



Economic Commission for Europe**Regional Conference on International Conference
on Population and Development (ICPD)**

Geneva, 19 and 20 October 2023

Item 4 of the provisional agenda

**Report on the implementation of the Programme of Action
of the International Conference on Population and Development
in the United Nations Economic Commission for Europe region****Extracts from the United Nations Economic Commission for
Europe Report on the implementation of the Programme of
Action of the International Conference on Population and
Development****Note by the secretariat****I. International Conference on Population and Development 30
review**

1. The Regional Report on the implementation of the Programme of Action of the International Conference on Population and Development (hereafter Regional Report on ICPD30) was prepared by the United Nations Economic Commission for Europe (UNECE) and the United Nations Population Fund (UNFPA) to inform the UNECE Regional Conference “Population and Development: Ensuring Rights and Choices” (19 and 20 October 2023, Geneva). It presents progress in the implementation of the ICPD Programme of Action (PoA) in the UNECE region since the last review in 2018 and highlights achievements and setbacks in population and development outcomes over time. The report identifies areas where acceleration of efforts is required to realize individual and societal potential and highlights policy responses to both longstanding and emerging issues. It provides action-oriented recommendations towards advancing progress on the ICPD PoA in the context of evolving demographic, social, and economic realities in the UNECE region.

2. The regional review assessed progress under the three thematic priorities that were formulated in the 2013 Chair’s Summary:¹ population dynamics and sustainable development; families, sexual and reproductive health over the life course; and inequalities, social inclusion, and rights. It analysed trends in population and development outcomes using the indicators and data sources identified in the UNECE Monitoring Framework for the ICPD Programme of Action Beyond 2014. The review drew on information from international databases, including the Voluntary National Reviews database on national and subnational

¹ The Chair’s Summary of the 2013 Regional Conference “Enabling Choices: Population Priorities for the 21st Century”, was the outcome document of the 20-year review of ICPD PoA implementation in the UNECE region. Its priorities and recommendations guide the ICPD Beyond 2014 PoA implementation and monitoring in the UNECE region.



progress on the 2030 Agenda for Sustainable Development, country and regional reports to recent reviews of relevant international action plans, country reports to international human rights processes and binding instruments, reports from international and intergovernmental organizations and academic research.

II. The demographic and socioeconomic context

3. In 2023, the total population of the UNECE region amounts to an estimated 1.3 billion people, reflecting an increase of 160 million people since 1994. The population of the region is projected to increase by an additional 40 million people by 2050. This overall trend masks regional diversity in demographic change. Between 1994 and 2023, total population size increased in 38 of 56 countries in the region. The largest relative increases were in Central Asia and Israel, where total fertility is still well above replacement level (2.1 births per woman), and in Luxembourg and Cyprus where, despite low total fertility, populations grew as a result of high net migration rates. The largest population declines have been in Eastern and South-Eastern Europe, where low fertility is coupled with negative net migration. Projections indicate that the population will decrease in half of the countries in the region between 2023 and 2030.

4. In 2023, the region's average total fertility rate is estimated at 1.69 children per woman of reproductive age, reflecting a significant decrease from 1.83 in 2015. Fertility rates are below 1.5 children per woman of reproductive age in 19 countries. The trend of delaying childbearing has continued, with the mean age of childbearing increasing to 29.7 years in 2023 from 29.1 years in 2015. Life expectancy at birth is estimated at 76.2 years for men and 82 years for women in 2023, increasing from 74.7 and 80.9 years respectively since 2015. Persons aged 65 years and older account for 17.6 per cent of the UNECE total population in 2023 and exceed 20 per cent in 24 countries in the region. Out of seven UNECE countries where the share of older persons currently remains below 10 per cent, only five are projected not to reach this threshold by 2030.²

5. International migration continues to impact population growth and the age structures of UNECE countries to varying degrees. At the regional level, net migration is positive, though it has declined sharply since the peak of the Syrian refugee crisis in 2015. Since 2015, all countries in Central Asia, most countries in the Balkans and South Caucasus regions, and Bulgaria, Greece, Latvia, Lithuania, Türkiye and Ukraine have experienced negative net migration.³ Net migration has been positive since 2015 in other countries in the region, with the largest inflows to the United States of America, the Russian Federation, and Germany. The war in Ukraine has led to a significant increase in the number of refugees in countries in the European Union (EU) and other parts of the region since 2022.

