

ACCELERATING THE PROMISE



The Report on the
Nairobi Summit on
ICPD25





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FOREWORD

In 2019, all roads led to Nairobi.

Thousands gathered at the Nairobi Summit on ICPD25: Accelerating the Promise, and what a celebration it was! Hundreds of thousands more around the world marched in solidarity, recommitting to the extraordinary vision of the Programme of Action set forth at the International Conference on Population and Development in Cairo in 1994 – a vision of full equality for women and girls, and of sexual and reproductive health and rights for all.

The world convened in Nairobi around a central belief that good progress is not good enough, and that we must accelerate the promises made in Cairo to girls and women, boys and men, to everyone. Achieving the Sustainable Development Goals depends on it.

Strengthening our societies, growing our economies and combating climate change all depend on women and girls taking control over their bodies, their choices and their futures. When every woman and girl lives in full equality, with dignity and respect, we can end poverty and hunger, improve health and human well-being, guarantee quality education, and achieve peace and prosperity for all.

The urgent message from the Nairobi Summit is that the world cannot – and must not – wait another 25 years. UNFPA and the Governments of Kenya and Denmark co-convened the Summit with that sense of urgency in mind. We were pleased to see

the leadership that exists at all levels – from presidents to the grass roots, from refugees to royalty, from youth activists to CEOs – to ensure sexual and reproductive health and rights for all.

Leaders of countries, communities and organizations from 163 United Nations Member States participated with a deep sense of purpose and hope. Together, we fashioned the Nairobi Statement and accompanying Nairobi Commitments, not to negotiate new documents or language, but to uphold existing agreements, address resource gaps, define actionable timelines, and share and learn from each other.

Partners from the private sector, civil society, academia and faith-based organizations brought new ideas and new resources to make rights and choices a reality for all. People with disabilities, indigenous people, people of African descent, and of sexual diversities turned out in their numbers, leading, challenging, inspiring and pushing the agenda forward.

Feminists, who ignited a movement in Cairo, brought their energy and passion to Nairobi. Young people raised their collective voice, declaring their intention to lead the sexual and reproductive health movement into a new era, where every girl can fulfil her dreams.

In the end, the Nairobi Summit was about action, not talk. We committed to making

the next decade one of action and results for women and girls. Sexual and reproductive health and rights are human rights, and it is up to all of us to protect and defend them.

Years from now, let it be said that the Nairobi Summit on ICPD25 sparked the accelerated action needed to achieve sexual and reproductive rights and choices for all. Let it be known that we did the work, we delivered on our promises, and we achieved the commitments of the ICPD Programme of Action and the Sustainable Development Goals.

The march continues. Our ultimate destination: full rights and full choices for all people, everywhere.

Natalia Kanem

*United Nations Under-Secretary-General
and Executive Director of UNFPA,
the United Nations Population Fund*

The Nairobi Summit on
ICPD25



I: The Road to Nairobi

MANY VOICES, ONE STAND FOR RIGHTS AND CHOICES

There is no turning back on sexual and reproductive health and rights and choices for all. The march forward must continue, and it must accelerate, because choosing what happens with one's own body and fertility is a fundamental right.

Twenty-five years ago, at the landmark 1994 International Conference on Population and Development (ICPD) in Cairo, Egypt, the world promised that every woman and girl would enjoy universal access to sexual and reproductive health. More do so today than ever before. Yet millions of women and girls still die in pregnancy, still cannot get contraceptives, still get married as children, still are mutilated and violated – the list of unfulfilled promises remains very long.

We know we need more action, more commitment, more investment in a far faster pace of change. But how? That's what the Nairobi Summit to mark the 25th anniversary of the ICPD set out to answer. Under the banner of "Accelerating the Promise", it took place in Nairobi, Kenya, from 12 to 14 November 2019, co-convened by the Governments of Denmark and Kenya, and UNFPA.

The culmination of a year-long process to re-energize people everywhere, the Summit brought together 8,300 people from 172 countries and territories. They made over 1,250 commitments to action. And with many voices they spoke as one in standing against decades of pushback on sexual and reproductive health and rights, and the equality of women and girls.

The Summit was the first large global meeting heralding the United Nations Decade of Action to deliver on the Sustainable Development Goals, and a lead into the 25th anniversary of the 1995 Fourth World Conference on Women. As such, the Summit set a high bar – and pioneered a fresh approach to multilateral action. Since it was an entirely voluntary exercise, Governments and others came because they genuinely wanted to express their commitments to sexual and reproductive health and rights. This approach proved highly successful in persuading a wide variety of institutions and people across the world to stake a claim on a new, brighter future, where promises are kept, not contested.





In the lead-up to the Nairobi Summit, UNFPA launched #IMarchFor, a social media campaign that brought 30,000 people and 15 million followers into a global call for world leaders to deliver on ICPD promises. In a striking video at the Summit opening, girls with artistically painted faces read the 12 global commitments of the Nairobi Statement.

WHERE IT ALL BEGAN

The Governments of Denmark and Kenya agreed to co-convene the Nairobi Summit with UNFPA. They brought geopolitical balance, tremendous experience in negotiating the Sustainable Development Goals (SDGs), and strong political will from their respective Governments to their roles as co-conveners. Denmark also became the major donor to the Summit.

In April 2019, UN Member States at the UN Commission on Population and Development adopted a Political Declaration calling for the “full, effective and accelerated implementation of the ICPD Programme of Action and the 2030 Agenda for Sustainable Development”. This provided a political impetus for Governments and all other relevant partners to come together to commemorate the adoption of the ICPD Programme of Action, and celebrate its successes in advancing rights and choices for all.

The process would galvanize political and financial momentum, and build and strengthen partnerships to complete the unfinished business of the ICPD Programme of Action, including as an integral part of the 2030 Agenda and its 17 SDGs. Early on, five themes with global relevance emerged as key focus areas. They included universal access to sexual and reproductive health and rights, financing the sexual and reproductive health and rights agenda, demographic diversity, ending gender-based violence and harmful practices, and sexual and reproductive health and rights in humanitarian and fragile contexts. The preparatory process also pinpointed five other issues to accelerate progress across all of the themes: gender equality, youth leadership, political and community leadership, innovation and data, and partnerships.

THREE OBJECTIVES

Three objectives shaped the process around the Nairobi Summit, aimed at renewing momentum to fully achieve the ICPD and the SDGs by 2030:

1. Obtain political reaffirmation of the ICPD Programme of Action, within the context of the 2030 Agenda for Sustainable Development and the SDGs.
2. Build political and financial momentum to fulfil the unfinished business of the ICPD Programme of Action.
3. Reinvigorate and expand the community of people necessary to push forward the ICPD agenda on all fronts.



A COMMITMENT TO COMMITMENTS

The co-convenors were determined that the Summit would galvanize new ways of thinking, new players and new actions. Early on, they defined it as a platform where Governments, international and regional organizations and all sectors of civil society would make concrete public commitments with a focus on leaving no one behind. Ambitious political, programmatic and financial commitments would showcase leadership, make the case for scaled-up investment, and move the world towards achieving sexual and reproductive health and rights for all.

To keep commitments relevant and meaningful, and aligned to the extent possible to shared global aims, an International Steering Committee guided the development of an overarching framework. The process drew on six months of consultations with UN Member States, civil society organizations, youth networks, people living with disabilities, the faith-based community, the private sector, foundations, academics and more. Together, they defined the magnitude of the unfinished business of the ICPD, and pinpointed areas where progress is most urgent.

The result was the “Nairobi Statement on ICPD25 – Accelerating the Promise”. Framed around the five themes of the Summit, it contains 12 global commitments that served as a point of departure for all other commitments made at the Summit.



Aimed at delivering benefits to women and girls, their families and societies at large, the Statement as a whole reflects the inextricable links between women's and girls' empowerment, sexual and reproductive health and rights, and sustainable development.

The 12 global commitments highlight three zeros – the end to preventable maternal mortality, unmet need for contraceptives, and gender-based violence and harmful practices. They spotlight urgent issues such as greater domestic and international financing, bringing young people into all decision-making that affects them, developing quality and disaggregated data, and ensuring that sexual and reproductive health information and services reach people in crisis. As a non-binding instrument, the Statement as a whole allows different countries and other actors to pursue concerns most important to them, including new imperatives arising since the ICPD, such as the global goal to achieve universal health coverage.

RADICAL INCLUSION

No one has paid as great a price for unfulfilled promises as women and young people. Their voices too often go unheard. Their issues are ignored, and their rights and choices denied.

Summit organizers decided that it was time to overturn this discrimination and exclusion, and

aim for radical inclusion. That meant explicitly ensuring that the Summit and the entire process leading up to it would aim for human diversity in every respect.

At the Summit, community leaders sat side by side with national ministers. Youth activists dialogued with CEOs of multinational corporations. Indigenous women interacted with academics. Debates were not constrained by the politics of position or gender or age, but embraced the power of open exchanges of wide-ranging experiences and ideas. Consequently, discussions were much richer, and commitments deeper. A highly interactive format, developed by an International Programme Committee, provided ample space for diverse participants to reflect together on opportunities, challenges and collective actions.

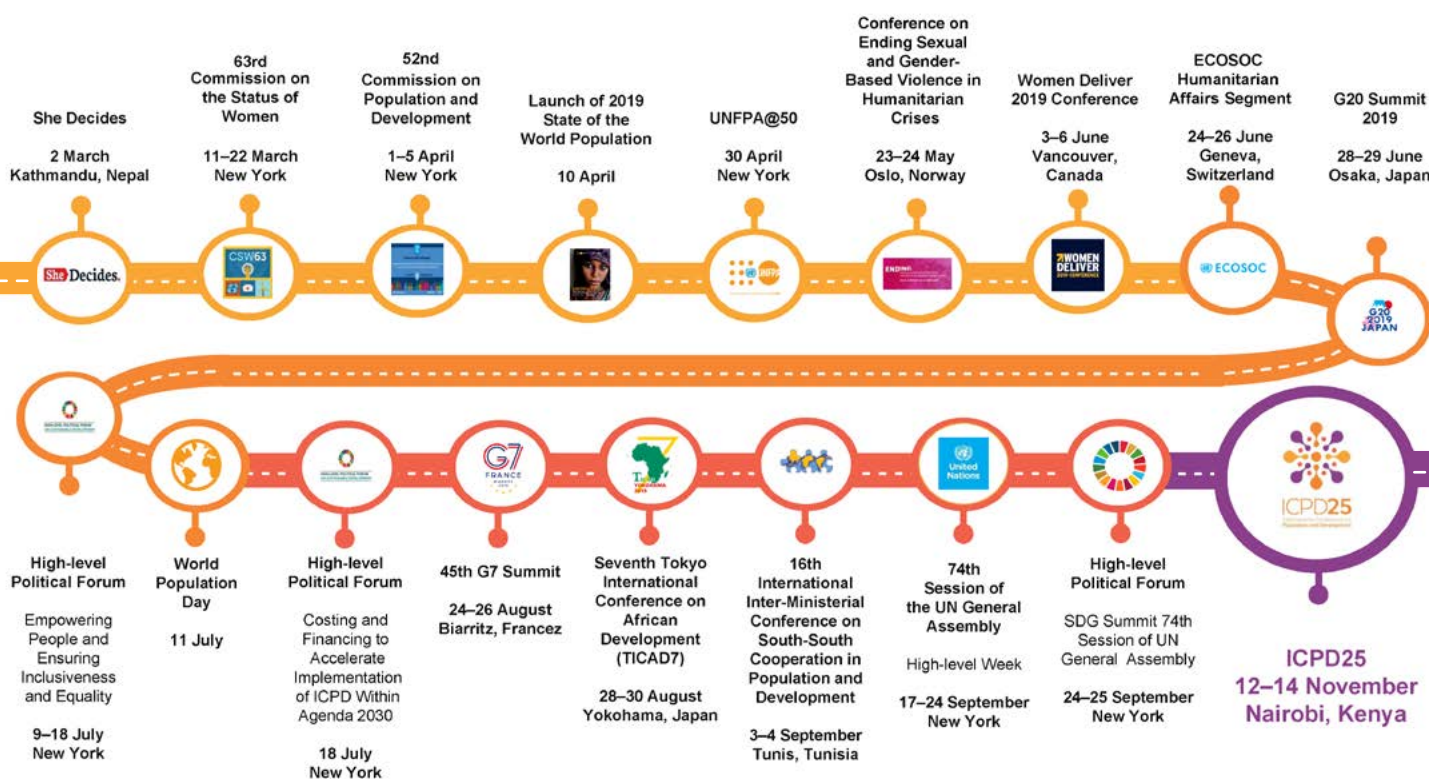
As a result, a new, broad coalition was formed. It is a coalition of the informed and committed, the bold and the brave. Everyone in it knows the stakes are high, but also that the solutions are at hand.

