



ARAB CONFERENCE ON THE IMPLEMENTATION OF THE
ICPD PROGRAMME OF ACTION

المؤتمر العربي حول تنفيذ برنامج عمل
المؤتمر الدولي للسكان والتنمية



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CHAPTER ONE

ORGANIZATION OF CONFERENCE WORK

I. LOCATION, DATE AND PURPOSE OF CONFERENCE

1.1 The Economic and Social Commission for Western Asia (ESCWA), the League of Arab States (LAS) and the United Nations Population Fund (UNFPA) held a conference entitled "Arab Conference on the Implementation of the ICPD Programme of Action" at the permanent ESCWA headquarters in Beirut, Lebanon, September 22-25, 1998. This Conference was within the framework of preparations underway to evaluate the extent of implementation of the Programme of Action of the International Conference on Population and Development five years after it was held in Cairo in 1994, and also in preparation for the Special Session of the General Assembly which will be held for this purpose June 30 - July 2, 1999 (General Assembly Resolution 52/188).

1.2 The Conference was designed mainly to conduct a review and evaluation of achievements of the Arab States in terms of implementation of the Second Amman Declaration on Population and Development in the Arab World, 1993 and the Programme of Action of the International Conference on Population and Development, 1994, and to highlight the constraints faced in this connection, in addition to the formulating of a number of recommendations regarding future steps which should be pursued to further the implementation process.

II. PARTICIPANTS

1.3 Delegations from the following Arab countries participated in the Conference: Jordan, United Arab Emirates, Bahrain, Tunisia, Algeria, Djibouti, Syria, Sudan, Iraq, Oman, Qatar, Kuwait, Lebanon, Libya, Egypt, Morocco, Mauritania and Yemen.

1.4 Other participants in the Conference included the Holy See, in observer capacity, and representatives of United Nations organizations and its specialized agencies: United Nations Development Programme (UNDP), World Food Programme (WFP), International Labour Organization (ILO), Food and Agriculture Organization (FAO) and World Health Organization (WHO). The Conference was also attended by representatives of the following organizations: Arab Fund for Economic and Social Development, the International Organization for Migration, the International Planned Parenthood Federation and the Cairo Demographic Center. Also present, from Lebanon, were representatives of the Ministry of Vocational and Technical Training, St. Joseph University, the Lebanese Family Planning Association and the Council for Development and Reconstruction. The names of all delegates and participants are contained in the list of participants which is the first appendix of the report.

III. THE OPENING

1.5 The Conference was opened by Dr. Hazem El-Beblawi, the Executive Secretary of ESCWA. He delivered a speech in which he welcomed the ministers, and the heads and members of delegations of the Arab States and the representatives of the League of Arab States, the United Nations Population Fund (UNFPA), and other Conference participants. He referred to the initiative of the UN in convening international conferences, and the listing of social issues at the heart of the question of sustainable development, in order that social development might have its proper place in that process on an equal footing with economic development. He also stressed the importance of coordination and cooperation in facing the regional conditions and challenges and striving to implement the recommendations of recent international conferences.

1.6 The Assistant Secretary General of the League of Arab States, Dr. Ali Abdel Karim, delivered a speech in which he welcomed participants and conveyed the greetings of Dr. Ismat Abdel Majid, the Arab League Secretary General, and his best wishes that the Conference would realize its objectives. He also referred to the need for joining efforts and capabilities to express the common will, and he listed activities

and mechanisms established by the Arab League in the framework of its adoption of international resolutions.

1.7 The Deputy Executive Director of the United Nations Population Fund, Ms. Kerstin Trone delivered a speech in which she noted that this Conference was being held within the context of the review of the implementation of the Programme of Action of the International Conference on Population and Development, which was being carried out by the international community. She indicated that this review process involves a series of regional consultations as well as technical meetings to evaluate the extent of implementation at the national, regional and international levels. The international forum on ICPD implementation (the Hague Forum) will be held in February, 1999, followed in March by a session of the Commission on Population and Development which will be the preparatory committee for the Special Session of the General Assembly, to be held June 30 - July 2, 1999. She also discussed the importance of this conference within the context of the comprehensive review of the implementation of the Cairo Conference recommendations.

1.8 The Lebanese Minister of Hydraulic and Electricity Resources and the Acting Minister of Social Affairs, Mr. Elias Hobeika, welcomed the participants in this Conference, which he described as an important and basic station in the review of the implementation of the Programme of Action of the Cairo Conference. He paid tribute to the efforts of the National Population Committee in policy-formulation and population programmes, and to the achievements of Lebanon at the social, economic, housing and environmental levels and in the areas of reproductive rights, sexual health and family planning. In closing, he referred to the basic trend towards completing the formulation of Lebanon's national population policies.

IV. ELECTION OF OFFICERS

1.9 Mr. Elias Hobeika, the Lebanese Minister of Hydraulic and Electricity Resources and the Acting Minister of Social Affairs was unanimously elected Conference Chairman.

1.10 The following heads of delegations were elected as vice-chairmen:

- Sheikh Humaid bin Ahmed Al-Mu'alla, the Minister of Planning of the United Arab Emirates.
- Mr. Ali Mohamed Daoud, the Minister of Health and Social Affairs of Djibouti.
- Col. Galuak Deing Garang, the Minister of Survey and Physical Development of Sudan.
- Dr. Hassan A.M. Al-Khattab, Minister and Head of Planning Commission in Iraq.
- Mr. Abdulla Bin Hamad Al-Attiyah, Minister of Energy and Industry and Chairman of Council of Planning of Qatar.
- Dr. Ismail Sallam, the Minister of Health and Population in Egypt.
- Mr. Abdelhamid Aouad, the Minister of Planning and Economic Projections in Morocco.
- Mrs. Rajiha bint Abdul Ameer bin Ali, the Undersecretary for Development Affairs in the Ministry of National Economy of Oman.

1.11 The Secretary-General of the National Population Commission in Jordan, Mr. Nabih Salameh was elected Conference rapporteur.

1.12 Mr. Hamad Habib Al-Musailam, the Assistant Undersecretary for Planning Affairs and Follow-up in the Ministry for Planning in Kuwait, was elected Chairman of the Drafting Committee.

V. APPROVAL OF ORGANIZATION OF WORK

1.13 In the opening session, held on 22 September 1998, the Conference approved the organization of work as shown in the second appendix of this report.

CHAPTER TWO

TOPICS OF DISCUSSION

I. FIRST SESSION

Implementation of the Programme of Action of the International Conference on Population and Development and Population Changes: A Regional Overview

A. THE STUDY

“The Population Situation in the Light of Progress Realized in the Implementation of the Programme of Action of the Cairo Conference: Analysis of Country Questionnaires”

Prepared in his advisory capacity by Dr. Muhammad Faour
and reviewed by the Population Section of ESCWA
and presented by Mr. Akil Akil, Chief of the Social
Development Issues and Policies Division

- 2.1 The study reviews the results of the statistical analysis of the responses received from 18 Arab states to the questionnaire sent to them by ESCWA. It notes, on the comparison of the present population situation with that which prevailed prior to 1994, that the disparities in demographic factors between the Arab states still existed, but the levels of fertility, mortality and population growth had generally declined along with improvements in health and social conditions.
- 2.2 All the Arab states that responded to the questionnaire, with one exception, declared that they had a development plan. All the development plans, with one exception, contained reference to population goals or programmes, but only eleven countries had clear-cut population policies. These policies contained some quantitative goals, most importantly infant mortality rates. The first population priority of the Arab states was the factor of decreasing mortality rates, followed by dealing with the high population growth.
- 2.3 Despite the commitment of most Arab states to the promotion of gender equality, including the introduction of legal and administrative measures to accomplish this goal, the participation of women in higher administrative positions and organizations remained limited and the ratification of the Convention for the Elimination of all Forms of Discrimination Against Women has not been comprehensive.
- 2.4 Most states introduced measures to increase the awareness of men and women of their reproductive rights and of the exercise of these rights and a number of measures were adopted after 1994 related to the implementation of various components of reproductive health, including family planning, improving quality of services and safe motherhood. However, reproductive health programs for adolescents are still unavailable in most countries.
- 2.5 Civil society institutions participate with governments in decision-making and implementation of decisions related to population and health in most countries, but most of them still do not have a unified authority to coordinate these joint activities.
- 2.6 Most Arab states introduced a variety of measures designed to brief decision-makers and experts on population and development issues. All states announced national population strategies in the area of advocacy for the role of information and education, and policies were formulated to mobilize resources in a bid to implement the Programme of Action of the Cairo Conference. Spending on population activities increased, compared to 1994.

B. COUNTRY INTERVENTIONS

- 2.7 A spokesman for the Tunisian delegation reported on the Tunisian experience in the formulation and implementation of population policies dating back to the late fifties. He underlined the success achieved in the issuing of legislation and the adoption of new measures related to family planning, women and family relations. He also referred to the integration of reproductive health components within comprehensive development policy. The 1996-2001 development plan has a special chapter on population policies and this trend is supported by the political authorities on the highest levels. A self evaluation carried out by Tunisia in this respect indicated that it is moving ahead in the direction of full implementation of the Cairo Conference Programme of Action.
- 2.8 The Egyptian delegate referred to data contained in the ESCWA study and requested that it be updated. She cited latest fertility and mortality data which was not contained in the response of Egyptian government to the questionnaire.
- 2.9 The head of the Moroccan delegation read the national report from his government to the Conference, which dealt with various aspects of Moroccan activities and population policies which focus on rehabilitation of the individual in a bid to raise his living standards. These activities included the adoption of legislation and measures by the government to protect children, establish their rights and help the less fortunate segments as well as to enlist public participation in the preparation of population and development programmes, support reproductive health programmes and strengthen gender equality.
- 2.10 A delegate of Yemen described the national programme of his country as being comprehensive in view of the fact that it comprises a number of themes, including health, human resources, sustainable development and attention for specific groups (youth, elderly and handicapped). He spoke of the partnership with the Non-Governmental Organizations (NGOs) and the concern of the political authorities for population issues, and he noted that the authorities had set up a higher population council chaired by the Prime Minister.
- 2.11 The head of the delegation of Iraq reported on the population aspects of the Iraqi development plan, designed to maintain the present population growth rate, reduce migration to the cities, promote a balanced population distribution within the country, avoid pollution of the environment and give special attention to the handicap. He also referred to the national programme for mother and child care and mentioned the formation of a population policy committee.
- 2.12 The head of the delegation of Jordan paid tribute to sections of the ESCWA study, especially pages 4-7, and he stressed the importance of the National Population Commission in Jordan, which is considered to be the authority on population affairs. He called for the establishment of an Arab Information System based at ESCWA.
- 2.13 The head of the delegation of Bahrain noted that his country had occupied, for the third year in a row, the first position among the Arab states in the level of human development according to the United Nations Development Programme and he referred to the distinctive Bahraini emphasis on providing welfare for special groups, improving the living conditions of the needy and constantly seeking to raise educational standards of children. To this end, an information center on women and children had been established.
- 2.14 The head of the delegation of Djibouti delivered a statement on the accomplishments achieved in his country in the implementation of the Programme of Action of the Cairo Conference. He concentrated on measures taken to improve social and health conditions and their impact at the level of population.
- 2.15 A delegate of the United Arab Emirates reviewed the accomplishments of his government in educational programmes for all age groups and in literacy campaigns and in health care and population and he called for Arab cooperation to achieve common interests.
- 2.16 The delegation of Oman reported on population changes in their country based on the national report submitted to the Conference, which contained information on the decline of the population growth and infant mortality rate. The delegation reaffirmed the dependence of Oman on its own resources in matters related to

population and development and stressed the participation of the civil sector in the formulation and implementation of development policies.