6. Socioeconomic development in the region since the last regional assessment of the ICPD PoA has been marked by major disruptions caused by the COVID-19 pandemic, the war in Ukraine and other crises in the region, rising inflation and cost-of-living in many countries. The COVID-19 pandemic disrupted education, health and social care services with both immediate and potential longer-term impacts on social development outcomes in the region that are discussed in the report. Disadvantaged and marginalized population groups, including women and girls, have been particularly affected. Before the onset of the COVID-19 crisis, gross domestic product (GDP) in the UNECE region increased at a steady but decelerating rate, averaging around 2.5 per cent annually. In 2020, severe GDP contractions were observed in practically all countries in the region. Around half of the countries in the UNECE region brought their output back to pre-pandemic levels in 2021. Growth in 2022 slowed down in most countries, amid rising inflationary pressures and still unresolved supply chain disruptions. The war in Ukraine has exacerbated tensions in

² Data source for paragraphs 3, 4, and 5: United Nations Department of Economic and Social Affairs Population Division, 2022 Revision of World Population Prospects.

³ Balkans refers to Albania, Bosnia and Herzegovina, Croatia, Montenegro, North Macedonia, and Serbia. South Caucasus refers to Armenia, Azerbaijan, and Georgia. All countries in these subregions experienced negative net migration between 2015 and 2023 except for Azerbaijan and Serbia.

commodity markets, in particular food and energy, heightened uncertainty, and severely depressed the economic outlook in the region.

7. Poverty reduction efforts have been negatively affected by the COVID-19 crisis. In the European Union, after years of steady decline, the share of people at risk of poverty and social exclusion increased in 2020 and remains above pre-pandemic levels. However, country performances differed, with some economies continuing to report reductions. In countries with more precarious social support systems, earlier gains in poverty reduction were reversed as a result of the pandemic, and recent gradual improvements are yet to prompt a return to previous levels.

III. Key findings

8. The analysis of available data has found overall improvements in outcomes in most priority areas identified in the 2013 Chair's Summary. However, progress has continued to be uneven across the region and within countries. Recent setbacks in areas related to education and human capital, health, and the protection of vulnerable groups are concerning. Multiple and overlapping forms of inequality and discrimination continue to impede individuals from realizing their full potential, even in countries where most progress has been recorded. Evidence reflecting the impacts of the multiple crises faced by the region is not yet available for all areas and indicators, but available data point to exacerbated inequalities and recent disruptions to progress in several areas of the ICPD PoA.

A. Population dynamics and sustainable development

9. The 2013 Chair's summary underscored the need to take a long-term, holistic, rights-based approach to population dynamics and its linkages with sustainable development. Addressing the social and economic dimensions of sustainable development, it called on member States to invest in human capital across generations by enhancing their access to quality education, decent work and health and social care services, promoting healthy lifestyles, and supporting their involvement in decision-making. Regarding the environmental dimension of sustainable development, it encouraged UNECE member States to reduce CO₂ emissions and strive for energy efficiency.

10. Investing in human capital development across the life course to enable all to realize their full potential is key to inclusive and sustainable development and societal adaptation to population ageing. While pre-school enrolment of children in organized learning activities the year before they enter primary school is very high in most countries of the region (90 per cent or higher), participation levels have decreased since the last review in half of the countries with data.⁴ This decline may reflect disruptions to childcare and early learning during the COVID-19 pandemic, with potential for long-term impacts on child development and outcomes. In all countries in the UNECE region with data, at least two-thirds of the population has completed upper secondary education.⁵ Completion rates are higher among younger cohorts, but disparities by gender (rates among women are often higher), place of residence, and socioeconomic status persist in many countries. Progress on learning outcomes is mixed. Overall outcomes as measured by the Organisation for Economic Co-operation and Development (OECD) Programme for International Student Assessment (PISA) improved in Eastern Europe and Central Asia between 2015 and 2018. In a majority of countries across the region, however, PISA science performance scores are decreasing, and large gaps by immigration status and socioeconomic status exist.

11. Among older persons, participation in education and training increased slightly between 2015 and 2022 but levels remain low in most countries. Fewer than 5 per cent of persons aged 65 to 74 participate in education or training in most countries with data.⁶ Levels are slightly higher among women and among persons aged 55 to 65, but older people risk

⁴ United Nations SDG Global Database.

⁵ UNESCO Institute for Statistics.

⁶ Eurostat.

being left behind, especially when it comes to skills in information and communications technology (ICT). During a time of rapid digitalization, ICT skills are necessary not only for access to employment but for full and equal participation in nearly every aspect of society. Additional efforts to maintain and update skills and increase digital literacy throughout the life course are necessary to support access to employment and social participation for all persons with special attention for older persons.