A GLOBAL ROAD TO NAIROBI

To guide an extensive year-long build-up to the Summit, a global road map identified major events in every part of the world that could propel political momentum behind Summit objectives and reinvigorate the movement to finish the ICPD's unfinished business. A global reflection took off, unprecedented in its scope and scale, on where progress had been made, who was being left behind, which key issues and commitments to bring to Nairobi, and how to sustain energy, partnerships and commitments right through to 2030 and the Decade of Action, for everyone, whether they came to Nairobi or not.

Talks about the Summit featured at the Commission on Population and Development, the United Nations High-level Political Forum on Sustainable Development and the United Nations General Assembly, as well as in the Group of Seven (G7) and Group of 20 (G20) summits, and at major international gatherings on humanitarian action, South-South cooperation and more. Regional road maps played major roles in propelling interest. And in practically every country, multistakeholder processes and consultations were initiated to identify the unfinished agenda and formulate concrete national commitments.

THE ROAD TO NAIROBI



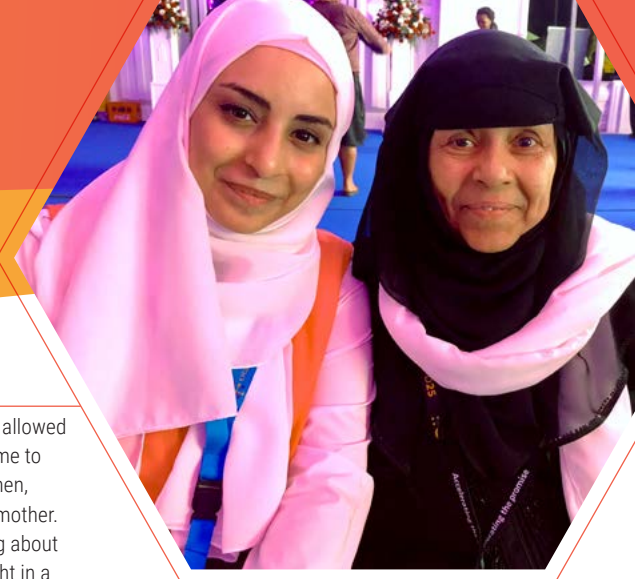
THE ROAD TO NAIROBI FOR YOUNG PEOPLE AND CIVIL SOCIETY

Young people and civil society mobilized around the Nairobi Summit throughout 2019, from the local to the global level. They discussed progress since the ICPD, and the challenges and possibilities ahead, and provided direct inputs into Summit planning and outcomes. The road to Nairobi became a chance for many to prepare themselves to assume the mantle of new leadership from Nairobi to 2030 and beyond.

More than 80 youth-led and youth-serving partner organizations contributed to developing the Summit programme and global, regional, national and local commitments. Civil society more broadly saw the Summit as a chance to re-energize the ICPD movement, strengthen commitments to rights and choices for all, and broaden coalitions with other partners and constituencies. Understanding the power and importance of Cairo, they wanted to be a part of Nairobi.

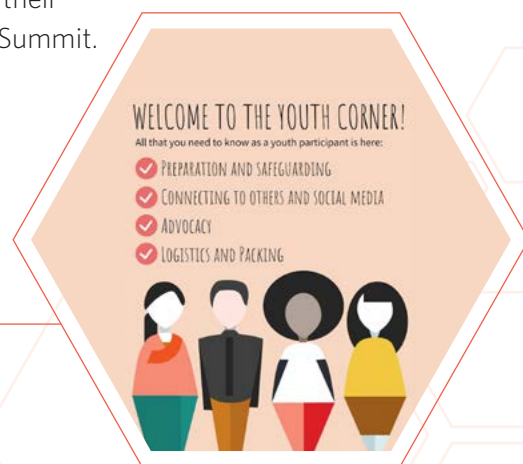
The Summit process provided an opportunity for meaningful participation between activists of different generations working on a variety of issues. It catalysed collaboration and action, and articulated the ICPD agenda's relevance today. Crucially, young people and non-governmental organizations played a pivotal role in both the International Steering Committee and the International Programme Committee.

A UNFPA scholarship allowed Emy Hetari, 29, to come to the Summit from Yemen, accompanied by her mother. She performed a song about adolescent girls caught in a humanitarian nightmare.



SCHOLARSHIPS BRING LOCAL COMMUNITIES ON BOARD

From the outset, every effort was made to ensure that people from smaller communities were present in large numbers, bringing to the discussions their diverse perspectives and lived experiences. UNFPA and its partners provided scholarships for more than 2,000 young people, women from grass-roots organizations, traditional leaders, LGBTQI populations, people living with HIV, people living with disabilities, people of African descent, indigenous people and community-led organizations. Their road to Nairobi included training, toolkits, workshops and consultations, which assisted them in developing their own commitments and making the most of their participation at the Summit.



The Youth Engagement Toolkit helped youth prepare to make their voices heard.

THE #IMARCHFOR CAMPAIGN... TELL US WHY YOU MARCH!

Not everyone physically came to Nairobi, but they all marched to Nairobi. The #IMarchFor campaign brought together champions of sexual and reproductive rights, gender equality and women's empowerment from all over the world. They shared personal messages on why the Nairobi Summit mattered to them and turned the Summit into a movement.

Tens of thousands of individuals and institutions participated, with the #IMarchFor hashtag generating around 30,000 posts reaching over 15 million followers. They marched for their personal commitment to rights and choices for all. They marched for survivors of female genital mutilation, and for women and girls affected by humanitarian crisis. They marched for access to menstrual hygiene products, mental health, quality education, dignity, freedom from violence and discrimination, and achieving the three zeros.

WHAT'S CHANGED? THOUGHT LEADERSHIP CONVERSATIONS ON ICPD

A highly popular series of global, regional and national conversations, online and in person, posed the provocative question: What's Changed? They brought together thought leaders, experts and community voices to reflect upon progress since Cairo and stimulate new thinking, ideas and solutions to complete the unfinished business of the ICPD Programme of Action. The conversations took up the rights of young people and adolescents, advances in reproductive technology, family planning, low fertility, demographic shifts such as ageing societies, sexual and reproductive health and rights of people living with disabilities, and many other critical concerns.

The first What's Changed? conversation brought together thought leaders to debate what's next in achieving the ICPD agenda.



In Afghanistan, a young woman affirmed her priorities as part of the #IMarchFor campaign.





Summit co-convenors, the Governments of Denmark and Kenya as well as UNFPA, and partners celebrated the close of an early round of vibrant exchanges at “Join us on the Road to Nairobi”, a high-level side event at the 74th General Assembly of the United Nations.

PUBLIC AND PRIVATE, PARTNERS REACH THE WORLD

An unusually broad spectrum of public and private partners had visible roles all along the road to the Summit, joining cross-regional alliances and partnerships to gain traction on the three zeros and put forward innovative solutions to bottlenecks. A UNFPA-led costing exercise provided technical and financial tools to take the sexual and reproductive health and rights agenda to scale.

The Government of Denmark provided the bulk of the financial resources needed. Additional financial support also came from the Governments of Australia, Canada, Finland, Germany, Iceland, Ireland, Italy, Luxembourg, the Netherlands, Norway, the Republic of Korea, Sweden and Switzerland. Kenya provided significant in-kind support. Support also came from private sector partners. They included, Bayer, the Ford Foundation, Global Citizen, Kenya Airways, Special Olympics, the UN Office for Partnerships and YMCA Africa. They made financial commitments and/or in-kind contributions.



When it was finally time for the Summit to begin, the Burundian delegation impressed other participants by arriving in ICPD-branded attire.

II: Fulfilling Our Promises

READY FOR THE FUTURE, STARTING NOW

The Nairobi Summit began with a welcoming ceremony where more than 8,300 participants took a journey from Cairo to Nairobi to the world of 2030 and the achievement of the Sustainable Development Goals. The ceremony set forth a forward-looking vision to guide commitments for finally achieving all parts of the ICPD Programme of Action.

Guests took their seats in the main hall of the Kenyatta International Convention Centre to the inspiring sounds of performers from around the world, including traditional dancers from Kiribati, the African regional youth network and renowned singer Kaliya from Kazakhstan. The percussive beats of the Kibera Slum Drummers marked the formal start of the ceremony, followed by a compilation of #IMarchFor campaign videos to showcase the journey to Nairobi. A highlight was the flash mob performance of adolescent girls presenting the 12 global commitments of the Nairobi Statement, and urging the audience to fulfil ICPD promises because their future depends on it.

The Summit was officially opened by the three co-convenors, the Governments of Denmark and Kenya as well as UNFPA. Opening remarks were delivered by His Excellency President Uhuru Kenyatta of Kenya, Minister for Development Cooperation of Denmark Rasmus Prehn, Her Royal Highness Crown Princess Mary of Denmark, Deputy Secretary-General of the United Nations Amina Mohammed and UNFPA Executive Director Dr. Natalia Kanem.

The Kibera Slum Drummers set the beat for co-convenors to open the Summit.



At the opening ceremony, adolescent girl champions of Nairobi Statement commitments performed Katy Perry's "Roar", a rallying cry for the rights and leadership of girls worldwide.



The co-covenors formally launched the Summit, including (from left) Her Royal Highness Crown Princess Mary of Denmark, Patron of UNFPA; Rasmus Prehn, Minister for Development Cooperation of Denmark; His Excellency President Uhuru Kenyatta of the Republic of Kenya; United Nations Deputy Secretary-General Amina Mohammed; and UNFPA Executive Director Dr. Natalia Kanem.

“Women are the backbone of the family and, indeed, the bedrock of a nation... Empowering women essentially empowers all our families, it empowers our societies, it empowers our nations, and it empowers the world.”

—His Excellency Uhuru Kenyatta,
President of the Republic
of Kenya

“The Sustainable Development Goals cannot, and will not, be achieved until women, girls and young people are able to control their bodies and their lives, and live a life free from fear and from violence.”

—Dr. Amina Mohammad,
Deputy Secretary-General,
United Nations

“Women and girls are the true owners of their own bodies, and reaching SDG 5 is the key to reaching the other SDGs... We can only be here in 2030 if we are celebrating the finished unfinished business... Let us march and unite in this moment of solidarity across the globe so women can make informed choices.”

—His Excellency Rasmus Prehn,
Minister for Development
Cooperation, Denmark

“It is important to better understand the underlying societal complexities and structures that fail to respect women’s physical integrity so that we can bridge the gaps!”

—Her Royal Highness Crown
Princess Mary of Denmark,
Patron of UNFPA

“The reproductive rights of women and girls are not up for negotiation and we shall protect and uphold them! We will do it because the Sustainable Development Goals depend upon it. We will do it because we cannot hope to end poverty and achieve peace and prosperity until every woman and girl can live in full equality, with dignity and respect. We will do it because strengthening our societies, growing our economies, and importantly, combating climate change – all depend upon women and girls taking control over their bodies, their choices, and their futures.”

—Dr. Natalia Kanem,
Under-Secretary-General,
Executive Director, UNFPA

African legend Youssou N'Dour roused the audience with songs of hope and renewed ambition.



CHAMPIONS FOR CHANGE ACROSS GENERATIONS

In opening plenary sessions, four champions of the ICPD agenda came together to discuss rights and choices for all on the road from Cairo to Nairobi.

Renowned women's rights activist Gita Sen, Director of the Ramalingaswami Centre on Equity and Social Determinants of Health at the Public Health Foundation of India, set the stage by emphasizing the centrality of human rights to achieve equality and leave no one behind. Noting that young people view their lives comprehensively – the same young people who march for climate change are mobilizing to claim their sexual and reproductive health and rights – Sen called for transferring the baton held by the women who went to Cairo to the young women and girls in the room and everywhere else.

Melinda Gates, Co-founder of the Bill & Melinda Gates Foundation, spoke of how 25 years ago, the ICPD put women at the centre of the agenda. Now it is time to listen to young people and put girls at the

centre. She highlighted the transformative power of FP2020, pointing out that with 53 million more women and girls obtaining contraceptives since 2012, universal coverage of contraceptives is achievable.

As a voice of the new ICPD generation, Neil Fidelle Lombao, She Decides 25x25 Champion and Chairperson of the UN Youth Advisory Board Philippines, mapped a vision for the future fully grounded in human rights, equity, equality and action. Dr. Lina Abirafeh, Executive Director of the Arab Institute for Women at the Lebanese American University, urged strengthening the women's movement and broadening its engagement with other movements, and outlined what it will take for women to feel safe.