2.17 The delegation of Mauritania requested that the ESCWA study also include measures taken in Mauritania in all aspects of human development. The delegation described achievements by the administrative institutions in improving the lot of women and also mentioned government accomplishments in the fields of child care, fighting illiteracy and the integration of women into the labour force and providing them with leadership responsibilities.

2.18 The Syrian delegation noted that population issues were included in the development plans despite the absence of a specific population policy. The delegation submitted data indicating that there had been a sharp decline in the rate of illiteracy between 1970 and 1996 and also in the crude death rate. Special mention was made of improved health services, the increased participation of women in economic activity, and universal elementary education for all, including the Bedouins. It was also noted that a permanent population committee, chaired by the Minister of Planning, had been formed.

2.19 The Algerian delegation revealed that there had been a sharp decline in the population growth rate, which had reached 1.7% annually. The delegation referred to the importance of the national population council which includes representatives of all ministries.

2.20 The debate which followed focused on ways of measuring accomplishments. One participant referred to the lack of data on specific financial and human resources allocated to each population activity. Another participant responded by pointing out that this is contained in the reports available among the participants. It was pointed out by another intervener that the demographic rates and national statistics submitted were an indication of what had been achieved and were a summation of a number of accomplishments. It was noted that it would be very difficult to specify the budgets in specific details. Moreover, this might even be unknown in most cases due to the interaction of different factors on every population issue. Another participant in the debate noted that the evaluation of spending must take into consideration the size of the population, the level of development of the country and other factors which make evaluation relative. Another speaker concentrated on the joining of efforts by governments and the civil societies in the implementation of the Programme of Action of the Cairo Conference. The delegate of Lebanon said that he had not made an intervention because the head of the Lebanese delegation, the Minister of Hydraulic and Electricity resources, had covered the subject in his speech at the opening ceremony.

II. SECOND SESSION

Development Strategies and Population, with Special Emphasis on Labour Migration

A. STUDIES

1. "Population Policy and Development Strategies in the Context of Macroeconomic Change"

Prepared by Dr. Abdul-Aziz Farah and Dr. Elie Yashoui
Presented by Dr. Abdul-Aziz Farah

2.21 The study reviewed stages of change in population and development policies of the Arab states and the impact of financial, environmental and political crises in the eighties on this change. It also dealt with the accomplishments of the Arab countries in areas of education, health, training and employment, and especially in caring for poor groups and the absorption of migrant labour in the wake of the Gulf war. It referred to administrative reforms in the public sector, the stimulating of individual initiatives and strengthening national technical capacities. Areas of setbacks included economic decline in countries where statistics on the national product were available, with a growth in the numbers of the poor, especially women and children, the rise in unemployment, increased external debt and rise in military spending, whereas the

implementation of the Programme of Action of the Cairo Conference requires the allocation of more resources for the health, education and information sectors.

2.22 As a result of programmes of economic reform, structural adjustment and privatization, governments withdrew from some productive activities, which led to the rise in the price of basic commodities, the deterioration of the quality of health and educational services available to the poor, and a rise in unemployment. As such, the authors called for the concluding of a "new moral contract" between the state, employers and institutions of the civil society in a bid to resolve the population and developmental complications arising from the contradictions between economic growth and social cohesion and to avoid the set backs in population accomplishments achieved during recent years. The most prominent of these is the development of primary health programmes, including the various components of reproductive health, a reduction in fertility and population growth, improvement of education, strengthening the role of women in society and the adoption of developmental policies which contain population factors.

2. "Migration and the Family: Case of Arab Labour-Sending Countries"

Prepared and presented by Dr. Khaled Louhichi

2.23 The study begins with a review of the concept of international migration as a complicated and complex phenomena, it describes the state of Arab labour migration and the results of the international survey of policies of states on international migration, and conducts a conceptional review of studies on migration and household in general. The impact of migration on the Arab family was dealt with in detail, on the basis of recent national surveys conducted in Egypt, Tunisia and Jordan, which covered the characteristics of family members, educational qualifications of wives and their demographic characteristics, and reasons for the migration of husbands and features of their migration, the role of the wife in the migration decision, changes in family structures before and during migration and their characteristics at the time the surveys were conducted.

2.24 The study indicated that the absence of the husband enhanced the authority of the wife and increased her role in family-finances decisions, and increased her independence - most wives of migrants moved to separate housing apart from the extended family. This change especially involved wives in rural areas; whereas the number of working wives in urban areas dropped, and the opportunities to leave the house or change residence decreased significantly. Besides, the family duties of wives increased, placing a heavy burden on them as they sought to function as mother and father. The psychological suffering of wives and children should not be overlooked, especially in the case of countries where husbands are away for longer periods. The study concluded with recommendations designed to mitigate the negative impact of the absence of the husbands on wives and children.

3. "Labour Migration in the Gulf Cooperative Council Countries"

Prepared and presented by Dr. Maitha Al-Shamsi

2.25 The study contained four components: One, historical background and description of migration features, and the laws and regulations that govern migration to the countries of the Gulf Cooperation Council (GCC); Two, a study of the impact of labour migration on the size and composition of the population and their professional and demographic characteristics; Three, other consequences; Four, a review of policies of states. The study concludes with a survey of future horizons.

2.26 Among the main points noted in the study was that the great majority of migrant labourers in the Gulf come from Arab and non-Arab Asian countries. Asian workers outnumbered Arab workers after the second Gulf war. Most of these workers are aged between 15 and 40 years. Due to the increasing numbers of migrants, they constitute a majority of the population in some countries, and they dominate productive activities, especially in the private sector. Their presence also has an important political, social and cultural impact on the Gulf societies.

2.27 One of the goals of the development plans of the United Arab Emirates is to develop a diversified and self-propelled economy, with an emphasis on developing the national workforce, especially technical labour and to activate the participation of women in the workforce. The Arab Gulf countries are also working on stimulating the private sector and replacing foreign labour with national labour.

2.28 The researcher urged the amendment of some of the laws and regulations on migration to provide greater stability for migrant workers and to maintain the Arab identity of the countries; labour-sending countries were urged to prepare programmes to absorb the workers returning from the Gulf to their countries because these numbers are expected to rise steadily.

B. INTERVENTIONS

2.29 On the issue of coping with the challenges of globalization in terms of population policies, the researcher indicated that comprehensive development involved improving the quality of life of the population and a rationalized use of resources in a manner that would ensure a balance between economic and social development. This would reduce the numbers of marginalized people who are pushed into need and despair by the market forces and privatization that are hallmarks of globalization.

2.30 The "new moral contract" is a document of understanding between the state and the private sector, under which the state continues to exercise the minimum role that is designed to mitigate the negative implications of privatization and market forces on poor and marginalized groups.

2.31 The Syrian delegation, in reference to the second study, disputed the prediction that the rate of growth in Syria would drop to the level mentioned by the researcher.

2.32 A system to monitor population data should be set up to monitor labour migration not only between the Arab countries, but also to the West, which constitutes a brain drain that has probably doubled in the past decade.

2.33 The problem of development and the distribution of resources in the Arab countries was addressed. Agreement was reached on the need for political cooperation and economic integration among the Arab countries. The absorption of Arab workers in humble positions that require unskilled labour, such as domestic work, poses a problem since most Arabs prefer posts that require advanced training or education.

2.34 There is a need for a new study of the migration phenomena, which is a complicated phenomena requiring a frank exchange among the Arabs and also with the Mediterranean peoples.

III. THIRD SESSION

A. STATEMENTS OF STATES, AND REGIONAL AND INTERNATIONAL AGENCIES PARTICIPATING IN AN OBSERVER CAPACITY

2.35 The delegate of the International Organization for Migration thanked the organizers of the Conference for inviting him to participate.

2.36 The delegate of the International Labour Organization indicated that the ILO is composed of three parties: governments, employers organizations and workers organizations, which all work together to formulate and follow-up programmes. He listed the most important activities of the ILO, including the rehabilitation of the disabled, training and developing small businesses. He referred to the activities of the Organization in the fields of employment, social security and tourism, and he referred to the technical cooperation with Arab governments, and with international agencies and university research centers.

2.37 The delegate of the World Food Programme specified the items in the Cairo Conference Programme of Action which are relevant to the objectives of his organization, including helping women and female heads of households of needy families, not only by providing them with food, but also assisting them to develop their educational and technical skills. In the Arab countries, the Programme is involved in

increasing the elementary school enrollment of rural girls, encouraging women to carry out income generating activities and providing instruction in business management. The World Food Programme (WFP) also is working in a number of fields to narrow the gap between males and females, especially those less fortunate.

2.38 The delegate of the Holy See, reading from a prepared French statement, thanked the organizers of the Conference for inviting him to participate and he elaborated on the basic role of the family in individual and collective development, and on the impact of labour migration on the balance of the family and society. He also referred to the assistance provided by the Church to reduce maternal mortality, especially in poor countries, and he stressed the need for making adolescents aware of their responsibilities and of their sexual and reproductive health within the framework of moral and religious values. He concluded by quoting from the Papal encyclical, "The New Hope of Lebanon" which was directed by Pope John Paul II to the Lebanese during his visit to Lebanon.

2.39 The Head of the Sudanese delegation read portions of the country report of Sudan, including statistical data on the high birth rate and the high population growth rate.

2.40 The Head of the Tunisian delegation, speaking in her capacity as the president of "South-South Partners in Population and Development" discussed the Partnership, which includes countries from Asia, Africa and Latin America. It was initially founded in 1994, with ten charter members for the purpose of cooperation to improve the quality of life of the people of these countries. Members states have shared a significant demographic change. It is also seeking to integrate family planning services with safe motherhood and other reproductive health components into one, comprehensive programme. Tunisia currently chairs the Executive Bureau of the Partnership, but the presidency rotates among member states.

