WORKSHOP REPORT

Asian Forum of Parliamentarians on Population and Development
Sri Lanka Forum of Parliamentarians on Population and Development

AFPPD-SLPPD National Inception Workshop

16 – 17 February 2017 | Negombo, Sri Lanka
## Contents

### OPENING SESSION
- Workshop Opening ................................................................. 2
- Opening Remarks ......................................................................... 2

### WORKSHOP INTRODUCTION
- AFPPD’s Strategic Priorities Framework (2016-2019), Workshop Objectives and Agenda Overview ................................................................. 7

### SESSION 1 AND 2: Role of the National Committee-SLPPD in Supporting Parliamentarians to Prioritize Agenda into Action
- Roles and Responsibilities of National Committees, and Priorities and Developments from the ICPD, the MDGs and the SDGs ......................................................................... 10
- Why Parliamentarians Need to Advocate on Population and Development Issues: Their Role in Accelerating the Achievement of the SDGs ......................................................................... 12
- Discussions ....................................................................................... 15

### SESSION 3: Active Ageing in Sri Lanka
- Overview of the National Policy of Senior Citizens, Sri Lanka .................................................................................. 17
- Demographic and Population Processes and Their Linkages to Social Policies ................................................................. 20
- Discussions ....................................................................................... 23

### SESSION 4: Gender Equality and Women’s Empowerment
- Overview of the Legal and Policy Framework on Gender Equality and Women’s Empowerment ................................................................. 25

### SESSION 5: Sexual and Reproductive Health Rights (SRHR)
- Overview of the Legal and Policy Framework on SRHR ................................................................................................. 31
- Mainstreaming SRHR in Crisis Management and Emergency Response ................................................................................ 34
- Discussions ....................................................................................... 37

### SESSION 6: Youth Policy
- Sustainable Development Bill/Act ................................................................................................. 38
- Overview of the SDGs and Youth ................................................................................................. 40
- Discussions ....................................................................................... 41

### CONCLUSION
- Recap of Recommendations ................................................................................................. 43
- Closing Remarks ................................................................................................. 43

### ANNEX
................................................................................................. 46

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OPENING SESSION

AFPPD Executive Director, Dr. Mika Marumoto, opened the workshop followed by remarks from the Sri Lankan Minister of Social Empowerment and Welfare, Hon. S.B. Dissanayake, and UNFPA Representative, Ms. Kristine Blokhus. (Photo: AFPPD)

Workshop Opening

Chair: Dr. Mika Marumoto, Executive Director, Asian Forum of Parliamentarians on Population and Development (AFPPD)

AFPPD Executive Director, Dr. Marumoto, welcomed the participants and expressed her deepest appreciation to Hon. Minister S.B. Dissanayake who was the leading force behind the establishment of the Sri Lanka Forum for Parliamentarians on Population and Sustainable Development (SLPPD) in October 2016. Dr. Marumoto then proceeded by introducing the speakers of the opening session.

Opening Remarks

Hon. Mr. S.B. Dissanayake, Chair of SLPPD and Minister of Social Empowerment and Welfare

Hon. Dissanayake welcomed the participants and expressed his expectations for the workshop, highlighting the need for parliamentarians to work on a common agenda in a more meaningful manner.

He presented three main topics of the workshop, starting with ageing. The Asia-Pacific region is currently home to over half of the world’s elderly population and is experiencing a rapid expansion of ageing population as a result of improved life expectancies and declining fertility rates. The number of elderly in the region is expected to triple from 438 million in 2010 to 1.26 billion in 2050.

The second topic evoked by Hon. Dissanayake was gender equality and women's empowerment. He highlighted the measures adopted in the past that have effectively increased women's participation in the region, ensured their fundamental human rights, and improved their nutritional status.
The third topic covered by the workshop was investing in youth. The Asia-Pacific region is home to more than 60 percent of young population aged 15 to 24. They are a major human resource for development. They are also key agents for economic development and a driving force in technical innovation. However, the full potential of youth across the region is largely untapped as many of them still face obstacles in their access to education, healthcare, employment, and civil participation.

Hon. S.B. Dissanayake, MP and Minister of Social Empowerment and Welfare in Sri Lanka, highlighted the three central topics of the workshop: ageing, gender equality and women’s empowerment, and investing in youth. (Photo: AFPPD)

Hon. Dissanayake then commented on Sri Lanka’s situation, emphasizing ageing issues. The Sri Lankan population is ageing fast. By 2040, 25 percent of the population will be over 60 years of age, placing the country in the same position as many European countries and Japan today. This will become a major challenge for the country unless the development process is improved in a sustainable way. The main drive behind the rapid ageing in Sri Lanka is family planning, which led to a manageable population and better social achievements among families. However, this ageing speed has also become an increasing concern as the present intergenerational care system of the elderly is unlikely to sustain itself. For instance, more families need increasing support as the number of income-generating family members has decreased. Additionally, it is difficult for the State to support the 63 percent of population working in the informal sector, and the population concerned has to continue working into their old age even with infirmities. Women in their senior years will be particularly vulnerable and more dependent on family support as their labor force participation is low and their life expectancy is higher than men. One should also consider the rights of the elderly: the right to work, the right to choose, and the right for protection and support. The policy framework should take these rights into account and ensure social protection and well-being of the elderly. While drafting policies, it is crucial to take into account the experiences of other countries which have faced similar ageing phenomena.

There is also much to be understood about the ageing population in Sri Lanka, such as their varying levels of productivity, their care needs and the ways in which they can contribute to the welfare of their families and society. Therefore, it is important that Sri Lanka conducts ageing specific surveys, so that informed and appropriate policy responses can be devised.
Ms. Kristine Blokhus, Officer-in-Charge, UNFPA Sri Lanka

Ms. Blokhus congratulated SLPPD for its re-establishment. She stressed the crucial role of parliamentarians in building legal and policy frameworks, and monitoring their implementation. She recognized Sri Lanka’s significant progress on social development indicators over a short period of time and underlined the need to take advantage of this momentum.

Ms. Blokhus acknowledged the work of AFPPD in engaging parliamentarians across the region and its wealth of experience built over many years. AFPPD’s partnership is highly valued by UNFPA. She also mentioned the beneficial contribution of UNFPA’s partners, including the National Secretariat for Elders, and the Sri Lanka Family Planning Association.

Ms. Blokhus spoke about the ageing situation in Sri Lanka, highlighting the projection that one in four Sri Lankans is expected to be an elderly person by 2041. This quarter of the population will therefore need care and support for healthy and active ageing. UNFPA has supported the government in collecting and analyzing demographic data to establish plans accordingly. Sri Lanka will be required to establish adequate social safety nets and caregiver systems, and the Government is well on its way in making such preparation. Ms. Blokhus underlined the Parliamentarians’ contribution in this regard. Ms. Blokhus mentioned the launch of the website of the National Secretariat for Elders (NSE) with the support and contribution of UNFPA. The NSE website provides data on the number of elder committees, elder homes, and elderly population in Sri Lanka by district-level, which is pivotal in ensuring informed decisions and evidence-based policy development.

The second topic addressed by Ms. Blokhus was gender equality and women’s empowerment. She stated that Sri Lanka ranks well under indicators on health and education for women. However, some gaps remain as cited by Ms. Blokhus as below:

- One in four households in Sri Lanka are headed by women. UNFPA is pleased to have been involved in promoting a National Action Plan for Women Headed Households, which
addresses issues faced by such households, including access to healthcare, psycho-social support, and social protection.

- **Gender-based violence** is an issue faced both by women-headed households and by other women in Sri Lanka. This is an issue that the recent household surveys in Sri Lanka attempted to measure. However, data availability remains a challenge and therefore, advocacy for better data is needed. The **Sexual and Gender-based Violence National Action Plan** will require vigilant attention from Parliamentarians.

Finally, Ms. Blokhus commented on **Sri Lankan youth**. Sri Lanka has 4.4 million young people who are the future of the country. Their skills and capacities, their efforts toward social cohesion, and their civic and political participation will carry Sri Lanka into the future. The **health and education indicators** show that the government has invested in youth. However, there are still gaps that remain:

- Less than half of the young people in Sri Lanka have correct knowledge about sexual and reproductive health.
- Sri Lanka’s teenage pregnancy rate is increasing.
- Sri Lankan Parliamentarians under age 35 have consistently remained below 10 percent.
- Less than 2 percent of the young people in Sri Lanka are involved in any political party, and 90 percent are not involved in any decision-making at their workplace.

Young people therefore need accurate information and quality services as well as increased support on how to engage in civic and political affairs. Ms. Blokhus mentioned UNFPA’s **Provincial-Level Youth Policy Programme**, which has facilitated multi-stakeholder discussions in the Northern, Eastern, Southern, and Sabaragamuwa Provinces, and will be pursued in all provinces.

Recognizing the importance of Parliamentarians’ support and advocacy to address all these issues, Ms. Blokhus called for a closer partnership and expressed UNFPA’s will to provide Parliamentarians with evidence-based information for effective policy formulation and implementation.

**Ms. Thushara Ranasinghe, Executive Director, Family Planning Association of Sri Lanka (FPASL)**

Ms. Thushara Ranasinghe, Executive Director of Family Planning Association of Sri Lanka, expressed her confidence in Parliamentarians at the workshop to influence policy-making in the future. (Photo: AFPPD)
Ms. Thushara Ranasinghe highlighted the importance of the strategic partnership that exists between AFPPD and the International Planned Parenthood Federation (IPPF) of which FPASL is a member. Secondly, she shared a personal experience from her past collaboration with AFPPD since 2011. For instance, she had the opportunity to accompany two Parliamentarians to AFPPD-organized workshops in Chiang Mai and Phuket.

In the latest meeting held in Sri Lanka, the commitment was made to form a National Committee on Population and Development. She expressed her satisfaction to witness the realization of this commitment, and that SLPPD is chaired by the Honorable Minister for Social Empowerment and Welfare.

Ms. Ranasinghe highlighted that this inception workshop was a great opportunity not only to launch SLPPD’s activities, but also for MPs to understand the strategic directions of AFPPD and to equip themselves with user-friendly tools that have been developed by AFPPD.

The three thematic areas to be discussed during the workshop (specifically women, youth, and ageing population) are the same areas on which FPASL is also currently working on. FPASL contributed to the success story of the country regarding family planning. However, its scope of work has been expanded to include all issues related to SRHR, therefore all the three thematic areas covered by the workshop are FPASL’s concern.

Ms. Ranasinghe recognized many challenges in implementing the population and development agenda, namely the International Conference on Population and Development Programme of Action – ICPD PoA. She stated, however, that she is confident in the ability of Parliamentarians present at the workshop to influence policymaking in the future, to hold the government accountable for its global and regional commitments, and to ensure a suitable budgetary allocation in order to address these issues.

Dr. Marumoto offered a gift as a token of appreciation to each speaker of the opening session, and presented AFPPD’s historical book and Briefing Cards for Parliamentarians (2016) for all the SLPPD members.
WORKSHOP INTRODUCTION

Dr. Mika Marumoto, Executive Director of AFPPD, and Hon. Lakshman Senewiratne led the Workshop Introduction. (Photo: AFPPD)

Chair: Hon. Mr. Lakshman Senewiratne, Secretary General of SLPPD and State Minister of Science Technology and Research

AFPPD’s Strategic Priorities Framework (2016-2019), Workshop Objectives and Agenda Overview

Presenter: Dr. Mika Marumoto, Executive Director, AFPPD

Dr. Marumoto started by presenting AFPPD’s history. AFPPD was established at the Asian Conference of Parliamentarians on Population and Development in 1981 in Beijing. Dr. Marumoto stressed the role of Sri Lanka in AFPPD’s inception, as it was one of its four founding members, along with Japan, China and India. In this regard, the re-establishment of SLPPD and the commitment of Hon. Minister Dissanayake were particularly appreciated.

As for the second decade of AFPPD’s history in the 1990s, Dr. Marumoto highlighted the International Conference on Population and Development (ICPD) held in Cairo, Egypt in 1994, which was a watershed moment in which population and development issues started to be viewed from a human rights perspective. Additionally, Dr. Marumoto underlined the role of parliamentarians; this conference was held immediately after the International Conference of Parliamentarians on Population and Development (ICPPD). This was one of the largest parliamentarians’ conferences attended by 300 Parliamentarians from 107 countries. The Parliamentarians’ Declaration and Recommendations were addressed to the ICPD and were brought into the ICPD Program of Action.

The third decade and beyond of AFPPD’s history started in the MDGs era, followed by the SDGs era after the adoption of the 2030 Agenda for Sustainable Development by UN Member States in 2015. One month after this event, AFPPD’s General Assembly adopted a new strategy for the period 2016-2019 aligned with the SDGs framework.
Dr. Marumoto then presented AFPPD’s visions and mission based on this new strategic framework:

- **Vision 1**: a world where demographic changes and population issues are taken into account in planning for sustainable development.
- **Vision 2**: a world where particularly women and girls have equal rights and opportunities and can enjoy a safe, healthy and dignified life throughout their lives. Within the SDGs framework, this vision does not only include women and girls, but everyone.
- **Vision 3**: a world where all women and girls have access to SRHR.

AFPPD aims to realize its visions through parliamentary work by:

- Formulating and amending legislation and policies.
- Holding governments accountable for their commitments: Sri Lanka is one of the 193 countries that are committed to achieving the SDGs. Parliamentarians therefore play a crucial role to hold Sri Lanka’s government accountable for its commitment.
- Advocating for, and allocating budgets for their implementation.

Dr. Marumoto continued her presentation by introducing AFPPD’s organizational structure, beginning with the 29 National Committees (including SLPPD) which cover five sub-regions in Asia-Pacific. The General Assembly takes place every two years, and this year it will be held in October when SLPPD will be officially welcomed by other AFPPD members. Between the General Assemblies, Executive Committee meetings are organized. The Executive Committee is currently chaired by Hon. Keizo Takemi, a Member of the House of Councillors in Japan, and comprises 11 members in total: 5 Vice-Chairs, 1 Secretary-General, 1 Treasurer and 3 Executive Members. Three Standing Committees were established during the last General Assembly, focusing on Gender Equality and Women’s Empowerment, Investing in Youth, and Active Ageing. These three Standing Committees are mandated to provide strategic advice to AFPPD’s Executive Committee, and the overall functioning is supported by the Secretariat in Bangkok.

Dr. Marumoto then presented AFPPD’s two strategic guidelines:

1) **AFPPD Standing Committees’ Strategic Priorities Framework**: AFPPD is strategically supported by three Standing Committees which focus on Gender Equality and Women’s Empowerment, Investing in Youth, and Active Ageing. In the past, AFPPD Standing Committees operated in an isolated manner. To rectify this, cross-cutting themes were set so that all three Standing Committees will take up issues from the same angles: safety and security, health, and participation. Other overarching issues such as climate change, universal health coverage (UHC) and migration are also covered under this Strategic Framework.

2) The second framework adopts another perspective on AFPPD’s strategies. AFPPD has to deliver 4 outcomes, which contribute to the SDGs:

- Outcome 1: Capacity building: all members try to align policies and budget allocation.
- Outcome 2: Effective partnerships: in reaching out other parliamentarian networks such as those affiliated with the World Bank or ASEAN as well as strengthening strategic partnerships with CSOs (e.g., IPPF, HelpAge.).
- Outcome 3: Political influence: For example, the G7 Global Conference of Parliamentarians on Population and Development (GCPPD) held last year in April gathered Parliamentarians to ensure that their collective voices will be heard by world leaders. Last year, the recommendation issued after the G7 GCPPD was extensively included in the G7 Summit Leaders’ Declaration and other outcome documents.
• Outcome 4: Management output: AFPPD is committed to be transparent and accountable, and undertake effective communication.

Dr. Marumoto mentioned that this national inception workshop is the very first activity of AFPPD in 2017. AFPPD also undertakes regional and global activities. A Regional Parliamentarians’ Conference on Combatting Human Trafficking will be held in Bangkok in March 2017. In August 2017, AFPPD will hold an APEC side event open to parliamentarians from APEC member economies and AFPPD members.

Dr. Marumoto concluded by listing some of the objectives of this inception workshop. Firstly, it aims to provide a platform for SLPPD's Parliamentarians to work toward the common population and development agenda and to help them understand their role as AFPPD’s members. It is also an opportunity to examine and prioritize issues related to the ICPD PoA and the SDGs. Most importantly, it will help strengthen parliamentarians' advocacy skills.
SESSION 1 AND 2: Role of the National Committee-SLPPD in Supporting Parliamentarians to Prioritize Agenda into Action

Chair: Hon. Mr. Lakshman Senewiratne, Secretary General of SLPPD and State Minister of Science Technology and Research

Roles and Responsibilities of National Committees, and Priorities and Developments from the ICPD, the MDGs and the SDGs

Dr. Mika Marumoto, Executive Director of AFPPD, presented on the role and responsibilities of AFPPD National Committees and highlighted that parliamentarians are catalysts of change in the SDGs era. (Photo: AFPPD)

Presenter: Dr. Mika Marumoto, Executive Director of AFPPD

Dr. Marumoto started by presenting relevant articles of AFPPD’s Constitution. Article 6.4 explains the role of National Committees:

a) To act in accordance with the AFPPD’s mission and objective;

b) To demonstrate an ability to organize and maintain basic activities to achieve the AFPPD’s mission;

c) To facilitate the election and nomination process for sending representatives to the General Assembly and other AFPPD meetings;

d) To participate in and contribute to the strategic planning and implementation of AFPPD’s sub-regional, regional and global activities; and

e) To provide annually a programme of activities for the coming year and an annual report of activities undertaken in the previous year. A two-year report will also be presented to the General Assembly.

Dr. Marumoto continued by presenting AFPPD’s accountability framework: the National Committee will send a representative to the General Assembly and also representatives to the three Standing Committees – representing SLPPD, Hon. Minister Dissanayake is a member of the Standing Committee on Active Ageing. The Secretariat will support the Standing Committees, the Executive
Committee and the National Committees. She expressed her wishes to see SLPPD’s representatives at AFPPD’s upcoming General Assembly.

Dr. Marumoto then explained why the role of parliamentarians is paramount in the SDGs era. She explained the SDGs process, which came as an improvement of the MDGs which adopted a more top-down approach in development. The SDGs are more participatory and more focused on human rights; hence their principle philosophy: “leaving no one behind.” While the MDGs were applied to developing countries only, the SDGs apply to all countries and give clear means of implementation. They are very expansive with 17 goals and 169 targets. Without careful planning and commitments by all stakeholders involved, it is impossible to achieve the SDGs. The SDGs require each country to disaggregate their statistics by women and men, rural and urban, and other categories to monitor progress. This data can be used to ensure that no population group will be left behind including the most vulnerable. This workshop will help SLPPD’s Parliamentarians to understand their role in the achievements of the SDGs.

Dr. Marumoto then quoted Paragraph 45 of the 2030 Agenda for Sustainable Development Declaration, which acknowledges the essential role of national parliaments through their enactment of legislation and adoption of budgets and their role in ensuring accountability for the effective implementation of SDGs.

She stressed three points relating to SDGs implementation’s strategy:
- It requires stronger commitment from Parliamentarians and Ministers.
- It adopts a top-down approach.
- Parliamentarians are catalysts of change through AFPPD’s activities at the national, regional and global levels.

She encouraged SLPPD's members to work with their fellow Parliamentarians and convey this message, stating that this result would already be a great achievement for AFPPD.

Dr. Marumoto then went through some of the SDGs in more details:
- **Goal 5 – Achieve gender equality and empower all women and girls**: this gender-focused goal was not included in the MDGs. She highlighted the different targets of the goal, including 5.4 about recognizing unpaid care and domestic work, and the three means of implementation, especially undertaking reforms and strengthening policies and laws that are clearly addressed to Parliamentarians.
- **Goal 3 – Ensure healthy lives and promote well-being for all at all ages**: the first three targets were included in the MDGs, but not target 3.7 (ensuring universal access to SRH services) and 3.8 (achieving UHC).

Dr. Marumoto proceeded by explaining why political will is imperative in achieving the SDGs by showing a chart showing the specific targets and indicators of Goal 3 through a life-cycle approach. Unlike the goals and targets in the MDGs, the SDGs cover all stages of one’s life. One Ministry or one Parliamentarian only cannot realize this mission in achieving the SDGs.

She then gave a few examples of means of implementation of Goal 3 to underline Parliamentarians’ role. For the implementation of Goal 3, they have a responsibility to implement target 3.d: “Strengthen the capacity of all countries for early warning, risk reduction, and management of national and global health risks.” These global risks are not only national concerns, it is a regional and global concern. Parliamentarians have to work together regionally and globally.
To conclude, Dr. Marumoto explained briefly the importance of AFPPD’s National Committees, which are expected to participate in global, regional and national events organized by AFPPD to become catalysts of change. She mentioned **three past events as an example:**

- The G7 Global Conference of Parliamentarians on Population and Development held in Tokyo in April 2016 led to the adoption of global parliamentarians’ *Declaration and Recommendations* delivered to the Japanese Foreign Minister.
- Minister Dissanayake participated in the Standing Committee Meeting on Active Ageing held in Hanoi in September 2016, where AFPPD parliamentarians’ *regional commitment on active ageing* was deliberated.
- As an example of national level activity, a workshop was also organized in September 2016 in Kyrgyzstan on legislating for the achievement of the development agenda. At the end of this workshop, the National Committee’s *National Action Plan for Advocacy* was adopted.