“Contraceptives are one of the most powerful tools we have, to put the power in the hands of young girls and women to plan their families, and quite honestly to plan their futures.”

—Melinda Gates, Co-founder,
Bill & Melinda Gates Foundation

Economist Gita Sen (left) and philanthropist Melinda Gates (right) stressed engaging with young people.





Five Themes. Three Zeros.

Many lives.

THE PROGRAMME

Both broad and deep, the programme of the Nairobi Summit inspired one of the most diverse international gatherings ever. Together, in nearly 150 sessions with over 700 speakers, a chorus of voices debated how we implement the ICPD commitments, for everyone, for our shared future.

Their perspectives were many, a rich offering. But their transformative goals were the same.

Three zeros. Zero preventable maternal mortality. Zero unmet need for family planning. Zero gender-based violence and harmful practices.

Each day 810 women die giving birth. Over 232 million women want to delay or prevent pregnancy but have no effective contraception. Millions of women and girls suffer unspeakable violence, from intimate partner violence to sexual assault to female genital mutilation, and the physical and psychological trauma of early child marriage. To address the three zeros and the broader ICPD agenda, the Summit focused on the five themes defined in the preparations as powerful accelerators of progress on all of these issues: universal access to sexual and reproductive health and rights, financing the sexual and reproductive health and rights agenda, demographic diversity, ending gender-based violence and harmful practices, and sexual and reproductive health and rights in humanitarian and fragile contexts. Discussions at the Summit highlighted the power of gender equality and women's leadership, youth leadership, political and

community leadership, innovation and data, and partnerships to accelerate change.

The Summit programme was structured around signature sessions held in plenary with expert panellists addressing key solutions, impacts and data analysis. Open dialogue sessions encouraged audience discussion and debate, challenging the status quo and advancing advocacy and action. Concurrent sessions put a focus on community-led approaches, concretely drilling down into specific solutions. The interactive Pamoja Zone inspired networking, the sharing of innovations, and exploration of initiatives by communities, young people and partners.

“We should create a world where everybody, women, young men, LGBTI, persons with disabilities, and all marginalized sectors should have the power to decide about their own bodies, their lives and their futures without question.”

—Neil Fidelle Lombao,
She Decides 25x25 Champion

THEME 1 Universal access to sexual and reproductive health and rights as a part of universal health coverage

WE CHANGED THE CONVERSATION!

At the Nairobi Summit, enthusiasm for a “next generation” conversation on sexual and reproductive health and rights reached an all-time high. Consensus was strong. We need bolder demands to realize sexual and reproductive health and rights. We need scaled-up investments aimed at universal access to care, bolstering health systems but also going beyond them. We must achieve equality, quality, affordability, acceptability and accountability – for everyone.



Fatma Bulic, a member of the Information Centre for Persons with Disabilities in Bosnia and Herzegovina, spoke about ending gender-based violence, an essential sexual and reproductive health intervention.

“All too often, the stigma and taboo surrounding sex, menstrual health and reproductive health prevent individuals and communities from talking about issues crucial to empowering women to make decisions over their own bodies.”

—Folly Bah Thibault,
Journalist and Broadcaster

Participants from Governments, civil society and academia agreed: An essential and comprehensive package of sexual and reproductive health and rights interventions is the basis for transformative change. Required for the full implementation of the ICPD Programme of Action, universal health coverage and the SDGs, the package needs to be progressively realized in rolling out national universal health coverage plans.

For most countries, a comprehensive approach to sexual and reproductive health and rights is cost-effective and affordable. Domestic resource mobilization must increase to sustain gains and unlock additional investments. Proven partnerships must be strengthened, and new forms of collaboration established, including between the public and private sector and with non-traditional partners. Together, they can work towards making comprehensive sexual and reproductive health and rights integral to universal health coverage benefits, financing and protection schemes to prevent financial hardship. An imperative element is adolescent sexual and reproductive health services.

“ Stop leaving young women and girls behind; they die because we don’t want to talk about sexuality education and safe abortions.”

—Mamello Makhele,
Young midwife and founder of
MobiHope in Lesotho

The call to redress inequalities was loud and clear – and came from all directions. We heard from people of African descent, indigenous communities, people living with disabilities, young sex workers, women in humanitarian settings, LGBTQI communities, people living in urban slums and young people in rural and remote communities. Leaving no one behind requires systematic actions that put people at the centre. Gender equality, youth leadership, political and community leadership, innovation and data, and strategic partnerships can all help accelerate the progressive attainment of universal sexual and reproductive health and rights.

KEY TAKEAWAYS

- Universal health coverage requires a **comprehensive approach** to sexual and reproductive health and rights, across the lifecycle, and embedded in national plans. Focused, rights-based interventions must meet the needs of all groups, including those most marginalized and underserved.
- Government partners, representatives of civil society and academia all agreed: **the essential package of sexual and reproductive health and rights interventions** is the basis for transformative change. It is imperative to complete the ICPD Programme and achieve the SDGs, and should be progressively realized in both new and existing universal health coverage plans.

Safe pregnancy and childbirth are about survival, but also about thriving, where the health and well-being of women and girls is the goal. Getting to zero preventable maternal mortality requires strong health system capacity, innovation, equity and accountability, and partnership and coordination. All actors must commit to providing quality and respectful maternal and newborn care at a national scale, including by connecting referral and primary health facilities. Properly trained, equipped and regulated, midwives can provide 87 per cent of the essential care women and newborns need.

Towards reaching zero unmet need for contraception, discussions emphasized realizing rights, extending access to services, training health-care providers and improving quality

The essential package of sexual and reproductive health interventions is part of a comprehensive life course approach to realizing rights and choices for all.



- Investment must go beyond the health system. It should back interventions **centred on people** and integrating the multiple issues they face.

- Not negotiable: **women's and girls' rights to health care, bodily autonomy and integrity!**
- **Complex issues demand ambitious solutions**, with a central place for community involvement to define how best to meet local needs.

- Successful investment in **the health workforce**, particularly midwives, requires tackling imbalanced gender and power dynamics in health systems.
- **Access to safe abortion** is essential to sexual and reproductive health and rights.

of care. Other prominent issues encompassed access to accurate information, and creating awareness and generating demand, with strong potential to harness innovation, especially digital tools. In making sure that contraceptive commodities reach users, essentials include preventing stock-outs, improving supply chains and expanding choices of modern methods. Family planning should be better integrated into maternal care, primary health care and HIV services, and, as a matter of urgency, reach groups left behind, particularly youth and adolescents, people with disabilities, migrants and refugees, and people living in humanitarian settings. Improved data would allow better evaluation of whether family planning reaches marginalized groups. Both domestic and international financing remain critical for sustaining family planning, alongside strong accountability mechanisms and enabling legislation and policies.

Universal access to sexual and reproductive health means for everyone. That includes men, young men and boys. Many lessons have been learned, including in HIV

programmes, about the consequences of restrictive gender norms, violence, stigma, discrimination, lack of information and lack of access to services. Rates of HIV are increasing, for instance, in some LGBTQI communities, and among men who have sex with men who are married to women. A lack of access to information and services for men and young men results in high rates of untreated sexually transmitted infections, gender-based violence and adolescent boys becoming fathers. The gap hampers important efforts to increase men's responsibility for using contraception.



With India exploring universal health coverage, Debasree Chaudhuri, Minister of State for Woman and Child Development, attended the Summit, joined in one session by the then UNFPA Deputy Executive Director, Laura Londen.

- **Comprehensive sexuality education** must reach every young person, including through technology, and emphasize transforming discriminatory gender norms.
- **Young people** can face multiple, intersecting obstacles to sexual and reproductive health information and services. These are related to age as well as disabilities, gender diversity, sexual orientation and ethnicity, among others. They must be part of designing and driving their own solutions.
- A frank new conversation emerged around **menstrual hygiene**, driven by emerging champions of innovations such as new designs for period underwear, menstruation tracking apps and machines dispensing organic period products.

YOUTH HAVE A RIGHT TO CONTRACEPTION TOO

A recurring and critical issue was the urgency of meeting young people's need for contraception, as an integral part of adolescent sexual and reproductive health and rights. Participants, including many youth, stressed that progress must be co-led with youth. Policies and laws should ensure that young people universally can access good quality, integrated and comprehensive sexual and reproductive health information and services, along with comprehensive sexuality education.

Much more could be done to build the capacity and commitment of health providers to deliver information and services that meet the specific needs of adolescents and youth. Different sectors will need to work together to reach everyone and link the multiple issues at stake.

To keep the momentum going, the Youth Coalition for Sexual and Reproductive Rights launched a short guide: Calling for Action on Young People's Need for Contraception. Find out more at: unfpa.org/resources/calling-action-young-peoples-need-contraception-guide-youth-advocates.

- It's time for more **investment in the sexual and reproductive health and rights of men and boys**, targeting institutions, communities and individuals.
- We should increase advocacy and services emphasizing **men's responsibility for contraception**.
- Reformulated strategies should improve **LGBTQI** access to services, sexual and reproductive health education, and the protection of their rights.
- Stepped up efforts to collect and analyse **disaggregated data** should cover the national and subnational levels, and the parameters of age, sex, wealth, ethnicity, migration status, disability and parity.

THEME 2 Financing to finish the ICPD Programme of Action and to sustain the gains made

WE KNOW WHAT WE NEED TO INVEST: LET'S GET THE JOB DONE!

A combination of decisions, actions and funding will determine whether or not we meet the three zeros and live up to the promise of the ICPD and the SDGs. It is truly a defining moment. For achieving the first time, we know the for achieving the zeros. New research presented at the Summit went beyond calculating costs. By identifying priority interventions, it set the stage for next steps, including country investment cases.



KEY TAKEAWAYS

Journalist Folly Bah Thibault (bottom left) moderated talks on the power of creative industries to achieve rights and choices for all, featuring supermodel philanthropists Natalia Vodianova (top left), Anja Rubik (bottom right) and Maria Borges (top right).

- **How do we achieve the three zeros?** Fill resource gaps faster. And step up political commitment.
- As the most sustainable source of investment, **domestic resources** can drive transformative results. The three zeros need to be incorporated in public budgets and development cooperation, at the national and local levels.
- Clear **financial accountability** guides the best possible use of available resources.

“ The ICPD plan of action and its focus on women’s and girls’ empowerment is the foundation of human capital formation and a key priority for both the Global Financing Facility and the World Bank Health team.”

—Dr. Muhammad Ali Pate,
Global Director, Health, Nutrition and
Population Global Practice, World Bank

Getting to zero is firmly grounded in recognizing and respecting the human rights of all women, girls, men and boys. Incalculable harm results when a child grows up without its mother or a young girl suffers female genital mutilation. The emotional, social and economic toll may last a lifetime – and never be fully grasped. Yet we can calculate the economic benefits of, for instance, ensuring that all women can freely plan and space pregnancies, and that girls can complete their schooling

and find decent work instead of getting married as children. Over time, these benefits far exceed investments made in achieving the three zeros.

Completing the unfinished business of the ICPD Programme of Action is a complex task, but a feasible one. New and reinvigorated partnerships, at all levels, from the global to the local, must take up the call for investment that is strategic and, by linking different sectors, effective, with a broad reach. A combination of smart domestic investment and international support, framed by committed partnerships, will be critical to delivering for women and girls.

The amount of official development assistance going towards sexual and reproductive health and rights is declining. A transition to domestic resources needs to be managed to protect gains made, and attract and make the best use of all possible financing flows. Countries need to deliberately prioritize health, and especially sexual and reproductive health and rights.

UNFPA, in partnership with Johns Hopkins University, the University of Washington, Victoria University and Avenir Health, costed the estimated global resource needs to achieve the three transformative results – the three zeros – by 2030. Knowing the global price tag provides the foundation for developing country-level investment cases to support national priorities.

- Sexual and reproductive health and rights need to be **systematically integrated** in primary health care and universal health coverage, in benefit packages as well as modes of financing.
- Political impetus and adequate budgetary allocations must stand behind meaningful efforts to uphold the sexual health and rights of **adolescents and youth**.
- Government leadership is critical in partnerships with the **private sector** including to invest in women’s inclusion, economic empowerment and health.
- **Investing resources in coordination in cities** means investing in innovation and sustainability, and effective targeting of services to local needs.
- **Small local entrepreneurs** can play critical roles in providing health services; their successes should be scaled up more broadly.