2.41 The delegate of the International Planned Parenthood Federation (IPPF) - Arab World region - discussed the ways in which methods of dealing with population issues in the Arab countries had changed since the eighties. He referred to the absence of clear-cut population policies in a number of countries. He noted that there were decisions taken on population issues and that awareness of the importance of population issues had evolved to the point to which these issues have become part of development plans being carried out by an institutional unit. The approach to reproductive health reflected a realism that was not known previously. He drew attention to the absence of any role for the public in the formulation of population policies, which made their implementation all the more difficult. He explained the difficulties involved in trying to compare countries in view of their different concepts and the absence of appropriate indicators.

2.42 The Libyan delegate said that the population issue was not one of his government concerns in view of the small population size and the low population density. He stressed, however, that his government is concerned with increasing the level of education and the participation of women in the working force and he concluded by affirming the priority of human development and the availability of health services.

B. REPRODUCTIVE HEALTH

1. Studies

(a) "Availability and Quality of Reproductive Health Services: the Case of Egypt"

Prepared by the Ministry of Health and Population in Egypt
(H. E. the Minister Dr. Ismail Sallam and Dr. Moshira El Shafei)
and presented by H. E. Dr. Ismail Sallam

2.43 The paper referred to the shift in Egypt to the comprehensive concept of reproductive health, that was translated into practice by the setting up of 700 health centers for women and the use of mobile clinics in remote areas, and other more non-traditional approaches to health policies integrated with population policies. In Egypt, reproductive health is considered to be part of preventive health, and women are entitled to health services as one of their rights.

2.44 The study stated that the real challenge was to reach the most needy groups who mostly are not found in the cities and factories, but in remote rural areas where the women represent 70% of all women in the country. The help of pioneering educated women who would hold dialogue with rural women, was enlisted to confront this challenge.

2.45 The health unit activities include literacy campaigns and the encouragement of productive families. A partnership was established in every governate between the government and the civil society under which the government extended training and assistance for media programmes which adopted a new confrontational style.

2.46 Each house in the village was assigned a health number and a family file was opened that contained records of some of the socio-economic aspects of the family. The concept of family doctor was adopted in a family health policy based on the reality of the situation. Policy programmes provide for explicit references to problems of women when raised in public meetings in villages, schools and other forums in which health workers meet the public.

(b) "Issues Relating to the Integration of Reproductive Health Components: the Case of Morocco"

Prepared by Dr. Redouane Belouali and Mr. Najib Kadira
Presented by Dr. Redouane Belouali

2.47 The study reviews the results of a field study carried out in Morocco, that revealed that the average age of marriage for women had increased recently, as well as the ratio of single girls in young age groups. The study noted that reproductive health programmes had neglected diseases of the reproductive system, such as infertility, and had not given due consideration to the gender issue as one of the components of reproductive health. The researcher also referred to the difficulties faced in coordinating civil society organizations dealing with conditions of women.

2.48 The study also revealed that Morocco is giving inadequate attention to reproductive morbidity and pre-pregnancy consultancy services in villages, which has raised the maternity mortality rate. On the other hand, whereas the constitution provides for gender equality, actual practices reveal that women are defrauded, a fact which is evident from the high level of female illiteracy and the relegation of women to lower positions and jobs.

2.49 Morocco has reached an advanced stage of demographic change, represented by: continuation of family planning which started before 1994, improved population strategies and increased allocations for this purpose, strengthened safe motherhood programmes, and the formulation of national programmes designed to decrease and treat sexually transmitted diseases and reproductive system diseases. The researcher called for the creation of new mechanism to integrate reproductive health components and to give attention to gender, youth and men.

(c) "Resolutions of the Regional Round Table of Arab Countries, Rabat, July 1998 on Reproductive Rights and Reproductive Health"

Presented by Dr. Moshira El-Shafei

2.50 Subjects discussed at the Round Table Conference were reviewed. They revolved around: 1) Reproductive rights and the implementation of reproductive health programmes; 2) The basic rights of women and population policies; it was shown that most Arab laws contained some form of discrimination against women which affected their participation in work and other social activities; 3) Empowerment of women and the role of men; discussions of the subject underlined the importance of education as a means of empowerment; 4) All forms of violence against women, and the lack of control of women over their economic resources.

2.51 Eight Arab countries which are working on the implementation of the Cairo Conference Programme of Action participated in the Round Table. The concept and contents of reproductive rights were discussed in depth, especially issues of gender equality in education, development, health and others. The Round Table resolutions included a call for the integration of reproductive health into population policies and primary health programmes, the upgrading of reproductive health services and meeting unaddressed needs.

(d) "Availability and Quality of Reproductive Health Services"

Prepared by Dr. Salah Mawajdeh, Dr. Raeda Qutub and Dr. Ali Al-Kaza'a
Presented by Dr. Huda Zurayk and Dr. Salah Mawajdeh
Commented on by Dr. Hind Khattab

2.52 Dr. Huda Zurayk, introduced the study by referring to the experience of a reproductive health team which started work in 1988 on evolving the basis for reproductive health research in the Arab countries. This involved changing of concepts based on the reality of the Arab situation, through dialogue among sectors and individuals involved. The team studied the viewpoints of all involved in reproductive health, from the provider to the recipient.

2.53 Dr. Salah Mawajdeh explained the qualitative and quantitative indicators used in the study. The quantitative indicators included, inter alia, accessibility of services center and working hours, whereas qualitative indicators included the relationship of the provider with the client and the quality of available services. A comparison of the availability and quality of services offered today with what was offered in 1994 showed a strong trend in most countries towards a more comprehensive concept of reproductive health, with family planning justified on the basis of health and development, and not only demographic considerations. This trend has been translated into structural changes in the organizations that implement reproductive health programmes; whereas in most countries these programmes are limited to providing maternal services during and after pregnancy. Besides, indicators used to measure outputs of the programmes do not reflect the concept of comprehensive reproductive health, with most countries using quantitative indicators that focus on the availability of and the ease with which information, services and cost can be secured, given the obvious absence of indicators which measure the quality of the service rendered. Furthermore, no survey is conducted in these countries to analyze the concept of reproductive health and its components, or to develop monitoring and follow-up indicators. The researcher referred to the constraints of the implementation of reproductive health programmes, including, for example, lack of financial resources, high illiteracy rate and the absence of political commitment.

2.54 Dr. Hind Khattab, affirmed, in her comment on the study, the need to give full consideration to the way woman perceive health issues. She referred to the lack of awareness of women, regardless of their educational level, of their reproductive health, and noted that the Arab woman gives top priority to the health of her children and family, rather than to her own health. She treats some of her ailments, while others, such as cervical cancer, which could pose a threat to her health and life, go untreated. In addition, the woman cannot decide, on her own, to consult a doctor - only a quarter of those in Egypt responding to a field study questionnaire indicated that they had taken that decision without checking with their husbands. The commentator recommended three channels of intervention: training of service providers; providing medicines and contraceptives and implementation of awareness and educational programmes for women. Implementation of these recommendations has started in some parts of Egypt.

(e) "Adolescent Reproductive Health and Male Involvement"

Prepared and presented by Dr. Abdul Halim Joukhadar and Dr. Naeema Al-Gaseer

2.55 Dr. Naeema Al-Gaseer noted that there were different definitions of adolescence, and that the World Health Organization considers adolescents to be those 10-19 years old; they represent 20 percent of the population in most Arab countries.

2.56 Adolescent reproductive health, she noted, covered physical and psychological tests and counseling for early detection of disease and troubles. However, the provision of information and services to this

segment of the population requires special methods, designed to develop the living skills of adolescents to enable them to cope with their daily problems and avoid harmful habits. The Arab accomplishments in the fields of information, communication and advocacy were listed, without reference to the provision of services. In health centers, singles have access only to information, not services, with reproductive health services for adolescents absent in most countries. It is essential that adolescents be provided with sound health information rather than be left to secure such information from unreliable sources, and that they be enlisted in the formulation of policies related to them.

2.57 Dr. Joukhadar reviewed the history of concern for reproductive health in the Arab world, and he listed books that deal with Islamic rules on health and sex, and population education from an Islamic viewpoint. He stressed that transfer of information concentrated on knowledge rather than on behavioural changes, and noted the embarrassment in discussing the subject of sexuality, even though this was in contradiction to the religious laws. In Islam, the parents are required to explain the Islamic law position on issues that effect worship, such as ritual impurity and menstruation. He indicated that family planning associations had played an important role in educating adolescents through the system of peer education, and he referred to the lack of coordination among programme providers and the lack of use of indicators.

**(f) "Adolescent Reproductive Health and Male Involvement:
the Case of the Syrian Arab Republic"**

Prepared and presented by Mr. Khaled Najati

2.58 Youth in Syria are the 13-35 age group, and receive awareness and services from the organization of the Revolutionary Youth Union. The study focused on accomplishments of the organization in the area of reproductive health for adolescents and youth, which were, among others: 1) Discovering the views of the youth on information and attitudes related to health issues, especially knowledge of contraceptives and desire for future use; 2) Implementation of the United Nations Programme "SYR 94 PO1" designed to train service providers and to make youth aware of reproductive health considerations. That is achieved by using various channels of communication, such as youth and public meetings, public information, and the inclusion of population education and reproductive health in the permanent agenda of the organization. The organization also convened a number of supportive activities such as the national seminar, the round table conference and observance of the World Population Day.

2.59 The involvement of males in reproductive health was expressed through numerous activities including dialogue in mixed groups, brain-storming sessions that produce creative solutions and workshops. The researcher referred to the absence of adolescent medicine in the Arab countries and the failure to train youth to take decisions.

2. Interventions

2.60 Discussions centered on indicators to measure the availability and quality of services. One participant called for the introduction of the gender dimension into qualitative indicators, and for a study in the countries involved of the link between female circumcision and reproductive system diseases. Another participant called for an understanding of the significance of indicators, and he noted that the claim that only one quarter did not consult their husbands before seeing a doctor could be due to factors unrelated to gender equality and empowerment of women. In addition, the indicator of the prevalence of contraceptives is not sufficient to give an accurate presentation of the population situation. There is a mutual relationship between fertility levels and contraceptive use. Another participant called for an indicator on breast-feeding. In her response, Dr. Hind Khattab said that what concerned her was the identity of the decision-maker. Who makes the decisions about the woman's reproductive health, the woman or the man? Whenever the man is the decision-maker, as is the prevailing situation in the Arab countries, action should be taken to change this situation through women empowerment.

