Consultation on Post 2015: Agenda with Parliamentarians and Key Stakeholders
Jointly organized by IAPPD and FPAI, June 9, 2015, New Delhi

With the objective to initiate a dialogue with Parliamentarians and other key stakeholders in articulating the Post – 2015 development agenda with special focus on Sexual and Reproductive Health and Rights (SRHR), and work with the MPs and Key influencers to establish a mechanism for initiating action on the Sustainable Development Goals (SDGs) at country level, ensuring greater ownership and accountability, the Indian Association of Parliamentarians on Population and Development (IAPPD) and Family Planning Association of India (FPA India) have organized a one-day Consultative Meeting with Parliamentarians and other Key Stakeholders on Tuesday, June 9, 2015, in New Delhi. A total number of 30 members consisting of 15 Members of Parliament from different political parties and the remaining 15 technical experts of IAPPD and Senior Officials of FPAI attended the meeting.

The Consultation commenced with a warm welcome to all the distinguished participants by Ms. Bindiya Nimla, Director Advocacy and Training, FPA India, Mumbai and Mr. Manmohan Sharma, Executive Secretary, IAPPD, New Delhi.

Mr. Umesh Aradhya, President, FPA India, introduced the FPA India and its work. He said that FPA India is a national level non-governmental organization working in the communities for improving the sexual and reproductive health (SRH) and lives of the people since 1949.

Ms. Geeta Sethi, Secretary General, FPAI, set the context by emphasizing “These (Sustainable Development) goals were developed by a participatory process. Each one of us has an important role to play in getting what we would live to have. Sexual and reproductive health are not explicit in these goals and still they are integral part of health. Various sectors need to be included to see the linkages share the challenges and see what is achievable for a better world”.

The inaugural address of the Consultation was delivered by Prof. P. J. Kurien, Hon’ble Deputy Chairman, Rajya Sabha and Chairman, IAPPD. Prof. Kurien said that this Consultation is very relevant, apt and timely. He especially thanked Members of Parliament for coming in such a large number despite of the fact that it is an inter-session time when most of them remain out of Delhi in their respective constituencies. He further said that we have made considerable achievement in MDGs but maternal mortality and infant mortality still exists. There is need to examine to what extent we achieved MDGs and what are the impediments in our success. Let us not go for another set of goals after 15 years. Let’s achieve these SDGs this time. One of the biggest impediments in achievement of MDG targets including MDG-4 and 5 is the exponential growth of population; so it is important to encourage contraception, spacing of pregnancies, and access to information on sexual issues. He emphasized the crucial role of Parliamentarians and Legislators in getting any programme successful as they are the policy makers of the country.

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Sustainable Development Goals and Post-2015 Agenda

The sustainable development goals (SDGs) are a new set of universal goals, targets and indicators that UN member states will be expected to use to frame their agenda and political priorities over the next 15 years. The SDGs follow, and expand on, the MDGs, which were agreed by governments in 2000, and are due to expire at the end of this year.

There is a broad agreement that MDGs provided a focal point for the Governments to hing their policies and overseas aid programmes to end poverty and improve the lives of poor people. However, the MDGs failed to consider the root causes of poverty, or gender inequality, or the holistic nature of development. The goals made no mention of human rights, nor specifically addressed economic development. Even today, women are still fighting hard for their rights, and millions of women still die during childbirth.

Within the proposed 17 SDG goals, there are 169 targets. Proposed targets under goal one, for example, includes reducing by at least half the number of people living in poverty by 2030, and eradicating extreme poverty (people living on less than $1.25 a day). Under goal five, there’s a proposed target on eliminating violence against women. Under goal 8 there is a proposed target to achieve full and productive employment and decent work for all women and men, including for young people and persons with disabilities, and equal pay for work of equal value. Goal 16 sets a target to promote the rule of law and equal access to justice. A major conference on financing for SDGs will be held in Addis Ababa, Ethiopia, in July, where it is hoped that concrete financing will be agreed.

If member states agree the draft set of 17 SDGs at a UN summit in New York in September, they will become applicable from January 2016.