RUNNING THE NUMBERS TO GET TO ZERO

ZERO PREVENTABLE MATERNAL DEATHS

ZERO UNMET NEED FOR FAMILY PLANNING

ZERO GENDER-BASED VIOLENCE
AND HARMFUL PRACTICES
AGAINST WOMEN AND GIRLS

Costs from 2020 to 2030 in total

\$115.5 billion in 120 priority countries.

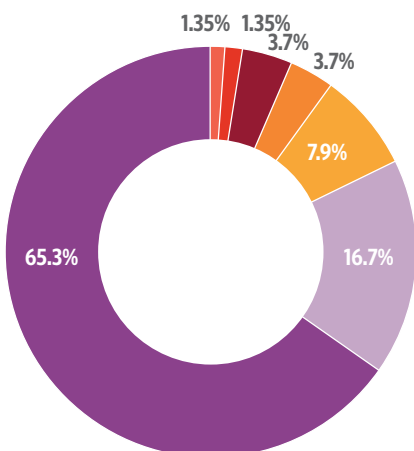
\$68.5 billion in 120 priority countries.

\$2.4 billion to end female genital mutilation in 31 countries. \$35 billion to end child marriage in 68 countries. \$42 billion to end gender-based violence in 132 priority countries.

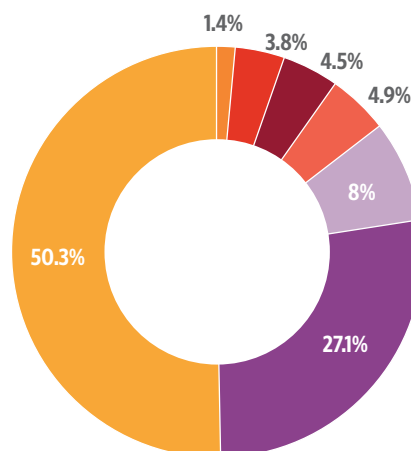
WHERE'S THE FINANCING GAP?

The largest financing gaps are in some of the countries that are the least able to address this need through domestic spending.

THE SPENDING GAP FOR MATERNAL HEALTH



THE SPENDING GAP FOR FAMILY PLANNING



CENTRAL EUROPE,
EASTERN EUROPE
& CENTRAL ASIA

HIGH-INCOME
NORTH AFRICA &
THE MIDDLE EAST

LATIN AMERICA &
THE CARIBBEAN

SOUTH ASIA

SOUTH-EAST ASIA,
EAST ASIA
& OCEANIA

SUB-SAHARAN
AFRICA

Note: by Global Burden of Disease super-region, 2020–2030.

Source: *Costing the Three Transformative Results*, 2020, Johns Hopkins University, Avenir Health, Victoria University, Institute of Health, Metrics and Evaluation at the University of Washington, and UNFPA.

- New **financial engineering** methods ensure that private sector resources support efficient, scaled-up investments in sustainable development.

- We need **more innovation**, including in financial technology, to replicate small but promising successes and achieve more broadly effective solutions to development problems. Women are generators of innovation who deserve more support!
- **South-South and triangular cooperation** can deliver many benefits; countries in the global South should take the lead.

The global community needs to provide technical support to make the investment case and increase fiscal space, realize spending efficiencies and achieve quality public expenditures on health. It must also support protections for sexual and reproductive health services in a time of fiscal austerity. Urgent priorities include delivering essential sexual and reproductive health services within universal health coverage, and reaching populations being left behind. Countries must also work towards a more sophisticated integration of services, a greater focus on quality care, and foresighted links to major determinants of health such as climate change and gender equality.

In scaling up financing, public-public and public-private partnerships have critical roles. So do parliamentarians in steering adequate domestic financing into sexual and reproductive health and universal health coverage. Additional partnerships

and alliances need to be nurtured with academia, young people and civil society, aimed at extending monitoring as well as social vigilance to uphold accountability for domestic financing. Amid vibrant discussions on leveraging the reach, ingenuity and financial power of the private sector, leading corporations and philanthropies, including BD, Philips, MSD for Mothers, Johnson & Johnson, the Ford Foundation, Laerdal Global Health and the Maternity Foundation, committed at the Summit to mobilizing some \$8 billion in new pledges.

Government representatives also stressed institutionalizing South-South and triangular partnerships as mechanisms for policy dialogue, technical cooperation, and the sharing of innovative approaches contextualized to local situations. There was a call for countries of the South to increase financial resources to scale up such mechanisms.

“HUMAN RIGHTS demand accountability ...and we need to focus on the unfinished agenda of ICPD. The current situation is not inevitable, but the result of policy choices. Governments need to be held accountable for making better CHOICES.”

—Michelle Bachelet,
UN High Commissioner for Human Rights

THEME 3 Drawing on demographic diversity to drive economic growth and achieve sustainable development

INVESTING IN PEOPLE: IT'S THE RIGHT THING TO DO AND IT PAYS A BIG DIVIDEND!

We live in a unique demographic moment. Some countries are grappling with ageing and low fertility, others with high fertility. Many are experiencing a prominent youth bulge. The Nairobi Summit explored this demographic diversity and how it could drive sustainable development, including through investments in health and education. Packed sessions had an air of expectation and shared understanding of the seriousness of issues such as employment, urbanization, migration, ethnicity and climate change. Understanding the opportunities and challenges of demographic diversity, and the political, economic, social, and peace and security consequences, is fundamentally important to all countries.



The Summit's celebration of diverse cultures and identities was key to the inclusion of all.

KEY TAKEAWAYS

- At all stages of the demographic transition, human capital investment is among the most critical drivers of demographic dividends. This will demand **an education revolution** in some of the poorest countries, and extends to more lifelong learning in older, wealthier populations.
- All stages of demographic transition and sustainable development depend on **gender equality. LET'S BE CLEAR: There are NO short cuts.**

Demographic transitions are time-bound. Reaping a demographic dividend from them requires making decisions based on sound projections. Governments from the global South and North shared lessons and current challenges in responding to demographic change. Investment in education and employment for young people to expand opportunities at home and provide alternatives to outmigration came up again and again. With 1.8 billion young people, the world cannot wait to act.

Another prominent concern was gender equality. To realize demographic dividends, women need decent work and the ability to realize their reproductive rights and choices. The consequences of gender inequality are palpable in preparing for an older world, with older women left more vulnerable to poverty for reasons ranging from the lack of access to land titles to low lifelong earnings. Older persons in general are more vulnerable to extreme climate events and humanitarian crises, areas that demand far more attention.

Since Cairo, the data revolution has transformed the possibilities for tracking development inequalities among different population groups. It offers extraordinary potential to count everyone in achieving universal access to sexual and reproductive health and rights, and to hold leaders accountable for local and national development. Debate took off on the policy potential of new geospatial data, the need for decentralized data, and the challenges of protecting privacy so that democratizing data is a public good and not used against people and communities.

Amid the fastest ever rates of urbanization, how we harness the power of cities will define hopes for achieving the ICPD agenda. Decentralized governance, economic and health systems have made some cities engines of innovation and inclusion. Cities are also stepping forward to offer safe spaces for women, and safe havens for minorities, immigrants and refugees. There is a huge opportunity to integrate the sexual and reproductive health agenda within SDG 11 on sustainable urbanization.

- **Mayors mobilizing behind the ICPD agenda** are pioneering inclusive cities friendly to youth, women, older people and minorities. Cities offer bountiful opportunities to advance family planning coverage and other essential sexual and reproductive health services given high population density and geographic concentration of demand.

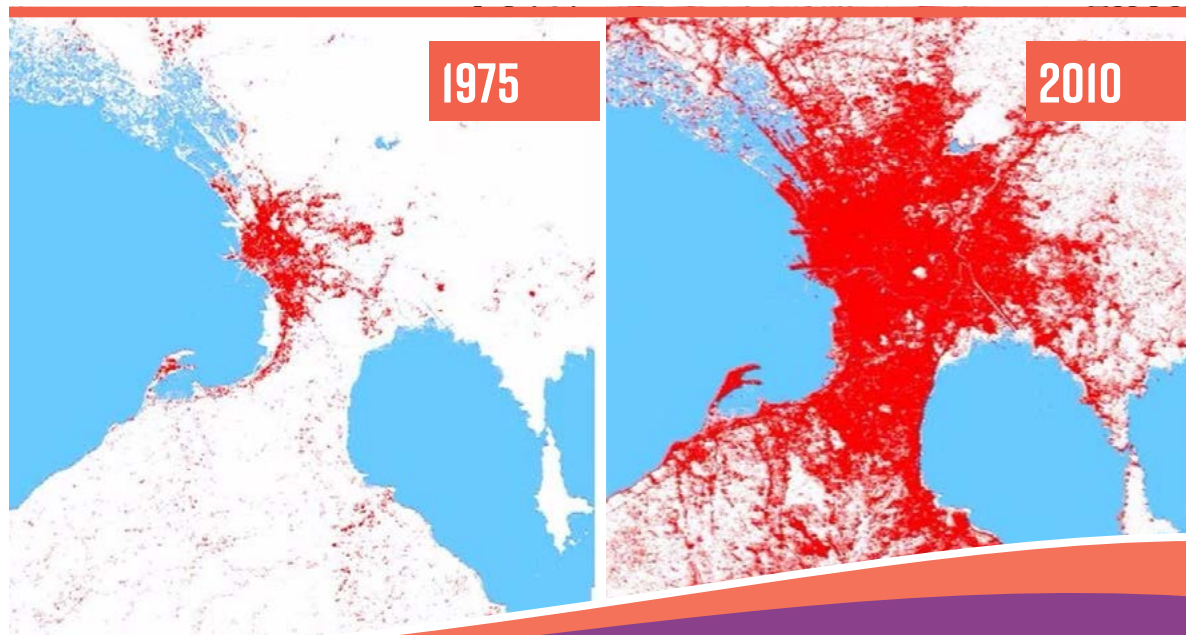
- Governments see enormous potential in using **new geo-referenced data** to optimize the locations of public services and reach those left behind. Towards that end, however, national statistics offices need more skills related to technology, legal systems and the policy dimensions of population data and privacy.

- The **UNFPA Population Data Thematic Fund**, launched at the Summit, will stimulate more investment in geo-referenced population data, particularly as part of conducting censuses. The Digital Earth Africa programme, the GRID3 partnership for geospatial data and similar efforts warrant expansion.

Climate change, adaptation and justice are central concerns of our time. No person, community, town, city, country or region will be spared the impacts of climate change. Populations will be forced to move. Economies and demographic dividends may contract. While climate change affects everyone, it disproportionately affects countries and populations in the global South, as well as vulnerable and marginalized groups, despite their minimal contributions to greenhouse gas emissions.

Globally, the climate crisis dramatizes climate injustice on an entirely new scale. Small island developing states, often having just ascended to the status of middle-income countries, see a future of being swept into the sea. Yet they are told they are too “rich” to qualify for international aid by wealthy countries whose consumption habits have caused climate change.

An urbanizing world poses challenges and opens opportunities for progress: MANILA, PHILIPPINES



Source: German Remote Sensing Data Center and German Aerospace Center.

- **COMPREHENSIVE POLICIES SHOULD UNDERPIN THE RIGHTS OF OLDER PERSONS AND HELP PREPARE FOR AN AGEING WORLD.** Yet global data on older persons are limited, especially where ageing is a recent trend. Poverty, discrimination and violence affecting older persons, especially older women, are seriously understudied.
- More qualitative and quantitative research on older persons is urgently needed to understand how to address their needs, but also how they may be involved in perpetuating harmful norms. Experiments with wide-ranging long-term care options deserve global evaluation to learn key lessons.

Young people made powerful appeals for solutions driven by and for young people, women and girls, indigenous communities and other marginalized populations.

Empowering young people as leaders and active partners on climate change is an issue of justice now – and intergenerational equity over time.

CLIMATE JUSTICE LEAVES NO ONE BEHIND

Speakers from small island developing states repeatedly drew attention to climate justice, leaving no one behind. They live with the daily reality of acute vulnerability to climate change, even as they have contributed relatively little to greenhouse gas emissions. His Excellency Gaston Browne, Prime Minister of Antigua and Barbuda, emphasized that climate justice is a global challenge. His Excellency Paul Adams, Minister of Health of the Seychelles, stressed that climate adaptation includes resilient health systems, empowering women and girls, and scaling up opportunities for youth. Coming from Micronesia, youth activist Yolanda Mori highlighted community adaptation as a process grounded in participation. Indigenous peoples, youth, women, civil society, community-based organizations and grass-roots movements are all critical voices in decision-making. From another perspective, His Excellency Dag-Inge Ulstein, Minister of International Development of Norway, described how forest and land management projects must incorporate gender, women's health and empowerment, and investments in sexual and reproductive health and rights. All of these elements are fundamental to resilience and conservation.