**Why Parliamentarians Need to Advocate on Population and Development Issues: Their Role in Accelerating the Achievement of the SDGs**

*Presenter: Mr. Jayan Abeywickrama, UNFPA National Programme Analyst EmON*

Mr. Abeywickrama started by reading some quotes on sustainable development and and parliamentarians’ role:

- UN Former Secretary General Ban-Ki Moon: “*Parliamentarians can play a central role in rethinking the way policies are produced and carried out. (...) Through official development assistance and domestic resources, you can ensure that sustainable development efforts receive the financing they need (...).”*
- Dr. Babatunde Osotimehin, Executive Director of UNFPA: “*Parliamentarians are, of course, our essential partners. Without your leadership, passion and commitment we would not be able to move forward (...).”* Sri Lanka needs SLPPD to move forward.
The Sustainable Development Goals for 2030, set by the UN, will guide Sri Lanka. **We take them seriously and we are committed to achieving them.** Sri Lanka's policy framework is in the process of being revitalized to reflect the inspiration gained from the sustainable development targets (...)."

Hon. Prime Minister: “**Sri Lanka has embraced the 17 Sustainable Development Goals, as central to its national development strategy (...)**” of the next five years.

Mr. Abeywickrama continued by stressing the **importance of the ICPD held in Cairo in 1994** in the context of population and development issues. Sri Lanka participated in this conference, along with 178 other nations. Until 1994 the development scene was detached from human rights, and was seen more as an investment process. During this conference, the governments agreed that development is a right of people. The legislation and the policies must recognize this right. All parliamentary processes must ensure that the human rights standards of the Universal Declaration of Human Rights (UDHR) are better taken into consideration.

The **ICPD PoA has 15 key areas:**

- Interrelationships between population, sustained economic growth and sustainable development: the needs of people need to be met, along with ensuring quality of life.
- Gender equality, equity and empowerment of women: this is an issue in the region and around the world. The development process must take into consideration GBV and gender equality. The Parliament has to ensure that all policies recognize the need to establish gender equality.
- The family, its roles, rights, composition and structure: social-economic support for families from the State must be ensured by all policies.
- Population growth and structure: population is increasing; Sri Lankan’s population is now of 20.4 million according to a 2011 census. The population structure is changing as well; now the working population is the largest group. By 2041, 25 percent of the population is expected to be elderly. It is important to take advantage of the current period with right policies in education to develop human resource. There should also be political decisions on the population growth.
- Reproductive rights and reproductive health: women must be free to decide on children spacing and numbers and choose their method of contraception.
- Health, morbidity and mortality: ensure UHC so that no one is left behind.
- Population distribution, urbanization and internal migration: more and more people are concentrated in specific areas. Colombo is now congested. New policies must ensure that population is distributed.
- International migration: “brain-drain” is a phenomenon that deserves attention. Although Sri Lanka has free education, very few percentage of students pursue their education in universities and vocational training and there are some left behind who do have skills. Education must be more inclusive and answer the needs of young people. Opportunities of studying abroad and organizing student exchanges must also be increased.
- Technology, research and development: the appropriate use of technology is not to be neglected. To undertake demographic research in Sri Lanka, tablets have been used, and the results have been obtained in two or three months. Manually, it would have taken three years. It is difficult to develop appropriate policies with delayed results. Whereas with appropriate use of technology, immediate actions can be taken. Parliamentarians must ensure that technology are used in an appropriate way so that the country can move forward faster.
- National action: there must be a clear vision of what kind of policies need to be implemented, as well as clear priorities. Not everything can be achieved.
• International cooperation: this agenda cannot be realized by working alone. Donor countries have to make sure that they allocate some budget to assist the development of developing countries.

• Partnership with the non-governmental sector: for example, FPASL has been the driving force of the national family planning in Sri Lanka. Also, private sector has money that can be invested in population development. It is important that legislations are accommodating these factors.

• Follow-up to the conference: after the 1994 ICPD, Sri Lanka has adopted a population and development policy in 1998 which immensely helped the health sector, especially in bringing down maternal mortality. That is a great example for all the countries on how Sri Lanka followed-up ICPD recommendations.

Parliamentarians are law makers. As legislators, parliamentarians must use this ability to ensure that they take action in all the areas mentioned in the most suitable way for Sri Lanka. All the country must be involved. Just a few people cannot decide on these issues. Parliamentarians can inform everyone, and also raise awareness within the government by establishing their priorities.

Mr. Abeywickrama emphasized the importance of parliamentary oversight. Parliamentarians can hold the government accountable and question an absence of progress, especially while allocating budget.

He also introduced an element of debate on emerging issues, such as population ageing, and asked whether sufficient policies were in place to ensure a smooth transition. The Ministry will launch the Elderly policy in the following days, and the National Secretariat for Elderly also works on this issue. However, that is not enough. Other Ministries have to be informed and involved. Preparedness is essential.

Mr. Abeywickrama stressed once again the importance of budget as Parliamentarians can decide on its allocation. Therefore, civil society must not be neglected, as well as the private sector, which can be a source of funding. It is important to consult them and to identify their needs. Integrating the SDGs agenda into established national policies requires cooperation between the legislative and the executive powers.

To conclude, Mr. Abeywickrama presented some policy gaps and suggestions:
• Population and Reproductive Health Policy 1998: as the population structure is changing, it might be the right time to think of a new policy.
• The National Family Planning Programme has been in place for the last 6 years. However, there has been no costed action plan to evaluate its costs and the exact financial needs of the programme.
• National GBV referral system: there is a problem when it comes to collecting data on this issue; as a consequence, it is difficult to take measure of the problem.
• As the Policy on Senior Citizens has been developed in 2006, it might also be an appropriate time to revise it.
• The Youth Health Policy has been implemented in 2015 but has yet to be launched. It is also important to raise awareness on this policy so people know its existence and content.
Discussions

The Chair thanked the presenters and formulated a request to Honorable Minister Dissanayake to organize a workshop on the issues presented within the Parliament.

First question: Mr. Bandula Harischandra, Additional Secretary, Ministry of Social Empowerment and Welfare: How can Parliamentarians have enough resources to establish strategies which are now lacking?

Second question: Dr. R. M. K. Rathnayake, Consultant, Ministry of Social Empowerment and Welfare: Do you have any suggestion of an implementation mechanism?

The Chair emphasized the usefulness of organizing a second workshop of that kind within the Parliament that would help identify strategies. For example, half a day could be allocated to discuss these issues. Therefore, all Parliamentarians, as a group, would request the government and the Ministry of Finance to allocate budgets to realize the SDGs upon which everyone has agreed.

Dr. R. M. K. Rathnayake answered that many workshops are organized, but follow-up actions are lacking. Much can be done, and it is just a matter of spreading the message.

Third question: Hon. Mr. Hafeel Salman, MP, Deputy Minister of Social Empowerment and Welfare: In Sri Lanka, there are 9 provincial councils and hundreds of local authorities. In order to reach the grassroots, there should be a way to incorporate these entities. The provincial councils also have certain powers and some of the issues (gender, youth) come under their mandate. Secondly, it was said in the presentation that people should benefit from a right to development and social and economic rights. Unfortunately, in Sri Lanka today, people only enjoy civil and political rights as fundamental rights. Now that the Parliament is in the course of discussing a new Constitution, there should be an attempt to incorporate these new rights.

The Chair agreed that it should be of common agreement to consult provincial councils and local authorities, but this process has to be launched at the central level first.

Mr. Abeywickrama added that it is not very difficult to develop strategies, given Sri Lanka’s human resources to accomplish this. However, there is a lack of implementation and a need of monitoring the progress made. It is very important that these strategies are monitored at the highest level. This was the key in making progress in the health sector, which benefited from a regular monitoring. It is very difficult to lose control of strategies with a good monitoring system. Strategies are very important indeed, and it would be useful to do a sort of mapping of existing strategies to identify where they are lacking, but also where they are in place and they would need better investment and monitoring.

Fourth question: Hon. Mr. Ashok Abeysinghe: Why do Asian countries tend to have more elderly populations?

Mr. Abeywickrama answered that Sri Lanka is in transition and currently experiencing a demographic bonus. This is the time to plan ahead for future financing of pension schemes. In order to ensure that when 25 percent of the population will be elderly in 2020-2021, the society will be
able to take care of them. As the dependency ratio will be very high, there will be a need of proper pension schemes.

The Chair and the audience then exchanged few remarks regarding the importance of ensuring healthy ageing of the population, as the health status of people tends to regress faster than before, with cholesterol and consumption of unhealthy food. As a result, there is a greater necessity to rely on the healthcare system and the government. With a better quality of life, the number of future patients can be reduced.

Dr. Marumoto added a few comments to conclude the session:

- She stressed that Parliamentarians have the great potential to initiate a budget process, and coordinate and ensure proper budget allocation by the Finance Ministry.
- Regarding the ageing population, Asia has the two most populous countries which are India and China. China has recently reversed the one child policy. They are learning the lessons of this ageing phenomenon due to the declined fertility rate. It will be the home of a largest number of ageing population.
- Economic development is a success in Asia, often accompanied with a decline of fertility rate. Japan’s fertility rate, for example, is very low about 1.4, and the government is now trying to convince women to have more children. As one of the most aged societies, the ageing phenomenon, a combination of lowering fertility rate and increased longevity, is a trend that is very hard to stop. Some European countries have been successful in reversing the fertility rate with effective gender-equality policies including childcare system, friendly workplace for women with children. All these policies have to be in place and implemented in a comprehensive manner. Parliamentarians have the power and the potential to do so.
- On ageing, it is important to find ways to increase healthy life expectancy so that the government’s fiscal burden to cover medical and long-term care costs can be reduced. In Japan, there is a 7 to 8-year gap between healthy life expectancy and life expectancy. That gap is expanding because of non-communicable diseases such as diabetes, heart diseases, and obesity. Policymakers in each country need to find ways to reduce non-communicable diseases by encouraging people to lead a healthy lifestyle starting at a young age. AFPPD strategic framework covers this issue, and our Standing Committees work together toward achieving this goal (Standing Committee on Investing in Youth and the Standing Committee on Active Ageing).

Dr. Marumoto then presented the Briefing Cards for Parliamentarians (AFPPD’s publication) that combines good practices from different countries with relevant statistics and data, encouraging evidence-based policymaking. This can be also used to convince the Ministry of Finance and other stakeholders to take actions. She also shared AFPPD’s work in Central Asia, where AFPPD organized multi-stakeholders’ meetings for parliamentarians and government officials. One such instance revealed that the role of National Statistics Bureau was neglected and did not receive appropriate attention. Budgets was cut for the agency although their role will be critical in the SDGs era to monitor and measure the progress. The lack of communication among the governmental agency such as national statistics bureaus and parliamentarians prevents them from collecting necessary data to advance the implementation of the SDGs. She encouraged the organization of such a meeting for parliamentarians and the officials of the statistics bureau as a next step.
SESSION 3: Active Ageing in Sri Lanka

Chair: Hon. Mr. E. Saravanapavan, Deputy Chairman, SLPPD

Overview of the National Policy of Senior Citizens, Sri Lanka

Mr. Bandula Harischandra, Additional Secretary at the Sri Lankan Ministry of Social Empowerment and Welfare, explained the situation of ageing in the context of Sri Lanka. (Photo: AFPPD)

Presenter: Mr. Bandula Harischandra, Additional Secretary, Ministry of Social Empowerment and Welfare (MOSEW)

Mr. Harischandra presented the 9 key points that his presentation will cover, including: ageing population due to a demographic transition and challenges faced by Sri Lanka; economic implications of the demographic transition; key challenges in preparing for the shift and mitigating social costs; the role of MOSEW and its other public entities in addressing the issue, the protection of the rights of elders Act No.09 of 2000, the Policy on Elders, the Elder’s Social Security Fund, and the way forward.

He started by explaining the issue of ageing in Sri Lanka’s context. According to a 2013 report by Professor Indralal De Silva published by the World Bank, the current total population of Sri Lanka is 21 million. Sri Lanka is experiencing a demographic transition, with a steadily ageing population, which will peak by 2041. Now, 12.5 percent of the population is considered as elderly. By 2021 and 2041, it is projected to be 16.7 and 25 percent, respectively. Sri Lankan population is the oldest in South Asia; as a result, there are many challenges to overcome.

Mr. Harischandra showed two diagrams, one illustrating the fast growth of Sri Lanka’s elderly population from 1946 to 2041, and one pyramid showing the distribution of Sri Lanka’s population by age and sex in 2014. He highlighted that the life expectancy of women is higher than men’s.

According to the data from MOSEW and other sectors, there are 2.5 million elders in Sri Lanka, among which 1.3 million do not need support, 350,000 are Employees’ Provident Fund (EPF) recipients, 400,000 are retired public servants, 386,080 are receiving a monthly allowance, and 114,000 are in...
waiting list to get a monthly allowance. Further data was extracted as follows: by 2031, Sri Lankan population will be 21.9 million. Currently, 67% of Sri Lanka’s population is in the working-age group, larger than its dependent population. Sri Lankans would be the oldest population in South Asia. The highest percentage of elderly persons currently live in Kegalle District. Another diagram shows that around 2027, the population aged 60 and above which has been increasing since 1970s, will surpass the population aged 14 and under which has been decreasing since 1960s.

Mr. Harischandra then referred to the global context, as the world faces the similar situation as Sri Lanka. By 2027, there will be 1 billion older people worldwide and by 2050, 1 in 5 persons in developing countries will be aged over 60. He continued his presentation by giving some important data regarding remarkable achievements in social development in Sri Lanka, such as life expectancy and literacy rate.

Mr. Harischandra mentioned some economic implications of the demographic transition in terms of employment, productivity and performance of cash transfer programs to assist poor and vulnerable groups. He also went through policy challenges faced by Sri Lanka: large informal sector, high unemployment and low level of female employment. He emphasized that policies need to target at low-income families supporting elderly, women-headed families, and families with disabled persons (1.8 millions of families). Resource allocation for Sri Lanka’s safety net programmes are very low, equivalent to 2.2 and 0.3 percent in 2004 and 2009, respectively.

In response to these challenges, he presented ways to prepare for the population shift and to mitigate social costs of the demographic transition. The World Bank made some policy recommendations, such as helping strengthening the safety net for vulnerable population groups. Mr. Harischandra mentioned other necessary measures, including the private sector’s skill development programmes, land ownership, and some measures needed in the labor market where a balance needs to be struck between protecting the rights of workers and the potential overregulation of jobs.

The government has already undertaken some actions to redress the issue. The objectives of the Economic Policy Framework 2017-2020 include:

1. Generating one million job opportunities
2. Enhancing opportunities to increase income levels
3. Developing rural economies and create more opportunities through the SME sector
4. Ensuring land ownership
5. Creating a strong middle class

The Government has already taken action through the MOSEW and policies. As a result:

- 15 percent of elderly receive pension benefits
- 26 percent receive EPF
- 41 receive some kinds of benefits
- 18 percent receive no retirement benefits and tend to rely on welfare of their children, relatives and friends.

The MOSEW plays a role in easing the problems and empowering the elderly at the Ministry and district levels by:

- Strengthening retirement benefits, welfare benefits, and safety net benefits and insurance benefits.
- Implementing livelihood development programmes
- Providing micro credits
The Social Security Board of Sri Lanka is implementing a contributory pension scheme, with a view to providing each elder over 60 years old with a lifetime pension, social security and many other benefits. The present membership totals 533,514 people, with a plan to enroll 60,000 elders in 2017.

Mr. Harischandra presented the Ministry’s main programmes being implemented by the Samurdhi Development Department, including the Livelihood Development Programme (an investment of 1,500 million SLR); provision of micro-credit facilities to poor and low income families at a concessionary interest (8,000 to 10,000 million SLR); Social Security Benefits to the poor (900 million SLR); a subsistence grant to the poor (44 billion SLR); and allocation of 4,000 houses to the poor (800 million SLR).

Mr. Harischandra then introduced the Protection of the Rights of Elders Act No.9/2000. Its primary objectives are the establishment of the National Council of Elders (NCE), thereby promoting and protecting the elderly's welfare and rights. Section 12 of the Act states that the NCE has been established for the promotion and protection of the welfare and the rights of elders and to assist elders to live with self-respect, independence and dignity. Section 3 deals with the constitution of the NCE: the President appoints 5 members among professionals, members of corporate bodies and public officers, additional 5 members representing voluntary organizations, and 3 members representing elders. Section 10 stipulates the establishment of a National Secretariat of Elders (NSE) to assist the NCE. The NSE is headed by a director, supported by assistant directors, accountants, district directors (25) and divisional secretaries (331).

Section 13 lists other functions of the NCE:
   a. To advise the government on promotion of welfare and rights of elders
   b. To recommend programmes to the government and other corporate bodies to strengthen traditional values
   c. To take all measures necessary to promote and protect the welfare and rights of elders
   d. To organize lectures, seminars, workshops and other programs to make the young generation understand its duties to elders
   e. To ensure that the government adopt and comply with relevant international declarations and commitments related to elders
   f. To maintain accurate and up-to-date statistics related to elders
   g. To promote studies and research to identify principal causes of problems of elders and their needs and aspirations, and to promote effective measures for alleviating and eliminating such causes and for meeting their needs and aspirations

Section 13. j also states the NCE’s additional duties in terms of monitoring and coordinating programs and schemes.

Mr. Harischandra mentioned other sections of the Protection of Elders Acts: Section 14 on the NCE’s mandate including some provisions for the protection of rights of elders; Section 19 dealing with the NSE fund; Sections 24 and 25 delineating the Board’s decisions in response to claims brought by elders who are unable to financially maintain himself or herself to obtain an order obligating one or more of his/her children make monthly allowance or lump-sum payments for their parents’ living; Section 35 about the NSE’s mandate to make rules; Section 36 about the NSE’s roles and obligations to inspect and search premises of any approved person or any voluntary organization engaged in providing services or assistance to elders.
Mr. Harischandra then presented the National Policy on Elders that focuses on health, social welfare and economic support. It was revised in 2006 to be adapted to the current context. It was based on the recommendations of the 2nd World Assembly on Ageing held in Madrid.

The NSE provides many services to elders, through the establishment of village, district, divisional and provincial level committees and the provision of financial assistance. Such services encompass offering pre-retirement counselling programmes and providing monthly allowance to elders aged over 70 years. Monthly allowance expenses to elders have reached 772.16 million SLR per month. The Elders’ Social Security Fund (ESSF) made a proposal to the Cabinet in 2016 to deduct 100 SLR from the monthly allowance of 2000 SLR.

Mr. Harischandra concluded by mentioning the NCE’s future plans:

- **Ensuring welfare for elders**: provision of aids for elderly day care centers; provision of cash for urgent operations and medical treatments for diseases including cancer and kidney diseases; introduction of health insurance schemes, and assistance for self-employment opportunities.
- **Empowering elders**: programmes for consulting elders, providing grants and loans; conducting research and formulating elders-friendly policies.
- **Development**: building and operating elderly homes; facilitating sales of products manufactured by elders.

### Demographic and Population Processes and Their Linkages to Social Policies

**Presenter: Professor (Mr.) Lakshman Dissanayake, Vice Chancellor, University of Colombo**

Professor Dissanayake greeted the participants and made his presentation about the features, challenges and opportunities of population ageing in Sri Lanka.

Features: He started by presenting the projected total population and percentage of those aged 60 and over from 2012 to 2037, based on his own research using the 2012 census. In 2012, the
percentage of the elderly of 60 years and over reached 12.4, which is already a significant proportion. According to his projection, it will reach 22.1 percent in 2037. Another diagram illustrated Sri Lanka’s more rapid pace of population ageing than other countries’ in the region, due to its declining fertility rate that started in the 1960s leading the population pyramid moving upward. At the same time, Sri Lanka’s average life expectancy improved because of a decline in mortality, thanks to health policies covering Sri Lankan population throughout their lives. As a result, more and more Sri Lankan people accumulate at late ages.

There is a rapid population ageing process. In 2032, there will be an equilibrium between the population aged less than 15 years and the 60+ years. The population has been ageing since the 1970s in an exponential manner. There will be a change in the older-age dependency burden, with fewer younger people to support older people: in 2014, there were 8 people aged between 15-64 for one elder; in 2030, the ratio is expected to be 5 for 1, and in 2050, 3 for 1. Also, the potential support ratio is going down based on the 2001 to 2051 projections. After that date, there will be more people aged 60+. Policies have to be directed toward accommodating this trend. Solutions to the rapidly ageing population also need to be adopted from an optimistic point of view.

Professor Dissanayake then presented a diagram of average annual growth rates of different aged population groups (those aged 65+, 70+ and 80+). He urged parliamentarians to adopt evidence-based policymaking based on data and statistics. For instance, the percentage of those aged 65+ reached a very high level in 2011 thanks to the improvement of the health status in Sri Lanka. The current situation is still manageable because of a large portion of the elderly population being the “young-old population” group aged over 60 but below 80 who remain active and do not yet need much assistance. However, the “old-old” population group aged 80+ is expected to increase in the near future. The “old-old” age category will not be very active and needs much assistance from the community and the government. That is why appropriate social and economic policies need to be adopted to reach out and accommodate this population group.

Professor Dissanayake showed a diagram on changes in life expectancy by sex, from 1921 to 2026. The life expectancy is increasing along with the gender disparities: there are about 5 to 7 years difference between women’s life expectancy and men’s life expectancy. The causes of these disparities should be understood and appropriate policies need to be taken. Professor Dissanayake conducted a research on avoiding mortality and men’s health in Sri Lanka. He concluded that adding 3 more years to men’s life expectancy is possible by mitigating six isolated risk factors including eating habits and smoking.