In order to establish a complete framework of interrelated institutional commitments, it would hold key actors accountable for the achievement of the Goals. Therefore, it is pertinent that in case of framing the SDGs, the accountability of each stakeholder is articulated clearly with proper guidance on their roles and responsibilities. Here, Members of Parliament (MPs) play an important role in the development process. Any development is directly related to the MPs as they belong to that constituency and they are responsible for framing the policies or laws drafted and implemented in the country. Partnering with, and empowering parliamentarians can effectively influence the architecture of Post-2015 development framework and therefore help in building ownership and also develop government accountability to these goals.

Keeping this in mind, FPA India and IAPPD have organized a one-day Consultation Meeting with Parliamentarians and other key stakeholders on June 9, 2015 at New Delhi, and two follow up Consultations were also organized on 24 June, 2015 in Bhubneswar, Odisha and on 26 June, 2015 in Chandigarh, Haryana, respectively.

Punjab MP bats for orphans in Rajya Sabha

Even though he eventually withdrew his Private Member’s Bill seeking reservation for orphans in government establishments on the behest of the government, Punjab MP Avinash Rai Khanna managed to draw attention to the hitherto neglected issue when he highlighted the plight of this section of children in society in the Rajya Sabha on April 25, 2015.

The government ruled out any quota for orphans in government jobs as sought by Khanna, saying that addition of any more clauses in reservation could not be entertained because of complexities. However, the bill managed to highlight the ordeals faced by these children.

Asking for a survey to establish their exact number in the country, the Rajya Sabha MP from Punjab drew a poignant comparison between children who stay with their parents and those who are not as fortunate.

Khanna, who moved the Orphans (Reservation of Posts in Government Establishment) Bill, 2012, seeking reservation for them in educational institutions and state and central government, said there was no data to show how many orphans were actually there in the country.

Urging for consideration of his demands, he asked for a nationwide survey to establish the exact number of orphans in the country. Though Khanna was urged to withdraw his bill, he won appreciation from Union Minister Jitender Singh for his efforts in the direction. The bill asked for reservation of posts in government establishments for orphans and for matters connected therewith and incidental thereto.

Source: Tribune News Service, New Delhi, April 26, 2015.
In his keynote address, Dr. Rakesh Kumar, Joint Secretary (Reproductive and Child Health), Ministry of Health and Family Welfare, Government of India, shared “with an annual reduction of 6.5% in maternal mortality, India has performed much better than the global average. Against the MDG-5 target of 140, India at present is reporting a MMR of 167 maternal deaths per 100000 live births. There are higher chances that India will achieve its target for MMR. But what is important is that not a single women should die giving birth; a pregnant woman give nine months’ notice and still she dies. With one-third of girls getting married before 18, child marriage continue to pose as one of the major problems for the country. India is one of the youngest country with 2.3 million adolescent population. To make the SDGs a success and address the unfinished agenda of MDG, we have to focus on health and education of adolescents.

Detailed presentations on (i) Sustainable Development Goals and Post 2015 Development Agenda by Ms. Anjali Sen, Regional Director, International Planned Parenthood Federation-South Asia Regional Office (IPPF-SARO), and (ii) Country Status on Sustainable Development Goals (SDGs) – Gains and Opportunities by Ms. Pooja Parvati, Research Manager, Oxfam India, were made during the Consultation. These presentations were chaired by Shri V. P. Singh Badnore, MP, Rajya Sabha.

**Voices from Members of Parliament**

Ms. Vipolve Thakur, Member of Parliament and Deputy Chairperson, IAPPD, chaired the session. She said that these goals are mostly decided by the UN without consulting the parliamentarians whereas the onus of achieving these goals is on the parliamentarians.

Prof. (Dr.) Prasanna Patasani, MP, said that when the individual and the society is healthy, the entire country is healthy. A healthy country should not produce more children. The unhealthy country, such as ours, doesn’t know how to control family. Parliamentarians should strive to contribute in creating awareness among the masses.