- On the front lines of climate action, **small island developing states** are galvanizing progress on behalf of the most affected regions. They must not be left alone to cope with climate fallout.
- **Young people** are taking on greater leadership on climate change – as is their right. Their involvement is crucial for the success of the Paris climate change agreement and the SDGs.
- **Indigenous peoples** have a role in climate solutions linked to their deep understanding of the natural world.

THEME 4 Ending gender-based violence and harmful practices

GETTING TO ZERO: EVERYONE PLAYS A PART!

The goal is zero. No one in the world should suffer from gender-based violence or harmful practices. Getting to zero by 2030 requires all Governments to enact and implement laws and policies, and provide quality prevention, protection and care services. Grounded foremost in human rights, the measures must aim for transformation. That means eliminating gender inequalities and discriminatory social norms, significantly advancing the empowerment and agency of women and girls, reaching all communities and across societies, and building in accountability and quality assurance.



US scholar Michele Bratcher Goodwin (left), UN High Commissioner for Human Rights Michelle Bachelet (centre) and Yazidi gynaecologist Dr. Nagham Nazwat Hasan stressed transformative strategies to end gender-based violence.

KEY TAKEAWAYS

- No sexual and reproductive rights means no gender equality. **Women must have choice and agency to demand their rights.**
- We must accelerate action on **commitments to stopping gender-based violence and harmful practices – for good.**
- **Top priorities for ALL COUNTRIES:** ending harmful practices such as gender discriminatory sex selection, child and forced marriage, and female genital mutilation.

The Nairobi Summit shone a spotlight on the unequal power dynamics and stigma that drive discrimination and violence against women and girls, and are so often entrenched in laws, policies and social norms

“ We are not just the victims and the beneficiaries. We are the survivors and the change makers, and it is time that we get what we deserve: the right to exist freely and safely in this world.”

—Pooja Singh,

Advocate for adolescents and youth with Pravah in India

Discussions stressed the urgency of acting on root causes, which requires the deepest examination of gender, family, social and cultural constructs; of what happens in homes behind closed doors; and of how gender stereotypes can normalize violence against women and girls. With the rapid growth of technology, it is time as well to better respond to evolving forms of gender-based violence, including online.

Much unfinished business remains in leaving no one behind. Moving forward depends on human rights-based policymaking, where a core principle and practice is the more meaningful participation of diverse communities and marginalized populations. Different approaches can meet the needs of particular countries, but all should uphold the rights and choices of people with disabilities, indigenous women and girls, and other key populations such as the LGBTQI community, which experiences high rates of gender-based violence.

- Investing much more in ending gender-based violence is an economically and morally sound choice. Money stands behind the commitment to eliminate harm and violence. It's a potent indicator of government accountability.

- Creating environments safe for girls and women depends on eliminating discriminatory gender norms. It calls for closer engagement with men and boys towards thinking and behaving in new ways.

- Stigmas and taboos must be challenged and broken down, wherever they manifest, including in attitudes, laws, policies and institutions. **Let's provide respectful and quality health care and other services for ALL!**

- To end gender-based violence, countries need the right laws. But faster progress calls for broad buy-in, including among influential religious and community leaders, from the local level on up.

Human rights defenders, leaders of social and feminist movements, grass-root activists, and members of community-led organizations and youth networks can all be powerful agents of change. They can reach well beyond their communities and networks, including in contesting imbalances in power and rights. Mobilizing new young leaders should be central to realizing the promises that have been made, with a systematic emphasis on young women and girls.

Despite global agreement that gender-based violence is a human rights violation, a chasm remains between rhetoric and reality. Too few financial and human resources are invested in getting to zero. Gender-based violence needs to be seen and stopped in all its forms, whether as economic violence, partner violence, domestic violence, child marriage, female genital mutilation, gender-biased sex selection, denial of access to education or work, or the denial of rights and choices.

“I commit to provide the leadership necessary to ensure that female genital mutilation ends within this generation.”

—Uhuru Kenyatta,
President of the Republic of Kenya

There are many solid examples of countries dramatically reducing child marriage and female genital mutilation. Compelling narratives made it clear that urgent action is still needed, however, combined with increased funding, including from domestic resources. Governments everywhere have the responsibility to ensure that no woman or girl is subject to harm.

Building investment cases can draw on evidence of what works and the perspectives

- **Persons with disabilities are agents of change, making a difference everywhere** so that everyone can live free of violence and discrimination.
- **Laws must guarantee equal rights for LGBTQI people. Health services must meet their needs.** Information and education on sexual and reproductive health must include diverse gender identities and sexual orientation, diversity and the protection of rights.

- **Discrimination in health care translates into widespread abuse of indigenous peoples.** We must better educate the public about cultural diversity, provide culturally accessible and quality health services and information for indigenous peoples, and respect their traditional knowledge and culture.

“The violation of our bodies might heal, but psychological damage is harder to repair. This is how patriarchy uses violence against women to keep women trapped in inequality.”

—Aya Chebbi,
African Union Youth Envoy

of diverse communities. They must span the national to the local level, and cover economic, social, cultural and political dimensions. Since gender-based violence and harmful practices have significant impacts on economic development and hinder achievement of the SDGs, the Decade of Action provides the political space to act boldly and decisively. Further momentum comes from the 25th anniversary of the 1995 Fourth World Conference on Women in 2020. Achieving gender equality will be fundamental, because without that, the toll of violence against women and girls will never end.

Participants stressed that the road from Nairobi leads to the 25th anniversary of the Fourth World Conference on Women.



- We need to better see the problems and monitor progress. That means more disaggregated and reliable data, especially on **marginalized communities invisible in current data and research.**
- Scaled-up support should go towards further **empowering grass-roots actors on the front lines** of stopping gender-based violence and harmful practices.
- Let's not talk about young people. Let young people do the talking! They should have leading roles in **changing the culture of relationships**, providing behavioural education for children, and assessing their own needs.

THEME 5 Upholding the right to sexual and reproductive health care even in humanitarian and fragile contexts

PEACE AND HUMANITARIAN ACTION: PUT WOMEN, GIRLS AND YOUNG PEOPLE AT THE CENTRE!

Today, more than 2 billion people live in countries affected by conflict, violence and fragility. Only by meeting their needs can the world realize the ICPD promise of universal rights to sexual and reproductive health care and an end to gender-based violence, along with commitments to women and youth made in Security Council resolutions 1325 and 2250.

Of 143 million people requiring humanitarian assistance in 2019, more than one in four were women and adolescent girls of reproductive age.



A youth leader from the Dadaab Refugee Complex highlighted the power of young people in promoting positive change in countries affected by crisis.

KEY TAKEAWAYS

- Uphold **sexual and reproductive health and rights** in conflict situations, **backed by the increased allocation of resources**. Apply a gender lens to all programmes!
- Crisis should not interrupt the **continuum of care**. In armed conflicts, preserving the health system, including to provide sexual and reproductive health care, should be a priority.
- More can be done to deploy **mobile services** to reach vulnerable women and girls in remote areas. There should be a focus on community health care, not just hospitals, to provide sexual and reproductive health services.
- More **crisis preparedness** should include pre-positioning more reproductive health kits. Pre-crisis training on humanitarian tools and coordination mechanisms is critical.



@MavicCBalleza: We spoke about reproductive health in peacebuilding at the resolution 1325 anniversary in New York and spoke about it again at #NairobiSummit. We'll speak again and again until there's sustainable peace! Until there's no more sexual violence in conflict at any time.

—Victoria “Mavic” Cabrera Balleza,

Founder and CEO of the Global Network of Women Peacebuilders

Yet sexual and reproductive health services are often overlooked and underfunded in emergencies. The shortfall continues despite some tremendous successes in delivering high-quality sexual and reproductive health services to populations in the most difficult environments.

Much more can be done with the right planning, coordination and funding. Participants called for a feminist approach to humanitarian action as well as more attention to adolescent sexual and reproductive health, and specific support to menstrual hygiene through education and sanitary towel distribution. Community engagement can empower women and girls, and change social norms by working with men and boys. Compelling stories highlighted vulnerability to gender-based violence in conflicts and natural disasters, and the horrors of sexual abuse,

which occurs with impunity around the world. Activists working on the ground stressed commitments to protecting the safety and rights of all women and girls, including those who are hard to reach and most vulnerable.

Life-saving interventions during humanitarian crises must be linked to longer term development actions to advance human rights, reduce risk, strengthen preparedness and build resilience. This can build on strengthening national systems, including for health care and supply chains. Local systems and solutions are especially important.

All discussions took up the centrality of solutions driven by women and girls, young people and marginalized populations. They bear enormous burdens in humanitarian and fragile contexts, whether these arise from conflict, violence, fragility, climate change and environmental degradation or a combination of factors.

- Integrate essential services to prevent and respond to **gender-based violence** within sexual and reproductive health care. Services should be inclusive and comprehensive, linking legal, psychological, medical and educational assistance, and responding to needs for electricity, sanitation, food security and so on.
- Preventing **sexual exploitation** and abuse and ensuring access to justice where it does occur should be a top priority.

- Bring **more women into peace talks and peacebuilding** – from all population groups and from the beginning! Peacebuilding should involve not only the antagonists in a conflict, but all members of the society.
- Establishing **safe spaces for girls and women** caught in crisis gives them space to talk freely and participate in designing programmes based on their needs. Programmes should ensure that women and girls find safety and can avoid harmful coping mechanisms.

Climate change, for instance, puts huge stress on ecosystems, food production, soil and coastlines, where women, especially in marginalized communities, typically have fewer resources to cope. It will be crucial for responses, such as forest and land management projects, to incorporate gender, women's health and empowerment, and sexual and reproductive health, and aim at both resilience and sustainability. Increasingly, young people are leading climate action, urging significant investment in adaptation and resilience. Their calls for community leadership, youth empowerment and opportunities for political action deserve more attention and investment.

Women and girls can play essential parts in negotiating peace agreements and sustaining peace. Yet they remain on the margins, denied their right to lead and participate. Women who have been included and excluded in peace processes shared compelling stories about the subsequent impact on prospects for peace. They galvanized renewed commitments to bringing many more

women into negotiating ceasefires, preventing conflicts, participating in peace processes and building sustainable futures. "No women, no peace" was reiterated as the rallying cry. Similarly, the active participation of youth underpins social cohesion as well as long-term development, peace and security.

Conflict, violence and disasters have devastating effects on people's bodies and also their minds, underscoring the essential requirement for mental health and psychosocial support to be integral to humanitarian responses.

How does an adolescent girl recover from rape and childbirth in conflict settings, for example? Participants discussed barriers to mental health and psychosocial interventions in emergencies, and the most promising solutions. They stressed how these services can uphold human rights and justice, and pave the way for others to help people cope and restore a sense of normalcy in their lives.

- Young people need to be fully involved as agents of change in humanitarian situations. Comprehensive sexuality education should be integral to humanitarian action, as it equips young people with knowledge and the skills to make informed decisions. **Engaging youth in peace processes fosters social cohesion and longer term prospects to restore stability and return to development.**

- **Mental health and psychosocial support** in crisis are major but underrecognized issues. It is time to prioritize, scale up and sustain related interventions. This requires sufficient resources, skills, services and capacities. Interventions must be tailored to local communities and engage young people, women, people living with disabilities and other marginalized populations.
- More should be done to roll out capacity development programmes on mental health and psychosocial support for people on the front lines of humanitarian action, and to collect more evidence on effective responses.

III: Committed to Change, Accountable for Progress

The Nairobi Summit had an overarching vision: inspire action that makes a difference. Get people from all walks of life to come with a concrete plan to accelerate progress and fulfil ICPD promises. And then call on them to stand up and announce their commitments for all the world to hear. It's about change and accountability, about finishing the unfinished agenda, about getting to zero!

Before people came to the Summit, they were invited to post commitments on a dedicated website (nairobisummiticpd.org/commitments). Some 1,253 commitments were uploaded before and during the Summit. Aligned with the 12 global commitments of the Nairobi Statement, all were expected to match a big dream with a well-defined plan to power real and lasting progress.

The Summit could have been just another global event: lots of interesting discussions, new insights, new energy, good intentions, but in the end, little accountability. It was the commitments that dramatically raised the Summit's level of meaning and relevance, even more so because they were made on a voluntary basis. People chose to come and

chose to commit, achieving a heightened ownership and legitimacy that will last for years to come.



Over three days, participants listened intently to 247 commitment statements, the basis for actionable changes worldwide.