He further commented that the general idea in Asian culture that men are stronger and therefore healthier should be corrected. Until men are clinically ill, they tend not to consult a doctor in Sri Lanka. Women are in a better position thanks to Sri Lanka’s very strong maternal and childcare health (MCH) programme, which has contributed to increased women’s awareness and health-conscious attitude even after their reproductive age period. A similar health check-up system for men should be introduced to raise awareness among men about the importance of taking care of their health. This disparity has another consequence: there will be more widowed women, perhaps unemployed and without savings, who may be vulnerable for falling close to or under the poverty line. Their needs have to be accommodated.

Also, the disease pattern has also shifted after 1970s from communicable diseases (CDs) to non-communicable diseases (NCDs). These NCDs will increase while people accumulate in the old-age structure.
In this context, Professor Dissanayake explained two types of health policies: **morbidity expansion policies** and **morbidity compression policies**. With the former policies, people who become sick at a younger age around age 40 may be able to extend their life expectancies by a few years because of good healthcare services and facilities. **Morbidity compression policies** aim at avoiding sickness at a young age and extending healthy years, by implementing strong health policies starting at birth, covering all stages of life and all dimensions (e.g., urban, rural, district). Pointing out an increased percentage of healthy life years lost due to NCDs in 2012 from 2000 in Sri Lanka, and comparing Sri Lanka’s life expectancies after 60 to those of Japan, Professor Dissanayake emphasized the importance of introducing **morbidity compression policies** in Sri Lanka. By so doing, more people will stay healthy after they reach 40 years, ensuring a productive work force. Health policies should be directed toward that projection while maintaining a balance between two types of policies. **Morbidity compressions policies** are already in place in Sri Lanka, but they must be further strengthened.

Professor Dissanayake then commented about **living arrangements and feminization of poverty among older women**. The size of the elderly population living alone is a policy concern. The proportion of people living alone is increasing because of the decline of fertility, with an average of two children per family; it is likely that parents will be left alone by the time they reach 60 years. Policy solutions have to be found to accommodate needs of the elderly, with the number, proportion and distribution of people living alone to be collected and analyzed. The people living alone will require more assistance in case of sickness and at an old age with increased social connectedness and moral support. Elderly women have a greater chance of exhausting their resources of income and will be more impoverished in their advanced ages. The incidence of poverty among the very old seems to be large, and it affects more old women than men.

Professor Dissanayake explained more details about the consequences of **declining family support**. Family is the key institution of social organization in any society, defined by exchanges of mutual support between its members. These are “inter-generational transfers”: parents to children and children to parents. At the elderly age, children transfer their resources to parents. Parents transfer their wealth to their children in the young age, even their grandchildren. The roles of traditional extended families have been changed with the development of nuclear families.

He then presented the **opportunities resulting from these dynamics**. Transformation in population age structure also creates a second demographic dividend that depends on how the accumulation of wealth is related to population ageing. This demographic dividend or bonus is created historically by the changes that take place in the age structure, mainly because of the decline of fertility. When the fertility declines, there will be more and more people in the productive ages (50 to 64). The first demographic dividend is currently happening, and is the ideal moment to adopt many policies to take advantage of this first bonus, while there is still a very healthy and productive young group. This first demographic dividend will end by 2037 with two decades being left. Sri Lanka is going to face the ageing phenomenon as other countries in this region and the world. The demographic dividend is policy-dependent, and there should be productive employment to take advantage of this young and productive population.

After 2037, Sri Lanka will experience the **second demographic dividend**. The ageing population can be viewed positively. In order to do so, planning needs to start now; they should be able to accumulate more and more wealth by the time they reach 60. This requires conducive policies ensuring decent employment, improved ability to secure their savings, training opportunities to improve their skills, thus creating a knowledge-based economy. Reducing unemployment and improving female participation in employment should be part of this set of policies. In Sri Lanka, there remains room
for policy improvements. As people will have accumulated wealth on their own, this then will result in decreased burdens imposed on the State.

To conclude his presentation, Professor Dissanayake made several recommendations:

- **Recommendation 1**: Devise an appropriate policy strategy to improve welfare of the elderly who live alone without their spouse or children. During the recent past, the proportion of never married or unmarried people has increased. It is a small percentage but should not be neglected.
- **Recommendation 2**: Focus its policy attention more on the elderly who do not have any children. In 40 years of teaching experience, he noticed that young people do not have the same attitude toward marriage and do not want as many children as before, or perhaps no children at all.
- **Recommendation 3**: Carry out a study on national transfer accounts to understand national transfers to different generations and their income, expenditure, savings and consumption patterns in order to measure, analyze and interpret macro-economic aspects of age and population ageing. There should be a real understanding of inter-generational transfers. With these data, policies will be better implemented and more adequate.
- **Recommendation 4**: Create a programme to improve the financial position of the elderly by devising a special programme of income generating activities for the elderly, as well as providing financial support from the government for those who are financially burdened. This could be through delaying the retirement age.
- **Recommendation 5**: Devise a mechanism of improving healthcare facilities of the elderly including their mental health issues at all levels. This will become more important with the increasing number of people in the “old-old” population group.
- **Recommendation 6**: Ensure a supportive environment in the family and community for the elderly with appropriate legal rights to guarantee their well-being. The government should also pay attention to the feminization of elderly: more and more elder women need legal protection.
- **Recommendation 7**: Take the initiative with the support of the private sector to establish an adequate number of aged homes with satisfactory facilities or encourage private investment like in developed countries. There should be some health facilities and partnerships with the private sector.

**Discussions**

Dr. Marumoto made a comment on recommendation (3) regarding the national transfer account. With the collaboration of HelpAge International and the University of Hawaii East-West Center, AFPPD is currently planning to hold a regional seminar focusing on ageing and national transfer accounts this year in Chiang Mai. Dr. Marumoto encouraged SLPPD’s participation in this seminar to follow up on this inception national workshop.

Professor Dissanayake explained briefly the functioning of national transfer accounts; its aim is to understand inter-generational transfers at macro-levels to come up with better policies and to use the available resources at their maximum potential.

Hon. Mr. Lakshman Senewiratne made a few comments on the role of the government and parliamentarians in establishing pension schemes for this growing elderly population, also through partnership with the private sector, and asked about the nature of other benefits attributed to elderly.
Mr. Bandula Harischandra answered that within NCE, there are many funds made available to the elderly and the amount will be increased. Sri Lanka has many intangible programs satisfying the various needs of the elderly as well, which are offered by other organizations at district level. It is not fair to evaluate their performances based only on the amount of money allocated to these programmes.

Hon. Mr. S. B. Dissanayake asked a question regarding what needs to be improved in terms of the existing pension schemes and coverage.

Professor Dissanayake answered that there are different types of pension schemes, but some portions of the population do not benefit from any, especially those working in the informal sector. There is a need to create income-generating activities so elder people can support themselves.

Hon. Mr. S. B. Dissanayake explained further the pension strategy of the MOSEW, the money allocated and the number of people who can benefit from it. The Ministry will conduct campaign to encourage donations and convince independent authorities to distribute funds to the elderly.
SESSION 4: Gender Equality and Women’s Empowerment

Chair: Hon. Mr. Seyed Ali Zahir Moulana, MP

Overview of the Legal and Policy Framework on Gender Equality and Women’s Empowerment

Presenter: Ms. Chandrani Seratna, Secretary, Ministry of Women and Child Affairs
Ms. Seratna began her presentation by defining **women empowerment**, which consists of creating conducive environment for women where they can make decisions on their own for their personal benefits as well as for the society. There are three levels where women’s participation should be ensured: the State, society and family levels. Referring to comparative figures related to women’s empowerment, she explained that at present 15 seats are reserved for women in the Parliament and 5 females take Ministerial positions in Sri Lanka. Compared to other countries in South Asia, Sri Lanka ranks well and has achieved significant progress in some MDGs, such as community involvement and sanitation. Other issues still need some additional work.

Ms. Seratna then listed the **rationale for and objectives of empowering women**, underlining women are seen valued and satisfied when a society has good governance, among others:

- To ensure equal rights for women to benefit from development.
- To prevent women from becoming victims of violence and harassment in powerless situations (e.g., UNFPA has published a survey on violence against women that occurred in public transportation).
- To overcome the prevailing economic, social and gender disparities.
- To make the maximum use of female labor force for the national development as many women are still working in the informal sector. Women’s employment opportunities need to be created.
- To ensure women’s participation in society and its decision-making process.

Ms. Seratna continued by listing some **international interventions** aimed at empowering women, such as the Convention of Elimination of Discrimination against Women (CEDAW), MDGs, and SDGs, especially SDG5 related to Gender Equality, the 16th day of activism on prevention of VAW, Beijing 20+ Platform, the Universal Human Rights Declarations, the UN Security Council Resolution No. 1325. She concluded by saying that much has been done in terms of making commitments.

She then went through some **national interventions** aimed at empowering women, such as:

- The **Prevention of Domestic Violence Act No.34/2005** and the Implementation of the Prevention of Domestic Violence Act – that was needed as the reporting system of domestic violence had to be improved, as victims of domestic violence did not benefit from any relief scheme and when/where they are sent back home.
- The **Convention on Prevention and Combating Trafficking in Women and Children for Prostitution Act No.30/2005** – The National Steering Committee for Prevention on Trafficking is headed by the Ministry of Justice; currently, the framework is under discussion to ensure that trafficking is tackled properly as a separate issue and sanctioned adequately.
- The **Penal Code Amendments Act No.22/1995** followed by two other amendments which have increased punishments and introduced a compensation for victims of violence.

To address these issues, a new **governance structure** was established, starting with the Women Bureau in 1978, followed by the formulation of a governmental policy on women in the 1993 Women’s Charter, the 1981 Principle Policy Statement by the Government regarding the rights of women, expressing the State’s commitment to CEDAW, and addressing the issues relevant to women in 1981. There has been some progress since then, and many policies and guidelines have addressed issues of violence against women. Ms. Seratna also mentioned:
• Implementation programmes based on the UNSCR Recommendations No. 325 on Women, Peace and Security. Many Ministries are working on the reconciliation process, but it needs an Action Plan that will be prepared in 2017.
• Establishment of the National Committee on Women (NCW) in 1993, which is responsible for addressing the issue of violence against women, formulating related policies and making policy recommendations. An emergency phone number has been set up, and many complaints have been received since then.
• Publication of the Gazette Notification of Establishment of Island-wide Police Child and Women Bureau Legal Units. There are 42 police stations and 32 units where victims can file complaints. Modules for training have been prepared by the Ministry of Women and Child Affairs.
• Establishment of the National Sexual and Gender-Based Violence (SGBV) Forum. The Action Plan includes 9 sectors and has been endorsed by the Cabinet, and implementation will start in 2017 with the support of all UN agencies.
• Approval of the Guidelines for Women Safe Homes by the Cabinet.
• Establishment of “Mithuru Piyasa” Centers in Government Base Hospitals for cases of violence and rape. These facilities have to be extended nation-wide.
• The National Human Resources and Employment Policy (NHREP) addresses gender issues.
• The UN Development Agencies Framework – Sri Lanka (UNDFA): it includes all development programmes and agenda to be implemented in the country by all UN agencies.
• Commemoration of the International Girl Child Day and Women's Day: activities are conducted in schools and outside the schools for the Girl Child Day, other activities are organized for the Women's Day.

Many actions plans have been prepared by other Ministries to which the Ministry of Women and Child Affairs has contributed:
• National Policies on Disaster Risk Reduction/National Disaster Management Action Plan: prevention and protection of women and children.
• Media Codes/Ethics.
• National Media Policy.
• Handbooks for Journalist.

The Ministry of Women and Child Affairs has been working on a Framework for other Ministries to work on women’s affairs:
• Policy on Establishment of Gender Mainstreaming Mechanism: it ensures to address the numerous aspects of gender equality including in the private sector and proper budgeting in all policies.
• Policies on Sexual Harassment against Women at Working Place, approved by the Cabinet in 2016 and aiming to establish committees dealing with work-place sexual harassment.
• Proposed Family Policy of Ministry of Social Services.

Other national interventions include:
• Establishment of the Task Force Recommendations on the Opposition Leaders Report on Prevention of VAW and Girl Child to make sure that recommendations have been implemented.
• Amendments to the Local Government Election Act to increase representation of women. 25 percent of seats are allocated to women in the local and provincial authorities.
National Policy on Socio Economic Empowerment approved by the Cabinet. 17 Ministries have given their inputs to the Action Plan, which will greatly benefit female-headed households.


Action Plan on Prevention of SGBV: UNDP supported this Action Plan. Many programs have been planned and are to be implemented in the 2012-2020 period, including for collecting more data.

National Human Rights Action Plan: separate chapter to protect and promote the rights of women.

Ms. Seratna presented briefly the women’s empowerment approach adopted by the Ministry, with its three components, and some of its programmes and policies.

To conclude, Ms. Seratna stated that if women and children have an environment in which they can live peacefully, that would be qualified as good governance. The Ministry of Women and Child Affairs alone will not be able to address all the issues. It needs other Ministries’ help to ensure further progress for women and children in Sri Lanka.

The Chair expressed his wish to work with the Ministry of Women and Child Affairs and to promote the participation of men and boys in gender equality and women empowerment, to work against violence against women.

Gender Equality and Women’s Empowerment

Ms. Kumudini Samuel, Director of Women and Media Collective, highlighted the challenges in women’s economic empowerment noting that not all women enjoy the social development of Sri Lanka. (Photo: AFPPD)

Presentation: Ms. Kumudini Samuel, Director, Women and Media Collective

Ms. Samuel greeted the participants and thanked AFPPD and SLPPD for organizing the workshop and soliciting her participation.
She started by recognizing Sri Lanka’s **good progress in terms of social indicators** including women’s participation in politics. Sri Lanka has made tremendous progress in social and economic spheres since its independence thanks to effective social policies. Sri Lanka has achieved outstanding progress in education and demonstrated commendable health indicators. Women are more visible than ever in the public domain, including in the state bureaucracy, diplomatic corps, private sector, medical, legal and teaching professions, arts and many other fields.

She continued by saying that the proportion of female workers in the semi-skilled and unskilled job categories has also increased. Women’s contribution to the economy through overseas remittance by earning foreign exchange as migrant domestic workers, work in the plantation sector and the garment sector, has been recognized by the government and the non-governmental sector.

**The UN World Conferences of the 1990s were impetus for pushing progressive legal reform to work on women’s rights.** During this period, the Ministry of Women’s Affairs enjoyed its high profile status and was able to deliver its best work with adequate budget allocation. Today, however, it is seen as a smaller ministry without sufficient national attention, responsibilities and resources, attention that many of high-profile ministries enjoy. Often, women get relegated with fewer resources and less recognition. A decision has to be made regarding the place of the Ministry on Women and Child’s Affairs, with the possibility that could be linked to the Ministry of Planning and Finance.

Despite Sri Lanka’s progress, particularly in the education and health sectors, Ms. Samuel underlined that there has been no achievement in other areas since 1931. **Not all women across the board enjoy favorable social development that Sri Lanka so often takes pride in.** Together with political disparities, women face economic disparities across different regions, particularly poorer rural areas and regions affected by the conflict where women are most marginalized. In her opinion, those regions suffer most gender inequality and lack of women’s empowerment, requiring special attention.

Ms. Samuel came back on the positive results of the advocacy conducted within the Parliament, under the leadership of the President and the Prime Minister, and the work of Ms. Chandrani Bandara, Dr. Sudharshani Fernandopulle, Ms. Rosy Senayake and others within the Parliamentary Women’s Caucus. This had led to an attempt to remedy women’s political under-representation with the introduction of the **25 percent of women quota in local governments.** She asked the audience the reason why this women’s quota was not introduced at the same time when the youth quota of 30 percent was discussed. Indeed, at that time, many parties were reluctant to introduce a mandatory quota for women. It is a practice of political parties to attribute nominations to sitting members (of Parliament or local councils). If 90 percent of sitting members are men, they have to stand down if women can be nominated. There is also a feeling that women cannot win elections but women have never got the opportunity to be nominated in substantial number. These are all barriers that prevent women’s nomination in the first instance. There are some concerns on how to appoint women by political parties, especially in small political parties. In this regard, the system of first-past-the-post should be contested. Women want to get the opportunity to contest in these political scenes. Some fear that women will just get appointed without complementary actions. With the Constitution’s reform process, many women from all the constituencies brought the problem of political representation of women, from local governments to Parliament.

The other issue brought forward by women from local communities during the constitutional reform process was **economic entitlement**, jobs, livelihoods, wages, which will support them and their families. The new development policies must implement ways to create formal sector employment
for both men and women, but particularly for the latter. One in four families in Sri Lanka are headed by women. Those women need a proper source of income in the formal employment sector where wages are secured. Skills have to be developed, especially for poor women who cannot access to secondary and higher education.

In her opinion, there is also a need to revise the concept of male-headed families. Now, women and men are sharing responsibilities within the household. The care of elderly parents must also be distributed; there is a need to learn how to share housework. The State has to develop support and infrastructures to help women optimize their potential to earn better incomes. The practice of “family background report” that only women are asked to do is also particularly discriminating as it confirms this idea that only women are in charge of taking care of the family.

Ms. Samuel mentioned that a number of discriminative laws still exist. With the constitutional reform, there is an opportunity to ensure that these laws will be repealed. Article 16 already prohibits discrimination. Still, women are subject to a range of laws, including personal laws that discriminate against them in the areas of marriage, divorce, inheritance, and access to land and productive resources. In addition, archaic laws such as Vagrants Ordinance and the Brothels Ordinance continue to be used discriminatingly against women. Same-sex relations are criminalized. It is about time for Sri Lanka to stand up and to protect everyone’s rights, everywhere. Sri Lanka has already made excellent progress in major indicators; it just needs to take a little further step beyond that.

The Constitutional reform process gives a good opportunity to work on these issues and on reconciliation. There is a need to make peace across communities’ reconciliation, making sure that the war caused by inequalities, political power and economic entitlements, should never happen again. Ms. Samuel shared her personal history concerning the conflict that took place in Sri Lanka. She expressed her hope and conviction that reconciliation can be possible. She further stated that the Taskforce on Reconciliation’s mandate to set up the Office of Missing Persons should receive more public acceptance that disappearances have in fact occurred. Mostly women are pressing this kind of requests.

Ms. Samuel concluded her presentation by affirming that the Constitution-making process will also serve as a great opportunity to include that plurality is accepted in Sri Lanka, and that women are accepted in Parliament. Sri Lanka can draft a Constitution that people can be proud of, and share with others. The civil society can work together with Parliamentarians to really ensure equality for everybody.

The Chair thanked Ms. Samuel for her presentation and concurred with her statement, that in a society that ensures gender equality in all spheres, economic, social and political, including is the work place, everyone benefits from this equality; evidence shows that gender equality expands the size of the economy.
SESSION 5: Sexual and Reproductive Health Rights (SRHR)

Chair: Hon. Dr. Sudarshini Fernandopulle, MP, State Minister of City Planning and Water Supply

Overview of the Legal and Policy Framework on SRHR

Presenter: Dr. (Mrs.) Janaki Widanapathirane, Consultant, Community Physician, Ministry of Health

Dr. Widanapathirane started by giving the definition of sexual and reproductive health, which is a state of complete physical, mental and social well-being in all matters relating to
the reproductive system. It implies that people are able to have a satisfying and safe sex life, the capability to reproduce, and the freedom to decide if, when, and how often to do so. It is important to provide SRH services to the community so people can make healthy choices and informed decisions.

She clarified that many legal and policy instruments exist to ensure SRH services in Sri Lanka, but challenges still remain. A few years ago, she collected 70 legal and policy related documents and interviewed some people in that area. Her findings concluded that a number of SRHR-related laws, policies, plans and programs, as well as committees and management and governance exist in Sri Lanka. These documents included Article 12 of the Constitution, some international human rights instruments, the Public Health Care Declaration, and the draft National Health Policy (not yet available for the public), the Population and Reproductive Health Policy (1995), the National Maternal and Child Health Policy (2009), the National AIDS policy (2011), the National Youth Policy (2014), the National Policy and Strategy on Health of Young Persons (2015), and the Sri Lanka National Migration Health Policy (2012). All these policies ensure access to SRHR. As for governance support, she cited the National AIDS Committees and Sub Committees and the National Committee on Family Health. Despite the existence of many legal and policy instruments, she reminded that including SRH in school curriculum for implementation encounters some difficulties.

Sri Lanka signed several international conventions recognizing the right to health. In the current Constitution, however, the right to health is not recognized as a right although it may be amended in the new Constitution. Article 12(2) of the Constitution prohibits discrimination. The Right to Information Act. No. 12/2016 ensures the right to information. These documents are in place to ensure accessible, efficient, cost effective health care services on an equitable basis and free of charge. SRH should be included in the school curriculum in this regard.

Sri Lanka in fact has a very comprehensive reproductive health curriculum incorporated into health and physical education subjects in the school system. However, there is no comprehensive sexuality education (CSE) offered. It is offered only as an elective for the 10th graders and above. Only 40 percent of students select this subject. Moreover, contraception, including the use of condoms, is only taught to advanced level biology students. According to the Sri Lankan legal framework, the legal age of marriage is 18 years, while the consent for sex is 16 years. Therefore, students are deprived of the right to know on sexual education given the two-year gap.

Dr. Widanapathirane also mentioned some problems encountered at school on sexual education. Teachers do not have enough skills to provide education on the subject. Healthcare providers are supposed to provide SRH services, but when it comes to providing SRH services to youth, many cultural barriers exist such as service providers’ negative attitude toward the fact that youth obtain SRH services and reticence from youth themselves to get SRH counselling and services. Lack of knowledge, cultural norms, and legal age of marriage hinder youth access to SRH services.