Dr. Anup Kumar Saha, former MP, said that India is trailing in achieving the MDGs. The TFR is higher than the desired norms. The unmet need for family planning is also more. Male participation in the family planning is very low. Maternal Mortality Rate is also high. He said that though non-communicable diseases are increasing, we must not neglect the communicable diseases.

Shri Anand Bhaskar Rapolu, MP Rajya Sabha, said that MDG and SDG are all dependent upon the state, the country, the society, the community and the individual family.

Shri Harinder Singh Khalsa, MP Lok Sabha, said that it is really difficult to attain a target of 109 MMR of the MDG by 2015. He further said that public health institutions are afflicted with number of maladies.

Shri Baishnab Charan Parida, MP Rajya Sabha, said that usually parliamentarians are not considered to have any important role in the implementation of the policies. They are considered to be only the policy makers.

Smt. Rajni Patil, MP Rajya Sabha, brought the attention on the Goal-2 of the SDG which talks of promoting sustainable agriculture. She said that this sector needs to be promoted for sustainably developing our country.
Shri Prahlad Singh Patel, MP Lok Sabha, spoke that population size is the biggest problem that inflicts our country. He said that we, the parliamentarians should rise above our party politics and think collectively about the nation.

In the post-lunch session, a panel discussion was organized on the theme - Opportunities for Integrating Sexual and Reproductive Health and Rights (SRHR) in Post-2015 Development Agenda. The session was jointly chaired by Dr. Kalpana Apte, Senior Assistant Secretary General, Programme Implementation, FPA India and Mr. Anindit Roy Chowdhury, Director, Advocacy, Resource Mobilization and Communications, IPPF-SARO. The panelists were Dr. Sushma Dureja, Ms. Poonam Muttreja, Ms. Aarti Dhar, Dr. Aparajita Gogoi, Prof. Krishna Rao and Mr. Shivashranappa.

Ms. Sujata Natarajan, Honorary Treasurer, IPPF; Chairperson, Regional Executive Council- South Asia Regional Office (SARO) and Patron and Immediate Past President of the FPA India, finally summarized the day long consultation on Post 2015 Agenda.

Follow-up Consultations at Bhubaneswar and Chandigarh

Two follow-up Consultations were also organized in Bhubaneswar, Odisha, and Chandigarh, Haryana, on June 24, 2015 and June 26, 2015, respectively.

At the Odisha State level Consultation in his inaugural address, Mr. Baijayant Panda, MP, Lok Sabha, emphasized the need for educating girls. He said, “Goals and targets are self-chosen. It serves as a marker. We have to create the journey to reach at the goal. In addition to economic growth, we need to be conscious about sustainable issues and renewable resources.”

The Odisha State Level Consultation was hosted by FPA India Bhubaneswar branch. FPA India – Kolkata and Singhbhum branch volunteers and staff attended the event. 30 participants, consisting of 5 Members of Parliament, 9 Members of Legislative Assembly and 16 members from civil society and senior officials of FPA India and IAPPD attended the Bhubaneswar Consultation.

The Haryana State Level Consultation was hosted by FPA India Panchkula branch on June 26. FPA India – Agra, Ahmedabad, Yamunanagar, and Mohali branches also participated in the Consultation.

While setting the context, Dr. Kalpana Apte, Senior Secretary General, Programme Implementation, FPA India stressed, “Post-2015 development agenda must include the unfinished agenda from MDGs and ensure that no one is left behind – maternal health, comprehensive sexuality education and reproductive rights are important.”

Mr. Kanwarpal Gujjar, Speaker, Haryana Vidhan Sabha, in his address called for strengthening laws to ensure sexual and reproductive health of women. He stressed that all political parties need to work collectively for the cause in national interest keeping aside their political gains of pleasing the vote bank.

Mr. Umesh Aradhya, President, FPA India opined that “Post 2015 development agenda in India should be focused on state level variations and priorities. We hope that our MPs and MLAs would raise these important issues in parliament and legislative assemblies for formulating proper policies.”