Global leaders from around the world and across the United Nations opened the commitments session and pledged the specific steps they would take to finish unfinished business.

THE COMMITMENTS SESSION: THE POLITICAL HEART OF THE SUMMIT

The political heart of the Summit was the commitments session. In a vibrant atmosphere of hope and change, and addressing over 4,500 participants with standing room only, the co-convenors invited global leaders to announce their commitments. Below are excerpts from these commitments to frame the Summit's high ambition towards the attainment of the ICPD Plan of Action.

His Excellency Uhuru Kenyatta, President, Republic of Kenya: *Increased budgetary allocations and integration of population issues into all national and subnational policies, increase in HIV and social protection allocations, elimination of female genital mutilation in Kenya by 2022 and all forms of gender-based violence and harmful practices by 2030.*

His Excellency Rasmus Prehn, Minister for Development Cooperation, Denmark: *International and national actions to increase funding levels in service delivery, accountability measurement of the Nairobi Summit commitments, nationwide counselling for youth victims of dating violence.*

Her Excellency Amina Mohammed, Deputy Secretary-General, United Nations: *Support to national governments, alignment and coordination of UN teams and UN reform processes, data gathering and dissemination, Nairobi Summit commitment fulfilment as critical contribution to the SDGs and integral part of the Decade of Action.*

Dr. Natalia Kanem, Executive Director, United Nations Population Fund: *Lead on three zeros globally, and remain custodians of ICPD especially for all marginalized populations, in development and humanitarian contexts, provision of reproductive health commodities, mobilize diversified funding to meet the financial gap.*

His Excellency Yoweri Kaguta Museveni, President, Republic of Uganda: *Eliminating obstacles that stand in the way of women's and girls' empowerment including teenage pregnancy, child marriage, and all forms of gender-based violence, and introducing sexuality education in schools.*

His Excellency Danny Faure, President, Republic of Seychelles: *Ensuring that 10 per cent of the State budget goes to universal health coverage, including sexual and reproductive health.*

His Excellency Mohamed Abdullahi Mohamed, President, Federal Republic of Somalia: *Supporting women and girls, ensuring public services, justice, equality and societal engagement with policy makers. No nation can succeed with half of its population marginalized!*

His Excellency Gaston Brown, Prime Minister, Antigua and Barbuda: *Ensuring full access to all adolescents, youth and girls, and continued progress in preventing mother-to-child transmission of HIV, introducing legislative and legal protection frameworks on gender-based violence, and passing new gender equality legislation including necessary domestic resources.*

Her Excellency Epsy Campbell Barr, First Vice-President, Republic of Costa Rica: *Providing protection of the rights of the more than 2 million people of African descent in South America and the Caribbean, making visible the intersectionality and vulnerabilities affecting them and overcoming structural obstacles and discrimination.*

Her Excellency Jewel Ciane Howard-Taylor, Vice-President, Republic of Liberia: *Contraceptive access by 2030 and attainment of the 12 global commitments of the Nairobi Statement.*

Her Excellency Dr. Hala Mostafa Elsaïd Zayed, Minister of Health and Population, Arab Republic of Egypt: *Given that Egypt hosted and co-convened the ICPD 1994, and given its regional and multilateral role, Egypt is keen to help face the complex elements of population issues and garner political will to implement the Programme of Action!*

Her Royal Highness Princess Angelika Latūfuipeka Halaevalu Mata'aho Napua-okalani Tuku'aho, Kingdom of Tonga: *Ensuring universal availability of quality, affordable and safe modern contraceptives by no later than 2030 and in this time of climate change, integrating sexual and reproductive health services and gender-based violence programmes during disaster responses.*





Her Excellency
Epsy Campbell Barr,
First Vice-President
of Costa Rica.

Following these remarkable initial statements of national and global import, all stakeholders were invited to the dedicated commitment session that ran for three days, non-stop.

Some 145 Governments stepped up to make commitments, as did a mix of 102 civil society organizations, private sector companies, parliamentarians, youth groups, speakers representing indigenous peoples and people with disabilities, faith-based

organizations, academia and regional organizations. The overcrowded room boasted a completely filled schedule of three-minute interventions.

The commitments session unfolded in line with the inclusive spirit of the Summit. Presentations from high-level government officials and ministers were liberally mixed with those from civil society representatives, business people and more, giving everyone equal prominence. The format broke down barriers and recognized that the ICPD agenda belongs to everyone, benefits everyone and requires everyone to do their part. The commitment session closed at the end of day three with 1,253 documented commitments, far beyond the already high ambition of the Summit co-convenors.

EXCERPTS FROM PARTNER STATEMENTS DURING THE THREE-DAY COMMITMENT SESSION

URUGUAY: We must ensure no one is left behind, no one is left out of human rights-based society, that no one can own the bodies of others, nor can love be made illegal in any form.

NEPAL commits to reducing maternal deaths to 70 per 100,000 live births and reducing maternal morbidity through integrating comprehensive sexual and reproductive health services as part of the universal health coverage basic health package, ensuring that

the proportion of births attended by skilled birth attendant increases to 90 percent by 2030, and the provision of legal abortion and post-abortion services that are safe, accessible, affordable and good quality. The basic health package will be provided free-of charge and other services beyond the basic health package will be offered at an affordable cost through targeted subsidies and various social protection and health insurance schemes for vulnerable populations.

Summit commitments are transformative, as they will galvanize global, national and local actions towards specific, time-bound financial, legislative, public and corporate results.

Commitments inspired close attention because they were all made voluntarily, and by people from all regions and walks of life, reflecting how everyone has a role in achieving the ICPD agenda.



The YouthNow! commitment combined inputs from 39 civil society organizations and youth networks from across Latin America and the Caribbean.

SOUTH AFRICA: The right to bodily integrity is at the centre of the protection of human dignity and thereby places a positive duty on the new democratic government of South Africa to put in place progressive population and development policies and laws.

“What was impressive for me to witness during the three days of the Summit was the high number of young people whose participation was supported through the scholarship programme. Moreover, the diversity of the young people who marched to Nairobi to be part of the historic moment is something one should always remember: youth with disabilities, LGBTQI, indigenous youth from all corners of the globe. That was one of the most diverse youth participation I have witnessed.”

—Jayathma Wickramanayake,
UN Special Envoy on Youth

BURKINA FASO: The goal is to provide free access to modern contraceptive methods across the national territory in public and private health care facilities by 2022.

Y-PEER MOLDOVA commits to reach 10,000 young people annually with peer-to-peer comprehensive and age-appropriate education on sexual and reproductive health and rights using alternative methods of education (such as theatre-based techniques, role games, simulations, etc.) with the purpose to increase their capacity in tackling informed decisions and having safe behaviours.

SAVE THE CHILDREN will uphold the right to universal sexual and reproductive health care in humanitarian and fragile contexts by reaching 1,000,000 new contraceptive users in these settings by 2030 – 30% of whom are adolescents and youth (10-24 years) – targeting the most vulnerable and marginalized.



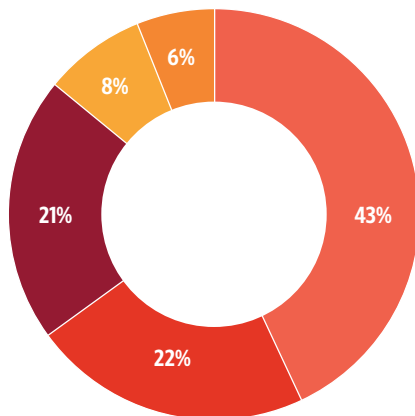
The Merck For Mothers Initiative presented a commitment statement.

During the Summit, the Governments of Austria, Canada, Denmark, Finland, France, Germany, Iceland, Italy, the Netherlands, Norway, Sweden and the United Kingdom, together with the European Commission, committed around \$1 billion in new money to support finishing the unfinished business.

The involvement of businesses, academia, civil society, foundations and others was

crucial, leading to one of the largest financial investments – totalling \$8 billion – ever announced to advance the ICPD agenda. Sportspeople, fashion designers and supermodels unveiled new and innovative initiatives, signalling the commitment of multibillion-dollar industries with the power to change how we think and talk about women’s health, menstrual hygiene, sexuality and sex education.

COMMITMENTS BY THE ISSUES



ACHIEVE SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS AS PART OF UNIVERSAL HEALTH COVERAGE

RESPOND TO DEMOGRAPHIC DIVERSITY

END GENDER-BASED VIOLENCE AND HARMFUL PRACTICES

UPHOLD SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS IN HUMANITARIAN AND FRAGILE CONTEXTS

MOBILIZE MORE FINANCIAL RESOURCES

IV: A Voice for Everyone

The Nairobi Summit was a moment of transition from those who have steered the ICPD Programme of Action for 25 years to those who will lead the way forward to 2030, through the SDG Decade of Action and the full realization of ICPD promises.

At every opportunity, the Summit celebrated ICPD champions and young people, marginalized communities and visionary leaders active on all elements of the agenda. The global movement for sexual and reproductive health and rights became richer and more diverse, with strong engagement from Governments, young people, women's organizations, businesses, royalty, refugees, grass-roots organizations, sports personalities, faith-based organizations, LGBTQI communities and the United Nations family. In joining the call to achieve rights and choices for all, they made commitments, presented

innovative programmes, listened, discussed and debated. They were thrilled by stories of hope and achievement, and saddened by stories of those suffering in silence.

Over 8,300 people from 172 countries and territories participated, debated and celebrated at the Summit.



Special Olympics athlete Kester Eduards demonstrated inclusively-designed trainers, one of many ways to encourage everyone to participate in sports.



Every aspect of the Summit promoted the rights of persons with differing abilities, leading some to commend it as the most inclusive meeting of its kind.

“Women’s and girls’ right to the health care they need and their **right to bodily integrity is non-negotiable.** We cannot talk about investments and services without making sure that human rights principles are directing them”.

—Gabriella Cuevas Baron,
President of the Inter-Parliamentary Union

PARLIAMENTARIANS

Over 200 parliamentarians from more than 100 countries came to the Summit from across the political spectrum. Their common commitment: advance the health and rights of women and girls everywhere.

Parliamentarians emphasized that health and rights transcend political differences.





Her Excellency the First Lady of Kenya, Margaret Kenyatta, delivered the keynote speech at the When Women Lead session.

WHEN WOMEN LEAD

A women-only high-level dialogue offered a rich mosaic of royalty, first ladies, ministers, parliamentarians, women of African descent, indigenous women, young women leaders, feminists and activists, women leaders from the private sector, supermodels, academics and advocates. Her Excellency Margaret Kenyatta, First Lady of Kenya, delivered the keynote speech.

She urged all women “to stand together to pledge to fulfil the ICPD commitments on maternal deaths by 2030, and to build sustainable solutions for an inclusive and more equal world”.

“Over the last seven years, I have learned that change requires more than collective and capable minds. It requires boldness, innovation, a spirit of humility and the capacity to critically question the status quo – to move beyond business as usual and to dare to do things differently.”

—Her Excellency Margaret Kenyatta
First Lady of Kenya



The “Fabric of Being” textile exhibition showcased renowned artists and designers from Africa and Asia, presenting textile artwork from handmade batik and indigo, to crochet and khangas.

ARTISTS AND FABRICS

In vibrant colours and striking designs, the “Fabric of Being: Textiles, gender equality and the empowerment of women” exhibit told the story of how textiles define the lives of people – and women, in particular – as they move through the life cycle, negotiating sexuality, fertility, reproduction, relationships, childbirth, health, illness and inevitably death.

THE PAMOJA ZONE

The Pamoja Zone provided an exciting, interactive space to explore new perspectives and experiences. Participants included the more than 1,000 young people and members of small communities who attended the Summit through UNFPA scholarships. They brought to the table a true grass-roots spirit and base of evidence.

Participants praised the Pamoja Zone for enabling interaction and a smooth flow of dialogue, and being a safe space, without judgment or restraint. Speakers shared opinions, experiences and ideas without hesitation.

More than 84 “lightning talks” (rapid 15 to 30 minute sessions) and 19 community conversations featured speakers from 78 countries. They covered topics including accelerating sexual and reproductive health and rights, humanitarian action, youth peace and security, population and data, and innovative community approaches. “Meet the Leaders” sessions became platforms for conversations between ICPD leaders and Summit participants, involving Her Royal Highness Crown Princess Mary of Denmark, the UNFPA Executive Director, two senators from Ireland, the African Union’s Youth Envoy and the UN Secretary-General’s Youth Envoy.

