognize** the need to mainstream healthy ageing into our national development plans.

We urge our national governments to **create** a national coordination mechanism that provides for the healthcare, psychological and recreational needs of the ageing population; **Ensure** greater quality of life through inclusion of geriatric care into family, home-based and community healthcare systems; **Tap into** the '*Second Demographic Dividend*' strengthening intergenerational bonds for economic growth.

25. **Promote healthy ageing in developing countries**

Partnership within PPD member countries and other stakeholders to strengthen PPD Global Commission on Ageing to promote healthy, active and productive ageing; The commissioner for Ageing and National Taskforce for South-South Cooperation to be supported for policy consultation towards country-specific evidence informed healthy ageing policies and programmes.

26. **Acknowledging** the importance of greater understanding of the linkages between Reproductive Health outcomes and Poverty, we **call** on our national governments to study and analyze the determinants among marginalized and vulnerable populations; and **Scale up** best practices related to improved access, coverage and utilization using a tailored approach for widening the health safety nets among the poor and marginalized population groups.

27. **Understanding the relationship between Reproductive health and poverty**

Strengthen South-South partnership to mainstream the linkage between poverty and health in the context of SDGs 1 (No Poverty) and 3 (Good health and Well-being); Enhancing partnerships to support partner country efforts to address the relationship between reproductive health and poverty.

28. **Appreciating** with satisfaction that PPD and its Member Countries and Partners organizations will play a catalytic role in optimizing the utilization of South-South Cooperation opportunities to implement the “Dakar Call for Action” in creating a positive impact towards achievement of Sustainable Development Goals in member countries.

We hereby call upon the Partners Country Coordinators (PCCs) and the PPD secretariat to monitor the action plan and the progress of the Dakar call for Action and report back to the next board meeting.

Adopted on this day the 29th November 2016,

at the Closing Session of the XIII International Inter-Ministerial Conference, Dakar 2016

Annex X

Dakar Call for Action (French)

XIIIème Conférence internationale inter-ministérielle sur la population et le développement

28-29 novembre 2016

Dakar, Sénégal

Appel à l'action de Dakar

Coopération Sud-Sud pour faire avancer les priorités des objectifs de développement durable

1. **Rappelant** nos engagements pris aux plates-formes de haut niveau de la CIPD, des OMD et des ODD, y compris le Plan d'action de la CIPD adopté en 1994, révisé en 1999;
2. **Réaffirmant** les engagements des Chefs d'Etat et de Gouvernement pris lors du Sommet du Millénaire 2000 sur les OMD et ceux convenus lors de l'Assemblée générale des Nations Unies en 2005, en 2010 et en 2015, les déclarations de la PPD lors de la douzième Conférence internationale interministérielle tenue à Dacca en 2015, pour consolider nos engagements politiques en plans d'action nationaux dynamiques suivis de « l'Appel à l'Action de Beijing » proclamé lors du dialogue ministériel sur la coopération Sud-Sud pour la population et le développement, qui s'est tenu à Beijing en mars 2016.
3. Aujourd'hui, 29 novembre 2016, nous, délégués, réunis ici à Dakar, au Sénégal, réaffirmons notre volonté politique et nos engagements d'accorder la plus grande urgence à l'engagement consécutif à la CIPD 2014 et à la réalisation des objectifs de développement durable (ODD) avec nos efforts redoublés en nous attaquant collectivement aux défis prioritaires en matière de population et de développement dans le contexte des objectifs de développement durable.
4. L'Appel à l'Action de Dakar vise à traduire ces engagements en actions concrètes pour renforcer les résiliences nationales inclusives et améliorer la qualité de la vie humaine dans les pays du Sud. Malgré sa taille modeste, la PPD a été en mesure de démontrer que la coopération Sud-Sud a le meilleur potentiel pour réaliser l'agenda du développement encore inachevé.
5. La PPD, en tant qu'organisation intergouvernementale de pays du Sud représentant près de 60% de la population mondiale, a émergé en tant que principale plateforme de consensus pour la coopération Sud-Sud en vue d'atteindre les ODD.

Préambule

6. La Coopération Sud-Sud est au cœur du travail de la PPD. L'action de la PPD est guidée par les six domaines prioritaires contenus dans le plan stratégique 2015-19 de la PPD sur cinq liens transversaux, sur la base d'une large consultation avec les pays membres. Le nouveau paradigme se concentre sur la durabilité et l'inclusion pour réaliser les priorités des ODD. Ces liens sont a) le plaidoyer basé sur des éléments probants; b) un dialogue mondial amélioré pour des réponses inclusives en matière de développement; c) la facilitation du renforcement des capacités en fonction des besoins et des demandes; d) un solide partage d'informations et d'expériences à travers une amélioration de la coopération Sud-Sud; e) le renforcement des capacités de coopération Sud-Sud pour réaliser les ODD.