The Chandigarh meeting was attended by 25 participants consisting of 3 MPs, six Members of Legislative Assembly and 16 senior officials of FPA India and Civil Society members. The Consultations received wide media coverage (both print and electronic) in English and local language.
With the core objective of strengthening the Parliamentarians between national committees and UNFPA country offices, to ensure a consolidated effort towards further implementation of the ICPD in the Post-2015, the Fourth Annual UNFPA-AFPPD National Committees Planning Session was organized in Bangkok, Thailand during January 28-29, 2015.

Over 40 participants including parliamentarians, representatives of national committees, partner organizations and representatives of UNFPA country offices attended the planning meeting. Sessions of the meeting were designed to encourage collaborative efforts in implementing the International Conference on Population and Development (ICPD) Programme of Action into the Post-2015 development framework.

Mr. Manmohan Sharma, Executive Secretary, IAPPD, attended the meeting.

"AFPPD and UNFPA recognize the value of bridging parliamentarians’ ICPD work with the work of UNFPA country offices," said Ms. Kochkina, AFPPD Programme Specialist for Central Asia. "Consolidated efforts and joint resources are essential to successfully integrate ICPD Programme of Action issues into the Post-2015 Sustainable Development Goals (SDGs)," she added. Hon. Keizo Takemi, MP of Japan and Chair of AFPPD, pointed out the need for AFPPD to equip parliamentarians with strong arguments that support placing ICPD agenda in the broader and horizontal SDG framework. 2015 marks the end of ICPD Programme of Action and the commencement of the Post-2015 SDG.

The two-day event was a combination of workshops and sharing and planning sessions. There were six strategic sessions that included sharing of learning and best practices on ICPD and Millennium Development Goals (MDGs), and workshops on stakeholders analysis and on messaging and communications, sub-regional planning and on monitoring and evaluation. The objective of the sharing sessions were: to create a shared understanding of the need to integrate ICPD into the Post 2015 Agenda; to share common and best advocacy practices and learning; and to foster stronger relationships between national committees and representatives of UNFPA Country Offices. Specific workshops on communication and stakeholder analysis were designed to give participants first-hand experience into creating an advocacy message and medium that they can use in their advocacy. The political mapping workshop on the first day set the mood for the second day’s sub-regional and national advocacy planning.

At the end of the two-day planning, key recommendations were made to strengthen the relationship and the advocacy work of the national committees and UNFPA Country Offices.
"Swachchh Bharat Abhiyan" (Clean India Mission) launched by the NDA government on 2nd October 2014 will have every village and every town clean by 2019. This scheme envisages a toilet in every house by the above date. We discuss here the various issues involved in meeting the requirements for toilets in different parts of the country in next four years.

The present article is part of a bigger study entitled Social Inequities in Living Conditions in India wherein data on “housing condition, household amenities and household assets” were analysed in detail from those obtained from the Census of India 2011. We concentrate here on two aspects that are directly related with “Swachchh Bharat Abhiyan” – availability of latrine facility within the premises and drainage facility within the premises.

Toilet Facility
Considering the availability of latrine facility within the premises which is an important dimension of “Swachchh Bharat Abhiyan”, at the national level a little less than half the households had the same in 2011, their percentage in rural India stood at 30.7 percent whereas in urban India it was 81.4 percent. Public toilet is not a common concept in India as just 3.2 percent of the total, 1.9 percent of rural and 6.0 percent of urban households had this facility.

Further, latrine facility within the premises was available to at least two-thirds of the households in five states – Haryana, Himachal Pradesh, Punjab, Delhi and Kerala. In fact, 95 percent of the households in Kerala and 90 percent in Delhi had the facility within the premises. In contrast, Jharkhand, Odisha, Bihar, Chhattisgarh and Madhya Pradesh were the other five states where latrine facility within premises was available in less than 30 percent of the households. The remaining states lay between these two limits. One would be happy to note that barely three percent of household members in Delhi and four percent in Kerala defecated in forests or other open spaces. It is obvious that rural households were more deprived of this facility than total or urban households.

Toilet Facility by Social Groups
It may be noted at the outset that scheduled castes (SC) population comprising around 16 percent of the country’s population is interspersed all over the country whereas the scheduled tribes (ST) (around 8 percent) is concentrated in north-east India and forms a belt from Odisha to Gujarat and Rajasthan. Almost 90 percent of ST population lives in rural areas. Further, Delhi, Haryana and Punjab do not have ST population.