Youth and grass-roots activists offered community-driven solutions to inspire the broader ICPD community. They showcased how they carve out spaces to talk about sex,

sexuality and gender, including by involving traditional leaders, religious organizations, and men and boys. Gender equality and gender diversity were themes emerging strongly from many discussions where participants deconstructed social norms and patriarchal values.

Comprehensive sexuality education was also a hot topic, with debate on how to integrate it into the school curriculum, and strengthen the ability of teachers and service providers to deliver it. Frank discussions broke out around issues often seen as sensitive or taboo, such as access to safe abortion, menstrual health management, and sexuality for people living with disabilities.

Conversations flowed freely in the Pamoja Zone, a dedicated space for sharing and identifying steps to accelerate ICPD implementation on the ground. All ideas were welcome, heard without restraint.



There was much talk about the role of new technologies in igniting more open discussions around sex, sexuality, relationships and gender. Speakers showcased cutting-edge data innovations, and touched on the need to both protect privacy and fully include marginalized populations. Vibrant exchanges took place around geo-localization technologies to better target development investments, and explored how the integration of different data sets such as geo-located censuses, household surveys and satellite imagery can reveal subnational inequalities and locate those usually missed in data collection.

As part of the Pamoja Zone, the Human Library hosted more than 30 speakers with various backgrounds and expertise, inspiring participants and creating new connections in a more informal setting. Among them were actors and artists fighting for gender equality, LGBTQI inclusion and access to comprehensive sexuality education;

youth leaders championing environmental innovations and promoting the rights of refugees; and researchers pioneering new methods to track progress on ICPD commitments.



The Pamoja Zone featured 84 lightning talks and 19 community conversations, with speakers from 78 countries. The majority were below age 35.



SAFE SPACE FOR ALL

To make the Summit a safe space for all, participants were required to adhere to the Code of Conduct to Prevent Harassment, including Sexual Harassment. A team of 30 designated "safe-persons" and a streamlined incident reporting system ensured comprehensive safeguarding. The Kenyatta International Convention Centre became United Nations international territory for the duration of the Summit, and was under the protection of the United Nations Department of Safety and Security with support from national and local authorities.

THE FAMILY OF WOMEN FILM FESTIVAL

The Family of Women Film Festival featured 11 feature and short-form documentaries and dramatic films on ICPD themes, as well as interactive discussions with award-winning film makers, artists and musicians. A highlight was *A Girl from Mogadishu* (Somalia), a full-length dramatic feature telling the extraordinary life story of advocate against female genital mutilation Ifrah Ahmed and Irish director Mary McGuckian. The film has gone on to win several film awards.

Ahmed told the audience, “*A Girl from Mogadishu* is based on my story – but it is also the story of the 200 million women and girls worldwide who have suffered the consequences of female genital mutilation. And while the movie is intended to focus attention on the barbarity and scale of the practice, its ambition is also to empower all young women and girls to have the courage to stand up and speak out!”

Also featured were other compelling stories including *The Eagle Huntress* (Mongolia), *Standing On Their Shoulders* (South Africa), *Pili* (Tanzania), the Academy Award-winning *Saving Face* (Pakistan) and *The Cave* (Syria). The films were interspersed with interactive sessions featuring emerging artists, and storytellers, poets and visual artists.



A scene from the award-winning *The Girl from Mogadishu*, which drew attention to the scourge of female genital mutilation.

AWARDS NIGHT

An awards ceremony and reception, hosted by UNFPA, celebrated outstanding contributions to advancing the ICPD agenda and achieving rights and choices for all. Her Majesty, Gyalum Sangay Choden Wangchuck, Queen Mother of Bhutan (left) looks on as Dr. Natalia Kanem, Executive Director of UNFPA (centre), recognizes Rebeca Gyumi, Executive Director of the Msichana Initiative.



V: A Global Call to Action

The Nairobi Summit on ICPD25: Accelerating the Promise closed as it began – with renewed dedication and drive! There was tremendous energy after three days of discussions and debates, consensus, commitments, new friendships, strengthened networks, and a shared feeling of success and purpose.

At the closing ceremony, there was no doubt that the three objectives set out at the beginning of the ICPD25 process had been fully met. In fact, the Summit, and the process leading up to it, exceeded all expectations. No one could have fully imagined all the people reached and engaged, the diversity of stakeholders involved, the commitments made, the political and financial buy-in achieved, and the new avenues to realize

ICPD promises explored. It was a more than befitting way to start the UN Decade of Action to achieve the SDGs.

The Summit demonstrated as never before that the three zeros have now been universally embraced as key vehicles to achieve the promise of the ICPD. Diverse actors can come to a common table with a common vision – to debate, resolve, and promote sexual

KEY SUMMIT TAKEAWAYS

- **The three zeros** of ending maternal death, unmet need for family planning, and gender-based violence and harmful practices **are cornerstones for achieving the 2030 Agenda for Sustainable Development.**
- Universal access to **sexual and reproductive health** is an essential part of **universal health coverage** and the achievement of the SDGs.
- We know the **price tag** to reach the three zeros, and that, **if no action is taken, the costs will be incalculably greater, in financial and human terms.**

“I have been to many conferences, and if attendance is any measure of success, this conference is in its own class! This is the only conference I have attended where there are more people at the closing ceremony than at the opening ceremony!”

—His Excellency Dr. William Samoei Ruto,
Deputy President of the Republic of Kenya



and reproductive rights and health across populations and cultures. It is possible to get voluntary commitments that are truly owned, achievable and attainable. An international plan of action is implementable through public and private voluntary global, national, local and individual actionable commitments.

It was also clear that an intergenerational transition had begun. Young people are empowered and ready for change, from rural villages to global conference tables. By coming in such large numbers, from every corner of the world, and infusing dialogues and debates with their wisdom and energy, they demonstrated that they are more than

prepared to carry the torch to 2030. Further, as we look to the coming decade, sexual and reproductive health and rights must be at the forefront of the SDGs. With Summit sessions addressing all 17 of the global goals, different participants repeatedly observed that there are no SDGs without the ICPD.

As a special tribute to rights and choices for all, celebrated Moroccan artist Ahmed Chawki composed and performed his new song on the ICDP at the close of the Summit. He was a smash hit and had people out of their seats, dancing. He charmed the audience with his personal story of triumph, thanking his single mother for being strong and supporting him.

- Ending gender-based violence and harmful practices is **imperative, possible and urgent.**

- Investing in human capital and drawing on **demographic diversity will drive economic growth** and achieve sustainable development, and is key to ensure economic, social and environmental justice.

- Upholding rights to sexual and reproductive health care even in humanitarian and fragile contexts remains a priority, and is **a pathway to peace and development.**
- To enact the ICPD agenda we need to **transform our societies.**

Afropop superstar Yemi Alade of Nigeria, known as the “woman of steel”, also took to the stage. Her message: “An investment in women and girls is an investment in a nation.”

The three co-convenors, the Governments of Denmark and Kenya as well as UNFPA, closed the Summit by urging an elated audience to meet their commitments, take forward concrete actions and deliver fully on the promise of the ICPD.

Karen Ellemann, Member of Parliament for the Liberal Party of Denmark, and Chairwoman of the All-party Parliamentary Group on Sexual and Reproductive Rights, said, “The Nairobi Summit has made it clear that an overwhelming majority of countries want to accelerate the promise of Cairo; that an overwhelming majority of stakeholders want to partner in this effort to make the ICPD Programme of Action a reality for all.”



Afropop superstar Yemi Alade brought down the house in a surprise performance. She rallied the crowd, leading chants of “ICPD, ICPD, ICPD”.



The celebrated Moroccan singer and songwriter Chawki inspired hope and solidarity with his original composition “Together we Rise”.

- **Women leaders are transforming the status quo, and protecting and advancing hard-won rights;** men and boys need to be engaged too.
- Political and community leadership are needed to address inequalities in sexual and reproductive health and rights, **make the “invisible”, visible, and end stigma and discrimination.**
- Meaningful **youth engagement and leadership** maximizes everyone’s potential, and leads to prosperity and peace.
- Innovation, technology, creativity, data and voice will **amplify results and scale up** progress to meet the promise of Cairo.
- **Partnerships have been strengthened and movements expanded** with Governments, regional bodies, international organizations, civil society, community-based organizations from marginalized groups and people with disabilities, the private sector, academia, philanthropists, activists, celebrities and artists.

WE ARE READY TO ACCELERATE THE PROMISE!

Participants from Governments, civil society, academia, the private sector, youth groups, humanitarian actors and the United Nations shared heartfelt reflections on the Summit.

“Greater investment in health and secondary education for women and girls could go a long way towards the critical goals of ending preventable maternal deaths, unmet need for family planning, and gender-based violence.”

—Christopher Murray,
Institute for Health Metrics
and Evaluation

“Thank you for the decision not to leave girls like me behind. We are the generation born after Cairo, and we are ready to accelerate the promise. The Summit has affirmed my faith in the power of nations to embrace the fullness of human life beyond number.”

—Priscilla Nyamal,
Refugee from South Sudan
and member of the Kakuma
Youth Parliament, Kakuma
Refugee Camp, Kenya

“Sexual and reproductive health and rights is a win-win concept... If you want to address these issues successfully you need to engage faith communities... Challenge false theologies, lift up research that shows the effectiveness of gender justice work, and lift up good examples, both from governance and grass-roots level, empower women in leadership, and last but not least, provide safe and brave spaces for difficult conversations and keep those conversations going.”

—Dr. Antje Jackelen,
Archbishop of the Church
of Sweden

“The highlight of this Summit is the commitment of my President that other girls and I who are worried about their education can access it without any worries. And that we are protected from harmful practices such as [female genital mutilation] and early marriage. As a matter of fact I will be 39 years old when the next ICPD50 will be held and I will work hard to accelerate the promise. I will also urge the stakeholders in this room to invest in sports and safe spaces for girls like me from challenging backgrounds.”

—Stacey Akinyi,
14-year-old Ambassador
at Polycom of Sports, Kibera
Slums, Kenya

In sharing final reflections, Stacey Akinyi welcomed the commitment of her President. Behind her (left to right) are Priscilla Nyamal; Dr. Antje Jackelen; Her Excellency Lindiwe Zulu, Minister of South Africa; Dr. Sheikh Hassan Kinyua Omari; Chris Murray; Lantonirina Rakotomalala; Naisola Likimani and Haifa Sdiri.



FROM COMMITMENTS TO ACTION

The Nairobi Summit had high ambitions. Nothing less will do as the world embarks on the Decade of Action to achieve the SDGs by 2030. Much work lies ahead to realize sexual and reproductive health and rights. We must close the financing gap. We must end inequalities. In its call to transform rhetoric into actionable commitments, the Nairobi Summit has already resulted in 1,253 steps forward through its voluntary commitments to action.

It is an extraordinary moment of hope and momentum, one that must be seized and sustained. Everyone must take part in, and be accountable for, accelerating the promise.

Individuals can step forward to know and claim their rights and choices, while doing everything they can to protect the rights and choices of others.

Communities and local groups can support the diverse groups committed to realizing the ICPD agenda through continued intersectoral and intergenerational dialogue and action at all levels, recognizing the centrality of young people as new leaders.

Nations must be accountable to their citizens and to other nations by providing sufficient domestic and international resources, aiming public policy at the three zeros, legislating in line with human rights and sharing lessons to accelerate progress.

Regions can work across borders to encourage solidarity and consensus in achieving the ICPD agenda in its entirety.

Private sector partners should be fully aligned with the ICPD agenda and the SDGs through their actions, products, messaging, practices and investments.

THREE CRITICAL ACTIONS

Of the many actions that will follow the Nairobi Summit, three are critical overall to keep progress on track. The first is to cost and implement the Summit commitments. The second is to encourage Governments and partners to voluntarily report on their achievements, including through the Voluntary National Reviews as the main monitoring tool for the SDGs, and the Universal Periodic Review under the UN Human Rights Council. The third entails multiple stakeholders monitoring the 12 global commitments in the Nairobi Statement. A high-level commission will be established to provide follow-up oversight.

Our collective actions will take us to zero, ensuring rights and choices for girls and women, boys and men, everyone, everywhere. We will keep our promises.

**“WE KEEP MOVING FORWARD.
We will NEVER RETREAT.
We are in a race *to the finish
line*, AND WE SHALL PREVAIL.”**

—Dr. Natalia Kanem,
Executive Director, UNFPA



Annex 1: Nairobi Statement on ICPD25: Accelerating the Promise

This is the final version of the Nairobi Statement, formulated after six months of global consultations led by the International Steering Committee on ICPD25, with hundreds of organizations and thousands of people involved. The Nairobi Statement provides a global framework for the formulation of government and partner commitments. Since it is non-binding, countries and other stakeholders may choose to support the Nairobi Statement in its entirety, in part, or not at all. In no way does supporting the Nairobi Statement infringe upon national sovereignty.

