



CHAPTER SIX

COMMISSION ON POPULATION AND DEVELOPMENT (CPD)

Members of the Commission on Population and Development:

Armenia	Haiti	Netherlands
Bangladesh	Hungary	Oman
Belgium	India	Pakistan
Bolivia	Indonesia	Peru
Brazil	Iran, Islamic Republic of	Philippines
Bulgaria	Jamaica	Russian Federation
Cameroon	Japan	Sierra Leone
Canada	Kenya	South Africa
China	Lebanon	Sweden
Comoros	Libyan Arab Jamahiriya	Switzerland
Democratic Republic of the Congo	Luxembourg	Ukraine
El Salvador	Madagascar	United States of America
France	Malaysia	United Kingdom
Gambia	Mauritania	Uruguay
Germany	Mexico	Zambia
Guyana	Morocco	

This year, AMUN's simulations include the Commission on Population and Development, one of the ten functional commissions of the Economic and Social Council (ECOSOC). Participation on the Commission is open to one or two members from any country currently represented on the CPD (see above list). The CPD will meet for all four days of the conference, and will report to a combined ECOSOC Plenary session on Tuesday afternoon.

About CPD

A functional commission of the Economic and Social Council (ECOSOC), the Commission on Population and Development (CPD) monitors and studies population trends and the interrelationship of those trends with development issues. Established in 1946 as the Population Commission and renamed in 1994, the CPD's primary mandate from ECOSOC is the monitoring, analysis, and follow-up of the Programme of Action of the International Conference on Population and Development (ICPD). It monitors the implementation of the Programme at the national, regional and international levels and advises the Council as to its findings.

Purview of the Simulation

In its review of Programme of Action of the International Conference on Population and Development (ICPD), the CPD directly reviews policies and implementation of the Programme at local, national and international levels. CPD is also tasked with arranging studies about and advising ECOSOC concerning: integrating populations with development policies, strategies and other programs; providing population assistance to developing countries and those economies in transitions upon their request; or addressing other population or development questions that arise from UN organs.

Website: www.un.org/esa/population/cpd/aboutcom.htm

The Changing Age Structures of Populations and Their Implications for Development

Between 2007 and 2050, the world population is projected to grow to over 9 billion, with most of the growth occurring in less developed countries. The World Population Prospects: 2006 Revision estimates growth in less developed regions moving from 5.4 billion in 2007 to 7.9 billion in 2050. The population of more developed regions is projected to remain essentially unchanged, hovering around 1.2 billion; the population change in more developed regions would be negative if not for mass migrations from less to more developed countries. Yet population change is not the only significant factor under consideration by the Commission on Population and Development. In addition to population growth and global distribution of people and resources, the age structures of the human population will be an increasingly important factor in global development.

In the past, age structures have been determined by a general and global trend of high fertility and high mortality; however, in recent decades, the trend reversed, displaying both declining fertility rates and increasing longevity in all parts of the globe. This phenomenon is known as "population aging," and it is expected to have an impact on every part of the world, though it may carry different consequences for developed and developing nations. Current population reports

show the proportion of the working age population is expected to decline by 2050 in every major area except Africa, while the number of elderly people is set to triple. The CPD recognizes a three-phase demographic transition to the low mortality, low fertility paradigm. First, a population undergoes rapid reduction in mortality, especially among children and infants. Then, as the population grows, so too does the number of children, as more healthy adults are producing offspring. Third, the demographic transition moves to a period of low fertility, as adults recognize they can parent fewer children to ensure the survival of the desired number. Currently, there are UN Member States in all three stages of this demographic transition.

In developed regions, the 2006 revisions of the World Population Prospects estimate that the number of people over 60 will double to over 406 million by 2050. Fertility rates in the developed world are expected to reach 2.05 children/women by 2050, which is just under the recognized replacement rate of 2.1 children per women. The decline in fertility will be sharper in the developing world, where the number of children per women may drop from 4.63 to 2.50 by the year 2050. The decline in fertility in the developing world will likely result from successful family planning practices being implemented in developing nations. Additionally, the effect of HIV/AIDS and its treatment will have a drastic role in increasing the average age of the developing world's population. Increasing the number of patients with access to secure antiretroviral treatment, as well as increased success of efforts to control the spread of HIV, could result in as many as 32

million fewer deaths by 2050 in the world's 62 most affected nations as compared to the 2004 estimates. Finally, in all regions except Africa, the proportion of the population of working age (15-59) is expected to decline, thus adding pressure to healthcare, economic, and social resources.