Dr. Widanapathirane shared a few words on abortion which is considered as a criminal offence under the Penal Code except for therapeutic reasons. Due to the lack of access to family planning services, many illegal abortions are performed in Sri Lanka. The number of teenage pregnancies is increasing in certain areas. According to the national data, teenage pregnancy represented 5.3 percent of total pregnancies in 2013, and 4.9 and 5.25 percent in 2014 and 2015, respectively. Healthcare providers are not advising youth to be pregnant before 20 years old, despite the legal age of consent set at 16 and marriage at 18. This situation creates and exacerbates a vicious cycle of poverty, low education and lack of life skills leading to girls’ decreased autonomy for life events, resulting in early marriage or sexual exploitation, lack of power and vulnerability to violence, limited access to health or other services, increased maternal morbidity/mortality and HIV/STIs, and
increased infant mortality. For those children who survive, cultural norms and lack of education push to reproduce the vicious cycle.

The Health Ministry issued two important circulars regarding the provision of SRH services to the legally married or partners living together aged 15 to 49 years. The first circular was issued in 2011 to affirm that medical officers do not have legal duties to report to the law enforcement authorities about teenage pregnancies under 16 year-old adolescents. This resulted from midwives having been questioned about their providing SRH services to youth below 16 years old. The second circular in 2015 stated that when providing reproductive health services to adolescents, healthcare providers must consider the best interest of the adolescents and that medical officers can provide reproductive health services even in the absence of guardians.

Dr. Widanapathirane explained the misleading legal framework in Sri Lanka has created a restrictive environment. For example, some discriminative laws still exist such as the Vagrants Ordinance (1841) that criminalizes soliciting sex in public places. Some police officers misinterpret the law such that a woman carrying condoms in her handbag is guilty. Fine in amount of 100 SLR is usually imposed on women carrying condoms. Consulting a lawyer would cost 3000 SLR, and if they cannot pay, women are imprisoned for 3 months. As a result, sex workers do not use condoms. An information campaign was launched in 2010 to educate police officers on this matter. Another legal provision that creates de facto discrimination is Article 365 A of the Penal Code (1995), which punishes any act of gross indecency between two persons in public or private places. This has been interpreted as criminalizing homosexuality, hindering the provision of necessary health services to them. Homosexuals do not express their sexual orientation as a result, and do not receive proper SRH counselling or services adapted to their needs. Condoms are viewed as a commodity included in the essential drug list of the Ministry of Health. Therefore, the interpretation of the Article 365 A of the Penal Code cannot be justified. These laws, therefore, should be repealed.

Dr. Widanapathirane commented on the LGBT community. Sri Lanka does not provide specific protection of human rights under anti-discrimination laws against the LGBT community including youth. However, Sri Lanka signed the relevant international conventions and is bound to protect LGBT's rights. Four main groups are more likely to acquire HIV (the risk compared to the general population group): sex workers (The risk is 10 times higher), drug users (24 times higher), Men having sex with men, also known as MSM (24 times higher) and transgender people (49 times higher). Dr. Widanapathirane cited as main problems an apparent lack of initiatives to raise awareness among these groups and school education on sexual health, as well as cultural barriers regarding sexual orientation. For MSM, there are two main issues linked to the criminalization of the same-sex relationship: MSM's tendency to pursue multiple relationships with different partners and MSM’s reluctance to keep condoms at home. The majority of the society is homophobic and tends to stigmatize homosexuals. As a result, they have limited access to health services and fall into depression and social isolation. SLFPA is implementing and monitoring intervention programs in 25 districts. Services for female sex workers are provided in 11 districts, MSM in 11 districts, drug users in 8 districts, and “beach boys” in 7 districts.

Dr. Widanapathirane then presented a diagram on HIV testing and counseling among sensitive populations in 2014. It shows the estimate number of persons who visited the clinics for HIV testing, after encouraged by NGOs, mainly FPASL. This diagram shows that cultural barriers prevented some from returning to clinics to obtain their test results; there is a critical difference in numbers between those who got tested, and those who actually returned to collect their results.
Dr. Widanapathirane then presented on **transgender certificates** introduced by the Director General of Health through a General Circular (No. 01-34/2016), which is intended to avoid similar problems encountered by transgender people during 2016. Transgender people were arrested by the police as they changed their gender identity but could not change their identification documents. Therefore, the Human Rights Commission alerted the government officials, prompting this Circular to be disseminated to instruct hospitals to issue gender certificates to allow transgender people to obtain new birth certificates and ID cards. There is no separate law for people living with HIV. General laws cover some aspects of their rights including health and education, but negative attitudes and cultural bias against them prevail, undermining the protection of their rights.

To conclude her presentation, Dr. Widanapathirane raised one provocative question to the audience: **“Do we provide services only for well-disciplined children?”** She recalled that the Constitution guarantees the right to education, but conflicting issues remain when it comes to addressing **teenage pregnancy**. Referring to one school case in 2016 where three girls were forbidden to come back to school after having spent time alone with their boyfriends, she further explained that some school principals demand students to submit pregnancy test results. If girls are pregnant, they are precluded from going to school. SRH-related laws are in place in Sri Lanka, but the Education Ministry should take more initiatives in this regard, said Dr. Widanapathirane.

She emphasized the fact that a number of laws, policies, plans and programmes are available to make SRH services accessible. At the same time, however, some laws negatively affect key vulnerable populations’ access to these services. She reiterated that the existing sexual health curriculum in the school setup does not cover comprehensive sexual education. There are no separate laws to protect rights of people living with HIV.

She urged the Parliamentarians to raise their voice to repeal the existing punitive laws and called for the incorporation of a CSE into the school curriculum. These steps will create a conducive environment where people can have a real access to health.

**Mainstreaming SRHR in Crisis Management and Emergency Response**

*Ms. Madu Dissanayake, Director at FPASL, spoke about the necessity of providing SRHR services in emergency situations, highlighting the Minimum Initial Services Package (MISP). (Photo: AFPPD)*
Ms. Dissanayake greeted the audience, and made her presentation focusing on the necessity of providing SRH services in emergency situations. She asked the audience to remember the phrase: “Do not miss MISP,” which stands for “Minimum Initial Services Package.” In most emergency situations, so-called “basic needs” such as providing food and shelters come first as high priority assistance. But SRH is also a fundamental right and a basic need. That is why FPA survived for 65 years, and providing SRH services should receive more attention as “basic needs” during emergency situations. The MISP saves lives and prevents illness, trauma and disability, especially among women and girls. She showed the audience one picture illustrating the vulnerability of women and girls when flooding disasters occurred.

Neglecting MISP in humanitarian settings can have devastating consequences:

- Preventable maternal and newborn deaths: in Sri Lanka, maternal mortality rate is fairly good compared to other countries in South Asia, and even in Asia-Pacific. Therefore, it is definitely preventable in Sri Lanka.
- Sexual violence and subsequent trauma: there happens sexual violence during an emergency. During the 2006 tsunami, sexual violence happened. It is not something visible but that can be felt. Victims of sexual violence find it extremely difficult to come out and testify, as they often face denial and ignorance. The lack of data on GBV also exacerbates the situation.
- Sexually transmitted infections: during a disaster, one should not forget that people have sex. Referring to the public reaction of genuine surprise when condoms were distributed during the 2016 Olympics, she pointed out that one should face the reality: one cannot expect young people to practice abstinence for one month. Healthcare providers have to be mindful and ready to face this reality.
- Unwanted pregnancies and unsafe abortions: she quoted one of the legal aid commission staff by saying during the recent legal aid training programme on unwanted pregnancy, “An adult woman who became pregnant due to rape should not be allowed to access abortion services, because she should know the means to avoid pregnancy.” Ms. Dissanayake was very alarmed by the comment that shows the subject requires further attention and discussions to raise awareness and to break cultural barriers. The same is true for other sensitive topics such as sexual orientation.
- The possible spread of HIV: Similar to STIs, it could happen without precaution and protection.

Ms. Dissanayake then explained why MISP is a priority: it aims to reduce mortality, morbidity, and disability among populations affected by crises, particularly women and girls. She showed two photographs of those who were in a vulnerable situation and probably looking for a safe place. These situations need to be handled by well-trained people who clearly understand their needs. She emphasized the fact that implementing the MISP is not an option in Sri Lanka but a must. She recalled complaints and grievances made during and after the May 2016 floods. Having been involved in the process of providing emergency assistance, she could testify that many locations were safeguarded and that maternal mortality or morbidity were prevented despite the magnitude of the flood. This disaster showed that people were well-prepared to cope with consequences, having experienced the 2006 tsunami and the 2009 civil war, where maternal mortality was also avoided.

She presented MISP in further details, starting by 5 key objectives:

1. Ensure that health clusters/sectors are identified in an agency to lead the implementation of MISP: MISP aims to make sure that the clusters in place are activated during an emergency. Repetition of the work needs to be minimized. It is important that services can reach target
locations. Being alert and prepared all the time is essential. There are some key actors: the Ministry of Health that has a separate department for emergencies, UNFPA, FPASL, and the Family Health Bureau under the Ministry of Health, which manages the entire maternal and child health program.

2. Prevent sexual violence and assist survivors.
3. Reduce the transmission of HIV.
4. Prevent excess maternal and newborn morbidity and mortality.
5. Plan for comprehensive RH services integrated into primary health care.

The MISP is an important “package program” with each component kit clearly identified to go to a designated target location during an emergency situation. The MISP contains several color-coded kits. For example, Kit 1 relates to condoms which is red-colored. She also showed three blocks of kits containing 12 kits in total. She further explained that based on the experience of the 2016 floods, those who were affected and complained about the country’s non-preparedness for the emergency were from the middle class who tend to raise their voices and grievances. However, the poor or the extremely poor tend not to express complaints, especially if disasters only hit small areas.

Ms. Dissanayake then explained the coordination mechanism of the MISP, emphasizing the importance of coordination at the local/camp level, not only by the midwives and healthcare workers on site. Sexual violence and HIV are not health-specific issues. Many technical issues should be resolved when and where camp settings are in place. Good training is imperative. Sometimes certain agencies come when they have sufficient funds but with very little understanding on how coordination should take place and be managed. Information should also be shared at the provincial and district level. In other words, each district secretary needs to understand how coordination mechanisms are working (and they usually do) at the national and even at the international levels.

Ms. Dissanayake showed the organizational structure of the MISP, involving UNFPA country offices, UNHCR, and the government agencies.

One of the objectives of the MISP is to prevent sexual violence and manage its consequences. She explained the monitoring of sexual violence prevention:

- Coordinated multi-sectoral systems to prevent sexual violence in all the sites;
- Confidential health and psychological services made available and accessible for survivors to manage cases of sexual violence. Victims are reluctant to report sexual violence, so measures need to be taken to have people aware of sexual violence protection mechanisms;
- Number of staff trained in sexual violence prevention and protection: SGBV is a very sensitive topic, and has only been integrated into the curriculum recently.

Moreover, displaced populations in crisis situations are especially vulnerable to STIs and HIV. They need to access to means of prevention, treatment and care:

- Safe blood transfusions need to be available;
- Respect for universal precautions needs to be enforced. For example, healthcare providers have to wear gloves and face masks with all the patients.
- Free condoms should be available: some married women became pregnant in emergency situations.

MISP also aims to prevent excess neonatal, maternal mortality and morbidity to ensure that every pregnancy is wanted and that every pregnant woman receives appropriate care.
Ms. Dissanayake specified that the MISP cannot provide comprehensive RH services, only **minimum services**. Basic data such as **default estimates** (i.e., the percentage of women of reproductive age in the population) is utilized in accurately estimating the number of supplies to place orders. In crisis situations, **kits should arrive within two to seven days** after an order is placed and the funds are transferred. Transport to field sites is dependent upon the ordering agency’s local transport and storage arrangements. More information about the MISP can be obtained at the Ministry of Health, the Family Health Bureau, UNFPA and FPASL.

Ms. Dissanayake concluded by explaining what Sri Lanka has already accomplished: national level workshops, teaching curricula in the faculties and universities, not only medical schools but general universities. MISP has been included in the prevention of an SGBV strategic framework and provincial level capacity building trainings. Kits have been pre-positioned to facilitate their access.

*Ms. Dissanayake showed a short video illustrating the positive effects of MISP in emergency situations.*

**Discussions**

**Dr. Marumoto** presented briefly the HIV/AIDS data supplied by UNAIDS Asia Pacific Regional Office which is included in the participants’ folders.

In responding to the questions raised by **Hon. Mr. Hafeel Salman, MP**, related to the necessity to repeal Article 365 A of the Penal Code, **Dr. Widanapathirane** emphasized that this needs to be understood from a health perspective, especially health consequences by not repealing the law. Sexual orientation cannot be changed. These laws pose critical social implications.

**Ms. Dissanayake** added that sexual behavior is a private matter, and therefore it should not be viewed as public nuisance issues. Judgment tends to be made against something that cannot be seen. Those who were biologically born to be homosexuals do not choose their sexual orientation. She posed a question, “Given that being in the mainstream is easier and knowing all the difficulties that women face in this country, why would someone choose to be different and be punished for that?” The society is judging people not according to how they live their life, but to how they have sex. It is a private matter.

**Hon. Mr. Hafeel Salman** expressed his concerns to see two people openly behaving as gays or lesbians. **Ms. Dissanayake** answered that female-female and male-male kissing in public is seen as a public nuisance in Sri Lanka. Historically, men used to walk with their arms around each other; now, they refrain from doing so, as they are afraid to be associated to homosexuals. This is the culture that is being created.

*The Chair of the session proposed that another workshop be held to further discuss these critical and important issues at the Parliament, inviting the presenters.*
SESSION 6: Youth Policy

Dr. K. A. S. Keeragala, Additional Secretary, Youth Affairs at the Ministry of National Policies and Economic Affairs, Hon. Mr. Lakhsman Senevirathne, Member of Parliament of Sri Lanka, and Dr. M. M. S. B. Yalegama, Director-Planning at the Ministry of National Policies and Economic Affairs, led the session on Youth Policy. (Photo: AFPPD)

Chair: Hon. Mr. Lakhsman Senevirathne, Secretary General, SLPPD and State Minister of Science Technology and Research

Sustainable Development Bill/Act

Presenter: Dr. M. M. S. B. Yalegama, Director-Planning, Ministry of National Policies and Economic Affairs

Dr. Yalegama greeted the participants.

He underlined that the Parliamentarians have an important role in contributing to, and passing the Sustainable Development (SD) Bill. The first reading of the Bill has already been completed. The aim of his presentation is to present a big picture of the Bill so that the benefits of the Act in specific areas can be well understood.

He mentioned that some newspapers have misunderstood the aim of the SD Act, which is not a development bill. **Sustainable development is sustainability applied to economic development.** Other countries understood that economic development had to integrate other components into a development process to ensure the future of the next generations. He showed a picture illustrating sustainable development to be balanced with the needs of the community, environment, and business.

Dr. Yalegama went through the history of the SD Act, which is the brain-child of Honorable Prime Minister. It was developed through a Committee appointed by him under the chairmanship of Hon. Dr. Harsha de Silva, then Deputy Minister of Policy Planning, Economic Affairs, Child Youth and
Cultural Affairs. The first meeting was held in June 2015. Once formed, the Ministry of Sustainable Development and Wildlife provided its inputs. The Bill was developed by studying similar acts in other countries such as Canada, New Zealand or Bhutan. The draft bill was presented to the Cabinet of Ministers for approval in December 2015. In January 2016, the Cabinet of Ministers directed the legal draftsman to draft the Act incorporating the proposed amendments by the Honorable Ministers, and the Secretary to the President was asked to obtain concurrence of all Provincial Councils before presenting the draft act to the Parliament. The amended Bill was approved by the Cabinet of Ministers in July 2016, and was published and presented to the Provincial Councils to obtain their consent.

Some **Provincial Councils** asked for the organization of sessions to understand the whereabouts of the SD Act. Most Provincial Councils approved the Act or suggested amendments. Only the Easter Provincial Council responded that they would consider it after the adoption of the new Constitution, and the Northern Provincial Council did not approve the Act because they were concerned about their authority transferred by the government to them under the 13th Amendment to be taken away by the enactment of the Act (which is not the case, even if the government will have to play a facilitating role). The next step is the second reading in the Parliament, which was planned in January but has been postponed.

Dr. Yalegama presented the proposals of the SD Act:

- To promote the integration of environmental, economic and social factors in the decision-making by the government;
- To carry out environmental and social audits on the new development projects and endure the environmental and social security by every government organization;
- To set national targets guided by global level ambitions but taking into account national interests and circumstances in incorporating 17 SDGs; SDGs give guidelines and national dynamic targets, some of which Sri Lanka has already reached. Dr. Yalegama mentioned Goal 5 and participation of women in government, noting that Sri Lanka has less gender-discrimination than some neighboring countries such as India or Pakistan. He shared his view that there is no need to establish quotas for women as gender equality will happen by itself. He added that women can often perform better than men in some sectors (such as teaching, as more women continue their education at university-level);
- To provide the legal framework for developing and implementing a National Policy and Strategy to achieve sustainable development in Sri Lanka in a holistic and inclusive approach. A holistic approach **under the SD Act mandates every government organization to prepare its national policy and strategy up to 2030**. An inclusive approach will involve Provincial Councils and local governments.

The SD Act will also establish a **Sustainable Development Council** consisting of 11 members representing the National Government and the Provincial Councils. It will prepare the draft National Policy and Strategy in compliance with the SDGs and concurrence with Ministries, Departments and Provincial Councils, forwarding it to the Cabinet which will then submit it to the Parliament for approval. The National Policy and Strategy will be forwarded to Ministries, Departments and Provincial Councils, which will prepare institutional policy and strategy in compliance with it. Progress reports will be submitted to the SD Council whose tasks will include:

- To prepare the National Policy and Strategy on SD;
- To review and update it periodically;
- To issue guidelines relating to SD with respect to new development projects;
- To facilitate and monitor the mechanisms and progress review processes of the implementation of the National Policy and Strategy on SD;
• To identify SD standards and ecological footprint indicators.

Dr. Yalegama presented briefly the composition of the SD Council (3 ex-officio members and 8 members appointed by the President, including 3 members out of 9 persons nominated by the Provincial Councils); the Chairman of the Council will be appointed by the President among its members. The members of the Council shall have specific qualifications related to sustainable development. The Provincial Councils are concerned because the members of the SD Council who are appointed by them hold office for only one year, while other members are appointed for three years.

Overview of the SDGs and Youth

Dr. K. A. S. Keeragala, Additional Secretary, Youth Affairs at the Ministry of National Policies and Economic Affairs, highlighted some achievements of Sri Lanka in terms of youth development, referring to the Global Youth Development Index 2016. (Photo: AFPPD)

Presenter: Dr. K. A. S. Keeragala, Additional Secretary, Youth Affairs, Ministry of National Policies and Economic Affairs

Dr. Keeragala greeted the participants.

He started by presenting the main bodies involved in youth policy under the Youth Ministry (the Youth Service Council in charge of youth development and the National Youth Corps in charge of skill development).

Dr. Keeragala then presented different SDGs related to youth:
• Goal 1: End poverty. The SED Business Programme has been launched to provide finance and assistance management to youth to start self-employment projects. The “Yowun Puraya” is the major youth development project (livelihood development project) in Sri Lanka implemented by the Youth Service Council, focusing on 6,000 Sri Lankan youth.
• Goal 3: Good health. It is a common agenda in Sri Lanka to make sure than youth become a healthy population. Non Communicable Diseases (NCDs) prevention programmes have been introduced under this goal.
• Goal 4: Quality education. A program is under implementation focusing on skill development and vocation training.
• Goal 8: Good jobs and economic growth (cf. Goal 1)
• Goal 10: Reduced inequalities. Youth exchange programs are in place with countries including China and India.
• Goal 16: Peace and justice. The National Youth Service Council has implemented programmes, including in the course of the national reconciliation process. In 2016, a Christmas programme was held with all the communities and the religious youth.

In conclusion, Dr. Keeragala mentioned some achievements of Sri Lanka in terms of youth development, referring to the Global Youth Development Index 2016. Sri Lanka ranks 31st in 2016, improving from 72nd in 2013. Dr. Keeragala also read the SDG targets more relevant to young people: 1.2, 2.2, 4.1, 4.3, 4.4, 4.6, 5.1, 5.2, 5.3, 5.c, 6.2, 8.5, 8.6, 8.7, 8.b, 13.b, 16.1, 16.2, 16.3, 16.7 and 16.a.

Discussions

Hon. Mr. Lakhsman Senevirathne queried about the adoption of the Act on SD with respect to some Provincial Councils which have not approved the Bill.

Dr. Yalegama answered that if the Bill is not approved by all of the Provincial Councils, it will be applicable only to those Provincial Councils which have approved it.

In that regard, Hon. Mr. Seyed Ali Zahir Moulana noted that Sri Lanka’s government committed to the implementation on the 17 SDGs at the UN, under the leadership of the President and Prime Minister that answer to global needs. It is therefore a matter of the government’s duty to implement them regardless of the Provincial Council’s objections. Also, these 17 Goals come under the philosophy of 5 “P”s: planet, people, peace, prosperity and partnership. Sri Lanka should proceed with implementing the SDGs.

Dr. Yalegama insisted on the fact that the SD Act will not take any power from the Provincial Councils.

Hon. Mr. Lakhsman Senevirathne (Chair of the session) commented that it is usually difficult to obtain everyone’s opinion but it is how democracy functions.

