The 1994 International Conference on Population and Development (ICPD) held in Cairo adopted a 20-year Program of Action (PoA) that addresses the issues of population and development, as well as the intricate inter-relationships among population, sustained economic growth, sustainable development, advances in education, economic stability and the empowerment of women. The ICPD PoA emphasizes universal access to health care, including: reproductive health, safe motherhood, treatment and prevention of sexually transmitted infections (STIs), and protection from violence.

The year 2014 marks the 20th anniversary of the Cairo Conference, which is an opportunity to comprehensively assess the programme’s principles, goals and future.

Central and Eastern European (CEE) countries have made modest headway in applying the ICPD framework as a tool to establish a sustainable foundation that protects and promotes women’s rights in the region. While some progress can be noted in the sphere of reproductive health and sexual rights (such as a small decrease in maternal mortality, small increase in the use of contraceptives, and the decriminalization of homosexuality in most countries of the region), ICPD goals remain far from completed.

Starting in the 1990s, a series of social and economic upheavals marked the region and had an overall negative impact on its development. This particular dynamic contributed to a growing inequality, expressed most significantly in gendered terms. More recently, the region witnessed a revival of populist politics, patriarchal discourses and religious fundamentalism. These factors impeded the development of policies addressing population management and reproductive rights.

Throughout the region, we continue to experience a lack of political will and government commitment to developing and implementing policies addressing the priorities underlined in the ICPD Programme of Action. From an economic point of view, we have witnessed a general implementation of health policies inspired by neoliberal principles that transform patients with rights to sexual and reproductive health into consumers who can (or cannot) pay for sexual and reproductive health services. The situation continues to worsen as major sources of funding withdraw from the region.

Taking into consideration that the ICPD PoA (15.3.) identifies non-governmental organizations as an important and efficient means to launch local and national initiatives and address pressing concerns regarding population, the environment, migration, and economic and social development.

Central and Eastern European Women’s Network for Sexual and Reproductive Health and Rights

We, representing organizations from Central and Eastern Europe and comprising of representatives from civil society organizations, including: women, men, youth, people living with HIV/AIDS, LGBTIQ people, sex-workers, faith-based organizations, and other networks and groups throughout the region call on our governments to:

1. Recognize, implement and reinforce the commitments accepted in 1994, in particular the promise to promote and achieve sustainable development through a sexual and reproductive health and rights (SRHR) agenda and to recognize the critical role of that agenda in the improvement of women’s status and the elimination of gender inequality;
2. Renew their commitment to provide universal access to comprehensive sexuality education as an efficient and proven preventive measure; to make available the full range of contraceptive methods, including emergency contraception; to promote condoms, including female condoms, as a dual protection method; to guarantee access to a full range of abortion services and post-abortion care; to make available and guarantee a full range of medical services that prevent maternal deaths, especially emergency obstetric care in adequately equipped facilities; to provide the full range of services for the identification and treatment of victim-survivors of gender-based violence; to address STIs and HIV/AIDS and reproductive cancers; to raise awareness of male responsibility in sexual and reproductive health; and to identify measures to eliminate stigma and discrimination in access to SRHR services;
3. Fund adequately medical services and pharmaceutical products in order to abide by the principle of equal access to health care as well as to guarantee the individual right to non-discriminatory access to health care;
4. Guarantee the implementation of SRHR policies by: ensuring the functionality of health systems, allocating adequate budgets for that purpose, providing updated training for health professionals;
5. Inform SRHR policies with an intersectional analysis; to base these policies on data using reproductive rights indicators; to include marginalized groups, especially Roma communities, in these policies; and to use qualitative research input in order to ensure that these policies are continually relevant;
6. Base policy reviews on human rights paradigms in order to ensure that sexual and reproductive health rights are being recognized as human rights and that governments are fulfilling those rights regardless of economic climate or political change;
7. Ensure that general health and HIV-related policies, programmes and services are free of stigma and discrimination and are built on the fundamental commitment to respect, protect and promote human rights and gender equality.

We call on the UNFPA and development partners to:

1. Ensure the capacity of civil society to effectively engage with governments and to participate in the ICPD Beyond 2014 processes on all three inter-related levels—country, regional and global;
2. Map national and regional level Civil Society Organizations (CSOs) to involve in the ICPD+20 review process and in the Global Survey validation process;
3. Convene in conjunction with CSOs pre-conferences and thematic conferences (Women’s Health and Human Rights), which will feed into the Secretary General’s Report;
4. Work with CSOs to ensure meaningful representation in country delegations to thematic conferences as well as at the 47th CPD in 2014;
5. Recognize SRHR issues as fundamental and critical issues in CEE and a priority for funding;
6. Provide assistance to mobilize resources and facilitate the above-mentioned technical processes, as well as to create conditions to guarantee transparency and accountability for all budgetary allocations related to ICPD.

In conclusion, we urge governments, donors and international organizations to address the critical need and to take action towards full implementation of the ICPD PoA, which is fundamental for achieving the Millennium Development Goals and for the advancement of women’s status in the region.