12. Health and well-being across the life course are fundamental for economic growth and the fulfilment of individual potential. The 2013 Chair's summary calls for the promotion of healthy lifestyles among young people, effective health and social services for ageing societies and the achievement of universal health coverage. Across the region, people are living longer, healthier lives and health service coverage, overall, has improved. Nonetheless, disruptions to health services due to the COVID-19 pandemic threaten progress on non-communicable diseases (NCDs), and stark disparities between higher income and low-and-middle income countries and between women and men remain. Increasing household expenditures on health since 2015 in most countries limits progress towards universal coverage. An ageing healthcare workforce and population also present challenges for health systems across the region. Mental well-being and suicide mortality rates have been an area of concern in the UNECE region for many years. Although at the aggregate level suicide trends are decreasing, the suicide rate increased in 10 countries between 2015 and 2019.⁷ The rates among persons aged 65 and older are twice as high than for the rest of the population.

13. Inclusive labour markets, where everyone of working age can participate in quality, paid work, enable people to join and remain in the workforce. The median unemployment rate for the region declined from 7.2 to 5.6 per cent between 2015 and 2022, but rates remain unacceptably high for certain groups, calling for tailored policy support.⁸ In most countries, unemployment rates for young persons aged 15 to 24 years and for persons with disabilities are two or three times higher than for the total working-age population.⁹ Nonetheless, the share of youth not in education, employment, or training (NEET) continues to decrease, reflecting the introduction of comprehensive measures to promote youth employment and reduce youth NEET rates in many countries. The share of men participating in the labour force is on average 14 per cent higher than the share of women across the region.¹⁰ Women with young children continue to be less likely to be employed than men with young children and women without children. Labour force participation is on average 25 per cent lower among older persons aged 55 to 64 compared to persons aged 25 to 54.¹¹

14. Migration flows, both within countries where people move from rural to urban areas for education and employment opportunities and between countries, continue to shape population dynamics and sustainable development. Migration flows have policy implications for both sending and receiving countries and regions. In sending countries, many of which are also experiencing declining birth rates, there is a need to ensure that the labour force remains productive and capable of upholding social support systems based on workers' contributions. Receiving countries must continue to facilitate the integration of migrants into labour markets and society, ensuring access to decent work, education, and healthcare. As the intensity and complexity of international migration deepens, all member States can further protect the rights of migrants and facilitate safe, orderly and regular migration.

15. CO₂ emissions per unit of GDP continue to fall in most countries in the region. The regional average was 0.4 kg of CO₂ per unit of manufacturing value added in 2020, down from 0.9 kg per unit of manufacturing value added in 2000.¹² Emissions continue to increase in some countries in Central Asia and the South Caucasus, and overall rates vary widely across the region. In recent years some progress has been made from the policy standpoint in

⁷ WHO European Health Information Gateway.

⁸ ILOSTAT.

⁹ International Labour Organization (ILO), "Global Employment Trends for Youth 2022: Europe and Central Asia".

¹⁰ ILOSTAT; data refer to working-age population age 15 to 64.

¹¹ ILOSTAT.

¹² United Nations SDG Global Database.

support of sustainable development and green economies.¹³ Use of renewable energy across many UNECE countries has increased since 2017, with a notable shift in support of policies for renewables, with changes in both the range of policy instruments being used and in country coverage.¹⁴ Thirty-one countries have submitted, in accordance with the Paris Agreement, long-term low greenhouse gas emission development strategies.¹⁵ It is crucial for countries to continue working to anticipate future climate conditions, enhance resource management, and foster technological solutions to mitigate and address the effects of climate change.

16. Changing demographic dynamics in the region call for new and creative ways to fulfil individual potential and strengthen societies' demographic resilience. As fertility rates decline or remain low, life expectancy increases, and population movements continue to shift, countries in the region need to stay attuned to what people themselves say they want and need to thrive. An essential component of this approach is the development of capabilities, focusing on the education of children and youth, and the development of new skills across adulthood, leveraging the opportunities presented by technology, ensuring a gender-transformative approach and ensuring sustained focus on rural communities and those living in most vulnerable situations. Gains in life expectancy and positive trends in advancing healthy lifestyles need to be secured. Drawing on lessons learned from the COVID-19 pandemic, countries should invest further in good practices that can expand access to health care for hard-to-reach communities. Efforts to address unemployment among young people should go hand-in-hand with efforts to enhance opportunities for the productive engagement of older persons. Policy frameworks should be designed and implemented to support the realization of fertility intentions and to help women and men balance work and family life. To adapt to population ageing, Governments should mainstream ageing into policy formulation and implementation with special attention towards active and healthy ageing and long-term care systems. Local authorities should invest further in social cohesion initiatives including cultural activities and public services. To fulfil commitments to the Paris Agreement and the 2050 net-zero horizon, an integrated and holistic action is needed by all actors to shift the distribution of available resources and generate opportunities for sustainable development.