Dr. Marumoto thanked the presenters. She re-emphasized that SDGs implementation requires an extremely complex and challenging process. Therefore, she sincerely believes that the role of National Parliament is essential in implementing the SDGs in every country. She also asked why the SDG 3 (Health) was missing from the presentation on the SDG Act, as well as goal 5.7 on gender equality, as she expects that health and gender goals such as comprehensive sexuality education (CSE) should be included as priority agenda and focus of the Ministry of Youth. She also warned the Parliamentarians that some countries tend to cherry-pick certain easier SDGs and targets to achieve, overlooking CSE for instance. She challenged and urged the Parliamentarians to tackle all the targets and issues, although prioritizing is critically important.

Dr. Keeragala answered that the Ministry of Youth is also addressing CSE, but he did not mention it in his presentation.
Other participants commented that CSE has been integrated in the school curriculum but its implementation encountered some difficulties.

The Chair asked whether integrating CSE in school will improve the global ranking of Sri Lanka in the Global Youth Development Index.

**Dr. Keeragala** confirmed that this was a factor taken into account in the ranking process.

The Chair commented that educating young people on these aspects would avoid many problems at further stages of their lives. The Chair also asked whether the UN had issued a resolution for the elderly.

**Dr. Marumoto** answered that the Madrid International Plan of Action on Ageing (MIPAA) is a major international resolution on ageing.

**Mr. K. Lionel Premachandra, Rights and Advocacy Advisor of HelpAge Sri Lanka** added there is indeed the UN resolution (MIPAA), but there is no UN Convention on Ageing that would have the status on international law. There is an on-going campaign that demands the drafting of such convention.
CONCLUSION

Recap of Recommendations

**Presenter: Dr. Mika Marumoto, Executive Director, AFPPD**

Dr. Marumoto summarized some key messages that have been conveyed during the workshop. Sri Lanka ranks well when it comes to indicators on health and education for women. At the same time, however, we are aware of gaps that remain. There is much work to be done by the Parliamentarians to ensure that further progress is made. Sri Lanka is undergoing a demographic transition; it is projected that by 2041, one in four Sri Lankans will be elderly. This will be a very significant shift for a country that for many years has had a large young, dynamic and productive population.

To close the workshop, Dr. Marumoto recalled main recommendations stemming from all the presentations made during the workshop as areas for further actions.

On **active ageing**:

- Call for an International Convention on Ageing.
- Devise an appropriate policy strategy to improve welfare of the elderly who live alone without their spouse or children.
- Focus its policy attention more on the elderly who do not have any children.
- Carry out a study on national transfer accounts to understand national transfers among different generations and their income, expenditure, savings and consumption patterns in order to measure, analyze and interpret macro-economic aspects of population ageing.
- Develop a strategy to improve the financial position of the elderly by devising a special programme of income generating activities for the elderly, as well as providing financial support from the government for those who are financially burdened.
- Devise a mechanism of improving healthcare facilities for the elderly including addressing their mental health challenges at all levels.
- Adopt and further strengthen Morbidity Compressions Policies rather than Morbidity Expansion Policies in order to increase healthy life expectancies.
- Ensure a supportive environment in family and community for the elderly with appropriate legal rights to guarantee their well-being.
- Take the initiative with the support of the private sector to establish an adequate number of elderly care homes with satisfactory facilities or encourage private investment as is the case with developed countries.

On **gender equality and women’s empowerment**:

- Increase awareness and recognize the issues on women and children in the government and other organizations.
- Rectify the general trend of insensitivity to the issues of women and children in the law enforcement and the judiciary fields, by introducing gender-budgeting systems, encouraging political participation by women, and avoiding the delayed enactment of the Women Commission Bill.
- Ensure that commitments made by relevant stakeholders on women’s empowerment be translated into action (by capacity building of Gender focal point persons).
- Take action to break gender stereotypes and traditional socio-cultural values.
- Develop action plans to ameliorate less representation of women in politics and decision-making due to socio, economic and cultural barriers.
• Ameliorate poor information-sharing by other governmental organizations by establishing a national system of collecting and disseminating proper gender disaggregated data.
• Ensure to collect gender disaggregated and age-specific statistics relevant to child and women-related issues.
• Urge community participation for the prevention of child abuse and VAW.
• Improve inadequate application of modern technologies (DNA-Electronic Technology) in fighting against child abuse and VAW and crimes.
• Low rate of women’s labour force participation as well as issues of unpaid care work need to be addressed.

Some data linked to women’s participation was shared:
• Seats for female in parliament: 15
• Females in ministerial positions: 05
• Female headed householders: 23%

On sexual and reproductive health and rights:
• Re-evaluate a number of laws, policies, plans and programmes available to access sexual and reproductive health.
• Improve further some laws which affect the key vulnerable populations for accessing the sexual health services.
• Make an assessment of the existing sexual health curriculum in the school setup in order to cover comprehensive sexual education.
• Evaluate the current situation in which no separate laws are available for the HIV-infected.
• Assess the need to repeal existing punitive laws and age appropriate sexual education.
• Create a conducive environment for improving further access to health care for all.

Specifically on SRH services in emergency situation, neglecting the Minimum Initial Service Package (MISP) in humanitarian settings has serious consequences such as:
• Preventable maternal and newborn deaths
• Sexual violence and subsequent trauma
• Sexually transmitted infections
• Unwanted pregnancies and unsafe abortions
• Possible spread of HIV

Concerning youth and sustainable development (SD):
• Keep in mind the 5 “P”s: Planet, People, Peace, Prosperity and Partnership while formulating National Action Plans and Policies.
• Promote the integration of environmental, economic and social factors in the decision-making by the government.
• Ensure that every governmental organization should carry out environmental and social audits on new development projects for environmental and social security.
• Set national targets guided by the global standards but take into account national interests and circumstances in incorporating 17 Sustainable Development Goals in the national planning processes, policies and strategies.
• Prepare national policy and strategy on SD in consultation with, and with concurrence of all ministries, departments and Provincial Councils.
• Review and update periodically the National Policy and Strategy on SD.
• Issue guidelines related to SD in respect of new development projects.
Facilitate and monitor the mechanisms and progress review processes of the implementation of the National Policy and Strategy on SD.

Identify SD standards and ecological footprint indicators.

The **role of Parliamentarians** as law makers:

- Reaffirm and acknowledge the power of national parliaments of UN Member States to make legislation and approve international agreements.
- Use effectively this ability to facilitate the implementation of the SDGs and advance population and development issues to protect and nurture aspirations and rights of citizens.
- Review legislation proposed by the government to ensure that it reflects human rights principles and contributes to achieving the national SDGs plan.
- Recognize these policies are important to offer clear visions to the country on its priorities and the way forward.
- Understand clearly that successfully implementing the SDGs means maximizing all available domestic resources to achieve the best possible results.
- Engage effectively and monitor how government funds are being allocated to their nationally defined SDGs during the budget approval process, including whether sufficient funds are reaching the most vulnerable and excluded.
- Assess the existing Population and Reproductive Health Policy 1998 to see if any revisions are necessary.
- Develop a costed action plan for a National Family Planning Programme.
- Develop and implement a National GBV referral system.
- Revisit the National Policy on Senior Citizens in Sri Lanka 2006 to see any gaps that need to be addressed and filled.
- Implement the Youth Health Policy 2015 (which is yet to be launched).

These are the points MPs should keep in mind and advance. Dr. Marumoto encouraged in particular:

- The formulation of SLPPD Action Plans (within two weeks).
- Follow-up workshops for parliamentarians on thematic issues (to be discussed).

She expressed her wish to work further with Sri Lankan Parliamentarians, by organizing follow-up workshops, where needed, in order for Sri Lanka to effectively implement the SDGs.

**Closing Remarks**

*Hon. Mr. S.B. Dissanayake, Chairperson, SLPPD and Minister of Social Empowerment and Welfare*

Hon. Minister. S. B. Dissanayake thanked the AFPPD staff and all the participants of the workshop for ensuring that the workshop was successfully completed. He made a commitment by confirming that SLPPD Action Plans will be prepared, developed and consolidated by the relevant Ministries and submitted to AFPPD. He also expressed his wish to organize an international conference on ageing in Sri Lanka.
ANNEX

Contents

I. List of Participants....................................................................................................................................47
II. Agenda ....................................................................................................................................................49
III. Workshop Evaluation..........................................................................................................................52
IV. Media..............................................................................................................................................57
V. Speeches and Presentations....................................................................................................................60
I. List of Participants

AFPPD-SLPPD National Inception Workshop
16 – 17 February, 2017 | Negombo, Sri Lanka

List of Participants

MEMBERS OF PARLIAMENT

Sri Lanka
Hon. Mr. S. B. Dissanayake, MP
Minister of Social Empowerment and Welfare
Chair, SLPPD

Hon. Mr. Eswarapatham Saravanapavan, MP
Deputy Chair, SLPPD

Hon. Mr. J. C. Alawathuwala, MP
Treasurer, SLPPD

Hon. Mr. Lakshman Senewiratne, MP
State Minister of Science, Technology and Research
Secretary, SLPPD

Hon. Mr. Hector Appuhamy, MP
Assistant Secretary, SLPPD

Hon. Mr. Seyed Ali Zahir Moulana, MP
Assistant Secretary, SLPPD

Hon. Mr. Ashok Abeysinghe, MP
Deputy Minister of Transport and Civil Aviation
Member, SLPPD

Hon. Mr. Ananda Aluthgamage, MP
Member, SLPPD

Hon. Mr. Vijitha Berugoda, MP
Member, SLPPD

Hon. Mr. T. B. Ekanayake, MP
State Minister of Lands
Member, SLPPD

Hon. Dr. Sudharshini Fernandopulle, MP
State Minister of City Planning and Water Supply
Member, SLPPD

Hon. Ms. Sriyani Wijewickrama
Radampala Gamage, MP
Member, SLPPD

Hon. Mr. Syed Ali Zahir Moulana, MP
Member, SLPPD

Hon. Mr. Malith Jayathilake, MP
Member, SLPPD

Hon. Mr. J. M. Ananda Kumarasiri, MP
Member, SLPPD

Hon. Mr. K. Kader Masthan, MP
Member, SLPPD

Hon. Mr. Mohamed Navavi, MP
Member, SLPPD

Hon. Mr. Ishak Rahuman, MP
Member, SLPPD

Hon. Mr. Harshana Supun Rajakaruna, MP
Member, SLPPD

Hon. Mr. Md. Hafeel Salman, MP
Member, SLPPD

Hon. Mr. Muthu Sivlingam, MP
Member, SLPPD

Hon. Mr. L. A. Wijemanne, MP
Member, SLPPD

GOVERNMENT OFFICIALS

Sri Lanka
Mrs. Chandrani Senaratna
Secretary, Ministry of Women and Child Affairs

Mr. Mahinda Seneviratna
Secretary, Ministry of Social Empowerment and Welfare

Mr. Bandula Harischandra
Add. Secretary, Ministry of Social Empowerment and Welfare
Dr. K. A. S. Keeragala  
Additional Secretary, Youth Affairs, Ministry of National Policies and Economic Affairs

Dr. M. M. S. S. B. Yalegama  
Director- Planning, Ministry of National Policies and Economic Affairs

Dr. Janaki Widanapathirane  
Consultant, Community Physician  
Ministry of Health

Dr. Sunil Jayanatha Navarathna  
Consultant, Ministry of Social Empowerment and Welfare

Dr. R. M. K Rathnayake  
Consultant, Ministry of Social Empowerment and Welfare

RESOURCE PERSONS

Ms. Kristine Blokhus  
Officer-in-Charge, UNFPA

Mr. Jayan Abeywickrama  
National Programme Analyst (EmONC), UNFPA

Professor Lakshman Dissanayake  
Vice Chancellor, University Of Colombo

Ms. Madu Dissanayake  
Director, Family Planning Association for Sri Lanka

Ms. Kumudini Samuel  
Director, Women and Media Collective

Mrs. Thushara Ranasinghe  
Executive Director, Family Planning Association for Sri Lanka

AFPPD

Dr. Mika Marumoto  
Executive Director

Ms. Seema Gaikwad  
Policy Research and Advocacy Advisor

Ms. Pornprapas Sappapan  
Administration Manager

Mr. Anake Lekkoon  
Accounts Manager

Ms. Madevi Sun-Suon  
Special Assistant to the Executive Director

Ms. Adele Marchal  
Research Assistant

TOTAL: 52

MPs: 22  
Male: 20 Female: 2

Government Officials: 8  
Resource Persons: 6  
National Secretariat Staff: 10  
AFPPD Staff: 6
## II. Agenda

### AFPPD-SLPPD National Inception Workshop


**Final Agenda**  
16-17 February 2017  
Negombo, Sri Lanka

<table>
<thead>
<tr>
<th>DAY ONE</th>
<th>Time</th>
<th>Activity</th>
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<tbody>
<tr>
<td></td>
<td>08:00 – 08:40</td>
<td>Registration of participants</td>
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<tr>
<td>09:00 – 09:30</td>
<td>Workshop opening</td>
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<td></td>
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<td><strong>Chair:</strong> Ms. Mika Marumoto, Executive Director, AFPPD</td>
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<td></td>
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<td><strong>Opening remarks:</strong></td>
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<td>- Hon. Mr. S.B. Dissanayake, Chair, SLPPD and Minister of Social Empowerment &amp; Welfare</td>
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<td></td>
<td>- Ms. Kristine Blokhus, Officer-in-Charge, UNFPA</td>
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<td></td>
<td>- Mrs. Thushara Ranasinghe, Executive Director, Family Planning Association of Sri Lanka</td>
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<td></td>
<td>09:30 – 10:15</td>
<td>Introduction to the workshop</td>
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<td><strong>Chair:</strong> Hon. Mr. Lakshman Senevirathne, Secretary General, SLPPD and State Minister of Science Technology and Research</td>
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<td><strong>Presentation:</strong></td>
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<td></td>
<td></td>
<td>- AFPPD’s Strategic Priorities Framework (2016-2019) &amp; Workshop Objectives and Agenda</td>
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<td>Overview, Ms. Mika Marumoto, Executive Director, AFPPD</td>
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<td>- Introduction of Participating Ministers, Members of Parliament, Guests and Staff</td>
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<td></td>
<td>10:45 – 12:00</td>
<td>Session 1 and Session 2: Role of the National Committee-SLPPD in Supporting Parliamentarians to Prioritize Agenda into Action</td>
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<td><strong>Chair:</strong> Hon. Mr. Lakshman Senevirathne, Secretary General, SLPPD and State Minister of Science Technology and Research</td>
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<td><strong>Presentation:</strong></td>
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<td>- Roles and Responsibilities of National Committees and Priorities and Developments from the ICPD, the MDGs and the SDGs, Ms. Mika Marumoto, Executive Director, AFPPD</td>
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<td></td>
<td></td>
<td>- Why parliamentarians need to advocate on population and development issues: their role in accelerating the achievement of the Sustainable Development Goals (SDGs), Mr. Jayan Abeywickrama, UNFPA Representative</td>
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<td><strong>Q &amp;A</strong></td>
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<tr>
<td>Time</td>
<td>Session Description</td>
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| 12:00 – 13:00 | **Session 3: Active Ageing in Sri Lanka**                                             | **Chair:** Hon. Mr. E. Saravanapavan, Deputy Chairman, SLPPD                                         | • Overview of the National Policy of Senior Citizens, Sri Lanka, Mr. Bandula Harishchandra, Additional Secretary, Ministry of Social Empowerment and Welfare  
• Demographic and population processes and their linkages to social policies, Professor (Mr.) Lakshman Dissanayaka, Vice Chancellor, University of Colombo |
| 13:00 – 14:00 | Lunch                                                                                |                                                                                                    |                                                                                                  |
| 14:00 – 16:00 | **Session 4: Gender Equality and Women's Empowerment**                               | **Chair:** Hon. Mr. Seyed Ali Zahir Moulan, MP, Assistant Secretary, SLPPD                           | • Overview of the legal and policy framework on Gender Equality and Women’s Empowerment, Ms. Chandrani Senaratna, Ministry for Women and Child Affairs  
• Presentation on Gender Equality and Women's Empowerment, Ms. Kumudini Samuel, Women and Media Collective |
| 16:00 - 16:20 | Coffee Break                                                                         |                                                                                                    |                                                                                                  |
| 16:20 – 17:30 | **Session 5: Sexual and Reproductive Health Rights (SRHR)**                          | **Chair:** Hon. Dr. (Mrs.) Sudharshini Fernandopulle, State Minister for City Planning and Water Supply | • Overview of the legal and policy framework on SRHR, Dr. (Mrs.) Janaki Vidanapathiran, Consultant, Community Physician, Ministry of Health  
• Mainstreaming SRHR in Crisis Management and Emergency Response, Ms. Madu Dissanayake, Director, FPASL |
<p>| 19:00 - 20:30 | Dinner                                                                               |                                                                                                    |                                                                                                  |</p>
<table>
<thead>
<tr>
<th>17 February</th>
<th>DAY TWO</th>
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<tr>
<td><strong>09:00 – 10:30</strong></td>
<td><strong>Session 6: Youth Policy</strong></td>
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<td><strong>Chair:</strong> Hon. Mr. Lakshman Senevirathne, Secretary General, SLPPD and State Minister of Science Technology and Research</td>
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<td><strong>Presentation:</strong></td>
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<td>• Sustainable Development Act, Dr. M. M S. S. B. Yalegama, Director- Planning, Ministry of National Policies and Economic Affairs</td>
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<td>• Overview of the Sustainable Development Goals and Youth, Dr. K. A. S. Keeragala, Additional Secretary, Youth Affairs, Ministry of National Policies and Economic Affairs</td>
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<td><strong>Q&amp;A</strong></td>
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<tr>
<td><strong>10:30 – 10:45</strong></td>
<td><strong>Coffee Break</strong></td>
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<tr>
<td><strong>11:00 - 11:30</strong></td>
<td><strong>Closing</strong></td>
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<td>• Recap of Recommendations, Ms. Mika Marumoto, Executive Director, AFPPD</td>
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<td></td>
<td>• Closing Remarks, Hon. Mr. S.B. Dissanayake, Chairperson, SLPPD and Minister of Social Empowerment &amp; Welfare</td>
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<td><strong>Felicitation ceremony and Workshop Evaluation</strong></td>
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<td><strong>Departure</strong></td>
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**III. Workshop Evaluation**

*Please note that the comments have been edited for brevity and appropriate grammar where needed*

Total respondents: 14 participants

Level of Satisfaction per Session

**Summary:** According to the evaluation forms, the majority of participants expressed that they were “extremely satisfied” with the conference for each session. Only one participant manifested being “extremely dissatisfied” by five of the sessions, while always more than 70% of the participants expressed being “satisfied” or “extremely satisfied” for each session. The most positively rated were the Opening and Introduction Session (where key speakers presented the challenges and the goals of the workshop) and Session 3 (where the audience had the opportunity to grasp the implications and opportunities of population ageing in Sri Lanka). In general, the participants made few comments on the overall experience, two of them qualifying it as “excellent” and one of them stating that it was a good opportunity to gather new information on the Sustainable Development Goals. More comments are highlighted below.

![Overall Experience Chart](chart1)

![Opening and Introduction Chart](chart2)
Session 3

“Quite alarming but this session was a real eye-opener.”
Session 4

“Inspiring.”

Session 5

“Thought provoking.”
“Extremely important.”
“Very detailed on SDGs 4 and 5.”
General Highlighted Comments

Most Interesting:

- Demographic and population processes and their linkages to social policies by Professor Lakshman Dissanayaka (Session 3 on Active Ageing)
- “Everything was equally interesting.”

Learn More:

- Population demographic and Ageing population
- Youth Policy and Youth Health Policy
- SDGs-related issues

Future Actions:

- “SLPPD will propose its work plan within two weeks following the workshop.”
- “We must meet regularly to move forward all the suggestions. SDGs and ICPD PoA are a must!”
- “We must encourage the implementation of this agenda and advocate for it among fellow Member of Parliaments.”
- “There is a need of involving the Youth sector in the formulation of new policies.”
IV. Media

Sri Lankan Parliamentarians participate in AFPPD-SLPPD National Inception Workshop on population and development


SLPPD, a member National Committee of AFPPD, was initiated in October 2016 under the leadership of the Sri Lankan Minister of Social Empowerment and Welfare, S.B. Dissanayake, following his participation in AFPPD’s inaugural Standing Committee Meeting on Active Ageing.

More than 30 Members of Parliament and Ministers of Sri Lanka are attending the AFPPD-SLPPD National Inception Workshop held in Negombo on 16-17 February.

Among the participants are the Deputy Speaker of Parliament, Thilanga Sumathipala, the Minister of Women and Child Affairs, Chandrani Bandara, the State Minister of Youth Affairs, Niroshan Perera, representatives from the United Nations Population Fund (UNFPA) and the Family Planning Association of Sri Lanka, and the Vice-Chancellor of the University of Colombo.

The issues to be addressed on the AFPPD-SLPPD agenda are among others, ageing, gender equality, sexual and reproductive health and rights, and youth.

Addressing the issues of ageing population and female workforce in Sri Lanka in his opening remarks, Minister S.B. Dissanayake said Sri Lanka has a decreasing female labor force participation, but increasing female life expectancy and emphasized on the need to ensure the rights for elderly to work as the intergenerational care for elderly is not sustainable.

The workshop will strategize SLPPD’s activities for 2017 and beyond in alignment with AFPPD’s strategic priorities on gender equality and women’s empowerment, investing in youth, and active ageing.

Read More: Colombo Page
UNFPA Sri Lanka Supports 30 Parlimentarians Coming Together To Discuss Population and Sustainable Development

17 February 2017

The Asian Forum of Parliamentarians on Population and Development (AFPPD) is a network of 29 National Committees of Parliamentarians from Asia-Pacific. This network works on promoting advocacy and parliamentary actions on population and development issues at national, regional and global levels. Over the last 35 years, AFPPD has played a prominent role in engaging parliamentarians across the region regarding issues in relation to population and development, legislative reforms and driving change.