2.61 The head of the delegation of Kuwait was critical of some statements in the papers presented and described them as far-removed from the Arab reality. He said that unwanted pregnancy that leads to abortion was a social problem which had nothing to do with the provision of health services. He expressed

hope that the final report would not contain views that contradict the heritage and traditions of the region. He was also critical of claims that girls received less food and care than boys. The delegate of Morocco stressed that his government did not neglect the health of adolescents, and that sex education should not lead to premarital sexual relations because that violates Arab and Islamic values. One participant called for the convening of a workshop on adolescents and reproductive health, to be organized by the United Nations Population Fund. She referred to the embarrassment involved in supplying reproductive health services and information to adolescents inside health centers, because of its impact on the client's reputation.

2.62 The delegate of Egypt cited the differences within groups which could be classified as youth: married and unmarried, students, workers, unemployed and those hard to reach. She called for greater attention to be given to youth in view of the impact that would have on our societies. In rural areas, men are preferred over women in the provision of food and treatment, and most 13-year old girls suffer from anemia, which obviously has an impact on the health of the children they bear not long after.

2.63 The delegate of the International Planned Parenthood Federation (IPPF) commented on the subject of Islam and reproductive health and stressed there was no conflict between Islamic law (Sharia'a) and sex education, and he cited resolutions of the Rabat Conference on Islam and family planning held in the seventies. He stressed the role of peers in conveying correct information.

2.64 It was noted that discriminatory practices between male and female children in food and education, as documented by field studies, were a violation of the letter and the spirit of Islam, and steps were needed to bridge the gap between laws and practices. Reproductive health services are made available to married couples in harmony with religious beliefs and in accordance with resolutions of the Azhar Conference of 1997 which called for a greater role for preachers in making people aware of issues related to reproductive health. The chairman of the session, the head of the Moroccan delegation, summed up the discussions with the following points: 1) The need to activate the comprehensive concept of reproductive health; 2) The need to develop indicators to measure and follow-up the implementation of reproductive health programmes, which requires a regional information center; 3) The family, state, and civil society have joint responsibility; 4) Every state should evaluate its accomplishments in this field after 1994.

IV. FOURTH SESSION

Partnership with civil society and the role of non-governmental organizations in the implementation and follow-up of the Programme of Action

A. STUDIES

1. "Role of Civil Society: Opportunities and Constraints"

Prepared and presented by Dr. Amani Kandil

2.65 After defining the civil society and its importance, the researcher spoke of the expanding role of the civil society in the Arab countries. The number of non-governmental organizations (NGOs) had risen sharply to between 130,000 and 150,000. She noted that there had been a general shift in the focus of NGOs from charity work, which prevailed prior to 1994, to a more comprehensive developmental role. Economic changes, such as restructuring and privatization, democratic changes and United Nations activities have profoundly influenced the emergence of the Arab civil society.

2.66 In a study of the opportunities and resources available to the civil society, a field study carried out recently in Egypt on a sample of NGOs was cited to indicate that more than half of them were implementing projects related to the recommendations of the Cairo Conference, with priority given to social care for the family, children and disabled, followed by capacity building. Empowerment of women is still in early stages, especially in rural areas and there are only very limited efforts in the field of sex education, and only a limited role for the private sector and academic institutions in partnership for the implementation of the ICPD Programme of Action.

2.67 It was proposed that a number of resolutions be adopted to provide for agreement among NGOs on a "moral code" that would call for accountability and transparency and the setting up of networks that would link them, similar to the Arab Network for Non-Governmental Organizations. The researcher felt that the greatest challenges facing NGOs are the presence of the political will to create the right environment for the implementation of the Cairo Conference Programme of Action, self capacity building, financing, and the ability to be able to function within the framework of networks.

2. "Role of the Civil Society: the Case of Lebanon"

Prepared and presented by Mr. Toufic Osseiran

2.68 The researcher asked that the Second Amman Declaration recommendation concerning NGOs be incorporated into conference resolutions. He referred to the active role of NGOs during the Lebanese war and reported in detail on the activities of the Lebanese Family Planning Association, which revolved around the following points: 1) The move from the concept of family planning to the concept of reproductive health by changing the national perception of this subject and providing more comprehensive health services. The information effort involved conducting seminars and workshops, and the Association concentrated on the subject of population education in schools; 2) The conduct of operational research in a number of regions of Lebanon in a bid to determine the views and positions of women and youth on reproductive health and to evaluate the role of the Association; 3) Participation with NGOs, government, and parliament in the formulation and implementation of population programmes and active participation in the Permanent National Population Committee, which has been inactive for over a year; the researcher said that United Nations was partly responsible for this inaction; 4) The implementation of a variety of population programmes, some related to awareness campaigns for women, youth and men and others that offer health services or consultancy through field workers within the local community programme and clinics.

2.69 The Lebanese Family Planning Association organized training sessions on gender and worked on the rehabilitation of rural women, the organizing of voluntary youth work camps and the combatting of addiction. The researcher concluded by calling on the United Nations to set the criteria for partnership between the governments and NGOs. Many of the active NGOs do not have adequate support, while others, which are inactive, get large support. He urged the United Nations to help Lebanon conduct a census in order to settle disputes over the accuracy of population features and figures available from various sources.

B. INTERVENTIONS

2.70 There is a need to evolve relations between the governments and the NGOs to make them complementary and to avoid duplication of efforts. The Egyptian Health Minister discussed the experience of Egypt in providing the opportunity for NGOs to work with government health units. He stressed the need for the NGOs to observe accountability and transparency and called for the setting up of a council in each governate or administrative unit to coordinate work between the government and the civil society to ensure implementation of the programmes. This would involve the exchange of information and technical support which the government is able to provide for the NGOs.

2.71 The problem of the absence of coordination and understanding between NGOs in the Arab countries was raised. A participant noted that the civil society was receiving help from the United Nations through the government, a move which gave the latter authority to determine the forms of support given and the identity of the recipients, which were not always active or independent of the government. The network of NGOs was urged to intervene to resolve this complication.

2.72 Participants agreed that there was no need for a specific ministry to be responsible for all NGOs, but there was a need for the establishment of an entity coordinating between all the ministries involved and the NGOs.

V. FIFTH SESSION

Gender Issues

A. STUDIES

1. Gender Equality, Equity and Empowerment of Women: Conceptual and Legal Changes”

Prepared and presented by Dr. Balghis Badri

2.73 The researcher introduced the concept of gender and stressed the need to find indicators to measure it. She proposed that the empowerment of women was one suitable approach to the removal of gender inequality and the measurement of progress in achieving gender equality, and: 1) That the constitution provide for equality on every level, including the Head of State; 2) Ratification of Arab and international labour laws; 3) Ratification of the Convention for the Elimination of all Forms of Discrimination Against Women, with or without reservations; 4) Special laws for increased participation of women in authority; 5) Compulsory education; 6) Citizenship laws giving the mother the right to grant citizenship to her children.

2.74 The researcher noted that there were a number of draft civil status laws, such as the laws in Egypt and Morocco, and called on the League of Arab States to circulate the texts to member states for study and approval. She concluded with draft resolutions which could be achieved by the year 2005, involving changes in the laws related to education, labour, legislative and consultative assemblies, civil status and citizenship.

2. “Gender Equality, Equity and Empowerment of Women: Procedural Changes and Application of New Concepts”

Prepared and presented by Mrs. Emily Nafa

2.75 Changes in the concept of empowerment of women, ranging from care to equity to empowerment and the introduction of the concept of gender in population and development were reviewed. It was noted that 11 Arab states had ratified the Convention on the Elimination of all Forms of Discrimination Against Women. She added that the relationship between the development of women and the advance of society was acceptable on the Arab level even though true equality between males and females was still absent. Women were still looked down upon in a number of countries, with low participation in many areas of life and large disparities between country and country. Only 3 Arab countries had introduced the concept of gender into their policy.

2.76 Constraints facing gender equality were said to arise from the fact that women were recipients of policies and not participants in their formulation. As such, their viewpoints were not represented in these policies. There are some exceptions. For example, women participated in the formulation of the social plan in Jordan. The advent of globalization, international trade agreements and the shrinking of the role of the state have created new challenges which require the cooperative effort of men and women alike. The presentation was concluded with a number of resolutions, including the formation of a ministerial-level authority responsible for affairs of women, the study of the impact of structural adjustment on women and the establishment of an Arab fund to finance women's organizations and the creation of a data base on gender.

3. “Reproductive Rights: the Case of Tunisia”

Prepared by Dr. Nabiha Gueddana
Presented by Dr. Saloua Darghouth

2.77 Reproductive rights were considered to be part of the general rights of men and women. The practice of these rights is an indication of gender equality and social progress and a basic component of

comprehensive development. It was noted that in Tunisia, in the three decades prior to 1994, a national programme for family planning was launched which has evolved with time into a more comprehensive reproductive health programme. This change has been based on advanced legislative provisions which began in the sixties with the lifting of restrictions on the sale of contraceptives and on abortion starting with the fifth child and continued with the linkage of such sales with health conditions, in addition to the banning of polygamy and arbitrary divorce, the consecration of gender equality in the constitution and other legislations and procedures that ensured for women and the family a large number of basic rights.

2.78 The trend towards strengthening reproductive health services and strengthening their legislative and institutional frameworks continued after 1994. Three special meetings of the council of ministers, chaired by the president of the republic, were set aside for the issues of population and family and reproductive health, with support for research in these areas. In addition, a special "presidential award for reproductive health" was instituted to be awarded annually to an individual or an organization that had excelled in this area. Information, education and communications programmes dealing with reproductive health, were developed and directed to different segments of the society especially youth and men. Reproductive health components were strengthened with intervention in gray areas and the adoption of partnership between NGOs and international bodies.

4. "Gender Issues: the Case of Jordan"

Prepared and presented by Dr. Shirin Shukri

2.79 The study covered the condition of women in Jordan where illiteracy among women is still high, even though it has declined compared to prior to 1994. Families are inclined to educate the males more than the females causing low participation of women in higher economic activities. The study underlined the participation of the Jordanian National Committee for Women in the empowerment of women through a variety of activities designed to introduce legislative, political, economical, social, educational and health changes. This committee has become the main focal point for the advance of women, with its activities running in parallel with the Programme of Action of the Cairo Conference. The study also referred to programmes for women in government departments such as the ministries of education and labour, and the NGOs, especially the Queen Alia Fund for Social Development in Jordan, the Jordanian Women's Federation and the National Grouping of Women's Committees.

2.80 Referring to a case-study of Jordanian rural areas, where illiteracy among women is high, the study showed the importance of the obstacles confronting the progress of women, including local community culture, and it gave details of measures adopted by the social services center located in the village which was target of the study.

B. INTERVENTIONS

2.81 The Head of the Kuwaiti delegation objected to the contents of some papers, especially what he considered to be a rejection of polygamy and a call to raise the age of marriage. He declared that polygamy was consecrated by Islamic law and he rejected the hint that marriage prevents women from pursuing education. He also referred to the problems involved in granting the mother the right to pass on her citizenship to her children, especially within the context of the Gulf countries. He also objected to granting wives the right to divorce because the judge of the religious court is authorized to do that if she is victimized. He also objected to any attempt to change civil status laws because Gulf countries reject tampering with Islamic and Arab values.