7. **Nous, délégués** de la 13e Conférence internationale interministérielle 2016;
8. **Reconnaissant** l'importance du partage d'expériences et de connaissances en tant que pilier essentiel de la coopération Sud-Sud afin de renforcer les capacités des pays pour la réalisation complète et collective de l'Agenda du développement durable de 2030;
9. **Exprimant notre profonde gratitude** au Gouvernement de la République du Sénégal pour l'accueil de la XIIIème Conférence internationale interministérielle sur la population et le développement;
10. **Nous engageons de nouveau** à soutenir et à renforcer les efforts déployés aux niveaux national, régional et mondial visant à accélérer les actions prioritaires en matière de population et de développement dans le contexte de la réalisation des objectifs de développement durable en:
11. **Appelant** nos gouvernements nationaux à accorder une plus grande importance à l'avancement de la dynamique démographique et à son intégration dans les plans nationaux de développement;
12. **Reconnaissant** que la dynamique démographique est essentielle à toute action de développement. Nous appelons nos gouvernements à cerner l'interdépendance subtile et complexe de la dynamique démographique vis-à-vis de la santé, de l'éducation, de l'accès aux services sociaux dans leurs efforts de planification:

Modernisant, renforçant et rationalisant la collecte de données de recensement, le système d'enregistrement de l'état civil, la compilation, le stockage et l'utilisation des données grâce à un meilleur flux et à une meilleure consommation des données dans des centres de données numériques en temps réel,

Révisant la composante population des plans de développement nationaux pour les adapter aux nouvelles tendances en matière de données sur fécondité, la mortalité et la morbidité.
13. **Identifiant** les cohortes de personnes âgées dans les pyramides démographiques et intégrant ces tendances émergentes dans les plans relatifs à la population et au développement;
14. **Accroissant** l'analyse et l'utilisation de données désagrégées sur l'urbanisation et la migration dans le processus de planification nationale car celles-ci influencent directement le secteur des infrastructures, le secteur de l'agriculture et les services de base du secteur de la santé, notamment les dispensateurs de soins à titre onéreux et gratuit. Ces résultats sont tenus de guider le processus de développement national.

Nous convenons de,

15. **Intégrer la dynamique e démographique dans les plans de développement nationaux**

En Partenariat avec l'UNFPA et d'autres parties prenantes, mettre en place un «*Forum international sur la coopération Sud-Sud*» et des «*Centres d'excellence* » en matière de population et de développement en vue d'accroître le plaidoyer basé sur des éléments probants pour adapter les plans nationaux de développement en fonction de la dynamique démographique; échanger l'expertise et le partage de connaissances sur la conduite de recensements, notamment la personnalisation des ensembles d'application des données et l'adaptation de nouvelles technologies dans les pays membres; et examiner le logiciel utilisé par les pays membres de la PPD pour recueillir et analyser les données démographiques, notamment les prévisions de population. Construire un partenariat avec les pays membres de la PPD pour renforcer le «*Groupe de travail national pour la coopération Sud-Sud*» axées sur la réponse aux besoins des pays.