Read More: UNFPA
National launch of the Sri Lanka Forum for Parliamentarians on Population and Development


SLPPD, a member National Committee of AFPPD, was initiated in October 2016 under the leadership of the Sri Lankan Minister of Social Empowerment and Welfare, S.B. Dissanayake, following his participation in AFPPD's inaugural Standing Committee Meeting on Active Ageing.

Among the participants were the Deputy Speaker of Parliament, Thilanga Sumathipala, several cabinet, state and deputy ministers including the Minister of Women and Child Affairs, Chandrani Bandara, Lakshman Seneviratne, Dr. Sucharshini Fernando Pulle, Asoka Abeyesinghe, Niroshan Perera and several Members of Parliament including those from the opposition were present. Further the Vice-Chancellor of the University of Colombo, Prof Lakshman Dissanayake, representatives from the United Nations Population Fund (UNFPA), senior staff representing different Ministries and the Family Planning Association of Sri Lanka were also present.

In her address, FPA Sri Lanka Executive Director Thushara Agus said “This workshop provides us a great opportunity to launch the national level activities of SLPPD. Whilst it gives a platform for mutual learning and an understanding AFPPD’s Strategic Focus, it will equip our Hon. Ministers and Members of Parliament with the user-friendly advocacy tools that can be adapted to the national context. The three thematic areas as active ageing, Youth and gender equality and women’s empowerment are common issues to the region, where Sri Lanka has to make important strides and improvements”

Addressing the issues of ageing population and female workforce in Sri Lanka in his opening remarks, Minister S.B. Dissanayake said Sri Lanka has a decreasing female labor force participation, but increasing female life expectancy and emphasized on the need to ensure the rights for elderly to work as the intergenerational care for elderly is not sustainable.

Ms Madu Dissanayake, Director Advocacy, Policy and Public Affairs delivered a session on Providing SRH services in emergencies and spelt out the current operational framework and how it is linked to policies and practices on the ground. She stated that “Minimum Initial Service Package (MISP) comprises vital actions required to respond to Sexual and Reproductive Health needs at the onset of every humanitarian crisis and how it should be coordinated at different levels”

Read More: Family Planning Association of Sri Lanka
Hon. Mr. S.B. Dissanayake, Chair, SLPPD, Minister of Social Empowerment and Welfare:

Ms. Mika Marumoto, Executive Director of the Asian Forum of Parliamentarians on Population and Development,

Hon Ministers and other Parliamentarians,

Resource persons,

Participants of AFPPD from Thailand,

Distinguish invitees,

Ladies and Gentlemen,

Let me welcome you all at this national inception workshop, organized by the Asian Forum of Parliamentarians on Population and Development. This workshop is hosted by Sri Lanka Forum for Parliamentarians on Population and Sustainable Development.

The workshop will be held the next two days with seven particular sessions, which are going to be conducted by subject specialists. I hope that these deliberations will shed light, to understand the issues in a more meaningful manner.

As per the agreed agenda, the deliberation of this workshop will focus on three major issues. First it will deal on the issue on Ageing. The Asia Pacific Region currently to home, to over half on the world’s elderly population. The region is experiencing a rapid expansion of ageing of population. This phenomenon is, as result of, ever improving life expectancy, and falling fertility rates. The number of elderly in the region is expected to triple from 438 million in 2010 to 1.26 billion in 2050.

The second issue is the Gender Equality and Women’s Empowerment. The past decade have witnessed a steady increase in awareness of the need to address the issue of gender equality and women’s empowerment. Measures have been considered and adopted to increase social, economic and political quality, broadening access to fundamental human rights, and improvement of nutritional status.

Thirdly to Investing in Youth. The Asia Pacific Region is home, to more than 60 percent of young population between ages of 15 to 24 years. They are a major human resource for development. They are also the key agent and a driving force for economic development and technical innovation. However, the full potential of youth across the region is largely untapped as many of them still face obstacles in their access to education, health care, employment and civil participation.

Let me now appraise you on the situation in Sri Lanka. In Sri Lanka, the population is ageing fast and it is estimated that 25 percent of the population will be over 60 years of age as we enter the 2040s. While this would put Sri Lanka in a similar situation to that of Europe or Japan today, the larger issue is that unless our development process is improved in the present and sustained, we would have a lower level of income to support this ageing population. The lack of formal and decreasing intergenerational support systems to the aged would push a larger proportion of them into poverty in the coming years. Ageing is an outcome of Sri Lanka’s successful policy and implementation of family planning. While family planning has brought

V. Speeches and Presentations

Hon. Mr. S.B. Dissanayake, Chair, SLPPD, Minister of Social Empowerment and Welfare:

Ms. Mika Marumoto, Executive Director of the Asian Forum of Parliamentarians on Population and Development,

Hon Ministers and other Parliamentarians,

Resource persons,

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clear benefits to the development process – a manageable population and increased social achievements to families – the rapidity with which Sri Lanka is approaching an ageing society is a cause for concern.

As Sri Lankan society ages in coming years, the present intergenerational caring system of the elderly is, unlikely to sustain itself, with larger families needing to be supported, by decreasing numbers of income generating members. Additionally, 63 percent of the Sri Lankan working population being in the informal sector, makes it difficult for the state to provide support. This would make it imperative, for elderly engaged in the informal sector, to continue work into their old age even with infirmities. Female participation in the labor force is low in Sri Lanka, but female life expectancy is higher, making them more dependent on support from the family in their senior years, through pensions, and to wider society in the form of sharing knowledge and experience, and volunteering/social service.

They also noted that considering the rights of the elderly; the right to work, the right for protection and support, and the right to choose. The policy framework should have this balance; social protection and wellbeing of the elderly. They also argued that Sri Lanka needs to look at experiences of other countries, that have made effective use of aged, by creating means for sharing their knowledge such as mentoring younger professionals.

Obviously much needs to be understood about the ageing population in Sri Lanka, their level of productivity, their care needs and the ways in which they can contribute to the welfare of their families and society. It is important that Sri Lanka conducts ageing specific surveys, to understand the issues faced and the contribution of this demographic group, so that informed and appropriate policy responses can be devised.

With these remarks let me conclude my comments.

Let me take this opportunity to thank you for your patience.
Good morning,

It is my great pleasure to be here today and to be able to congratulate the Sri Lanka Forum of Parliamentarians on Population and Development on their establishment. All of us who are here this morning are here because we recognize the crucial role that parliamentarians play in building legal and policy frameworks that really work for people, and to monitor how equitably there are implemented. Sri Lanka has made enormous progress on social development indicators over a short time. There is much to be proud of here – and much momentum to build on.

At the outset, I would like to acknowledge the important work of the Asian Forum of Parliamentarians on Population and Development. Engaging parliamentarians

Minister of Social Empowerment and Chair of SLPPD, Hon. S. B. Dissanayake,

Hon. Members of Parliament

Ms. Mika Marumoto, Executive Director, AFPPD

Mrs. Thushara Ranasinghe, Executive Director, Family Planning Association of Sri Lanka

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AFPPD-SLPPD National Inception Workshop

_Talking Points for_

_Ms. Kristine Blokhus_

_Officer-in-Charge, UNFPA Sri Lanka_

16 February 2017, Negombo

---
across the region to discuss population issues, creating awareness and knowledge of issues, and supporting advocacy, AFPPD has a wealth of experience build over many years, and we at UNFPA value our partnership very highly.

I would also like to acknowledge our partners at the Ageing Secretariat and the Sri Lanka Family Planning Association. Thank you for organizing this important meeting.

The issues on the agenda for this meeting are close to our hearts at UNFPAUNFPA works closely with the Government to advocate for policies that ensure active ageing, empower women, and enable young people. I would like to take a few moments to address these one by one to highlight some of the successes, as well as some of the issues remaining, which you will no doubt address in the course of today.

First, on Active ageing: Sri Lanka is undergoing a demographic transition. It is projected that by 2041, this one in four Sri Lankans will be elderly. This will be a very significant shift for a country that for many years has had a large young, dynamic and productive population. Soon, a quarter of the population will need care and support for healthy and active ageing. UNFPA has supported the government to collect and analyse the demographic data that allows it to plan accordingly. Sri Lanka will be required to establish adequate social safety nets and caregiver systems, and we are pleased to see that the Government is well on its way in making such preparations. Parliamentarians will have a key role here, in developing informed policy, and in ensuring that policies are equitably implemented. UNFPA has been working closely with the Elder’s Secretariat to launch their website. I strongly recommend you visit it – this is an informative portal that provides data on the number of elder committees, elder homes, and elderly population in Sri Lanka by district-level. This data is pivotal in ensuring informed decisions and evidence-based policy development.

The second topic I wish to address briefly is that of gender equality and Women’s empowerment: Sri Lanka ranks well when it comes to indicators on health and education for women. At the same time, all of us here are aware of
gaps that remain, and of the work that will still be required of the parliamentarians to ensure progress.

As you know, 1 in 4 households in Sri Lanka are headed by women. Whether they are widowed as a result of conflict, or their husbands have migrated away, they face special issues and vulnerabilities which require attention. UNFPA is happy to have been involved in promoting a National Action Plan for Women Headed Households, which addresses some of these issues, including access to health, psycho-social support, livelihoods, and social protection. I hope that some of your discussions at this meeting might centre on what parliamentarians can do to support women-headed households.

Gender-based violence is an issue faced both by women headed households and by other women all over Sri Lanka. In truth, we don’t have many details, because this is an issue that is only recently beginning to be measured in household surveys. In order to address the issues comprehensively, we must continue to advocate for better data. What we do know is that gender-based violence prevents women to fulfilling their potential for themselves, their families, their communities and the country. The Sexual and Gender-based Violence National Action Plan will require vigilant attention from our parliamentarians.

**Finally, I want to speak about youth:** There are 4.4 million young people in this country. They are the future and it is their skills and capacities, their efforts toward social cohesion, and their civic and political participation that will carry Sri Lanka to the future. The government has invested well in its young people, and the health and education indicators show this investment clearly.

And yet, less than half of young people have correct knowledge about basic issues in sexual and reproductive health. The teenage pregnancy rate is increasing. Parliamentarians under age 35 have consistently remained below 10 per cent. Less than 2 per cent of young people are involved in any political party, and 90 per cent uninvolved in any decision making at their workplace.
Young people need accurate information and quality services, and they need support be get engaged in civic and political affairs.

We are proud to be working at sub-national level, to ensure focused, comprehensive youth policies that aim to enable young people to achieve their fullest potential. Through our Provincial-level Youth Policy Programme, we have facilitated multi-stakeholder discussions in the Northern, Eastern, Southern, and Sabaragamuwa Provinces – and we are continuing these discussions in all provinces in the island. Parliamentarians, your support will be crucial: how Sri Lanka continues to invest in its youth will determine the leadership of the future.

As parliamentarians, your support and advocacy in addressing all these issues are fundamental. We wish to work closely with you, to support you, and to partner with you to provide a better evidence base to inform not only the making of policies, but also their implementation for the benefit of all Sri Lankans.

Thank you.
Ms. Thushara Ranasinghe
Executive Director, Family Planning Association of Sri Lanka

Honourable Ministers, Honourable Members of Parliament, Executive Director – AFPPD and Officer in Charge – UNFPA and distinguished members of the audience,

I consider it an honour and pleasure to be given the opportunity to address this distinguished audience on a momentous occasion as the inception workshop of the AFPPD-SLPPD collaboration. At the outset let me explain my interest and presence in this prestigious meeting.

Firstly, AFPPD considers IPPF a strategic partner among others as Helpage and UNFPA. IPPF is the second largest INGO working in over 160 countries on Sexual and Reproductive Health and Rights and FPA Sri Lanka is the national organization affiliated to IPPF for over 61 years. AFPPD has many partnerships with IPPF and has a standing MOU to work together in areas of mutual interest.

Secondly, I wish to fondly recall the period from 2011 – 2014 when AFPPD organized a few workshops for regional Parliamentarians where FPA Sri Lanka contributed as the coordinating agency. It was one of my first tours abroad after joining FPA Sri Lanka as its ED to accompany two groups of Parliamentarians to Chiangmai and Phuket Thailand to facilitate their participation in these workshops. Needless to say, I was quite nervous and always on my toes.

At the last workshop in Thailand it was decided to set up a National Committees on Population and Development and I am very happy and grateful to note that the Ministry of Social Empowerment and welfare and the National Secretariat for Elders took the initiative to from the Sri Lanka Forum for Parliamentarians on Populations and Sustainable Development on 5 October 2016. It gives me great pleasure to note the Hon. Mr. S.B. Dissanayake has been appointed as Chair of the committee as well as a member of the Standing Committee on Active Ageing at AFPPD.

Today’s workshop provides us a great opportunity to launch the national level activities of SLPPD. Whilst it gives a platform for mutual learning and an understanding AFPPD’s Strategic Focus, it will equip our Hon. Ministers and Members of Parliament with the user-friendly advocacy tools that can be adapted to the national context. The three thematic areas as active ageing, Youth and gender equality and women’s empowerment are common issues to the region, where Sri Lanka has to make important strides and improvements. We hope the workshop will be filled with useful insights and learnings to draw up feasible national action plans to take the agendas of each area forward.

To me it looks like a lot of work, a lot to achieve. I am confident that the distinguished audience will strategically address our national issues in the context of our culture. As competent advocates our honourable members of the audience will be able influence policy forming and changing, hold the government accountable for its global and regional commitments and get suitable budgets allocated to achieve the PoA of the ICPD and also plan and reach our SDGs targets as well.

In view of the busy agenda in front of us and many brainstorming sessions, I do not wish to prolong my address. I conclude by wishing all of you an enjoyable and engaging workshop.
What is AFPPD?
The Asian Forum of Parliamentarians on Population and Development

What is AFPPD’s Strategy?
Standing Committees Strategic Priorities Framework
Results Chain Framework 2016-2019

Objectives of the Workshop & Expected Results
AFPPD’s First Three Decades & Beyond

First Decade (1981~1990)

Defined by: pioneering MPs on P&D

World Situation: Population explosion?

Asian Conference of Parliamentarians on Population and Development, Beijing
19 countries attended, incl.
Former Japanese PM Takeo Fukuda
UNFPA Executive Director Mr. R. Salas

Beijing Declaration
=> 4 AFPPD founding members:
Japan; India; China; Sri Lanka
Australia and Malaysia joined later.


Defined by: AFPPD’s geographical outreach
(Kazakhstan, Central Asia to Fiji, Pacifics)

World situation:
Disintegration of the Soviet Union => CIS

Major Conference: ICPPD, Cairo Egypt
International Conference of Parliamentarians on P&D (ICPPD) 3-4 Sept
The world’s largest international conference on P&D,
300 MPs from 107 countries.
MPs recommendations to ICPD, Cairo Egypt
179 countries attended

=> ICPD Programme of Action

Third Decade & Beyond
(2001~2015 towards 2030)

Defined by: New Faces of Networking

World situation:
Millennium Development Goals (MDGs) adopted

New Faces:
Young MPs, Indigenous MPs, Male MPs on
Elimination of Violence against Women

2015: UN 2030 Agenda and the SDGs
=> AFPPD 11th GA - AFPPD Strategic Cycle
(2016-2019)

AFPPD’s Visions and Mission

VISION 1:
Demographic changes and population issues are taken into account in planning for sustainable development

VISION 2:
Women and girls have equal rights and opportunities, and can enjoy a safe, healthy and dignified life throughout their lives

VISION 3:
All women and girls have access to sexual & reproductive health information, education and services, and can decide whether, when and how many to have children

MISSION – AFPPD aims to realize its visions through parliamentary work:
(1) Advance for and formulate/amend policies and legislation;
(2) Hold governments accountable;
(3) Advocate for budget increases and financial resources for implementation of laws and regulations

AFPPD’s Organizational & Governance Structure
The oldest regional parliamentary network in the world (since 1981)

29 National Committees
- Central Asia (3)
- West & South Asia (8)
- South East Asia (9)
- East Asia (4)
- Pacific (5)

**Total 11 Members:**
- 1 Chair (Japan)
- 5 Vice-chairs (Australia; China; India; Kazakhstan; Philippines)
- 1 Secretary-General (Thailand)
- 1 Treasurer (Cambodia)
- 3 Executive Members (Pacific; Vietnam; Iran-TBD)

**General Assembly**
- Every 2 years
- Female Representation
- 1 Country = 1 National Committee; 1 Vote

**Executive Committee**

**3 Standing Committees**
- Gender Equality and Women’s Empowerment
- Investing in Youth
- Active Ageing

- Co-chairs of SCs
  - New Zealand & Tonga
  - Nepal & Tajikistan
  - China & Japan

AFPPD Secretariat in Bangkok, Thailand

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AFPPD’s 2 Guiding Strategic Frameworks

- AFPPD Standing Committees Strategic Priorities Framework (April 2016)

- *AFPPD Strategic Plan 2016-2019* (October 2015)
  - Results Chain and Accountability Framework
1. AFPPD Standing Committees and Strategic Priorities in 2016-2019

Economic Arguments and Demographic Dividend

Women
- Elimination of Violence Against Women and Girls
- Family Planning/SRHR
- Political Participation

Youth
- Education
- Life Skills and Comprehensive Sexuality Education
- Youth Participation

Elderly
- Social Protection
- Social Welfare
- Healthy and Active Ageing
- Older Persons’ Contributions (e.g. volunteer, decent work, intern)

Safety and Security

Health

Participation

Universal Health Coverage, Health Financing, Disability

Economic Empowerment

Climate Change

Migration

Note: AFPPD has three Standing Committees working on (1) Gender Equality and Women’s Empowerment, (2) Investing in Youth, and (3) Active Ageing.

2. AFPPD’s Strategic Plan 2016-2019: Results Chain and Accountability Framework

Sustainable Development Goals 2016-2030/ICPD beyond 2014

Asia and Pacific Population Conference – Ministerial Declaration 2013-23

AFPPD Strategic Plan 2016-2019:
Enabling APPC Ministerial Declaration implementation and monitoring & Contributing to regional and global policy advocacy

Outcome 1: National Capacity Building
* National/sub-national and sectoral policies and plans are in line with the APPC MD
* Health and gender goals and targets of the SDGs are incorporated in national plans
* Increased national/sub-national budgets are allocated to enable implementation.

Outcome 2: Effective Partnerships
The ICPD regional agreement is extended and supported by other parliamentary and CSO groups and mechanisms, such as ASEAN Inter-Parliamentary Assembly, WB parliamentary network, CPA, IPU for wider support.

Outcome 3: Political Influence
AFPPD influences regional, global political development agenda and provide aligned support to its realization.

Management Output:
Good governance, clear accountability and effective communication are well institutionalized and practiced in AFPPD.
AFPPD Activity Modality:
SLPPD Inception Workshop is AFPPD’s first activity in 2017

Format, Purpose and Objectives
AFPPD-SLPPD Inception Workshop

- To provide a platform for discussing and exploring opportunities that AFPPD-SLPPD should draw on in advocating and influencing peer parliamentarians at the national, regional and global levels.

- To help deepen the understanding of the roles and responsibilities of the SLPPD as a member of the AFPPD.

- To provide the opportunity to examine and prioritize the ICPD PoA in the national and implementation of the SDGs.

- To help strengthening parliamentarians’ advocacy skills and capacities to address AFPPD’s strategic priority issues.
Expected Results:
AFPPD-SLPPD Inception Workshop

- Increased understanding by SLPPD members on the role of AFPPD, focusing on AFPPD-SLPPD synergies and opportunities.
- Increased awareness by SLPPD members on AFPPD’s strategic issues (women and girls, youth, and ageing populations) in the context of specific Sri Lankan situations.
- Identified priority issues for SLPPD to work on within AFPPD’s Strategic Framework for the period of 2017-2019 and beyond.
- Development of a cohesive set of advocacy action plans for SLPPD members to act as champion policy advocates on prioritizing ICPD issues in the national planning and implementation of the SDGs.

Thank you!
Roles of AFPPD National Committees
AFPPD-SLPPD Inception Workshop 2017

AFPPD Constitution (Article VI): Membership

I. Name
II. Definition
III. Location of the Secretariat
IV. Emblem and Seal
V. Mission, Objective and Activities
VI. Membership
VII. Organization and Structure
VIII. Finances
IX. Compensation
X. Amendments.
AFPPD Constitution (Article VI): Membership
6.4 Roles of members and associate members include:

a) To act in accordance with the **AFPPD’s mission** and **objective**;
b) To demonstrate an ability to organize and maintain basic activities to achieve the AFPPD’s mission;
c) To facilitate the selection and nomination process for sending representatives to the **General Assembly** and other AFPPD meetings;
d) To participate in and contribute to the **strategic planning and implementation** of AFPPD’s sub-regional, regional and global activities; and

e) To provide annually a **programme of activities** for the coming year and an annual report of activities undertaken in the previous year. A two-year report will also be presented to the General Assembly
6.1. Each country will have only one National Committee member in the AFPPD.

6.2. Admission of new members: National Committees of parliamentarians working on population and development issues shall seek membership in the AFPPD by written application supported by the office bearers of the committee seeking membership. The written application will be submitted to the Secretary General. The Secretary General shall refer the application with his/her comments thereon, if any, to the Executive Committee of the AFPPD. Membership shall be granted on approval by a majority of the Executive Committee, expressed either in writing or at the following meeting of the Executive Committee. Admission of the new member will then be confirmed at the next General Assembly.