2.82 A participant stressed that Arab women had no desire to change Islamic law but wanted the constraints of religion to be observed including the requirement that a man marrying more than one wife had to treat them equally and that the brother who inherits twice the share of his sister must provide her with financial support. These are provisions which are not being observed in many families. She contended that women still have a negative image in the Arab world which must be changed and the right approach is education and awareness. She also stressed that women should have the right to control their wealth as was the case in the early days of Islam because women have the right to participate in production, trusteeship and

education. The delegate of Mauritania said that it was very important to distinguish between law, traditions and customs and noted that his country had approved a national strategy for advancement of women.

2.83 The delegate of Lebanon cited great progress in the status of the Lebanese women despite the years of war and he listed figures on literacy and school enrollment. He pointed out that all that had been achieved under civil status laws which give every religious sect the right to implement its own civil status rules. He pointed out that polygamy is very rare even though it is allowed under Islamic law and he called for a close, in-depth examination of gender indicators. He noted that the simple statement that the salary of women was less than the salary of men did not reveal some important facts, at least in the case of Lebanon, such as the fact that differences are due to difference of professions and years of experience.

2.84 The delegate of Tunisia stressed that the issue of gender is part of comprehensive development and declared that Tunisia had studied this issue with courage that does not contradict Arab or Islamic affiliation or religious values.

2.85 Dr. Badri indicated that her call for changes in civil status laws was in harmony with Islamic law. She said that she was calling for reducing the role of the man in divorce without the knowledge of the wife and was appealing for male accountability rather than irresponsibility in that respect. With reference to polygamy, she said that she had the right to struggle for the defense of the interest of her family. In a comment on the age of marriage, she called for an end to the contradiction between constitutions and conventions signed by the countries where the age of accountability is 18 or 21 whereas the minimum age at marriage is 16 or below. The issue of citizenship will have to be left to the special situation of each country.

2.86 Mrs. Emily Nafa concluded the discussion by pointing out that she had been in the front line of defense of women's rights for some time. She described previous positions as being part of an age of decadence and stressed that religion is on the side of women even though many people try to hide behind religion to defend their own opinions. She noted that 10-15% of Arab families are supported by women, which is another reason for measures to provide for her assistance.

VI. SIXTH SESSION

Monitoring and Follow-up of the Implementation of the Programme of Action

A. STUDIES

1. "Quantitative Indicators for Monitoring and Comprehensive Regional Information Systems"

Prepared and presented by Dr. Hussein Sayed

2.87 The study refers to quantitative indicators which were adopted at previous conferences and the need for the establishment of appropriate mechanisms for monitoring and follow-up. The follow-up systems were classified according to goals: 1) At the regional level, determination of the extent of success of states in the implementation of policies; 2) At the national level, study of the inputs and outputs of programmes and implementation of activities; 3) At the project level, getting acquainted with the nature and goals of the project and activities and the method of management. The researcher defined the characteristics which must be found in a good indicator. These include the possibility of measurability, reliability, specificity, utility and clarity. Criteria for the choice of indicators include their capability of exact measurement, the possibility of calculating them by using available data, the clarity of objective of the indicator and the cost including the human cost to determine its value.

2.88 The study said that there were a large number of quantitative indicators which can be derived from various sources but there is no international agreement on any group of indicators except for the 11 indicators approved by the Task Force on Basic Social Services for All. These are in addition to the group of primary indicators included in the common national data base which is being prepared by the United Nations Development Assistance Framework (UNDAF). The United Nations Population Fund has chosen a large

number of indicators which could be used to follow-up and evaluate programmes at different levels in the areas of reproductive health, population and development strategies and advocacy. The most important indicators have been specified in some comparatively short list with regard to reproductive health programmes and population and development. These lists include quantitative and qualitative indicators because they consider that any distinction made between them is arbitrary. Regarding follow-up systems, regional systems should be based on national systems. Requirements and needs of the users must first be clear, to be followed by the factor of quality. It is not necessary to begin with a comprehensive system, in the beginning it is possible to pursue a stage-by-stage approach, drawing upon that which is available.

2. "Remarks on the Importance of Qualitative Studies for a Proper Understanding of Population Phenomena"

Prepared and presented by Dr. Khaled Louhichi

2.89 The researcher pointed out that this paper is an attempt to support qualitative studies in terms of their methods, indicators and estimates. This study addresses the methods used in qualitative studies and include group and in-depth interviews and participatory observations. The researcher said that this approach in population study is justified by the fact that it is a complicated area which is difficult to understand through semi-structured questions, as is the prevailing case because this means an abbreviation of the assumptions of research to their lowest level. That is possible through the gathering of data at the international level, but at the expense of variety. Furthermore, social behaviour and population phenomena are numerous and differ from place to place, and as such, it is very difficult to find one questionnaire which is suitable for all societies.

2.90 There is now a comprehensive dimension to the population phenomena that requires a qualitative comparison. There is a great shortage in the number of qualitative studies in the Arab countries (30 out of 2,000). These studies have a number of advantages, the most important being flexibility as the assumptions evolve constantly during field work. He called on governmental and private institutions to allow for such studies to be conducted.

3. "Towards a Regional Programme to Promote Arab Coordination and Efforts in the Field of Population and Development"

Prepared and presented by Dr. Ahmad Hammouda

2.91 The researcher found a common features in international conferences held in the nineties, namely they constituted one theoretical and operational movement that represented a move from the collective social level to the individual level. They affirm the right of the individual to secure services, and deal with issues of human development, population, environment and others. However, the challenge faced can be summed up in three issues: 1) Finding effective mechanisms for the implementation of programmes and resolutions; 2) Meeting national needs through these programmes and their harmony with regional and international needs; 3) Creating of methods and tools for follow-up.

2.92 The researcher indicated that the existing regional coordination mechanisms are hindered by the lack of political commitment and the vagueness of new terms, such as gender and empowerment, and the presence of national priorities (security, indebtedness ...) which are not compatible with the priorities of the Cairo Conference, and the absence of a national governmental authority that coordinates the implementation of the programme. He explained a project for a coordinated programme of action to be implemented by ESCWA, which envisaged establishing regional and national networks, building national capacities, formulating appropriate methods and indicators and implementing specific activities in the fields of advocacy, information and capacity building.

4. "Pan-Arab Project for Child Development and ICPD Programme of Action"

Prepared and presented by Dr. Ahmed Abdel Monem

2.93 The goals of the Pan-Arab Project for Child Development were explained. The most important of these is the plan to supply organizations, governments and universities with the information needed on mother and child health. The executing agency, namely the League of Arab States, has implemented the project into 10 countries. The researcher gave details of the five questionnaires used in the project, which covered housing, family, mother and child health and characteristics of the community. The data was analyzed and national, comparative studies were prepared. A regional conference where the findings of the project will be presented, is being organized. The reproductive health model was first adopted by Morocco.

2.94 The researcher said the future course of the project should take into consideration: 1) The need for additional data based on smaller geographical units and revolving around subjects not contained in this project, such as gender, and reproductive health for youth; 2) Qualitative studies should be given special attention in seeking explanations of phenomena which quantitative indicators were unable to explain; 3) Support of training programmes in countries in which the project has already contributed towards capacity building; 4) A wider media coverage of the results.

B. INTERVENTIONS

2.95 The indicators proposed are important, especially in view of their relevance to the monitoring of programmes, but it is also important to specify the objective: Is this a measure of the impact or a follow-up, since a study of the impact takes a long time? The importance of operational research to identify problems and project methods of solving them was also underlined.

2.96 One participant noted that most quantitative studies did not have a theoretical background and do not lead to the formulation of appropriate policies. He called for the abbreviation of the list of indicators in order to simplify their use. He noted that the presentation of a paper on a data base project for social policies in the Arab world would have been appropriate.

VII. CLOSING SESSION

A. ADOPTION OF FUTURE ACTIONS

2.97 Proposed future actions prepared by the drafting committee were read one-by-one and participants were asked to comment. The delegate of Mauritania proposed a number of changes which were approved and Mr. Toufic Osseiran requested another amendment on NGOs which was also approved. The Health and Population Minister in Egypt made a number of comments and the future actions were then approved unanimously.

B. CLOSING REMARKS

2.98 Dr. Nafis Sadik highly valued the accomplishments of the Conference and pointed out that its outcome along with those of other regions, would provide the basis of the draft report of the United Nations Secretary General to the General Assembly next June. Basing her remarks on conference discussions, she listed a number of achievements in the implementation of the ICPD Programme of Action, including progress in formulating population and development strategies, in integrating reproductive health components into the primary health care system, and in building national capacities for provision of services. She also listed the challenges defined by the conference including reducing maternal mortality and reproductive morbidity, bridging gender gaps and extending reproductive health services to adolescents.

2.99 Dr. Sadik also referred to the experience of the region in view of high population growth rates and armed conflicts which had claimed millions of casualties, especially youth, women and children. She announced that the United Nations Population Fund (UNFPA) was cooperating with the United Nations High Commissioner for Refugees and the Red Cross to put together a system that would provide

reproductive health care for women in emergency situations. She also acknowledged credit to the role of NGOs in raising the awareness of the public for these issues and urged governments to collaborate with the civil society, including NGOs, in this respect.

2.100 She stressed the need for governments to give attention to providing reproductive health services and family life education to adolescents and she stressed that research had shown that adolescent reproductive health programmes promote responsibility rather than promiscuity. She noted that the low-status of girls is not only an obstacle to the reproductive rights of adolescents but also leaves them open to harmful practices such as Female Genital Mutilation (FGM), the elimination of which requires considerable sensitivity because of the intensity with which cultural beliefs are held. She urged leaders at all levels, to condemn this practice outright in order for real changes to be realized.

2.101 She referred to the issues facing the region, including the ability to respect individual choices and social and family values which must be taken into consideration by national programmes supported by international organizations. That requires that governments and civil society collaborate closely to conceptualize programmes that complement each other, to develop joint monitoring systems. Within this framework, building national capacities has become a priority among UNFPA supported activities.

2.102 She noted that governments throughout the region had begun to support the integration of the concept of reproductive rights into population policies and stressed the need for the continuation of this support and the amendment of laws and removal of obstacles which prevent women and men from exercising their rights and limit their access to services. She stressed that there is a need for forward-looking efforts to integrate reproductive health services into primary health care systems, to expand the coverage provided by these services, to improve their quality and sustainability and to increase the participation of the civil society and the private sector. She stressed the importance of information, education and communication in disseminating health and reproductive awareness and stressed that information provided must be correct, reliable and complete and she called upon decision-makers to ensure the rights of the girl children and women and to eliminate all actions of discrimination and violence against them.