Only one-third of the SC households had toilet facility in the premises; whereas less than 25 percent of the ST households had this facility. The situation in rural areas was worse where 75 percent of the SC and 82 percent of the ST households were using forests, fields and other open spaces for defecation. In fact, 90 percent or more of the ST households were using open spaces or forests in Bihar, Chhattisgarh, Jharkhand, Odisha and Rajasthan. Again, more than 70 percent of ST household in Gujarat, Jammu & Kashmir and Madhya Pradesh and roughly the same percentage of SC households in Jammu & Kashmir had no option but to use open spaces. It is noteworthy that adolescents and young women face innumerable problems in not having a toilet facility within the premises.

An important question here is “why the concerned governments have failed to provide toilet facility to individual households or at least common toilets in most of the states in India.” There could be two reasons for not having a toilet in the dwelling unit especially in rural areas: First, the practice of going to open spaces/fields for
natural calls in India is an age-old tradition and people have accepted it as a way of life. Second, people do not prefer toilets inside the premises because of foul smell; instead they prefer to go for a walk (especially males) in the open air and use fields. To break this tradition is a daunting task for the government and various social institutions.

Further, cleaning a regular toilet requires quite a lot of water. In many villages, water has to be brought from distant places; therefore, instead of bringing water for toilet cleaning it is easier to use open fields to attend to nature’s call. The advertisements on radio and TV while propagating the idea of latrine within the premises should take note of these problems. There is a new concept of “bio-toilets” that need minimal water for cleaning. This might be an alternative but its cost factor will have to be kept in mind.

Drainage Facility
Data on drainage facility have been tabulated in 2011 census by classifying households having ‘closed drainage’, ‘open drainage’ and ‘no drainage’. Since having ‘no drainage’ facility and throwing waste water in the lane, street, or in open spaces is likely to adversely affect people’s health, data on households having ‘no drainage’ have been analysed here. It is noticed that Delhi, Haryana, Punjab, Uttar Pradesh and Maharashtra are the five good states where less than one-third of the households have no drainage facility. In contrast, more than two-thirds of the households have no drainage in Assam, Chhattisgarh, Jharkhand, Odisha and West Bengal where people throw waste water in the open. Further, the situation is worse in rural areas as most of the villages do not have any drainage system.

Drainage Facility by Social Groups
ST sub-population has suffered the most by not having drainage facilities in their locations (mostly rural). The differences in not having drainage facilities by ST households in comparison to other social groups – SC and non-SC/ST are large particularly in Andhra Pradesh, Gujarat, Jammu & Kashmir, Madhya Pradesh, Maharashtra and Rajasthan. We notice that the situation was bad in Assam, Chhattisgarh, Jharkhand, Odisha and West Bengal where more than three-fifths of the households in all the three social groups did not have drainage facility.

The task of controlling waste water disposal is huge since most of the villages have no drainage facility. The investment in laying drains in each and every village in all the states and union territories will run into several lakh crores in the next few years. The related problem is of discharging this waste water. This cannot be put into village pond whose water people use for household purposes, and, at places, even for drinking. Hence, an alternative to waste water disposal (as also village solid waste) has to be found out. It is understood that one way for waste water disposal is making ‘soak pits’ where water goes into the soil. In villages one ‘soak pit’ can be functional for 4-5 houses. Moreover, there is no maintenance cost involved in this respect. In fact, this water in the ‘soak pit’ would recharge ground water. State governments might like to examine the cost factor in this regard.

Thus, constructing latrine in the premises and its use by household members requires an attitudinal change of the masses which is a daunting task. Further, it is learnt that toilets built in institutions have occasionally been used as store rooms. Moreover, cleaning a toilet within premises requires a lot of water. In a large proportion of villages water even for household use has to be brought from a distance. Hence, people have no alternative other than using open spaces for defecation.