6.3. Associate members – individual parliamentarians.

Sri Lanka – one of the four original founders of AFPPD. SLPPD was established in October 2016.

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ANNEX 1: AFPPD Constitution (Article VI): Membership

On Resignation and Termination

6.5. Resignation: Members and associate members may resign by writing to the Executive Committee at least three months before the next General Assembly. Reasons for resignation must be provided. Any funding of activities considered as AFPPD activities will end on the termination of a membership. Any funds owed to the AFPPD, or other obligations, must be honoured in full before submitting a resignation.

6.6. Termination: A membership may be terminated for grave non-adherence to the mission and objective of the AFPPD and/or for not attending the General Assembly and other AFPPD meetings for a period of four years. The Executive Committee has the right to decide on termination of membership. The member in question will be notified in writing at least three months in advance of the Executive Committee discussion on the matter in order to allow for adequate time to prepare. A terminated member may also appeal to the General Assembly against a final decision.

6.7. The terminated member may reapply for membership upon confirmation that the original conditions for termination have been resolved and the potential member meets the conditions of admission.
<table>
<thead>
<tr>
<th>ANNEX 3: Rationale for AFPPD Constitutional Amendments in 2015</th>
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<tbody>
<tr>
<td><strong>NEW ARTICLE</strong></td>
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<tr>
<td>NAME</td>
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<td>DEFINITION</td>
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<td>LOCATION OF THE SECRETARIAT</td>
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<td>MISSION, OBJECTIVE, AND ACTIVITIES</td>
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<tr>
<td>MEMBERSHIP</td>
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<td>FINANCES</td>
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<tr>
<td>COMPENSATION</td>
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<td>AMENDMENTS</td>
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Why do AFPPD and SLPPD matter in achieving the Sustainable Development Goals (SDGs), and especially mainstreaming the International Conference on Population and Development Programme of Action (ICPD PoA)?
AFPPD - Empowering parliamentarians to advance ICPD PoA, MDGs and SDGs

**AFPPD Established in 1981 - ICPD PoA 1994 ~ Human Rights & Individual Dignity**

* Advancing the International Conference on Population and Development Programme of Action (ICPD PoA), Cairo.
* International consensus on Family Planning and Reproductive Health and Rights
* Paradigm shift from the macro-demographic approach to human rights approach.

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<tr>
<th>MDGs 2000 – 2015</th>
<th>SDGs 2016 - 2030</th>
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</table>
| * Developed a platform for advocacy among Asia-Pacific parliamentarians:  
  Goal 1: Eradicate poverty  
  Goal 2: Universal Primary Education  
  Goal 3: Gender equality and women’s empowerment  
  Goal 4: Reduce IMR  
  Goal 5: Reduce MMR  
  Goal 6: Combat HIV/AIDS  
  Goal 7: Ensure environmental sustainability  
  Goal 8: Global partnership for development | * Empowering MPs to achieve SDGs  
SDGs = Born out of criticisms towards MDGs  
- Top-down => Participatory  
- Inattention to Human Rights => HR oriented  
- Focus on national averages => disparities  
- Concentration on LDCs => all countries  
- Lack of means of implementation => means and implementation stated  
17 Goals & 169 Indicators  
Leaving no one behind |

**Why parliamentarians in the SDGs era?**

*Transforming our World: the 2030 Agenda for Sustainable Development Declaration* (para 45) states....

“We acknowledge the essential role of national parliaments through their enactment of legislation and adoption of budgets and their role in ensuring accountability for the effective implementation of our commitments.”

- The SDGs Implementation requires stronger parliamentarians commitment than ever.
- Top-down approach needed in implementation of the SDGs.
- Parliamentarians as catalysts of change through AFPPD activities at national, regional and global levels.
Achieve gender equality and empower all women and girls

<table>
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<tr>
<th>5.1</th>
<th>End discrimination against women and girls</th>
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<tr>
<td>5.2</td>
<td>Eliminate violence against women and girls</td>
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<tr>
<td>5.3</td>
<td>Eliminate all harmful practices (early/forced marriage and FGM)</td>
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<td>5.4</td>
<td>Recognize unpaid care and domestic work</td>
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<td>5.5</td>
<td>Ensure women’s effective participation and equal opportunities for leadership</td>
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<tr>
<td>5.6</td>
<td>Ensure universal access to sexual and reproductive health and reproductive rights</td>
</tr>
<tr>
<td>5.a</td>
<td>Undertake reforms for women’s equal rights</td>
</tr>
<tr>
<td>5.b</td>
<td>Enhance use of technology to promote women’s empowerment</td>
</tr>
<tr>
<td>5.c</td>
<td>Strengthen policies &amp; legislation for women &amp; girls’ empowerment</td>
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National Level Implementation & the Role of Parliamentarians

3. Ensure healthy lives and promote well-being for all at all ages (2030)

| 3.1 | Reduce maternal mortality…. |
| 3.2 | End preventable under-5 mortality… |
| 3.3 | End the AIDS epidemic…… |
| 3.4 | Reduce NCDs mortality…. |
| 3.5 | Strengthen prevention of substance & alcohol abuse…. |
| 3.6 | Reduce deaths and injuries from traffic and road accidents (by 2020) |
| 3.7 | Universal access to SRH services including FP, information & education…. |
| 3.8 | Achieve universal health coverage…. |
| 3.9 | End hazardous chemicals and pollution related illness/death |
Top-down approach and MPs’ roles are imperative in the SDGs Implementation: SDGs: Goal 3 Implementation through life-cycle approach

<table>
<thead>
<tr>
<th>Birth</th>
<th>Infancy</th>
<th>Childhood</th>
<th>Youth</th>
<th>Adulthood</th>
<th>Older age</th>
</tr>
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<tbody>
<tr>
<td><em>Skilled Birth attendants</em></td>
<td><em>Infant Mortality rate</em></td>
<td><em>U5 Mortality</em></td>
<td><em>Education</em>+ (<em>incl. CSE)</em></td>
<td><em>Education/literacy</em>+</td>
<td><em>Continuing education</em>+</td>
</tr>
<tr>
<td>Maternal mortality</td>
<td><em>Morbidity rates</em></td>
<td><em>Malaria prophylaxis</em></td>
<td><em>Employment (occupational injuries)</em></td>
<td>Employment (occupational injuries*)</td>
<td><em>NCDs</em>+</td>
</tr>
<tr>
<td><em>Emergency obstetric care</em></td>
<td><em>Immunities conferred + (including PMTCT)</em></td>
<td><em>Early childhood education</em>+</td>
<td><em>NCD risks initiated</em>+</td>
<td><em>STI risks+ (incl. HIV/AIDS)</em></td>
<td><em>Dementia incidence</em></td>
</tr>
<tr>
<td><em>Premature births</em></td>
<td><em>Neonatal mortality rate</em>+</td>
<td><em>Orphan status</em></td>
<td>Adolescent fertility</td>
<td>Other morbidities and mortality</td>
<td><em>Abuse and non-support</em></td>
</tr>
<tr>
<td><em>C-sections</em></td>
<td><em>Immunization (later)</em>+</td>
<td><em>GBV</em>+</td>
<td><em>Early marriage</em>+</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td><em>GBV</em>+</td>
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* Those with asterisk were not included in the MDGs.
+ Those with plus have been included in some manner or discussed in the official SDG process.


For instance.....Means of Implementation of Goal 3

3.a Strengthen implementation of the Framework Convention on Tobacco Control

3.b Support R&D of vaccines and medicines for CDs and NCDs
   ◦ access to affordable essential medicines and vaccines
   ◦ access to medicines for all

3.c Increase substantially health financing and the recruitment, development and training and retention of the health workforce

3.d Strengthen the capacity of all countries for early warning, risk reduction, and management of national and global health risks
**Why AFPPD and its member National Committees matter?**  
*Catalysts of change through AFPPD activities at all three levels...*

<table>
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<tr>
<th><strong>GLOBAL:</strong></th>
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<tr>
<td>AFPPD MPs are in the position to mainstream the 2030 agenda globally... (i.e., G7 GCPPD Ise-Shima Summit)</td>
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<th><strong>REGIONAL:</strong></th>
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<tr>
<td>Regional forums to address common agenda such as gender equality and women's empowerment (i.e., 11th Women Ministers and Parliamentarians Conference) and active ageing (Standing Committee Meeting on Active Ageing)</td>
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<th><strong>NATIONAL:</strong></th>
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<tr>
<td>AFPPD National Committees spearheading multi-stakeholders’ forums (i.e., SLPPD Inception Workshop; Kyrgyzstan Workshop)</td>
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**Global Conference of Parliamentarians on Population and Development**  
*Toward the 2016 G7 Ise-Shima Summit 26-27 April 2016, Tokyo, Japan*

**GCPPD Declaration and Recommendations to the G7 Ise-Shima Summit**

**G7 Leaders’ Declaration; G7 Ise-Shima Vision for Global Health**

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Source: GCPPD Declaration & Recommendations to the G7 Ise-Shima Summit:  [http://www.afppd.org/events/event-docs/1d%c3%b4c-global-conference-of-parliamentarians-on-population-and-development-2016-doc.pdf](http://www.afppd.org/events/event-docs/1d%c3%b4c-global-conference-of-parliamentarians-on-population-and-development-2016-doc.pdf)  
AFPPD. GCPPD Conference Report (2016). [http://www.afppd.org/events/event-docs/2g%c2%a0gcppd-final-report-2nd-ed-6-june-2016-map-report.pdf](http://www.afppd.org/events/event-docs/2g%c2%a0gcppd-final-report-2nd-ed-6-june-2016-map-report.pdf)  
Standing Committee Meeting On Active Ageing
Hanoi, Vietnam, September 8, 2016

Strategic Advice and Action Plans to the AFPPD Executive Committee

AFPPD-NCKPD Parliamentarian Workshop:
“Legislating for the Full Achievement of the SDGs/ ICPD Goals and Targets”
Issyk-Kul, Kyrgyzstan, September 2 – 3, 2016

Multi-stakeholders participation; National Action Plan for Advocacy
www.afppd.org

Upcoming Events & Resources

Meeting the Population Challenge in Asia (1981-2011)
Briefing Cards for Parliamentarians (2016)
Fact Sheet Draft (2016)
WHY PARLIAMENTARIANS NEED TO ADVOCATE ON POPULATION AND DEVELOPMENT ISSUES:

THEIR ROLE IN ACCELERATING THE ACHIEVEMENT OF THE SUSTAINABLE DEVELOPMENT GOALS (SDGS)

JAYAN ABEWICKRAMA
PROGRAMME ANALYST
UNITED NATIONS POPULATION FUND

WHY PARLIAMENTARIANS NEED TO ADVOCATE ON POPULATION AND DEVELOPMENT ISSUES:

UN Former Secretary General....

“Parliamentarians can play a central role in rethinking the way policies are produced and carried out. You can help to orient national programmes towards sustainable development goals. You can bring the views and aspirations of your citizens into the global arena. Through official development assistance and domestic resources, you can ensure that sustainable development efforts receive the financing they need....”
Dr. Babatunde Osotimehin, Executive Director, UNFPA

“Parliamentarians are, of course, our essential partners. Without your leadership, passion and commitment we would not be able to move forward in implementing the global promises of the ICPD and 2030 agendas. Your continued collaboration and support will be crucial as we begin working to implement the new global goals....

The 2030 Agenda underlines “the essential role of national parliaments” through enacting legislation, adopting budgets and ensuring accountability...”

H.E. The President....

“Inclusive growth is a challenge, not only for Sri Lanka, but for the whole world. First and foremost, I would stress the fact that in the interconnected world we live in today, no country alone can think of promoting inclusive growth unless the whole world comes together for the purpose. The sustainable development goals for 2030, set by the UN, will guide Sri Lanka. We take them seriously and we are committed to achieving them. Sri Lanka’s policy framework is in the process of being revitalised to reflect the inspiration gained from the sustainable development targets...”
Hon. Prime Minister...

“Sri Lanka has embraced the 17 Sustainable Development Goals, as central to its national development strategy...”

ICPD, 1994, Cairo...

- The 1994 International Conference on Population and Development (ICPD) articulated a bold new vision about the relationships between population, development and individual well-being. At the ICPD in Cairo, 179 countries adopted a forward-looking, 20-year Programme of Action (PoA) that continues to serve as a comprehensive guide to people-centred development progress.
- ICPD articulated the need to meet the needs of individuals within the framework of universally recognized human rights standards instead of merely meeting demographic goals.
- The adoption of this Programme of Action marks a new phase of commitment and determination to effectively integrate population issues into socioeconomic development proposals and to achieve a better quality of life for all individuals, including those of future generations.
- It promoted the integration of population factors in sustainable development initiatives.
### ICPD – Key areas of the PoA

- Interrelationships Between Population, Sustained Economic Growth and Sustainable Development
- Gender Equality, Equity and Empowerment Of Women
- The Family, Its Roles, Rights, Composition and Structure
- Population Growth and Structure

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### ICPD – Key areas of the PoA

- Reproductive Rights and Reproductive Health
- Health, Morbidity and Mortality
- Population Distribution, Urbanization and Internal Migration
- International Migration
- Population, Development and Education
ICPD – Key areas of the PoA..

- Technology, Research and Development
- National Action
- International Cooperation
- Partnership with the Non-Governmental Sector
- Follow-Up to the Conference

Sustainable Development Goals
Why support P&D - SDGs

Parliamentarians are law makers

- National parliaments of the UN member states have the power to **make legislations** and approve international agreements
- The parliaments should **use this ability** to facilitate the implementation of the SDGs and advancement of issues are population and development as they **aspiration** and **rights** of citizens
- Parliamentarians **must review legislation** proposed by their government to ensure that it reflects **human rights principles** and **contributes to achieving the national SDG plan/SDG globally**
- These policies are important to give clear vision to the country on its priorities and the way forward

Why support P&D - SDGs

Parliamentary Oversight

- Parliament is the **observation of the government's work** and achievements. During question time, when the MPs can put **questions to the government**, individual ministers and prime-minister regarding **their strategies and achievements**. It is also a prime opportunity to **solicit facts and statistics**
  
  Ex: Still it is impossible to calculate the government expenditure Family Planning

- MPs can **track the progress of SDG indicators** and the **investments** made through the oversight process/roll
Why support P&D - SDGs

Committee hearings

MMR in 2015 – 33.7 per 100,000 live births (FHB data)

- **Take action** - SDGs should be tackled at committee level. The sectoral focus of committees allows MPs to invite expertise on a particular subject, and request specific information and feedback. Most parliaments will opt to address the different SDGs in the relevant committee.

- Committees should also be able to call public hearings to gather citizens’ views on SDG planning/implementation.

### Figure 3.9: Maternal deaths due to pregnancy, childbirth and puerperium, 2000-2006

#### Why support P&D - SDGs

**Debate – on emerging issues**

Population aged 60 years or over by region, 1980-2050
Why support P&D - SDGs

Financial Concerns and the Budget

- Successfully implementing the SDGs means **maximizing** all available **domestic resources** to achieve the **best possible results**
- During the budget approval process, parliaments must engage on how **government funds** are being allocated to their **nationally defined** SDGs, including whether sufficient funds are **reaching the most vulnerable and excluded**

Why support P&D - SDGs

Civil Society & the Private Sector

- **Civil society organizations** also represent the concerns and interest of the people.
- Inviting civil society organizations, the private sector and investors is an important step in implementing the SDGs. This cooperation is also necessary for **financing sustainable development**.
- **Recognition** of civil society & private sector by parliamentarian/s it self will be an intensive for them to engage, involve, coordinate and finance
Why support P&D - SDGs

Cooperation with Executive Power

- Integrating the SDGs agenda in established national strategies requires cooperation between the legislative and executive powers
- Parliamentarian have access to the President, so they should always advocate for the implementation of P&D – SDGs & inform President about the public perceptions on development process

Some policy gaps/suggestions...

- Population and Reproductive Health Policy 1998
  Do we need another one...?
- Costed action plan for National Family Planning Programme
- National GBV referral system
- Revisit the National Policy on Senior Citizens in Sri Lanka – 2006
- Implementation of the Youth Health Policy – 2015
  (yet to be launched)
Thank you....
OVERVIEW OF THE NATIONAL POLICY OF SENIOR CITIZENS IN SRI LANKA

By
Mahinda Seneviratna
Secretary to Ministry of Social Empowerment & Welfare

CONTENT

1. Issue of Aging Population due to Demographic Transition & Challenges faced

2. Economic Implications of Demographic Transition

3. Key Challenges to Face with

4. Preparing for the Shift & Mitigating Social Costs of it

5. Role of MOSEW & its other Public Entities in Addressing the Issue
6. Protection of the rights of Act No.09 of 2000

7. Policy on Elders

8. Elder’s Social Security Fund

9. The Way forward

(1) Issue of Aging Population (Sri Lankan Context)

As per Prof. Indralal De Silva, World Bank, Sri Lanka report - 2013,

- Current total population of Sri Lanka is 21 mn

**Key Message**

Sri Lanka is experiencing a demographic transition, with a steadily aging population, which will peak by 2041.

Aging population:

- by now - 12.5%
- by 2021 - 16.7%
- by 2041 - 25%

Making Sri Lankans the oldest population in South Asia!!!

Facing the Challenges with limited Resources!
Fast Growth of Elder Population in Sri Lanka - 1946 - 2041

Sri Lanka Population Pyramid
Age and sex distribution
In 2014
ELDER POPULATION IN SRI LANKA
Coverage of Elderly Benefits

Elders;

- Drawing monthly allowance  – 386,080
- In waiting list to get m/ allowance  – 114,000
- Retired (Public servants)  – 400,000
- EPF recipients  – 350,000
- Rich  – 1,300,000

Total 2,500,000

Issue of Aging Population
(Sri Lankan Context contd...)

- With in next decade, demographic transition towards rapidly growing population – By 2031, population, 21.9 m.

- 67% of Sri Lanka’s population is of working age at present

- Until 2017, it is larger than dependent population

- Sri Lankans would be the oldest population in South Asia

- Highest percentage of elderly persons are living in Kegalle District
Proportion of population growth, Sri Lanka

Issue of Aging Population (Global Context)

- World too faces a similar situation.
- By 2027, there will be 1 b. older people worldwide.
- By 2050, 1 in 5 in developing countries, will be over 60.
What have influenced Sri Lanka’s Demographic Cycle?

- Remarkable achievements in Social Development in Sri Lanka recording higher indices?

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<thead>
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<th>S. No.</th>
<th>Index</th>
<th>Value ‘95</th>
<th>Value ‘13</th>
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<td>Life expectancy (Years)</td>
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<td>Literacy Rate (%)</td>
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<td>03</td>
<td>GDP Per Capita (p.m. Rs.)</td>
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<tr>
<td>04</td>
<td>Fertility Rate (%)</td>
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<td>05</td>
<td>Inflation Rate (%)</td>
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<td>06</td>
<td>HDI</td>
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</table>

Census & Statistics – 2012/13

(2) Economic Implications of Demographic Transition

Focusing on;

1. Employment & Productivity Related Issues

2. Performance of Cash Transfer Programs to assist Poor & Vulnerable Groups
(3) Key Challenges to Face with...

- Impediments to take full advantage of Demographic bonus enjoyed currently
  (i.e. bonus of 67% of working age population)
- Policy challenges
  1. Large informal sector
  2. High unemployment
     (4.2% in 2011 increased to 4.8% in 2015)
  3. Low levels of female employment
     (Labor force participation by female – by 2012 – 32.9% only where male – 75%)

Key Challenges to Faced with Contd..

- Significant Social Protection Challenges for Vulnerable Groups – (6.7% - below poverty line)
  (i.e. Low income families supporting elderly)

- Increased;
  * Women headed families
  * Families with disabled persons (1.8 m.)

- Relatively low resource allocation for Safety Net Programs
  * 2004 - 2.2% from GDP
  * 2009 - 0.3% from GDP
Preparing for the shifting & mitigating social costs of this demographic transition

POLICY RECOMMENDATIONS BY WORLD BANK;

- Help strengthen Safety Net for Vulnerable Groups
  (Pension cover only for 10-15% of the elderly that were employed in the Formal Sector, presently)
- Increase labor market competitiveness
- Broad-based social protection policy should be complemented by extending
  Pensions, social insurance & Credit to;
  Larger proportion of workers employed in the informal sector
- Improving existing safety net programs to improve targeting & adequacy of transfers to ensure they reach poor & vulnerable groups

Preparing for the shifting & mitigating social costs of this demographic transition Contd..

- Labor market reforms need to strike a balance between;
  Protecting the rights of workers with
  Potential overregulation of jobs
- Private sector participation in skills training can ensure relevancy of such programs to meet needs of expanding services sector
- Female labor force market be improved
- Vocational skills & internship programs can also be tailored to needs of working women
Efforts by Government to redress the Issue

• OBJECTIVES of Government’s Economic Policy Framework 2017 -2020

1) Generating 1 m job opportunities
2) Enhancing opportunities to increase income levels
3) Developing rural economies and create more opportunities through SME sector
4) Ensuring land ownership
5) Creating a strong middle class AND

MANY MORE…..