B. Families, sexual and reproductive health over the life course

17. The 2013 Chair's summary called on member States to guarantee universal access to sexual and reproductive health (SRH) care. It encouraged member States to strengthen comprehensive sexuality education programmes, including by training of professionals, removing barriers that limit the access to contraceptive methods, eliminating preventable maternal mortality and morbidity, and ensuring the prevention and treatment of HIV and other sexually transmitted infections (STIs), among other measures. Sexual and reproductive health and reproductive rights are central to sustainable development, critical to maternal, newborn, child and adolescent health, and fundamental for gender equality and women's empowerment.

18. Sexual and reproductive health and reproductive rights are an essential part of universal health coverage. Laws and regulations to guarantee full and equal access to the four key dimensions of SRH – maternity care, contraception and family planning, sexuality education, and HIV and human papillomavirus (HPV) – exist in just 3 out of 41 countries with data available: the Kingdom of the Netherlands, Norway, and Sweden.¹⁶ Despite growing recognition of the importance of adolescents' SRH, only 25 out of 39 countries in

¹³ See for example UNECE, "Climate Champions' Extended Compendium of Climate-Related Initiatives".

¹⁴ UNECE, "2022 UNECE Renewable Energy Status Report".

¹⁵ United Nations Climate Change Long-Term Strategies Portal.

¹⁶ United Nations SDG Global Database.

the region that reported had a national strategy or policy on adolescent health in place in 2022.¹⁷

19. Maternal mortality is a key indicator of women's health and a measure of a health system's efforts to promote SRH. Neonatal survival reflects the extent to which women and infants have been provided with access to quality SRH care before and during pregnancy, delivery and the post-partum period. Maternal mortality in the region declined from an average of 22 to 12 deaths per 100,000 live births between 2000 and 2020. Progress has recently slowed, and the maternal mortality ratio increased between 2015 and 2020 in 18 of 52 countries with data.¹⁸ The lifetime risk of maternal death is more than three times higher in countries in Central Asia (1 in 1,200) and Northern America (1 in 2,900) than in Western Europe (1 in 9,800).¹⁹ Neonatal mortality has decreased since 2000 in all countries in the region, falling from an average of 8.4 to 3.7 live births between 2000 and 2021.²⁰ Neonatal mortality remains high across Central Asia and the South Caucasus region, and gaps remain for the most disadvantaged despite widespread access to antenatal care and skilled attendance at birth in most countries.

20. Adolescent birth rates (ABR) fell from an average of 20.3 to 12.6 births per 1,000 women aged 15 to 19 years between 2000 and 2020.²¹ In several high-income countries – Andorra, Denmark, Liechtenstein, Norway, San Marino, and Switzerland – the adolescent birth rate is below 2 births per 1,000 women aged 15–19. The average ABR among women aged 15–19 years for Central Asia was 24.9 in 2020, and in some Eastern European countries, rates are 3 to 4 times higher than the average for the region. Adolescent pregnancy affects some population subgroups disproportionately. ABR is 10 times higher among Roma teenagers in Montenegro and Serbia than among the same age group in the general population; and 5 times higher in North Macedonia.²² Early marriage is uncommon in most of the region, but its prevalence remains high in some countries. More than 1 in 10 women aged 20–24 years were married or in union before the age of 18 in Albania, Georgia, Kyrgyzstan, the Republic of Moldova, and Türkiye.²³ Early marriage tends to be more common among women with low levels of education and income, with sizable differences in rates in some countries between those with primary education versus those with secondary education.²⁴

21. Contraceptive prevalence (any method) among married or in-union women aged 15–49 has changed little since 2000 with the median value for the region increasing only slightly from 69.6 per cent to 70.6 per cent in 2023.²⁵ However, there are significant variations across countries. In 2023, 85 per cent of married or in-union women aged 15–19 use some form of contraception in Norway, while in Montenegro only 27 per cent of women in this group use contraception. Contraceptive use is least common in countries in Central Asia, and the Balkans and South Caucasus regions – in 15 countries, one in three women do not use any form of contraception. Although the share of women with an unmet need for modern methods of family planning is decreasing in all countries, one in six women in the UNECE region still have an unmet need for a modern method of family planning.²⁶ In several countries in the

¹⁷ WHO Regional Committee for Europe, "Progress Report: Action Plan for Sexual and Reproductive Health: Towards Achieving the 2030 Agenda for Sustainable Development in Europe – Leaving No One Behind".