16. **En Insistant** sur la dispense d'informations et de services relatifs à la santé sexuelle et reproductive avec des nouvelles stratégies innovantes pour faciliter le changement d'attitude et créer des structures éducatives, sociales, économiques et juridiques dans un contexte culturel spécifique.
17. **En reconnaissant** la Résolution des Nations Unies sur l'enfant et les mariages précoces comme pratiques faisant gravement obstacle aux droits des filles et des femmes et comme menace pour leur santé, leur éducation, leur statut économique et social; une barrière au développement perpétuant le cycle de la pauvreté.
18. **Améliorer** l'accès des adolescents à la santé sexuelle et reproductive
Renforcement des partenariats sur **les échanges d'expériences réussies et de bonnes pratiques; coopération pour la fourniture d'équipements et de services relatifs à la santé reproductive pour accélérer la sécurité de la dispense de cette santé dans les pays en développement;** revue des obstacles juridiques à la santé sexuelle et reproductive. Répondre aux besoins des adolescents en matière de planification familiale.
19. **Reprise** de l'agenda non réalisé de la santé maternelle et infantile nécessitant des investissements et des partenariats plus importants;
20. **Revoir les programmes nationaux et infranationaux de santé maternelle et infantile** pour les aligner sur les composantes de l'EWEC et les ODD. Plaider pour un nouveau soutien budgétaire pour le renforcement des programmes de santé maternelle et infantile;
21. **S'attaquer à l'agenda inachevé de l'amélioration de la santé maternelle et infantile**
Mobiliser des ressources auprès des donateurs et des pays membres pour planifier, mettre en œuvre et soutenir les projets de santé maternelle et infantile dans les pays en développement; reconnaissance de l'initiative de la Chine de 100 projets de santé maternelle et infantile dans les pays en développement et exploration de la possibilité d'élargir et de dupliquer le programme de cliniques communautaires financé et soutenu par l'Inde et le Bangladesh.
22. **Prenant note** de la nécessité d'une **cohésion sociale de la population migrante conformément aux résolutions des Nations Unies sur les droits de l'homme.**
23. **Effectuer une évaluation des modèles de migration** - interne, externe, saisonnière et permanente - et élaborer des plans qui prévoient l'inclusion de ces populations migrantes, en particulier les femmes; Initier un dialogue politique tant au niveau international qu'au niveau transfrontalier pour favoriser l'inclusion des femmes dans les postes de contrôle, les points d'entrée et de sortie et les camps de réinstallation. Les pays membres de la PPD sont encouragés à prendre en compte les attitudes et les normes discriminatoires, en particulier dans le secteur de la santé; assurer un meilleur accès aux services de santé reproductive et de planification familiale, en améliorant l'inclusion et la cohésion sociale, en particulier des femmes, car les groupes de migrants sont vulnérables et marginalisés. Renforcer les partenariats avec des organisations comme l'OMS, l'OIM, l'OIT, l'UNFPA et d'autres organisations bilatérales pour répondre aux besoins des femmes migrantes dans les pays en développement.
24. **Reconnaître la nécessité d'intégrer le vieillissement en bonne santé dans nos plans de développement nationaux.**
Nous appelons les gouvernements nationaux à créer un mécanisme national qui réponde aux besoins sanitaires, psychologiques et récréatifs des groupes de population vieillissants ; assurer une plus grande qualité de vie en incluant les soins gériatriques dans les systèmes de soins de santé communautaires; exploiter le « Dividende démographique secondaire » pour contribuer au resserrement des liens intergénérationnels pour la croissance économique

25. *Promouvoir le vieillissement en bonne santé.*

Partenariat au sein des pays membres de la PPD et autres parties prenantes pour renforcer la Commission mondiale de la PPD sur le vieillissement afin de promouvoir le vieillissement en bonne santé, actif et productif; Le commissaire de la Commission mondiale sur le vieillissement et le groupe de travail national pour la coopération Sud-Sud seront soutenus dans le cadre d'une consultation sur les politiques et programmes de vieillissement en bonne santé spécifiques aux pays.

26. *Reconnaissant l'importance d'une meilleure compréhension des liens entre santé reproductive et pauvreté, nous lançons un appel à nos gouvernements nationaux* pour qu'ils en étudient et analysent les causes déterminantes chez les populations marginalisées et vulnérables; et mettent en œuvre les meilleures pratiques pour améliorer l'accès, la couverture et l'utilisation grâce à une approche adaptée pour renforcer l'accès aux filets de sécurité sanitaire chez les groupes de population pauvres et marginalisés.

27. *Compréhension de la relation entre santé reproductive et pauvreté*

Renforcer le partenariat Sud-Sud pour intégrer le lien entre la pauvreté et la santé dans le contexte des ODD 1 (non à la pauvreté) et 2 (bonne santé et bien-être); Renforcer les partenariats pour appuyer les efforts déployés par les pays partenaires visant à examiner le lien entre la santé reproductive et la pauvreté.

28. *Notons avec satisfaction* que la PPD, ses Etats membres et ses organisations partenaires joueront un rôle catalyseur en optimisant les possibilités de coopération Sud-Sud pour mettre en œuvre « l'Appel à l'Action de Dakar » afin de créer un impact positif sur la réalisation des objectifs de développement durable dans les pays membres.

Nous appelons ainsi les Coordonnateurs des pays partenaires et le Secrétariat de la PPD à assurer le suivi du plan d'action et la progression de l'Appel à l'action de Dakar et à en faire rapport à la prochaine réunion du Conseil.

Adopté le 29 novembre 2016,

à la séance de clôture de la XIIIème Conférence internationale interministérielle, Dakar 2016

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Partners in Population and Development (PPD) is an inter-governmental organization of **26** developing countries mandated to promote South-South Cooperation in the area of Reproductive Health, Population and Development and was incepted in conjunction with the International Conference on Population and Development (ICPD) held in Cairo, Egypt in 1994. The organization is a Permanent Observer at the United Nations General Assembly and has Diplomatic Status in Bangladesh. It has offices in New York, Uganda and China and PPD mission in Geneva.

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