DRAFT, NOVEMBER 11, 2009, ISTANBUL, TURKEY





Statement of Commitment and Key Actions to achieve MDG5 by 2015 In Eastern Europe and Central Asia

We, the participants representing Eastern Europe and Central Asia at the High Level Meeting on MDG 5 in Istanbul on 11 November 2009, acknowledge the urgency to end the needless and preventable death and suffering of women from complications of pregnancy and childbirth, and to achieve universal access to reproductive health, including among vulnerable populations, by 2015

We recognize the importance of sexual and reproductive health in meeting our countries' development goals including achieving the Millennium Development Goals (MDGs) by 2015.

We recognize the existing inequities in access and quality of reproductive health services including family planning, antenatal and postnatal care, emergency obstetric care, skilled birth attendance as well as other components of reproductive health.

We recognize that maternal mortality still high in some countries of the region and acknowledge the importance of preventing and managing the consequences of unsafe abortion to reduce maternal disabilities and deaths.

We acknowledge that investing in the health, education and rights of women and girls is smart economics for families, communities and nations, especially during the current financial and economic crisis, and that urgent action is needed to achieve MDG 5.

We realize that ongoing health reforms focused on decentralization and privatization should safeguard access for the poor to quality sexual and reproductive health services including maternal care, family planning, and reproductive health commodities.

We anticipate that population development issues such as aging, migration, a fast growing HIV epidemic, the current global economic and financial crisis, as well as climate change will have impact on sexual and reproductive health of populations and will require stronger political and financial commitment and support to ensure access to high quality reproductive health services;

We recognize that needs of vulnerable populations including ethnic minorities, migrants, refugees and internally displaced people, people living with HIV, poor and youth require special attention;

We recognize the importance of public-private partnerships, and the role of the private sector, civil society, faith based organizations and media, in creating demand for sexual and reproductive health services and in monitoring delivery of quality services in particular for vulnerable groups.

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We are aware of persistent gender inequality in addressing maternal mortality, unwanted pregnancy and high rates of abortion that are enhanced by social, cultural, educational and economic conditions;

We reaffirm our commitment to take concerted actions in the remaining five years to 2015 to protect and fulfill everyone's right to sexual and reproductive health, and to accelerate efforts in achieving MDG 5 recognizing that maternal health remains one area constrained by some of the largest health inequities in the world.

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WE COMMIT TO UNDERTAKE THE FOLLOWING KEY ACTIONS: -

- Ensure universal access to quality reproductive health services including family planning, emergency obstetric care and skilled birth attendance, adolescent sexual and reproductive health and prevention of HIV/AIDS;
- Ensure that health systems support integration of reproductive health in primary health care and continuum of care and that health reforms are designed to expand delivery of quality reproductive health services to poor and vulnerable populations
- Increase allocation of domestic and donor resources at all levels, ensure adequate deployment of
 financial and human resources for health and develop innovative and targeted health funding
 mechanisms to strengthen reproductive health services including reproductive health commodity
 security and improve monitoring of these financial flows
- Review policies and legislation related to reproductive health rights and choice, to eliminate barriers to service delivery and commodities especially for youth and vulnerable populations, and to develop mechanisms to implement and enforce the laws.
- Ensure that linkages and referrals are established between sexual and reproductive health and HIV/AIDS prevention, treatment, care and support programmes including access to harm reduction programmes where appropriate, and family planning information and services to further decrease HIV affected populations in the region
- Ensure gender equality and women's empowerment and make reproductive health services gender sensitive;
- Guarantee universal access to comprehensive sexual and reproductive health information, education and services for youth and ensure that they are youth-friendly, confidential, nonjudgmental, accessible, and based on recognition and respect for diversity;
- Strengthen research and data collection on maternal health, family planning and reproductive behavior and needs of vulnerable populations to ensure that decision making and policy formulation are evidence based;
- Improve accountability for results by strengthening monitoring and evaluation systems for national sexual and reproductive health programmes;
- Partner with civil society organizations to educate communities and vulnerable populations about sexual and reproductive health, including maternal care; increase demand for reproductive health services, especially family planning; and promote health seeking behavior particularly among youth, migrants, minorities and poor.
- Ensure multi-sectoral linkages with other sectors and strengthen partnerships with parliamentarians, donors, NGOs and the private sector to leverage human and financial resources to achieve MDG5.