¹⁸ United Nations SDG Global Database.

¹⁹ Trends in maternal mortality 2000 to 2020: estimates by WHO, UNICEF, UNFPA, World Bank Group and UNDESA/Population Division.

²⁰ United Nations SDG Global Database.

²¹ Ibid.

²² Multiple Indicator Cluster Surveys (MICS).

²³ United Nations SDG Global Database. Data for 2018 except for Republic of Moldova, which correspond to 2012.

²⁴ Based on data from recent MICS and DHS surveys for Albania, Armenia, Belarus, Georgia, Kyrgyzstan, Montenegro, North Macedonia, Tajikistan, Türkiye and Turkmenistan.

²⁵ United Nations Department of Economic and Social Affairs, Population Division World Contraceptive Use 2022.

²⁶ The median value for the UNECE region in 2022 is 18.7 based on United Nations Department of Economic and Social Affairs, Population Division (2022). Estimates and Projections of Family Planning Indicators 2022.

Balkans and South Caucasus regions, the usage rates of modern contraceptives are significantly below regional and global averages and one in three women have an unmet need for a modern method of family planning.²⁷ The availability, accessibility, and cost of contraceptives as well as age restrictions remain barriers in many countries. Few countries provide hormonal contraceptives over the counter, and family planning services for women and men are still mostly provided by specialist doctors, which also restricts the extent of their use.²⁸

22. The prevalence of induced abortions decreased by more than half from 393 to 189 abortions per 1,000 live births between 2000 and 2019.²⁹ Several countries in Eastern Europe have seen significant reductions in induced abortions relative to live births over the past decades. In Belarus, Romania, the Russian Federation, and Ukraine, for example, the ratio of induced abortions to 1,000 live births has decreased from more than 1,000 in 2000 to 350 or fewer in 2019. However, there is an upward trend among younger women and teenagers in several countries, with more abortions than live births among teenagers in some Western European countries and high abortion ratios among teenagers in Northern European countries. Considered together with relatively low use of modern contraceptives among sexually active adolescents in some countries, these trends point to a need to educate young people on sexual health, including for the prevention of unintended pregnancies.³⁰

23. Comprehensive sexuality education (CSE) is not yet widely implemented. In 2022, 28 countries reported adopting policies requiring mandatory CSE as part of the regular education curriculum or policy, a marked improvement compared with 19 in 2019. In Azerbaijan, Georgia, Kazakhstan, Kyrgyzstan, and Romania no legal frameworks supporting mandatory sexuality education in schools exist, although non-compulsory pilots or programmes have been implemented in Azerbaijan, Kyrgyzstan and Romania.³¹ Sexuality education programmes can tackle a wide range of topics, and issues such as limited curriculum content and insufficient teacher training and a persistent lack of confidence among teachers to deliver sexuality education continue to present barriers for adolescents and youth to gain access to information on SRH.³²

24. The latest trends on HIV infection rates for some parts of the region are alarming. In 2022, 160,000 people were newly infected with HIV in Eastern Europe and Central Asia, a 49 per cent increase since 2010 and the largest increase of any region in the world during this period.³³ The number of AIDS-related deaths in Eastern Europe and Central Asia in 2022 is 46 per cent higher than in 2010, despite expanding HIV treatment coverage and availability of new prevention methods and measures to control opportunistic infections.³⁴ In Eastern Europe and Central Asia, fewer than half of people living with HIV receive antiretroviral therapy (ART).³⁵ A lack of HIV prevention services for marginalized and key populations and the barriers posed by punitive laws and social stigma and discrimination drive growing infections. Although most countries in Europe and Central Asia have a national testing guidance in place, some of these policies are more than five years old and others lack content

²⁷ The share of women with an unmet need for a modern method of family planning in 30 per cent or higher in 2023 in Albania, Armenia, Azerbaijan, Bosnia and Herzegovina, Croatia, Georgia, Greece, Montenegro, North Macedonia, Serbia and Türkiye based on United Nations Department of Economic and Social Affairs, Population Division (2022). *Estimates and Projections of Family Planning Indicators 2022*.

²⁸ WHO Regional Committee for Europe, “Progress Report: Action Plan for Sexual and Reproductive Health: Towards Achieving the 2030 Agenda for Sustainable Development in Europe – Leaving No One Behind”.