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*Prof. M.K. Premi, Member of Technical Advisory Committee of IAPPD, is a renowned Demographer in the country.
To discuss and strengthen MDG 5-A and 5-B in South Asia, an interface meeting was organized with the parliamentarians and representatives of IAPPD and FPA India on February 26, 2015 in New Delhi.

The objective of the meeting was to create champions among the elected representatives and garner support for sexual and reproductive health and rights. Parliamentarians from different political parties attended the meeting.

The meeting was Chaired by Mrs. Viplove Thakur, MP and Vice-Chairperson of IAPPD, and attended by around 12 MPs and 9 representatives of IAPPD and FPA India.

While welcoming the participants, Mr. Manmohan Sharma, Executive Secretary, IAPPD, emphasized on exchange of ideas of parliamentarians and representatives of IAPPD and FPA India on MDG 5-A and 5-B which relates to reducing maternal mortality rate three quarters and universalize access to reproductive health by 2015.

In her address, Mrs. Viplove Thakur, MP, said that the issue of MDG 5-A and 5-B are the most vital issues confronting our nation. Many states have worked tremendously on these fronts; however, there are many other states which are still lagging far behind the goal. She said that besides awareness, the approach to confront these challenges is the key where we have to do a lot of endeavour. She further said that the year 2015 has already arrived and the data tells us that we are still far behind the goals and targets set in MDGs. She also talked about the factors responsible for unsuccessful attempts to meet these goals and targets. She stressed on encouraging male participation in awareness camps to make them aware of their responsibility in order to mitigate and tackle the issues of MDG 5-A and 5-B.

Mr. H.R. Umesh Aradhaya, Chairman, FPAI, in his address emphasized on to seek the support of the MPs to strengthen the MDGs 5-A and 5-B. He said that strengthening these two goals will help in reducing the risk that girl and woman faces during pregnancy and will avoid maternal deaths.

A short film on different activities being undertaken by FPAI in regard to MDG 5-A and 5-B was screened. The film displayed vividly the role played by FPA India for the last six decades under the objective of voluntary commitment to advocate for SRH and rights and choices for the poor, marginalized and vulnerable people and communities of India.

Mrs. Sujata Natarajan, Patron, FPAI, while speaking about the role of FPAI, informed that at present FPAI serves through its 40 branches spread across the country from Kashmir to Kanyakumari and from Rajkot to Nagaland. It provides help and inputs to state governments in the area of family planning, women empowerment, HIV/
AIDS, management of reproductive tract infection and management of young population.

During the discussion, Mr. Ananda Bhaskar Rapolu, MP, talked on the issues of widening gap of urban and rural India in service provisioning of maternal and child care. He said that today our nation is facing real complications at par with other nations across the globe. He asked, why this gap has developed? With the advancement of medical science and technology, India should have been much safer places in ensuring lesser maternal mortality. He also highlighted the importance of AYUSH in achieving the MDGs.

Dr. Prasanna Kumar Patasani, MP, in his address talked on the issues of female foeticide and the need for women empowerment in our society. He said that the situation of sex-ratio is such dismal that now Draupadi will be there in every house where one girl will have to marry more than a guy. He also commended the role of IAPPD in raising such population issues from time to time not only in India but also at global level.

Ms. Rajni Patil, MP, thanked IAPPD and FPAI to raise the important issue of MDG 5-A and 5-B as these issues are very close to her heart. She felt that the programme implementation related to MDG 5-A and 5-B should be expedited. She informed that she is the Chairperson of the Central Social Welfare Board, where she has highlighted the issues of MMR, IMR and female foeticide. She highlighted that Mewat district of Haryana, Rajasthan, Gujarat and even South Delhi has very low sex-ratio and this trend is more common in elite families than the poor and tribal societies.

Dr. (Mrs.) Vijayalaxmi Sadho, MP, highlighted the issues of poor health care infrastructure and poor health manpower in our country. She said that because of the poor health care facilities, our institutional deliveries suffer and the maternal mortality rate and infant mortality rate too gets affected. In tribal areas, there is a dearth of doctors in community health centres. She said that along with the imbalanced sex-ratio, health care infrastructure together with the poor health manpower should also be taken care of.