2.103 She declared the willingness of the UNFPA, working in cooperation with regional institutions, including NGOs, to establish a regional data bank and a network to follow-up on reproductive health and rights. In closing, she praised the final declaration of the conference for setting a clear and definitive course of action to address these challenges and fully achieve ICPD goals in the region.

2.104 Dr. Ali Abdel Karim, the Assistant Secretary-General of the League of Arab States, spoke briefly and paid tribute to the conference and the success achieved in underlining the size and the difficulties of the challenges which obstruct development efforts in the Arab World. He also paid tribute to United Nations organizations and agencies for their constant support for the Arab countries and he referred in particular to the effective efforts of the United Nations Population Fund (UNFPA) and its Executive Director, Dr. Nafis Sadik, who is working for the service of humanity and to enable and empower the individual to have his basic health needs met. He also paid tribute to the close cooperation between the League of Arab States and ESCWA in various developmental activities and thanked the Lebanese government and Minister Elias Hobeika for the warm hospitality accorded to the conference.

2.105 The Executive Secretary of ESCWA, Dr. Hazem El-Beblawi, praised Dr. Nafis Sadik who insisted on attending and participating in this important conference, at least the final session, despite her many preoccupations and commitments, that she might see for herself and participate in the success achieved by the participants in their discussions, recommendations and the future action approved.

2.106 Dr. El-Beblawi praised the standard of the scientific papers and national reports submitted to the conference and spoke highly of the distinctive responses of the Arab countries in providing the conference secretariat with detailed information on population by filling a related questionnaire. He also paid tribute to the high level representation of States at the conference and concluded by commending the positive contributions, the objectivity and the spirit of cooperation which characterized the participation of the Arab delegations in the conference.

2.107 Dr. El-Beblawi thanked the United Nations Population Fund (UNFPA) and the League of Arab States for cooperation and coordination with ESCWA in organizing this conference and a wide range of joint activities and he called for the continuation and expansion of this trend for the good of the Arab individual. He also expressed his gratitude and appreciation to the Lebanese government and people for the warm hospitality they had accorded ESCWA since it moved to its headquarters in Beirut and for what was done to ensure the success of this conference and he concluded by thanking the organizing committee, the media and conference personnel.

2.108 The Lebanese Minister of Hydraulic and Electricity Resources and Acting Minister of Social Affairs, Mr. Elias Hobeika, closed the conference with a short speech in which he commended efforts of the participating delegations and the work of experts in dealing with different subjects related to population. He also thanked ESCWA, the United Nations Population Fund (UNFPA) and the League of Arab States for organizing this conference and he expressed hope that there would be expanded financial and technical support from United Nations agencies and regional and international organizations to be extended not only in the areas of reproductive health and fertility, but also to deal with problems of the Arab brain drain, internal migration, forced displacement and urban crowding.

CHAPTER THREE

FUTURE ACTIONS

I. AFFIRMATION OF COMMITMENT TO IMPLEMENTATION OF THE PROGRAMME OF ACTION OF THE INTERNATIONAL CONFERENCE ON POPULATION AND DEVELOPMENT

3.1 The participants affirmed their commitment to the implementation of the recommendations of the Second Amman Declaration, issued in 1993 and to the Programme of Action of the International Conference on Population and Development, issued in 1994, while conceding "the implementation of the recommendations contained in the Programme of Action is the sovereign right of each country, consistent with national laws and development priorities, with full respect for the various religious and ethical values and cultural backgrounds of its people and in conformity with universally recognized international human rights."

3.2 The participants also reaffirmed commitment to the United Nations Charter, and the Universal Declaration of Human Rights and the international conventions related to human rights and the conventions on the rights of children and on the Elimination of all Forms of Discrimination Against Women.

3.3 Recalling the pioneering role of the Arab World in the consecration of principles, values and human rights, and in order to uplift the Arab person on the verge of the twenty-first century, the participants reaffirmed the extreme concern with the issues relating to human rights and population issues, which include reproductive health and the provision of integrated and comprehensive information, education, and health and social services that people need.

3.4 The participants affirm that the use of the term of "reproductive health" in the future actions embraces all the elements agreed upon and which are included in ICPD Programme of Action of 1994, and particularly the definition that "reproductive health is 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" (Paragraph 7.2 of the ICPD Programme of Action). As such, it embraces all methods and services which contribute to prevention from and treatment of disorders related to reproductive health, including family planning, which are designed to improve the quality of life and to protect from sexually-transmitted diseases and other disorders of the reproductive system and to alleviate practices detrimental to the health.

II. POLICY AND INSTITUTIONAL FRAMEWORK

3.5 The international and regional trends contributed to the emergence of a variety of demographic, economic and social issues which require our attention. Governments are adapting their policies to face increasing challenges. In this context, future actions must include: (1) The necessity of supporting measures designed to create an enabling environment for promoting the effective implementation of programmes and policies, including political commitment at all levels. (2) The provision and improvement of reproductive health services so as to lead to a reduction in maternal and child mortality. (3) Cooperation, on the regional level, with the institutions of civil society and with international agencies to promote the planning, implementation and follow-up of these programmes and policies. (4) Promotion of activities designed to enhance the role of the family in society in order to confront the challenges represented by the new values and roles of family members arising from globalization. (5) Support of actions aimed at the protection of the rights of Arab women and at empowering them to carry out their active and essential role in the development process.

3.6 Cooperation on the regional and international levels to secure respect for the freedom of movement and organization of the labour between countries of the region and in order to protect the rights of incoming workers, while giving full attention to the laws, rules and regulations in every country and the bolstering of developmental factors in favor of the poor groups and the groups exposed to emigration in labour-sending countries in a manner that will limit motivation to emigrate.

- 3.7 Given the openness between nations, and the need of the Arab countries for scientific and technical expertise that will meet developmental needs, and whereas numerous qualified Arabs have made well-known scientific contributions in advanced countries, it is imperative that the Arab governments conserve these national qualifications and creative capabilities by providing incentives that would induce these people, as part of population and general policies, to remain in their own countries by creating an atmosphere conducive to the retention of these qualified people within the Arab World.
- 3.8 When formulating policies and programmes on population and development and environmental health, governments are urged to devote greater attention to provision of potable water, sewerage system and suitable shelter in under-served areas and in areas of high population density. Likewise, the governments should adopt appropriate strategies and practical measures to create work opportunities and projects that will generate income for needy families and reduce unemployment and combat poverty.
- 3.9 Governments should study, in collaboration with regional and international bodies, the impact of economic reform and restructuring programmes on development and should exert every effort to mitigate, as much as possible, the negative repercussions on the more vulnerable population groups, such as women and children, and should introduce measures to cut down on cases of injustice and to achieve social justice and social security networks.
- 3.10 Governments should give care and attention to ensure that privatization and the restructuring of social sectors, especially health, will not have a negative impact on reproductive health services in terms of the quality and standards available to the public, especially women and other vulnerable groups.
- 3.11 Recognizing that the geographical distribution of the population and urbanization are important elements in population policies and recognizing the impact of mal-distribution on development and the quality of life of the people, in some Arab countries, governments are urged to integrate this issue into their development policies in a bid to achieve better population distribution and more balanced national development.
- 3.12 The presence of internal and external tensions and conflicts within the Arab region has produced large numbers of refugees who do not have access to adequate social and health services. Governments should exert efforts, in cooperation with the relevant international authorities and non-governmental organizations, to provide these people with all needed services especially in areas of reproductive health and child care, and at appropriate quality and suitable timing.
- 3.13 Governments should give attention to gender issues, in keeping with their laws, by raising awareness of officials in all governmental sectors about gender issues, and by increasing the representation of women in decision-making positions.
- 3.14 Governments should seek to integrate the unmet needs of the population, of all age groups, in the reproductive health plans and programmes so as to achieve greater gender equity.
- 3.15 Acting within the framework of ongoing reproductive health policies and programmes, based on conscious choice, governments should specify priorities aimed at achieving comprehensive and integrated reproductive health care services and at raising the standards and improving the quality of these services, especially in remote and poor areas in which health and social services are inadequate.
- 3.16 Attention of governments is drawn to the importance of coordination among all providers of reproductive health services, including governmental health institutions, non-governmental organizations and the private sector; it is the duty of the governments to support and maintain such coordination.
- 3.17 Greater attention should be given to promotion and advocacy activities that particularly target decision-makers and programme managers, and efforts should be exerted to create an enabling environment through dialogue and advocacy, based on the right assessment of needs in the areas of reproductive health, gender equality and equity and the empowerment of women.

- 3.18 The governments affirm the importance of development activities for adolescents and youth, and the need for the pursuit of a holistic approach which involves the integration of educational, cultural, professional, recreational and other activities.
- 3.19 Governments should promote research designed to support reproductive health policies and programmes, which include marital relations and other related issues (such as sexually transmitted diseases, breast cancer, cancer of the reproductive system, as well as violence against women and children and female circumcision). Research is needed into ways of improving the formulation, implementation and evaluation of projects and for qualitative research and need-assessment in order to increase understanding of changes among adolescents and youth, involving knowledge, attitudes, values, concepts and practices related to reproductive health.
- 3.20 Representatives of the people in legislative and consultative bodies are urged to continue to support and promote policies and programmes designed to implement the Programme of Action of the International Conference on Population and Development through the establishment and activation of national parliamentary population and development committees.
- 3.21 Governments are encouraged to formulate, implement and monitor appropriate actions designed to promote gender equality and equity. This should encompass the introduction of legislative and constitutional reforms - whenever appropriate - in order to protect the rights of women and to promote gender equality in the areas of education, employment, health and within the family, and the activation of the legal rights of women through greater awareness and advocacy efforts.
- 3.22 Governments are called upon to adopt a sound strategic approach which contains specific goals designed to achieve gender equality and equity, by concentrating on groups of greater need, such as people who live in poor environments or in environments in which sharp gender disparities exist.
- 3.23 Strategies designed to rectify the image of girls and women in media programmes and in educational curricula should be formulated so as to eliminate all the negative images of girls and women, and to promote gender equality.
- 3.24 Governments are urged to give opportunity to civil society bodies to actively participate in all stages of the formulation of development and population policies, the implementation of programmes, the mobilization of resources and the monitoring and evaluation of activities.
- 3.25 Non-governmental organizations are urged to exhibit greater transparency in their activities and to exercise accountability in their reporting.