²⁹ WHO European Health Information Gateway.

³⁰ WHO European Health Information Gateway, *Health Behaviour in School-aged Children (HBSC)*.

³¹ WHO, “Assessments of sexual, reproductive, maternal, newborn, child and adolescent health in the context of universal health coverage in six countries in the WHO European region: a synthesis of findings from the country reports”.

³² UNESCO, “The Journey Towards Comprehensive Sexuality Education Global Status Report”.

³³ UNAIDS, “The Path that ends AIDS: Global Update”, 2023.

³⁴ Ibid.

³⁵ Ibid.

on specific key populations, or recommendations on testing frequency or the implementation of specific methods to test for HIV.³⁶

25. Cervical cancer was the fourth leading cause of cancer and cancer deaths in women worldwide in 2020.³⁷ In Eastern Europe and Central Asia, cervical cancer is the second-most-common cause of cancer-related death among women of reproductive age. Women in high-income countries are more likely to be tested for cervical cancer and to be vaccinated for HPV which causes most cases of cervical cancer. Testing for and treatment of cervical cancer is free in 22 countries in EU³⁸ as well as in Albania, Azerbaijan, Belarus, Serbia, Türkiye, Uzbekistan,³⁹ and in Georgia and the Republic of Moldova.⁴⁰ All EU/European Economic Area (EEA) countries have introduced HPV vaccination in their national programmes,⁴¹ and many have recently moved or are planning to move from a girls-only HPV vaccination strategy to a universal or gender-neutral HPV vaccination strategy. Progress has been made in recent years to reduce inequities in access to HPV vaccination between high-income and middle-income countries, with coverage rapidly increasing in Albania, Estonia, Kyrgyzstan, Montenegro and Serbia.⁴²

26. Progress in securing sexual and reproductive health and reproductive rights across the region has been mixed. Trends observed across the region underscore the need to change unfavourable societal environments, investing in programmes that fight gender inequality and harmful gender norms, reduce violence against women and girls, and empower women and girls to control their own sexual lives, access sexual and reproductive health care, and access respectful maternity care. These should be supported by strengthened efforts to promote SRH education and information, quality service delivery, and accessibility especially by those marginalized by societies.

C. Inequalities, social inclusion and rights

27. Inequalities based on social, demographic, and economic characteristics undermine individuals' capabilities to exercise their human rights and limit economic growth and sustainable development. The 2013 Chair's summary highlighted that equality and non-discrimination are necessary preconditions for all individuals to enjoy their human rights and realize their potential. It called on member States to achieve gender equality and guarantee the social inclusion of marginalized population groups, which continue to suffer multiple and intersecting forms of inequality, disempowerment and discrimination.

28. Advancing gender equality requires responses in the economic, social and political spheres as well as a transformation of gender and social norms. Across UNECE countries there has been progress over the last decades, but the region is far from on track to achieve gender equality by 2030. The social and economic fallout from the COVID-19 pandemic has derailed, halted and in some cases reversed progress in many areas, including gender-based violence, employment, and the gender division of unpaid care, and an acceleration of efforts is required to avoid long-lasting consequences for gender equality across the region.

29. Women's participation in decision-making and in leadership positions is vital for the advancement of women. Some progress over time has been achieved but data show that parity is not yet achieved. The proportion of women in managerial positions across the region has

³⁶ Evidence brief: HIV testing in Europe and Central Asia – Monitoring implementation of the Dublin Declaration on Partnership to fight HIV/AIDS in Europe and Central Asia – 2021 progress report.

³⁷ Global Cancer Observatory: Cancer Today, GLOBOCAN 2020.

³⁸ WHO Regional Committee for Europe, "Progress Report: Action Plan for Sexual and Reproductive Health: Towards Achieving the 2030 Agenda for Sustainable Development in Europe – Leaving No One Behind".

³⁹ UNFPA, "Situation Analysis of Capacities for Cervical Cancer Prevention, Treatment and Palliative Care in Eastern Europe and Central Asia", 2021.

⁴⁰ UNFPA.

⁴¹ European Centre for Disease Prevention and Control (ECDC). Human papillomavirus infection: recommended vaccinations. Stockholm: ECDC; 2020.

⁴² As reported in the SDG Voluntary national reviews submitted by these countries.

increased from 29 per cent in 2000 to 35.5 per cent in 2022.⁴³ The share of seats in national parliaments held by women has nearly tripled since 2000, but the median value for the region is still well below parity at 31 per cent in 2023.⁴⁴ No country in the region has achieved gender parity in its national parliament, though several Northern European countries are approaching this important milestone.