While sharing his views, Mr. Shadi Lal Batra, MP, said that population control to be the core issue behind all the problems in India. He said that all other aspects such as family planning, maternal and child mortality, gender equality are because of the unabated population growth in India. He said that we must introspect on where we started, where we are going today and where we want to reach in the future. We should formulate such programmes and policies which are practicle, attract people and can convince people that small family will only lead to a happy family.

Prof. Pradip Bhattacharya, MP, spoke on extending all his support for these causes and he can even mobilize his fellow parliamentarians on these issues, if needed. He too emphasized on the rapid growth of population and its impact on every sphere of our life.

Ms. Mabel Rebello, former MP and Member, National Minority Commission, Government of India, presented her views on issues of family planning related to the poor and downtrodden people. These people, according to her, are unaware and uneducated and tend to produce more children. Our religious leaders are also responsible for this. Rich people have already controlled their population. She cited the examples from Kerala and Jharkhand and the factors responsible for population growth in these states. Ms. Rebello also raised the issue of female foeticide.

Mr. A.W. Rabi Bernard, MP, emphasized the role of media in family planning programme. He said that media will have to play a very vital role as this is a continuous process and lifelong education is needed for it. Giving the example of USA, Philippines, etc. he said that the Parliamentarians must demand for a compulsory bulletin to attract the attention of masses on health care, reproductive health, mortality, child care, etc. in some interesting capsules by the television channels on regular basis.

Mr. Avinash Rai Khanna, MP, while agreeing on all the issues raised by his fellow parliamentarians emphasized...
that since these issues are social, it must be tackled socially. He cited several examples from his experiences. He also emphasized on the need to focus on the remote areas, illiterate and needy people. He said that our outreach should improve in far and distant areas. He also suggested having mandatory HIV/AIDS test prior to marriage by all to fight against the dreaded diseases.

Dr. A. Sampath, MP, thanked fellow parliamentarians for citing Kerala as role model. He attributed the success of Kerala to its educational achievements and social consciousness of the people. He also discussed about the ICDS Scheme and said that in Kerala ICDS anganwadis run in rented buildings. He further added that gender imbalance and other such issues are because of the state of mind and socio-cultural perceptions, rather than economic well-being. All these can be changed by education and right to education for every citizen.

Mr. Bhupinder Singh, MP, while giving his comments, emphasized the role of education in tackling the issues related to MDG 5-A and 5-B. However, there are problems related to educated masses. He said that the issue of population growth is a national issue as we are adding one Australia every year.

At the end, Ms. Geeta Sethi, Secretary General, FPAI, proposed vote of thanks. She requested the Parliamentarians to help increasing the budget outlay in the health sector. Population being such a vital issue, it is hardly debated in the Parliament. She requested the Parliamentarians to raise these issues in the house in a sustained manner.

The Second Transparency, Accountability and Governance (TAG) Task Force Meeting
May 3, 2015, Bangkok (Thailand)

With the objective to allow parliamentarians to regenerate commitment and build-up political will for action to tackle the remaining tasks of the Millennium Development Goals (MDGs) in 2015, the second Transparency, Accountability and Governance (TAG) Task Force Meeting was organized by AFPPD in Bangkok, Thailand, on May 3, 2015.

The meeting was attended by the Task Force members, observers and AFPPD staff.

Prof. P.J. Kurien, MP and Vice-Chair, AFPPD, and Mr. Manmohan Sharma, Executive Secretary, IAPPD, attended the meeting.

In his welcome remarks, Hon. Prof. Keizo Takemi, MP and Chair, AFPPD, emphasized the need to revitalize the network as an important player and the important role of the Secretariat. Dr. Mika Marumoto, Special Advisory for Governance and Management, presented the highlights of the meeting that reviewed the draft revised constitution as well as the revised human resource manual, financial standard, operating procedures and the operations manual and raised pending issues for discussion.

Prof. P.J. Kurien proposed that the revised article to read “The AFPPD shall make its decisions on the basis of a majority of the members present and voting, except for amendments to this constitution, where more than two-thirds of the members present, and a majority of full members, voting.”