III. IMPLEMENTATION OF POLICIES AND PROGRAMMES

- 3.26 Governments should undertake, within the framework of improving population programmes, and with the help of international bodies, to choose and adopt a comprehensive approach to reproductive health including provision of family planning information, counseling and care services before and during pregnancy, as well as during and after birth, in addition to combating the negative impact of unsafe abortions, and prevention from and treatment of diseases of the reproductive system and sexually transmitted diseases including AIDS, along with other components of reproductive health care.
- 3.27 Efforts should be exerted to eradicate female circumcision traditionally practiced in some Arab countries inasmuch as it is a practice which is detrimental to the health and based on misconceptions. This should be realized through legislation and advocacy efforts utilizing available media which target the parties involved, such as public opinion leaders, parents, traditional leaders, religious leaders, government officials and members of legislative and consultative councils.
- 3.28 Governments should develop, in collaboration with international bodies, a number of integrated models for reproductive health care to be used in different areas of the same country and which would take

into consideration the variety and disparity of needs on the various levels at which services are provided; subsequently, a variety of models should be drawn up which are compatible with the availability of financial, human and natural resources and needs since one model would not be adequate for use in all stages and under all conditions.

3.29 In order to improve systems of measurement, monitoring and evaluation of population and reproductive health programmes on all levels, governments, with the help of regional and international bodies, whenever suitable, should undertake the following: (1) The promotion of statistical and management information systems to make them compatible with national needs and demands; and (2) Upgrading local capacities, including individual skills, in collecting and processing data for the purpose of monitoring, evaluating and analyzing. These measures are crucial for effective management and decision-making at all levels of the population and reproductive health care programmes.

3.30 Governments should improve logistics systems so that needed reproductive health supplies, including family planning methods, are available and sufficiently varied to meet unmet needs in order to facilitate the effective and inexpensive provision of health and reproductive health services, especially for limited income groups.

3.31 Governments should study the possibility of allowing duty-free import of contraceptives and other health-related basic supplies, whenever that is suitable and should explore the possibility of the production of contraceptives in some Arab countries.

3.32 Governments are urged to adapt and upgrade existing training programmes in a bid to promote national human resources with a view of raising the quality of health care services, with a special emphasis on inter-personal communication skills for service providers to meet client needs and satisfaction.

3.33 Governments are urged to adjust the structures of existing services so as to make them more client-oriented and to provide health care follow-up including referrals to more-specialized care, whenever needed.

3.34 Governments are urged to maintain cooperation with international bodies and to undertake and support the documentation and dissemination of results of research findings and studies related to the quality of reproductive health care in order to increase awareness among policy makers and providers of health services.

3.35 Attention should be given by governments to female education and to making all segments of the society aware of the importance of this education by providing for their admission and continuity in educational institutions during the basic education.

3.36 Governments and the civil society should increase awareness of legal rights and of the availability of health and social services, especially among women.

3.37 Males should be encouraged from childhood to act responsibly and to treat women as equal partners in the family, society and national life and should be encouraged to increasingly participate in reproductive health programmes and in assuming greater responsibility for family health.

3.38 Field studies should be encouraged on the phenomena of discrimination and violence against women in terms of patterns, causes, levels, and social impact on women who are victims of violence.

3.39 Governments, in a bid to communicate information and provide appropriate reproductive health services for adolescents and youth, should prepare, in partnership with the civil society, the suitable mechanism for the provision of this information and these services, in an environment of understanding and in harmony with Arab moral and religious values.

3.40 In order to create greater understanding for the issues and needs of adolescents and youth, special advocacy and information campaigns should be launched which are designed for leaders of public opinion,

parents, school teachers, religious leaders, traditional leaders, government officials and members of parliamentary and consultative councils.

3.41 Governments are urged to involve adolescents in formulating, planning, implementing and monitoring of their programmes, including involving them as trainers and consultants for their friends and peers. Governments should act in cooperation with international bodies and the civil society whenever possible to carry out research into the best ways of enlisting the participation of adolescents in the programmes which meet their needs.

3.42 It is essential that a distinction be made between various adolescent and youth groups in the planning of programmes related to them. There are, for example, those enrolled in schools, those who have dropped out, youth working with or without pay, and youth with special needs. Governments should provide a sound health education which is compatible with Arab beliefs and moral values to protect them according to their needs and conditions, from misconceptions that lead to conduct detrimental to the health.

3.43 Efforts should be exerted for meeting the needs of the elderly, especially those who are poor, and to ensure them social, health and financial security, by strengthening and supporting of the roles of the family and civil society, especially in view of the fact that the Arab region is witnessing an increasing proportion of elderly segment in society.

3.44 The United Nations Population Fund (UNFPA), acting in cooperation with international and regional bodies and with governments, should exert a greater effort to identify, test and agree upon: (1) A core set of indicators, which are valid for the use by all Arab countries for the comparative assessment and monitoring of the progress achieved in the implementation of the goals of the International Conference on Population and Development and the Amman Declaration; (2) A set of gender-sensitive indicators which will help in the monitoring of progress achieved in countries at different levels of development that have a disparity in issues in the fields of population and development, including reproductive health.

3.45 Civil society institutions should play a greater role in planning, implementing and evaluating of programmes at the community level, especially programmes that deal with complex and sensitive issues, such as reproductive health for adolescents and youth and the male involvement in reproductive health programmes.

3.46 Non-governmental organizations should establish an umbrella or national coordination body to maximize their effectiveness. Governments should encourage and facilitate such measures.

3.47 The governments should continue, in collaboration with the United Nations Population Fund (UNFPA), the World Health Organization and other international and regional agencies, to clarify and elaborate conceptual and practical issues related to the technical content and care levels, and the means of information, education, communication, monitoring and evaluation of reproductive health programmes, while providing countries with the necessary technical support.

3.48 Governments should intensify, in collaboration with the United Nations Population Fund (UNFPA) and other international agencies, their efforts to analyze, document and disseminate information on the successes and constraints of implementation in a number of integrated reproductive health care models, including quality-of-care elements to assist countries for the purpose of accelerating and supporting the implementation of reproductive health services.

IV. STRENGTHENING NATIONAL CAPACITIES

3.49 Governments should affirm the basic and continuing role of training in the field of reproductive health care, in an integrated manner that would facilitate the integration of the various reproductive health components. This would provide and upgrade national capacities, on all levels, to formulate, evaluate, implement and follow-up basic reproductive health services, while taking into consideration the commitment of services providers to the constraints of medical ethics and legality in their daily practices with beneficiaries, to be realized through training, follow-up and supervision.

3.50 Governments should support and strengthen the primary health care system in local community-based development programmes. This should include comprehensive health services centers in order to address all aspects of health care, including reproductive health, for all members of the family.

3.51 Governments, working with the assistance of international and regional bodies, should upgrade their capabilities to develop data analysis methodology to determine the extent of responsiveness of government policies and programmes to the gender issue. This effort should involve the formulation of indicators and adoption of tools to monitor gender equality and equity and empowerment of women at all levels of society.

3.52 Governments are urged to design and support training programmes in the area of advocacy for gender equality, equity and for the empowerment of women. They should take the initiative to develop strategic partnership with women NGOs which will involve specifying areas of discrimination against women, and should also encourage and support these organizations in their advocacy and information campaigns for gender awareness, especially at the community level.

3.53 Mechanisms should be put in place to monitor and follow-up issues of violence against women in its various forms - legal, economic, social, health and psychological - including establishing of centers for women who are victims of violence and to educate workers in the competent organizations on the international conventions related to human rights in order to improve the ways in which these women are received and given adequate care.

3.54 Governments should support national capacities and should depend on them to conduct quantitative and qualitative research and studies on the relationship between population and socio-cultural factors, to promote better understanding of social customs and behaviour, especially those which impede the sound implementation of the ICPD Programme of Action and the Second Amman Declaration, and to help promote advocacy activities on the role of women, youth, the family and the reduction of practices detrimental to health.

3.55 Governments and international parties should encourage research on international migration in order to set up a data base on Arab migration to enable planners and decision-makers in the Arab states to plan and organize migration and to project its impact.

3.56 Additional research should be conducted to formulate a conceptual framework, methodologies and indicators on the inter-relationship between population, resources, environment and development and to exchange research results among the Arab states. This can be achieved through the establishment of an information and data network on these variables to help in the adoption of decisions designed to harmonize the variables and prepare an Arab programme to link these networks and to coordinate between the Arab states in this respect.

3.57 Governments are urged to undertake, in collaboration with international bodies, regional organizations and the civil society, when appropriate, the following: (1) Capitalize on the existing expertise in the region to organize collaborative activities in research, training and exchange of information; (2) Urging of Arab states facing similar economic or social conditions to meet to discuss issues of common concern; (3) Exchange of experiences between governmental organizations and civil society institutions, especially non-governmental organizations.

3.58 The participants reaffirmed support for training institutions, universities, regional and national research centers, and non-governmental organizations as they perform their role in the planning and implementation of the training programmes needed by the states, by drawing on the technical support provided by the international bodies and the United Nations Population Fund (UNFPA), to strengthen this role and to exchange experiences between the states to maximize the benefit derived from their programmes.

V. MOBILIZATION OF RESOURCES

3.59 International bodies and other donor institutions are strongly urged to continue advocacy efforts to encourage the international community to seriously strive for the allocation of 0.7 percent of the Gross

National Product for developmental aid to countries in need, and to allocate no less than 4 percent of this aid for population programmes, in accordance with the recommendations of the International Conference on Population and Development.

3.60 Governments are urged to increase the mobilization and utilization of local human resources, as a matter of high priority, in order to ensure implementation of the Programme of Action of the International Conference on Population and Development and the recommendations of the Second Amman Declaration. Such efforts should involve: (1) Advocacy for increased political commitment; (2) Use of operational research to identify the most cost-effective methods to deliver services; (3) Encouragement of increased local community participation in the Programme.

3.61 Governments are urged to consider new ways of mobilizing resources by using selective methods, such as social marketing, cost-sharing, and other means of cost-recovery, but without impeding poor and marginalized groups from full access to social services, including reproductive health care.

3.62 Governments should increase social and health sector allocations, especially education and primary health care, and reorganize the related services to meet the needs of population in all age groups, with special focus on marginalized groups and on those groups that do not receive adequate services.

3.63 Governments should cooperate with other organizations, especially non-governmental organizations, to explore new ways to mobilize individuals and the private sector. They should also explore the possibility of mobilizing resources through bilateral and multilateral financing, from Funds, and international and Arab regional financial institutions.

3.64 Governments and non-governmental organizations are urged to 'do more with less' by a better utilization of available resources with greater management efficiency.

VI. REGIONAL ACTIONS

3.65 The Economic and Social Commission of Western Asia (ESCWA) should continue efforts to secure the implementation of its regional project to follow-up resolutions of international conferences, and should urge governments and international and regional bodies to participate and cooperate to achieve the objectives of this project.

3.66 The League of Arab States and donors are urged to continue support and implementation of the second stage of the Pan Arab Project for Child Development, specific to family health, in order to provide the data bases needed to follow-up implementation of the Programme of Action of the International Conference on Population and Development.