At the international level, population planning and monitoring has been in place since the World Population Conference held in Bucharest in 1974. More recently, the international community accepted a Programme of Action at the International Conference on Population and Development in Cairo in 1994. To date, most of the initiatives surrounding population growth and changing age structures have taken place at the national level, and the focus of governmental policy has mostly been on ways of addressing the consequences of these changing demographic trends. The consequences of these trends can be economic and social in nature. For example, progressively aging populations have profound impacts on intergenerational social support systems within a country. Retirement, pensions and other social benefits need to be financially supported and extended over longer periods of time and the demand and cost of medical care increases as the incidence of chronic diseases is typically higher in elderly persons. Policy changes that address the aging population have taken place in the areas of immigration reform, pension reform, family planning policies (in the developing world), and fertility incentives. The CPD may consider how these policies might have a global impact or consider how the international community might implement them.

At its 40th session this year, the CPD focused not only on the needs of aging populations, but also on the need for sustainability programs for youth. Targeted programs, aimed at promoting more responsible behavior among young people, could encourage savings and investment. Increasing self-reliance of older persons, by promoting a continued participation in the workforce and discouraging early retirement, is an effective and realistic response to the income security problem. Important, appropriate action must be taken to address demographic and social challenges created by the changing age structure, such as higher costs for social services, possible labor shortages, and higher costs for pensions and health care.

Questions to consider from your government's perspective on this issue include:

- How will the world's aging population affect the international community in the next 50 years and beyond?
- How can the international community prepare for the changing age structure of the international community?
- How can the UN, NGO's, and the international community as a whole be encouraged to address this issue from a global perspective?
- What are your country's major concerns regarding population change and the effects of an ageing population?
- How might Member States be encouraged to work with countries that have opposite population pressures or problems?

Bibliography:

- "Ageing Populations Worldwide Pose Key Policy Challenges, Warns UN Official," *UN News Service*, 11 April 2007.
- "An Ageing World Poses New Challenges for Development Strategists," *DESA News*, April 2007.
- "Budgetary Challenges Posed by Ageing Populations: The Impact on Public Spending on Pensions, Health and Long-Term Care for the

- Elderly and Possible Indicators of the Long-Term Sustainability of Public Finances." *Economic Policy Committee*, 2001.
- Bloom, D. E., David Canning and J. Sevilla, *The Demographic Dividend: A New Perspective on the Economic Consequences of Population Change*, 2002.
- Grant, Jonathan and Stijn Hoorens, "Consequences of a Graying World," *The Christian Science Monitor*, 29 June 2007.
- "Population Is 'Growing and Aging,'" BBC News, 15 March, 2007.
- "States Should Promote Jobs and Education for Older Peoples – UN Commission," *UN News Service*, 13 April 2007.

UN Documents:

- E/CN.9/2007/8
- E/CN.9/2007/7
- E/CN.9/2007/5
- E/CN.9/2007/4
- E/CN.9/2007/3 Report of the Secretary-General, "World population monitoring, focusing on the changing age structures of populations and their implications for development"
- Madrid International Plan of Action on Aging
- ECOSOC/953
- ICPD Programme of Action
- Living Arrangements of Older Persons Around the World, UN Department of Economic and Social Affairs, Population Division, 2005.
- "Challenges of World Population in the 21st Century: The Changing Age Structure of Population and Its Consequences for Development," Panel Discussion Report, UN Department of Economic and Social Affairs, Population Division, 2006.
- "Changing Population Age Structures," Reports from Expert Group Meeting, Department of Economic and Social Affairs, Population Division, 2005.
- POP/954
- "United Nations Expert Group Meeting on Social and Economic Implications of
- "The World Population Prospects: 2006 Revision," UN Department of Economic and Social Affairs, Population Division, 2006.
- World Population Policies, 2005, UN Department of Economic and Social Affairs, Population Division, 2005.

Additional Web Resources:

- www.globalaging.org/index.htm - Global Action on Aging
- www.un.org/esa/population/cpd/cpd2007/comm2007.htm - CPD 40th Session
- www.un.org/esa/population/unpop.htm - Department of Economic and Social Affairs Population Division
- www.un.org/esa/desa/ - UN Department of Economic and Social Affairs

Reproductive Rights and Reproductive Health

Reproductive health is a basic right for all persons. The International Conference for Population and Development (ICPD) defines reproductive health as "a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity, in all matters relating to the reproductive system and to its functions and processes." Female genital mutilation, HIV/AIDS,

abortion, and violence against women, including trafficking, are just some of the challenges faced in the area of reproductive health. While some of these issues are very State- and religion-sensitive, such as abortion, the international community continues to take action in the area of reproductive health.

The ICPD, held in Cairo, Egypt in 1994 as the first large scale conference of its kind, had aims of targeting issues related to reproductive health and population. Some of the concerns included the half million pregnancy related deaths each year, 99% of which were in developing countries, and increasing access to and education about family planning methods to people the world over. The Programme of Action on Population and Development, which came out of the ICPD, sets out goals and objectives for population and development, including reproductive rights and health over a twenty year timeframe. The Commission on Population and Development (CPD) is charged with monitoring the follow-up and implementation to the Programme of Action and advising ECOSOC on the status of the Programme. CPD annually reviews the progress and challenges encountered with the implementation of the Programme of Action at the local, national, regional and international level. There have also been several follow-up conferences, including the ICDP+5, the Fourth World Conference on Women, and Women 2000.