On the issue of Framework of Division of Duties between Executive Committee and Secretariat, Prof. Kurien raised a question that is the framework will be effective enough to address and resolve similar issues to the ones that happened at the Secretariat in the past few months. He also strongly insisted that the current requirement of 50 per cent quorum and 2/3 voting in support of constitutional amendments is too weak. He opined that the amendments to the Constitution should not be easily accomplished.
The 77th AFPPD Executive Committee Meeting was held on May 4, 2015, in Bangkok, Thailand. The meeting was attended by Members of Parliament from India, Vietnam, Australia, Thailand, Malaysia, and Iran. Observers and staff and consultants of AFPPD also attended the meeting.

Prof. P.J. Kurien, MP and Vice Chairman, Rajya Sabha, attended the meeting as Executive Committee Member and Mr. Manmohan Sharma, Executive Secretary, IAPPD, as Observer.

Prof. Keizo Takemi, MP from Japan and Chairperson of AFPPD, Chaired the meeting. The main decisions made at the 76th Executive Committee Meeting were presented by the Acting Executive Director, Ms. Olesya Kochkina and approved by the members.

Dr. Marumoto presented the highlight of the 2nd Task Force meeting that reviewed the draft revised constitution as well as the revised Human Resource Manual, Financial Standard Operating Procedures and the Operations Manual and raised pending issues for discussion. The draft minutes of the Task Force meeting were distributed.

Hon. Kurien, while speaking on Amendment to Constitution, proposed that the revised article to read “The AFPPD shall make its decisions on the basis of a majority of the members present and voting, except for amendments to this constitution, where more than two-thirds of the members present, and a majority of full members, voting.”
Recognizing that parliamentarians play a key role in advancing the international development agenda, particularly in mobilizing the necessary support and holding government leaders accountable for their commitments, the German All-Party Parliamentarians Group on Population and Development, in collaboration with DSW (Deutsche Stiftung Weltbevoelkerung) and the European Parliamentary Forum on Population and Development, organized a meeting of international parliamentarians in Berlin, Germany, prior to the G7 Summit, during April 16-17, 2015.

The objectives of the meeting were to:

- bring together parliamentarians from G7, G20 and southern and emerging countries to discuss and strategize emerging issues, challenges, best practices, lessons learned and policy recommendations;
- enhance parliamentarians influence and commitment to global development and health issues, in particular the importance of functioning health system, family planning and sexual and reproductive health and rights to women and girls economic and social empowerment; and
- reinforce parliamentarians’ ability to persuade the governments to complete the unfinished business of (MDG) Goal-3, Goal-4 and Goal-5 and to implement the recommendations of the International Conference on Population and Development beyond 2014.

Ms. Viplove Thakur, MP, India, and Vice-Chairperson, IAPPD, attended the meeting.

The conference drew attention to the fact that the sexual and reproductive health and rights of the women and girls are key prerequisites for their empowerment, as they enable women and girls to lead self determined, healthy and productive lives.

A special focus of the conference was on adolescent girls (10-19 years). Positive investments in women and girls not only benefit the women and girls themselves, but also their children, families, communities and the economy.

The conference also drawn attention to these issues and their inter-linkages; present and discuss relevant data, best practice, lessons learned, allow parliamentarians to discuss and determine effective ways forward.

During the meeting the parliamentarians deepen their knowledge about global development, health, gender equality and women’s empowerment, particularly with regard to sexual and reproductive health and rights. They intensified their efforts to advocate for health system strengthening and sexual and reproductive health and rights, family planning, economic and social empowerment of women and girls, and the implementation of the recommendations of the ICPD beyond 2014 Review and the Beijing Declaration and platform of Action in their own countries.

At the end of the meeting, the parliamentarians produced a forward-looking Parliamentarians’ Appeal, appealing to G7 heads of states and governments as well as other countries to strengthen their commitment in the area of global development, health and empowerment of women and girls and to ensure that sexual and reproductive health and rights, family planning and the needs of women and girls are included in the post-2015 development agenda and relevant policies. The parliamentarians also committed to promote and monitor the implementation of commitments made by G7 leaders and other governments.