Introduction

Twenty-five years ago, in 1994, 179 countries adopted a landmark Programme of Action during the International Conference on Population and Development (ICPD), held in Cairo, Egypt. The ICPD Programme of Action transformed the way in which the linkages between population, poverty reduction and sustainable development were addressed – by putting the rights, needs and aspirations of individual human beings at the centre of sustainable development. The 179 countries promised to strive for achieving universal access to sexual and reproductive health, for all, by no later than 2015; to achieve infant mortality rates below 35 per 1,000 live births and under-5 mortality rates below 45 per 1,000 live births by 2015; and a 75 per cent reduction of the maternal mortality rate by 2015.ⁱ In 2010, the UN General Assembly extended this promise beyond the 20-year timeframe given in the ICPD Programme of Action in order to “fully meet its goals and objectives”.ⁱⁱ In 2014, the UN Commission on Population and Development took note of the outcome documents of the regional conferences on population and development, stating that each outcome provided region-specific guidance on population and development beyond 2014 for each region that adopted the particular outcome document.ⁱⁱⁱ In 2015, the international community also reaffirmed the commitment

of putting “people, planet and prosperity” at the centre of sustainable development and leaving no one behind, when it adopted the 2030 Agenda for Sustainable Development and the Sustainable Development Goals (SDGs). And, on 1 April 2019, UN Member States adopted a Declaration during the 52nd session of the UN Commission on Population and Development that reaffirmed the importance of the ICPD Programme of Action for guiding population and development policies and programmes, within the context of the 2030 Agenda for Sustainable Development, and pledged to undertake further actions to ensure its “full, effective and accelerated implementation”.^{iv}

The future of sustainable development is directly linked to fulfilling the aspirations of adolescents and youth. Empowering the world’s 1.8 billion young people and unleashing their full potential to contribute to economic and social progress will be instrumental for bringing the vision and the promise of the ICPD Programme of Action and of the 2030 Agenda for Sustainable Development to life.

Moreover, the achievement of sustainable, just and inclusive development must be based on actions that meet the needs and aspirations of all. Consequently, governments

that embraced the ICPD Programme of Action 25 years ago, and reaffirmed it in subsequent intergovernmental fora and reviews, should continue to invest in its full and accelerated implementation, and support concrete actions to that effect, within the overall context of the 2030 Agenda for Sustainable Development.

Furthermore, to fulfil the unfinished business of the ICPD Programme of Action and enable the guarantee and respect for human rights everywhere around the world, strengthening civil society organizations and movements who have defended it and worked for its implementation is necessary and crucial. This means that those organizations, movements, institutions and individuals must be able to work freely in a safe environment, including through the active protection of sexual and reproductive health and rights^v and human rights defenders.

The way forward


We, representing all nations and peoples, and all segments of our societies,^{vi} meet at the Nairobi Summit on ICPD25, from 12 to 14 November 2019, in Kenya, to present our own ambitious commitments with concrete and innovative actions that will accelerate the implementation of the ICPD Programme of Action, leaving no one behind, ensuring rights and choices for all.

Despite remarkable progress over the past 25 years, the promise of the ICPD Programme of Action remains a distant reality for millions of people across the world. Universal access to the full range of sexual and reproductive health information, education and services, as defined in the ICPD Programme of Action and the Key

Actions for the Further Implementation of the Programme of Action of the ICPD,^{vii} has not been achieved. We acknowledge that unless we complete the unfinished business of the ICPD Programme of Action and realize the strong and evidence-based investment case for ensuring sexual and reproductive health and rights for all, and for girls' and women's empowerment and gender equality, reaching the ambitious SDGs by 2030 will be difficult, if not impossible.

Our world has, in many ways, profoundly changed over the last 25 years, and many new issues are influencing the field of population and development, including climate change, growing inequalities and exclusion within and between countries, migration, the youth bulge and the prospects of demographic dividends, and increasing demographic diversity.

Advancing the ICPD Programme of Action's promise of universal access to sexual and reproductive health, of girls' and women's empowerment and gender equality, while leaving no one behind, in particular youth as agents of positive change and the leaders of the generation to carry forward the ICPD Programme of Action and the 2030 Agenda for Sustainable Development, requires new, innovative and strategic partnerships, including with and between youth, civil society organizations, local communities, the private sector, and through South-South and triangular cooperation among countries.



Therefore, recognizing our different capacities and responsibilities, our way forward is to focus in particular on those actions, expressed in specific commitments and collaborative actions, that will deliver on the promise of the ICPD Programme of Action, the Key Actions for the Further Implementation of the Programme of Action of the ICPD, and the outcomes of its reviews, and the 2030 Agenda for Sustainable Development. In that context, we will:

1. Intensify our efforts for the full, effective and accelerated implementation and funding of the ICPD Programme of Action, Key Actions for the Further Implementation of the Programme of Action of the ICPD, the outcomes of its reviews, and the 2030 Agenda for Sustainable Development.

Achieve universal access to sexual and reproductive health and rights as a part of universal health coverage (UHC)^{viii} by committing to strive for:

2. Zero unmet need for family planning information and services,^{ix} and universal availability of quality, accessible, affordable and safe modern contraceptives.^x
3. Zero preventable maternal deaths^{xi} and maternal morbidities, such as obstetric fistulas, by, inter alia, integrating a comprehensive package of sexual and reproductive health interventions,^{xii} including access to safe abortion to the full extent of the law, measures for preventing and avoiding unsafe abortions, and for the provision of post-abortion care,^{xiii} into national UHC strategies, policies and programmes, and to protect and ensure all individuals' right to bodily integrity, autonomy and reproductive rights, and to provide access to essential services in support of these rights.
4. Access for all adolescents and youth, especially girls, to comprehensive and age-responsive information, education

and adolescent-friendly comprehensive, quality and timely services^{xiv} to be able to make free and informed decisions and choices about their sexuality and reproductive lives, to adequately protect themselves from unintended pregnancies, all forms of sexual and gender-based violence and harmful practices, and sexually transmitted infections, including HIV/AIDS, to facilitate a safe transition into adulthood.

Address sexual and gender-based violence^{xv} and harmful practices, in particular child, early and forced marriages and female genital mutilation, by committing to strive for:

- (a) Zero sexual and gender-based violence and harmful practices, including zero child, early and forced marriage,^{xvi, xvii} as well as zero female genital mutilation.^{xviii}
- (b) Elimination of all forms of discrimination against all women and girls,^{xix} in order to realize all individuals' full socioeconomic potential.

Mobilize the required financing to finish the ICPD Programme of Action and sustain the gains already made, by:

5. Using national budget processes, including gender budgeting and auditing, increasing domestic financing and exploring new, participatory and innovative financing instruments and structures to ensure full, effective and accelerated implementation of the ICPD Programme of Action.

6. Increasing international financing for the full, effective and accelerated implementation of the ICPD Programme of Action, to complement and catalyse domestic financing, in particular of sexual and reproductive health programmes, and other supportive measures and interventions that promote gender equality and girls' and women's empowerment.

Draw on demographic diversity to drive economic growth and achieve sustainable development, by:

7. Investing in the education, employment opportunities, health, including family planning and sexual and reproductive health services, of adolescents and youth, especially girls, so as to fully harness the promises of the demographic dividend.^{xx}
8. Building peaceful, just and inclusive societies, where no one is left behind, where all, irrespective of race, colour, religion, sex, age, disability, language, ethnic origin,^{xxi} sexual orientation and gender identity or expression, feel valued and are able to shape their own destiny and contribute to the prosperity of their societies.
9. Providing quality, timely and disaggregated data, that ensures privacy of citizens and is also inclusive of younger adolescents,^{xxii} investing in digital health innovations, including in big data systems, and improvement of data systems to inform policies aimed at achieving sustainable development.
10. Committing to the notion that nothing about young people's health and well-being can be discussed and decided upon

without their meaningful involvement and participation ("nothing about us, without us").

Uphold the right to sexual and reproductive health services in humanitarian and fragile contexts, by:

11. Ensuring that the basic humanitarian needs and rights of affected populations, especially that of girls and women, are addressed as critical components of responses to humanitarian and environmental crises, as well as fragile and post-crisis reconstruction contexts, through the provision of access to comprehensive sexual and reproductive health information, education and services, including access to safe abortion services to the full extent of the law, and post-abortion care, to significantly reduce maternal mortality and morbidity, sexual and gender-based violence and unplanned pregnancies under these conditions.

Follow-up

All stakeholders, present and not present at the Nairobi Summit on ICPD25, who have made concrete commitments to ensure the full, effective and accelerated implementation of the ICPD Programme of Action and the 2030 Agenda for Sustainable Development are strongly encouraged to report periodically on the progress towards fulfilling these commitments through transparent means and/or in appropriate public fora.

UN Member States are strongly encouraged to use the reporting ecosystem for the ICPD Programme of Action and the 2030 Agenda for Sustainable Development, i.e., the UN Commission on Population and Development, the periodic regional review mechanisms

and the High-Level Political Forum, for stock-taking on and follow-up to the national commitments announced at the Nairobi Summit. Commitments that are specific to UN entities should be taken up in the context

of their respective governing bodies. We recommend that UNFPA, the United Nations Population Fund, periodically report on the progress made towards achieving the global commitments outlined above.

- i Paras. 7.6, 8.16 and 8.21 of the ICPD Programme of Action.
- ii General Assembly Resolution 65/234, para. 2, of 22 December 2010.
- iii Para. 17 of UN Commission on Population and Development resolution 2014/1 - Assessment of the status of implementation of the Programme of Action of the International Conference on Population and Development.
- iv Political Declaration, adopted at the 52nd session of the UN Commission on Population and Development (1-4 April 2019).
- v The term "sexual and reproductive health and rights" is used in the UNFPA Strategic Plan (2018 – 2021), paras. 23 and 31, approved by the UNDP/UNFPA/UNOPS Executive Board in decision 2017/23 on 11 September 2017.
- vi In line with para. 4 of General Assembly resolution 70/1 on the 2030 Agenda for Sustainable Development, adopted on 25 September 2015.
- vii As defined by paras. 7.2, 7.3, 7.6 and 8.25 of the ICPD Programme of Action (September 1994), and para. 63 of the Key Actions for the Further Implementation of the Programme of Action of the ICPD (July 1999).
- viii Including in reference to paras. 68 and 69 of the Political Declaration of the High-level Meeting on Universal Health Coverage, adopted by the United Nations Member States on 23 September 2019.
- ix This commitment is different from the concept of 'unmet need for family planning', which points to the gap between women's reproductive intentions and their contraceptive behaviour.
- x Achieving zero unmet need for family planning information and services is an important indicator of having achieved universal access to sexual and reproductive health, as contained in SDG target 3.7 and SDG target 5.6.
- xi Achieving zero maternal deaths is an important indicator of having achieved universal access to sexual and reproductive health and reproductive rights, as contained in SDG target 3.7 and SDG target 5.6.
- xii At a minimum, as defined in paras. 7.2, 7.3 and 7.6 of the ICPD Programme of Action, and para. 53 of the Key Action for the Further Implementation of the Programme of Action of the ICPD. This could be further guided by the expanded definition of sexual and reproductive health and rights interventions, as proposed in the Report of the Guttmacher - Lancet Commission on Sexual and Reproductive Health and Rights (May 2018).
- xiii In accordance with para. 8.25 of the ICPD Programme of Action and para. 63 of the Key Actions for the Further Implementation of the Programme of Action of the ICPD.
- xiv In line with international technical guidance; ref <https://unesdoc.unesco.org/ark:/48223/pf0000260770>.
- xv SDG target 5.2.
- xvi SDG target 5.3.
- xvii This should also include 'de facto' child (marital) unions.
- xviii SDG target 5.3.
- xix SDG target 5.1.
- xx For the definition of 'demographic dividend', see www.unfpa.org/demographic-dividend
- xxi Including indigenous peoples and Afro-descendants.
- xxii 10-14 years of age.

Thank you from UNFPA to those who made the Nairobi Summit possible

Co-conveners: The Government of Kenya and the Government of Denmark, with their inspired leadership

Governance teams: Immense gratitude goes to the International Steering Committee, the International Programme Committee, and their thematic working groups and subcommittees

UNFPA staff: Local, regional and global offices

Co-organizers: Kenyatta International Convention Centre, Media Edge Consortium, United Nations Department of Safety and Security, United Nations Offices in Nairobi and Geneva, and the Protocol and Liaison Service of the United Nations

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