There are several issues involving reproductive health and reproductive rights that still affect men and women on an international scale. One large problem is exercising the right to health care, especially by certain groups of women. These groups include rural women, elderly women, ethnic minorities, and sex workers. The Committee to Eradicate Discrimination against Women (CEDAW) has recommended States parties take extra steps to ensure that health services are made available to these women. Other UN programs have targeted their work in Africa: UNICEF programs focus on education throughout parts of Africa to teach families about the dangers of female circumcision; UNAIDS works to combat the spread of HIV by educating about the virus.

Additionally, the United Nations is working carefully to meet the Millennium Development Goals by the year 2015. Specific to the Commission on Population and Development are MDGs 3, 5, and 6, which are to Promote Gender Equality and Empower Women; Improve Maternal Health; and to combat HIV/AIDS, malaria and other diseases, respectively. Key to promoting gender equality, empowering women, and improving maternal health are increasing access to reproductive health care and family planning, particularly in the least developed States, where maternal mortality remains an epidemic.

At its 26th Special Session in June 2001, the Assembly on HIV/AIDS focused attention on the devastation caused by the pandemic and adopted a Declaration of Commitment on HIV/AIDS to mount an expanded response to halt its advance. Substantial progress was also made to meet the goals of the ICPD, specifically by taking a broader approach to reproductive health with integration among different institutional structures, transformation of existing facilities, improvement of logistic systems and training to ensure appropriate and effective care. Thus, reproductive health is more often being addressed as a component of broad health programs in countries undertaking health system and financing reforms.

Despite all the gains made, the United Nations and others in the international community still face criticism and obstacles from groups reluctant to accept reproductive health as an aspect of total body health. Opponents often say that sexual health is a private

matter amongst a family, and governments should not participate in such personal affairs. There are Members States uncomfortable with interfering with issues of female genital mutilation, or others who tie their reproductive health funding up with caveats. Areas of conflict only serve to exacerbate these problems for women and the international community as violence to women increase and access to international aid becomes more difficult. And while scientific advances continue – including vaccines to prevent sexually transmitted infections such as Hepatitis B and human papillomavirus – the issue of reproductive health and reproductive rights continue to be a challenge.

Questions to consider from your government's perspective on this issue include:

- What role do men and boys have in ensuring reproductive rights?
- What progress has been made toward achieving the Millennium Development Goals of achieving gender equality and eradicating HIV?
- How can the international community further reproductive rights and reproductive health in the current environment?
- What progress has been made in implementing the Programme of Action from the ICPD? What are the barriers to full implementation of the Programme of Action?

Bibliography:

- “Anti-Poverty Goals at Risk if Reproductive Health Care not Funded - UN Official,” *UN News Centre*, 2004, www.un.org/news.
- “CDC Releases New Toolkit to Assist Humanitarian Workers Assess Reproductive Health Needs of Women Refugees,” *Webwire*, 31 May 2007, www.webwire.com.
- Francis, David R. “Fuse on the ‘Population Bomb’ Has Been Relit,” *The Christian Science Monitor*, 21 May 2007.
- Kapstein, Ethan B. “The New Global Slave Trade,” *Foreign Affairs*, Nov/Dec 2006.
- “Women in Islam: Veiled Oppression or Stigmatised Misconception?” *H2G2, BBC News*, 29 Nov, 2005, bbc.com.co.uk.
- “UN agencies and partners work to help survivors of Indonesia earthquake,” *UN News Centre*, 2006, www.un.org/news.
- “UN-Backed Study Paints Grim Picture of Neglect in Promoting Reproductive Health,” *UN News Centre*, 2006, www.un.org/news.

UN Documents:

- A/RES/61/145
A/RES/61/144
A/RES/61/143
A/RES/60/138
A/CONF.171/13 –ICPD Programme of Action
E/2004/25(SUPP)
E/CN.9/2004/L.3
E/CN.9/2002/3
E/2006/8
ECOSOC 2003/229
A/RES/S-26-2 Declaration of Commitment on HIV/AIDS

Additional Web Resources:

- hrw.org/women/conflict.html – Human Rights Watch, Women’s Rights
- www.reproductiverights.org – Center for Reproductive Rights
- www.unfpa.org/icpd/icpd_poa.htm - ICPD Programme of Action
- www.un.org/esa/population/cpd/cpd_archives.htm - UN Department of Economic and Social Affairs, Population Division
- www.un.org/millenniumgoals/ - UN Millennium Development Goals
- www.un.org/popin/ - UN Population Network
- <http://www.un.org/womenwatch/daw/followup/beijing+5.htm>
– Beijing +5 Web page