3.67 Arab governments are urged to facilitate the freedom of movement, migration and residence for Arab labour and in so doing, activate the conventions signed between the Arab states, especially the Arab agreement to facilitate the movement of Arab manpower, amended in 1975.

3.68 The importance of the role of the Population Studies Unit of the Arab League in the areas of research and training is reaffirmed and international bodies are urged to support its efforts.

3.69 The Economic and Social Commission for Western Asia (ESCWA), the League of Arab States, the United Nations Population Fund (UNFPA), and other regional and international organizations in the Arab countries should take this basic set of future actions into consideration when formulating and implementing population programmes at the regional level.

3.70 Finally, the participants recommended that the organizers of this conference periodically convene other meetings, to follow-up the progress made in the implementation of the recommendations of previous conferences.

Appendix I

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Appendix II

ORGANIZATION OF WORK

Tuesday, 22 September 1998

- 9:00-10:00 a.m. Registration
10:00-11:00 a.m. Opening Session
11:00-11:30 a.m. Break
11:30-Noon Election of the Bureau
- Noon-2:00 p.m. First Session: Implementation of the ICPD Programme of Action and Population Changes: A Regional Overview
- The population situation in the light of the progress made in the implementation of the Programme of Action of the Cairo Conference
 - Country interventions
- 2:00-3:00 p.m. Lunch break
- 3:00-4:30 p.m. Second Session: Development Strategies and Population, with Special Emphasis on Labour Migration
- Population policy and development strategies in the context of macroeconomic change
 - Migration and the family: the case of Arab labour-sending countries
 - Labour migration in the Gulf Cooperation Council countries

Wednesday, 23 September 1998

- 8:30-9:30 a.m. Statements of Regional and International Agencies Participating in an Observer Capacity
9:30-11:00 a.m. Third Session: Reproductive Health
- Issues relating to the integration of reproductive health components: the case of Egypt
 - Issues relating to the integration of reproductive health components: the case of Morocco
- 11:00-11:30 a.m. Break
- Third Session: Reproductive Health (continued)
- 11:30-1:00 p.m. 1. Resolutions of Regional Round Table for the Arab countries held in Rabat in July 1998
2. Availability and quality of reproductive health services
- 1:00-1:30 p.m. Break
- Third Session: Reproductive Health (continued)
- 1:30-3:00 p.m. - Adolescent reproductive health and male involvement
- Adolescent reproductive health and male involvement: the case of the Syrian Arab Republic

Thursday, 24 September 1998

8:30-10:00 a.m. Fourth Session: Partnership with Civil Society and the Role of Non-Governmental Organizations in the Implementation and Follow-up of the Programme of Action

- Role of civil society: opportunities and constraints
- Role of civil society: the case of Lebanon

10:00-10:30 a.m. Break

10:30-12:30 p.m. Fifth Session: Gender Issues

- Gender equality, equity and empowerment of women: conceptual and legal changes
- Gender equality, equity and empowerment of women: procedural changes and application of new concepts
- Reproductive rights: the case of Tunisia
- Gender issues: the case of Jordan

12:30-1:00 p.m. Break

1:00-3:00 p.m. Sixth Session: Monitoring and Follow-up of the Implementation of the Programme of Action

- Quantitative indicators for monitoring and comprehensive regional information systems
- Remarks on the importance of qualitative studies for a proper understanding of population phenomena
- Towards a regional programme to promote Arab coordination and efforts in the field of population and development (plans of action for world conferences - implementation and follow-up)
- Pan-Arab Project for Child Development (PAPCHILD) and the ICPD Programme of Action

Friday, 25 September 1998

9:30-11:00 a.m. Adoption of the final report

11:00-Noon Closing Session

Appendix III

LIST OF DOCUMENTS

Title	Code
Provisional Organization of Work	E/ESCWA/POP/1998/WG.1/L.1
The population situation in the light of the progress made in the implementation of the Programme of Action of the Cairo Conference	E/ESCWA/POP/1998/WG.1/L.2
Population policy and development strategies in the context of macroeconomic change	E/ESCWA/POP/1998/WG.1/L.3
Migration and the Family: the case of Arab labour-sending countries	E/ESCWA/POP/1998/WG.1/L.4
Labour-migration in the Gulf Cooperation Council countries	E/ESCWA/POP/1998/WG.1/L.5
Issues concerning the integration of reproductive health components	E/ESCWA/POP/1998/WG.1/L.6
Issues relating to the integration of reproductive health components: the case of Morocco	E/ESCWA/POP/1998/WG.1/L.7
Availability and quality of reproductive health services	E/ESCWA/POP/1998/WG.1/L.8
Availability and quality of reproductive health services: the case of Egypt	E/ESCWA/POP/1998/WG.1/L.9
Adolescent reproductive health and male involvement	E/ESCWA/POP/1998/WG.1/L.10
Adolescent reproductive health and male involvement: the case of the Syrian Arab Republic	E/ESCWA/POP/1998/WG.1/L.11
Role of civil society: opportunities and constraints	E/ESCWA/POP/1998/WG.1/L.12
Role of civil society: the case of Lebanon	E/ESCWA/POP/1998/WG.1/L.13
Role of civil society: the case of Palestine	E/ESCWA/POP/1998/WG.1/L.14
Gender equality, equity and empowerment of women: conceptual and legal changes	E/ESCWA/POP/1998/WG.1/L.15
Gender equality, equity and empowerment of women: procedural changes and application of new concepts	E/ESCWA/POP/1998/WG.1/L.16
Reproductive rights: the case of Tunisia	E/ESCWA/POP/1998/WG.1/L.17
Gender issues: the case of Jordan	E/ESCWA/POP/1998/WG.1/L.18

Title	Code
Quantitative indicators for monitoring and comprehensive regional information systems	E/ESCWA/POP/1998/WG.1/L.19
Remarks on the importance of qualitative studies for a proper understanding of population phenomena	E/ESCWA/POP/1998/WG.1/L.20
Towards a regional programme to promote Arab coordination and efforts in the field of population and development (plans of action for world conferences - implementation and follow-up)	E/ESCWA/POP/1998/WG.1/L.21
Pan-Arab project for Child Development (PAPCHILD) and the ICPD Programme of Action	E/ESCWA/POP/1998/WG.1/L.22
Future actions	E/ESCWA/POP/1998/WG.1/L.23
Final report	E/ESCWA/POP/1998/WG.1/L.24

Appendix IV

OPEN LETTER FROM PALESTINIAN DELEGATION TO THE CONFERENCE

The following is the text of the official memorandum from the delegation of Palestine to the Arab Conference on the Implementation of the Programme of Action of the International Conference on Population and Development. The text of this memorandum was distributed to participants of the Conference while it was in session, and produced as received (original in Arabic).

"In the name of the State of Palestine and its President, Brother Yasser Arafat, and the people of Palestine, the delegation of Palestine conveys its greetings, appreciation and best wishes for success to the participants in the Arab Conference on the Implementation of the Programme of Action of the International Conference on Population and Development, meeting this day in Beirut, organized by the Economic and Social Commission for Western Asia (ESCWA).

Mr/s Conference Chairman,
Participants,

The State of Palestine highly values the efforts of ESCWA headed by H.E. Dr. Hazem El-Beblawi and his colleagues for their help to the Palestinian people in various areas of ESCWA activity. We hope that this organization will continue to help the Palestinian State to achieve full independence and build a modern state. We also hope that this serious organization will be able to carry on its work with full freedom regardless of the policies of the host nation or its political position.

Participants, Ladies and Gentlemen,

Ever since the convening of the first population conference in Cairo, the state of Palestine has been determined to participate actively in the formulation of general directives and the preparation of detailed plans to implement the conference resolutions, and to adhere to its objectives. We would be happy, in this context, for the participants to read our national report, which we submitted to the organizing committee of the Conference and the questionnaire of our country. We hope that the contents of this report will be discussed, so that others can benefit from the Palestinian experience as expressed in our national report, in addition to the summary of our experience in the coordination between NGOs and governmental agencies in the confrontation of the challenges of the century in the areas of population policies and the implementations of the resolutions of the Cairo Conference and the Amman Declaration.

Ladies and Gentlemen,

After a long wait at the Palestinian Embassy in Amman, we received, with much regret and great dismay, the news that, for political reasons, the official Palestinian delegation would not be allowed to enter Lebanon to participate in this regional conference, despite the guarantees offered by the sister Lebanese Government to ESCWA and the other regional and international organizations to allow them to function freely and to enable different delegations to participate in their activities. Unfortunately, this action has been repeated from time to time with the Palestinian delegations which were invited to participate in regional or international activities in Lebanon. We stress that this political position, adopted by brethren with whom we shared the struggle against the common enemy in our procession towards liberation and independence, evidently does not distinguish between the position towards the peace process and the position towards joint technical and professional work designed to ensure the progress and prosperity our Arab peoples in the procession of democratic building and change.

Ladies and Gentlemen,

Even since the Palestinian Revolution was launched over three decades ago, the Palestinian leadership has affirmed the principle of the full and effective Palestinian participation in all Arab, regional and international activities and meetings in all fields. Palestinian participation would undoubtedly be of profit and benefit to the Palestinian people, and we are very hopeful that this participation would also have a role in

strengthening the results that emerge. In this context, we reaffirm that the State of Palestine is entitled to full participation in all Arab, regional and international meetings held in any Arab country, regardless of its political position. We call on the organizations and groupings that cannot ensure the full participation of the Palestinian delegations in their deliberations to move their headquarters, activities and meetings to a country that will provide opportunity for the free, equal and secure participation of all delegations.

Brethren and Sisters,

Your discussions and deliberations during the days of the Conference will, no doubt, come out with valuable deductions and recommendations in the field of interest of the Conference, in preparation for the session of the United Nations General Assembly in the middle of next year. Inasmuch as the State of Palestine was prevented from participation in the activities of your esteemed Conference, and did not contribute to the discussions or the formulation of resolutions, these resolutions do not express our position.

Mr. Chairman,
Ladies and Gentlemen,

It is clear, in view of the inability of ESCWA to ensure the participation of Palestine in this conference, in its capacity as a full member, that the organization will not be able to ensure Palestinian participation in future ESCWA activities. Consequently, we officially submit a request to ESCWA to transfer its headquarters, activities and meetings to another country. On this painful occasion, we call on all Arab, regional and international organizations and societies, to adopt a firm stand on this issue.

In closing, we salute your conference and we are very hopeful that it will successfully achieve its goals. We also salute with deep pride the struggling Lebanese people who were, are, and will always be a strategic ally of the Palestinian people in their just struggle for freedom and independence.

May the peace, mercy and blessing of God be with you.