30. The gender gap in employment and pay is narrowing in the region. The share of couples with young children where both man and woman are working is increasing across the region. However, the gap in female employment between couples with and without children remains large in some countries, suggesting insufficient family support policies, especially for parents of young children. Moreover, across the region, couples with young children are less likely to both work full time than those with older children or those without children. The gender pay gap has narrowed from a median value for the region of 18 per cent in 2015 to 14 per cent in 2020,⁴⁵ but women continue to be paid less than men for equal work and they bear the larger share of unpaid care and household work. In countries in Eastern and South-Eastern Europe with recent data, women spend at least twice as much time on unpaid care and domestic work as men. In some countries in the western part of the region, where female labour force participation is high, women still spend 30 to 40 per cent more time on care and domestic work than men.⁴⁶

31. The share of children under age two attending formal childcare or preschool is increasing across the region but varies significantly by country. In several western countries, more than half of children attend formal childcare or preschool but the share remains below 10 per cent in some eastern countries.⁴⁷ Parental leave entitlements also vary considerably. For example, all 17 countries and territories in Eastern Europe and Central Asia have maternity leave provisions which range from 16 to 52 weeks, but mothers can receive 100 per cent of their previous earnings in only 8 countries.⁴⁸ Since 2015, in two-thirds of UNECE countries with data there has been an increase in the number of weeks for paid father-specific parental leave, with notable increases in Greece, Iceland, Ireland, the Kingdom of the Netherlands, Norway, and Spain. In 2022, paternity leave was two weeks or less in one-third of countries with data. In Eastern Europe and Central Asia, 11 countries provide parental leave for mothers and fathers, but leave for fathers is generally much shorter than for mothers. Gender-responsive family policies and father-specific parental leave policies are a powerful tool to remove barriers to women's full participation in the labour force, to support families with care responsibilities, and to redistribute unpaid care work more equally between women and men.

32. Gender-based violence affects women in all countries in the UNECE region. In half of countries in the region with data, the share of individuals believing it is justifiable for a man to beat his wife has increased over time.⁴⁹ Evidence around violence against women and girls remains limited. Violence is often underreported, and official estimates may understate the scale of the issue. Recent surveys in selected countries in Eastern and South-Eastern Europe suggest 30 per cent of women experienced some form of violence in the previous year.⁵⁰ Country-level figures mask the varied experiences of different population groups. Ethnic and religious minorities or people of diverse sexual orientation are at higher risk of violence, and within these groups women are consistently the ones suffering more violence.⁵¹ Gender-responsive policy approaches which address underlying gender inequalities are essential to achieve sustainable development and the aims of the ICPD PoA.

⁴³ Median values for region. Source: United Nations SDG Global Database.

⁴⁴ United Nations SDG Global Database.

⁴⁵ UNECE Statistical Database.

⁴⁶ Ibid.

⁴⁷ OECD.

⁴⁸ UNFPA, "The State of Gender-Responsive Family Policies in the Eastern Europe and Central Asia Region", 2023.

⁴⁹ World Values Survey.

⁵⁰ OSCE, "OSCE-led survey on violence against women: At a glance report", 2019.

⁵¹ European Institute for Gender Equality, "Gender Equality Index 2020: Digitalisation and the Future of Work", 2020.

33. Poverty is at the centre of individual and household vulnerability, resulting in and perpetuating cycles of exclusion and inequality. The share of the population living below the national poverty line has decreased in most countries since 2015. Still, in one-quarter of countries one in five people face poverty.⁵² Younger and older persons are more likely to face poverty than the working-age population. Women are more likely than men to face poverty at all ages, but gender gaps increase with age. Nearly one in four women aged 75 and older is at risk of poverty across countries with data, reflecting the cumulative impacts of lifetime inequalities in employment and earnings for women.⁵³ Ensuring universal access to quality education is one of the most effective means of breaking cycles of poverty and inequality. Even before the pandemic, gaps between advantaged and disadvantaged students were widening in many countries. Educational outcomes as well as career aspirations among students vary significantly by socioeconomic status in many countries. Data that reflect the impact of the COVID-19 pandemic are not yet available, but it is likely that the pandemic further exacerbated these disparities.

34. Ensuring that all individuals, regardless of race, migrant status, disability, religion, age or sex, live a life free from poverty and discrimination, access social services and, more broadly, enjoy the protection and exercise of their human rights remains an unfinished item on the region's population and development agenda. Discriminatory attitudes and practices impact outcomes for several minority groups. Persons with a disability are more likely to have experienced discrimination or harassment than persons without a disability. Among women, those with a disability are two to three times more likely to have experienced discrimination or harassment than those without a disability.⁵⁴ Prejudice towards persons of a different race has increased across the region since 2000. One in three persons indicate they would not like to have a homosexual as a neighbour.⁵⁵ In Europe, one in three older persons aged 65 or older report experiences of ageism. Ageism affects young persons as well. More than half of youth aged 15 to 24 across European countries report being treated with a lack of respect because of their age.⁵⁶ All forms of discrimination need to be eradicated through prevention and community support systems and effective social integration policies.

35. The number of detected victims of human trafficking has increased since 2015 across countries with data.⁵⁷ Although some of the increases may reflect better monitoring and surveillance mechanisms, research indicates that human trafficking remains on the rise in Western Europe and Central Asia. It points to a greater variety of nationalities among human trafficking victims than in any other part of the world, and to a majority of victims being trafficked for the purpose of sexual exploitation.

36. Efforts must be accelerated to address inequalities within and across countries to leave no one behind on the road to the realization of individual rights and regional sustainable development. Women, migrants, persons with disabilities, older persons and minority groups continue to experience multiple and intersecting disadvantages in economic and social life in the region. Traditional gender norms limit progress towards many areas of the ICPD PoA in parts of the region, and efforts to promote gender equality and women's empowerment must continue. Policies to empower women and girls and achieve a gender-balanced reconciliation between work and family responsibilities, including affordable childcare, flexible working arrangements for employees with care responsibilities, and systems supporting equal pay for equal work should continue to be implemented jointly with mechanisms that support increasing representation of women in leadership roles, both within elected official roles and within the private sector as managers. All forms of discrimination need to be eradicated through prevention and community support systems, education that changes social norms, and effective social integration policies. Policies that prohibit discrimination based on gender, sexual orientation, age, ethnicity, religion or disability status should be strengthened and enforced across sectors. Systemic and institutionalized forms of discrimination which perpetuate the uneven distribution of power and resources should be identified and reformed.

⁵² United Nations SDG Global Database.

⁵³ Eurostat.

⁵⁴ United Nations SDG Global Database.

⁵⁵ World Values Survey.

⁵⁶ World Health Organization, "Global report on ageism", 2021.

⁵⁷ United Nations SDG Global Database.

The diversity and mobility of the UNECE population represent a source of potential for sustainable development, and the equal enjoyment of rights and resources will support healthier and more productive lives.

IV. The way forward

37. The UNECE region is characterized by considerable demographic diversity. Nonetheless, most countries are facing or will soon confront declining fertility, ageing populations, and projected population decline. The region will lead the world into a new demographic reality. To adequately prepare for emerging challenges and opportunities, countries should strive to understand their population dynamics and design human-rights-based public policies that build on individual potential and capabilities rather than demographic anxiety and that advance gender equality. The success of such an approach relies on universal enjoyment of human rights and fulfilled potential of individual capacities and capabilities. To achieve this goal, countries must redouble efforts to sustain progress amid disruptions driven by the COVID-19 pandemic, military conflicts and economic and environmental pressures. To realize individual and societal potential amidst the new economic and demographic realities in the region, a holistic, life-course and rights-based approach to population dynamics and sustainable development is required. Continued efforts are required to ensure equal protection of human rights and the universal freedom to exercise choices that support individual well-being.

38. The review has highlighted the need for enhanced data collection and dissemination. Data are insufficient to assess progress in the region for nearly a quarter of the indicators in the UNECE ICPD monitoring framework and for more than 30 per cent of Sustainable Development Goals (SDG) indicators. Data on older persons and children and youth are particularly limited, as are data that support the analysis of intersecting disadvantages through multidimensional disaggregation.

39. The diversity of the UNECE region means examples of good practices across various contexts are available as guidance towards advancing the implementation of the ICPD PoA and the 2030 Agenda for Sustainable Development. UNECE and UNFPA will continue to facilitate the exchange of experience and best practices among member States, facilitate the generation of timely, high-quality knowledge, support advocacy and policy dialogue processes, develop institutional capacities, civil society engagement, and foster partnerships and coordination.

40. The findings of the Regional Report on ICPD30, alongside the 2023 UNECE Regional Conference deliberations, will inform the global review of the ICPD PoA at the fifty-seventh session of the Commission on Population and Development in 2024, which will assess the status of implementation of the ICPD PoA and its contribution to the follow-up and review of the 2030 Agenda for Sustainable Development during the Decade of Action to deliver the Sustainable Development Goals.