Addressing the Problem of Aging Population

• Crucial;
  Welfare of Elderly, Retirement Benefits
• 15% receives pension benefits
• 26% receives EPF
• 41% receives some benefit or other
• 18% receives no retirement benefits & tend to rely on welfare of their;
  Children, Relatives & Friends
(5) Role of **MOSEW** to ease the Problems

- Strengthening;
  - Retirement Benefits
  - Welfare Benefits & Safety net benefits
  - Insurance Benefits
- Implementing livelihood development programs
- Provision of Micro-credit facilities to needy families

**Contributory Pension scheme by Social Security Board of Sri Lanka**

**Objective**

- Life time Pension, Social Security & many other Benefits for each of the elders above 60 years
- Present membership – 533,514
- Existing Fund – Rs. 1,818 million
- Plan to enroll – 60,000 elders for 2017
Programs Implemented by Samurdhi Development Department

Annual Expenditure on MAIN Programs;
- Spent more than Rs. 1,500 m. for Livelihood Development Program
- Provide around Rs. 8,000 – 10,000 m. Micro-credit facilities to Poor & Low Income families at concessionary interest
- Spent around Rs. 900 m. as Social Security Benefits to Poor
  (At incidences of birth, scholarships for children, wedding, sickness, death)
- Spent around Rs. 44 b. as Subsistence Grant to Poor
- Spent Rs. 800 m. to provide 4,000 houses to Poor
  
  MANY MORE TO INTRODUCE ..... 

(6) Protection of the Rights of Elders

- By the Act No 9 of 2000 – 

  For the Protection of the Rights of Elders
PRIMARY OBJECTIVES OF THE ACT

- Establishment of National Council for Elders (NCE)

- Promotion & Protection of:

  The welfare of elders
  the rights of elders
  provide for matters connected therewith
  or incidental thereto

National Council for Elders (NCE)

In terms of the Protection of the Rights of Elders Act No. 09 of 2000, the National Council for Elders has been established for the promotion and Protection of the Welfare and the Rights of Elders.
PRINCIPAL FUNCTION OF NCE
(As per Section 12)

- Promotion & protection of welfare & rights of elders
- To assist elders to live with;
  
  Self respect
  independence
  dignity

CONSTITUTION OF NCE
(As per Section 3)

<table>
<thead>
<tr>
<th>Secretary to the Ministry of Social Services (MSS) / MSEW</th>
<th>Chairman</th>
</tr>
</thead>
<tbody>
<tr>
<td>Director of DSS</td>
<td>Secretary</td>
</tr>
<tr>
<td>3 Members appointed by President to represent elders</td>
<td>Members</td>
</tr>
<tr>
<td>5 Members appointed by President to represent voluntary organizations</td>
<td>Members</td>
</tr>
<tr>
<td>5 Members appointed by President from among professionals, members of corporate bodies &amp; public officers</td>
<td>Members</td>
</tr>
</tbody>
</table>
ESTABLISHMENT OF NATIONAL SECRETARIAT FOR ELDERS (NSE) (As per Section 10)

- Established a NATIONAL SECRETARIAT to assist NATIONAL COUNCIL FOR ELDERS (NCE) in discharge of its functions
OTHER FUNCTIONS OF NCE
(As per Section 13)

(a) To advise Govt. on promotion of welfare & rights of elders
(b) To recommend programs to Govt. & other corporate bodies to strengthen traditional values
(c) To take all such measures as are necessary, to promote & protect welfare & rights of elders
(d) To organize lectures, seminars, workshops & other programs to inculcate, in younger generation, their duties to elders

OTHER FUNCTIONS OF NCE contd...
(As per Section 13)

(e) To ensure adoption of & compliance with, relevant international declarations & conventions relating to elders, by Govt. of SL.
(f) To maintain accurate & up to date statistics relating to elders
(g) To promote studies & research to identify principal causes of problems of elders & their needs & aspirations & to promote effective measures for alleviation & elimination of such causes & for satisfaction of such needs & aspirations
OTHER FUNCTIONS OF NCE contd...
(As per Section 13)

(h) To provide due publicity to findings of studies & research to make public aware of problems, needs & aspirations of elders

(i) To encourage establishment of welfare centers, recreation centers, day care centers & other appropriate institutions with accommodation for destitute elders & to provide necessary facilities to such centers & institutions

(j) To monitor & coordinate programs & schemes initiated & implemented by Govt. voluntary organizations & bodies of persons for upliftment of elders

(k) To introduce & implement a health insurance benefit scheme for elders

(l) To provide information in respect of services available for elders

(m) To maintain a directory of paid & unpaid job opportunities available to elders, for reference elders & to assist elders wherever possible to be gainfully employed
OTHER FUNCTIONS OF NCE contd...
(As per section 13)

(n) To maintain a directory of elders according to their talents & expertise for reference of public
   To facilitate elders to obtain necessary legal advice & assist elders to seek redress

(o) To introduce various programs to prepare younger generation to confront old age with confidence & courage &
   To initiate appropriate Social Security Schemes & encourage younger generation to subscribe to such schemes

POWERS OF NCE
(As per Section 14)

(a) To acquire, held, take or give on lease or hire, mortgage, pledge or sell or otherwise dispose of, any movable or immovable property

(b) To construct buildings on any land conveyed to, or acquired by council

(c) To enter into & perform directly or through any officer or agent authorized in that behalf, all such contracts as may be necessary for discharge of functions & exercise of powers of council
POWERS OF NCE contd...
(As per Section 14)

(d) To open & maintain current, savings or deposit accounts in any bank/banks

(e) To borrow such sums of money as may be necessary for the purpose of discharging functions of council

(f) To accept & receive, grants, donations & bequests both movable & immovable, from sources in Sri Lanka & abroad & apply them for discharge of its functions

(g) To make rules in respect of management of the affairs of council

(h) Generally, to do all such other acts & things as are necessary to facilitate the proper discharge of the functions of the council
PROVISION FOR THE PROTECTION OF RIGHTS OF ELDERS

(1) Children shall not neglect their parents willfully & it shall be the duty & responsibility of children to provide care for, & to look into the needs of their parents

(2) The estate shall provide appropriate residential facilities to destitute elders who are without children or are abandoned by their children

(3) No elder shall, on account of his age, be subject to any liability, restriction with regard to access to, or use of, any building or place or institution which any other person has access to or is entitled to use, whether on payment of any fee or not

FUND OF THE NSE
(As per Section 19)

Paid in to the Fund;

(a) All such sums of money as may be voted from time to time by Parliament;

(b) All such sums of money as may be received by council by way of donations, or bequests, aid or grants from any source whatsoever, whether in Sri Lanka or abroad;

(c) All such sums of money as may be received by council by way of proceeds from the sale of any movable or immovable property of council
FUND OF THE NSE contd...
(As per Section 19)

Paid out of the Fund;

(a) All such sums of money as are required to defray any expenditure incurred by council, in the exercise, performance & discharge of its powers, duties & functions under this Act;

(b) All such sums of money as are authorized by council to make any exgratia payment to any individual or organization in recognition of any exceptional or outstanding contribution made by such individual or organization towards the upliftment or improvement of the status of elders;

Paid out of the Fund contd...;

(c) All such sums of money as are required to be paid out of such fund, by or under this Act.
Board for determination of claims for maintenance by elders (Section 24 - 25)

- An elders who has a child or Children and who is unable to maintain himself may applied to the board for an order that One or more of his Children pay him a monthly allowance or any other Periodical payment or a lumsum for his maintenance.

POWER OF NSE TO MAKE RULES (As per Section 35)

(1) Council may take such rules as it may consider necessary in relation to any matter affecting or connected with, or incidental to, the exercise, discharge & performance of its powers, functions & duties

(2) Every rule made by council shall be approved by Minister & notification of such approval shall e published in the Gazette
POWERS OF NSE TO INSPECT & SEARCH
(As per Section 36)

(a) Enter & inspect premises of any approved person or any voluntary organization engaged in providing services or assistance to elders

(b) Enter & inspect any premises on which he has reasonable grounds to believe that a person or voluntary organization not registered under this Act is providing services or assistance to elders

POWERS OF NSE TO INSPECT & SEARCH contd...
(As per Section 36)

c) Examine any book, register or record & maintained by such person or organization & make extracts or copies therefrom

c) Interrogate any person in any such premises, for the purpose of ascertaining whether the

c) Provisions of this Act are being complied with me.
The National Policy was based on the recommendations of the 2\textsuperscript{nd} World assembly on Aging held in Madrid.

The National Charter and National Policy for Elders has been adopted by the Cabinet of Ministers in the Year of 2006.

The policy mainly focuses on:
- Health
- Social Welfare
- Economic support

The existing Policy on Elders – 2006 is being revised adapting the current context.

Services to Elders through NSE

- Services through Maintenance Board
- Providing Assistive Devices (Eye lenses, Hearing Aids & Wheel Chairs)
- Establishment Village, District, Divisional and Provincial Level Committees and Provision of Financial Assistance.
- Support to Elders Home
- Establishment of day Centers
- Issuing of Identity cards
- Support for Income Generation Activities
- Conducting of Pre Retirement Programmes
- Conducting Counselling Programmes for Elders
- Provide monthly allowance to elder over 70 yrs
Monthly allowance BY NSE

- Payment of monthly allowance to elders;

  Rs. 2,000/- @ 386,080 = Rs. 772.16 m

- Annual payment

  Rs. 772.16 m x 12 months = Rs. 9,265.92 m

(8) ELDERS’ SOCIAL SECURITY FUND (ESSF)

- Proposal to the Cabinet on 22.04.2016;

  To deduct Rs. 100/- from Rs. 2,000/- monthly allowance paid to each of the elders aged more than 70 yr.

  Value of monthly collection = Rs. 38 m. p.m.

- Approval by the Cabinet decision on 30.08.201
  Cabinet Paper No: 16/0719/711/010
(9) The WAY FORWARD

FUTURE PLANS OF NSE

1. WELFARE FOR ELDERS

2. EMPOWERING ELDERS

3. CONDUCTING RESAERCHES & FORMULATION OF POLICIES

4. DEVELOPMENT

FUTURE PLANS OF NCE contd...

1. WELFARE FOR ELDERS

* Provision of aids for elderly day care centers
* Provision of cash for urgent operations
* Provision of cash to get medical treatments for diseases such as; cancer & kidney diseases
* Introducing health insurance scheme
  (As per Section 13 (k) of Act)
* Provision of aids for self-employments
2. EMPOWERING ELDERS

* Programme for Consulting for the elders

* Provision of grants/loans to empower elders’ committees

* Developing elders mentally & spiritually

* Educating & helping elders engage in small ventures

3. CONDUCTING RESEARCH & FORMULATION OF POLICIES

To make elders active partners of national development
FUTURE PLANS OF NSE contd...

4. DEVELOPMENT

* To build elderly homes & conducting them (308 – elderly homes run by private parties)

* To facilitate selling of products manufactured by elders

* To help empower elderly homes

---

ACTION PLAN OF NSE - 2017

<table>
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<tr>
<th>S/No</th>
<th>Proposed Activity</th>
<th>Allocation (Rs. m.)</th>
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<tbody>
<tr>
<td>1</td>
<td>Strengthening Elders’ Committees</td>
<td>1.500</td>
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<tr>
<td>2</td>
<td>Issuing of ID Cards</td>
<td>0.551</td>
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<tr>
<td>3</td>
<td>Publications</td>
<td>3.000</td>
</tr>
<tr>
<td>4</td>
<td>Training, Research &amp; Awareness Programs</td>
<td>8.575</td>
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<tr>
<td>5</td>
<td>Medical clinics, issuing eye-lenses, &amp; assistive devices</td>
<td>10.000</td>
</tr>
<tr>
<td>6</td>
<td>Commemorating International Elders’ Day</td>
<td>16.000</td>
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<tr>
<td>7</td>
<td>Assisting homes for aged</td>
<td>2.400</td>
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<tr>
<td>8</td>
<td>Building &amp; structure</td>
<td>2.000</td>
</tr>
<tr>
<td>9</td>
<td>Furniture &amp; office equipment</td>
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<tr>
<td>10</td>
<td>Office equipment</td>
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<tr>
<td>11</td>
<td>Training &amp; capacity building</td>
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<td>12</td>
<td>Other recurrent</td>
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Total: 70,000
**ACTION PLAN OF ESSF - 2017**

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<tr>
<td>1</td>
<td>Building &amp; developing homes for elders &amp;</td>
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<td>2</td>
<td>Conducting &amp; maintaining homes for elders</td>
<td>100.00</td>
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<td>3</td>
<td>Grants for Day Care Centers for Elders</td>
<td>20.00</td>
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<tr>
<td>4</td>
<td>Grants for empowering rural elderly committees</td>
<td>20.00</td>
</tr>
<tr>
<td>5</td>
<td>Provision assistance for diseases &amp; operations</td>
<td>90.00</td>
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<tr>
<td>6</td>
<td>Assistance for self-employment projects &amp; facilitating for sales</td>
<td>16.00</td>
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<td>7</td>
<td>Arranging trips for elders</td>
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<td>8</td>
<td>Making elders active partners of national development</td>
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<tr>
<td>9</td>
<td>Allowances for employees at homes for elders</td>
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<td></td>
<td><strong>Total</strong></td>
<td><strong>685.00</strong></td>
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Issues of aging population can be mitigated through traditional and cultural norms and values of Sri Lanka with adapting global best practices.
THANK YOU
Features, Challenges and Opportunities of Population Ageing: Sri Lankan Perspective

Professor Lakshman Dissanayake
Vice Chancellor
University of Colombo

Features
Size and Growth of the Older Persons (60+ years of age)

Number and percentage of population 60 years and over, 2012 to 2037, Standard Projection

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<tr>
<th>Year</th>
<th>Number</th>
<th>Percentage</th>
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<tr>
<td>2012</td>
<td>2,520,573</td>
<td>12.4</td>
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<tr>
<td>2017</td>
<td>3,130,740</td>
<td>14.6</td>
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<tr>
<td>2022</td>
<td>3,766,743</td>
<td>17.0</td>
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<tr>
<td>2027</td>
<td>4,320,258</td>
<td>19.0</td>
</tr>
<tr>
<td>2032</td>
<td>4,775,618</td>
<td>20.8</td>
</tr>
<tr>
<td>2037</td>
<td>5,118,094</td>
<td>22.1</td>
</tr>
</tbody>
</table>

Source: Dissanayake, 2016

Relative change in the proportion of children (less than 15 years) and older persons (60+ years), 2012 to 2037, Standard Projection

Source: Dissanayake, 2016
Challenges

Rapid Population Ageing

Proportion of Population 65 years and over, 1970-2050, Sri Lanka
Older-Age Dependency Burden

Potential support ratio, 2001-2051, Sri Lanka
Population Ageing Lowers Economic Growth

Average annual growth rates of population 65+, 70+ and 80+ years of age, 2001-2051

Changes in Life Expectancy by Sex, 1921 to 2026
Increase in Non-communicable Diseases

Percentage of Life years Lost Due to Communicable and Non-Communicable Diseases, 2000 & 2012, Sri Lanka

Life Years Lost due to Non-communicable Diseases (%)
Life Years Lost due to Communicable Diseases (%)

Year
2000
2012

Life expectancy after 60:
Adding years to life or life to years?

Argentina
Sri Lanka

-3.5
-3.8
Living Arrangements and Feminization of Poverty among Older Women

- The size of the elderly population living alone is of policy concern.
- Those living alone are more likely to require external assistance in the case of illness or disability, are at greater risk of social isolation.
- Elderly women have a greater chance of exhausting their resources of income.
- Elderly women will be more impoverished in their advanced ages.
- The incidence of poverty among the very old seems to be large, and it affects more old women than men.

Declining Family Support

- Family as the key institution of social organization in any society is defined by exchanges of mutual support between its members.
  - Family and the local community for support
  - Younger generations’ increased involvement in economic and social activities outside the home
  - Women working outside the home
  - Increased international labour migration
- Changing size of families,
- Changing roles of traditional extended families
  - Perceptions of intergenerational support and caring for older persons
  - Intergenerational exchanges between elderly parents and adult children and found that transfers between the generations are greatest where there is co-residence.
- Overall the changes in the family role and functioning have led to a reduction in the well-being of Sri Lankan older people.
Opportunities

Second Demographic Dividend

- Transformation in population age structure also creates a second demographic dividend that depends on how the accumulation of wealth is related to population ageing.
- Sri Lanka is likely to commence its second demographic dividend from 2037 since the country also would have achieved its later part of the low stationary fertility status by that time.
- However, it is important to note that the relationship between the demographic dividends and income growth is very much policy dependent.
- The second dividend comes into operation in part because prime age adults save more to provide for their retirement.
- As people’s wealth increases, it is reasonable to hypothesize that they are more likely to invest in the health and education of each of their children.
- With fewer children to care for, it is possible for parents to invest more resources in each child.
- Economists claim that the prospects of a longer life and an extended period of retirement, act as a powerful saving incentive in the absence of widespread social security and family support systems.
Recommendations

- Recommendation 1: Devise an appropriate policy strategy to improve welfare of the elderly who live alone without their spouse or children.
- Recommendation 2: Government should focus its policy attention more on the elderly who do not have any children.
- Recommendation 3: Carry out a study on national transfer accounts to understand national transfers to different generations and their income, expenditure, savings and consumption patterns in order to measure, analyze and interpret macro-economic aspects of age and population ageing.
- Recommendation 4: Create a programme to improve the financial position of the elderly by devising a special programme of income generating activities for the elderly, as well as providing financial support from the government for those who are financially burdened.
Recommendation 5: Devise a mechanism of improving healthcare facilities of the elderly including their mental health issues at all levels.

Recommendation 6: The government should ensure a supportive environment in the family and community for the elderly with appropriate legal rights to guarantee their well-being.

Recommendation 7: The government should take the initiative with the support of the private sector to establish an adequate number of aged homes with satisfactory facilities or encourage private investment like in developed countries.

Thank You for Your Attention!
Overview of the legal and policy framework on gender equality and Empowerment of Women in Sri Lanka
16th February Negombo, Sri Lanka

Mrs. Chandrani Senaratne
Secretary
Ministry of Women and Child Affairs

General Description of Women Empowerment

Creation of an Environment for Women where they can make Decisions of their Own for their Personal Benefits as well as for the Society.

....
Constructive Figures Relative to Women Empowerment ......

- Population By Gender, % - Male 47.4, Female 52.6
- Literacy Rate% (15 years and over) - Male 93.5, Female 91.1
- Gender Inequality Index - 0.385 (Rank – 75)
- Labor Force Participation Rate - Male 76.4, Female 35.4
- Life Expectancy at Birth M/F - 70.3 years/77.9 years
- Maternal Mortality Rate - 35(Deaths per 100000 live births)
- Antenatal Coverage of at Least One Visit - 99.4%
- Birth Attended by Skilled Health Personnel - 99%
- Total Fertility Rate - 2.2%
- Population Growth Rate - 0.8%
- University Education% - Male –40.15, Female –59.85

Why We Need to Empower Women

- To Develop Nuclear Family as a Whole.
- To Ensure the Equal Right of Entertaining Benefits of Development.
- To Prevent the Victims of Violence and Harassments due to Powerless.
- To Overcome the Economic, Social and Gender Disparity.
Why We Need to Empower Women

• To Make use of Maximum Women Labour Force for the National Development.
• To Ensure the Participation and Decision Making of Women.

International Interventions by Policies, and Treaties.

• Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)
• Millennium Development Goals.
• Sustainable Development Goals. (Number-05 Gender Equality)
• 16th Day Activism on Prevention of Violence Against Women.
• Beijing 20+ Platform
• Universal Human Right Declaration
• UNSCR 1325 United Nations Security Council Resolution
National Interventions by Laws,


- Employees (Regulation and Remuneration of Employment) Act Number 19 of 1954 and Mines (Probation of Female Labor underground) Ordinance No. 13 of 1937.

National Interventions by Laws,

- The Penal code Amendments Act no. 22 of 1995 Followed by Two Other Amendments have Increased Punishments and Introduced a Compensation for the Victims of Crimes.

National Interventions by Policies

- Principle Policy Statement by the Government, Regarding the Rights of Women, Expressing the State’s Commitment to CEDAW and Address the Issues Relevant to Women – 1981, Article 16.
National Interventions Policies

• Implementing programmes based on Recommendations of UNSCR 1325 on Women, Peace and Security.

• Establishment of the National Committee on Women (NCW) in 1993.

• Gazette Notification of Establishment of Island wide Police Child and Women Bureau Legal Units. Developed 32 units

National Interventions Policies

• Establishment of National SGBV Forum.
• Guidelines for Women Safe Homes.
• Establishment of “Mithuru Piyasa” Centers in Government base Hospitals.
• NHREP (National Human Resources and Employment Policy)
• UNDAF –Sri Lanka (United Nations Development Agencies Frame Work Includes all Development Programmes and Agenda to be Implemented in the Country by all UN agencies for Given Period of Time).
• Commemorating International Girl Child Day.
• Commemorating International Women’s Day.
National Interventions by Policies.

• National Polices on Disaster Risk Reduction / National Disaster Management Action Plan.
• Media Codes/Ethics.
• National Media Policy.
• Handbooks for Journalist.

National Interventions by Policies.

• Policy on Establishment of Gender Mainstreaming Mechanism.
• Policies on Sexual Harassment against Women at Working Place.
• Proposed Family Policy of Ministry of Social Services.
## National Interventions by Policies

- Amendments to the Local Government Election Act to Increase Representation of Women.
- National Policy on Socio Economic Empowerment of WHHs.

## National Interventions by Plans

- Action Plan on Prevention of SGBV.
- National Human Right Action Plan – Separate Chapter to Protect and Promote the Right of Women.
Women Empowerment Approaches by Ministry....

**Socio-Cultural**
The process of developing a sense of autonomy and self-confidence, and acting individually and collectively to change social relationships.

**Economical**
Empowering women to participate fully in economic life across all sectors.

**Political**
Local and community level all the way to the highest levels of government, women are often underrepresented in leadership positions, left without a voice in decision-making and ignored as an electorate. Women hold only 22% of national parliamentary positions globally.

Projects and Programmes for the Empowerment of Women

1. **Prevention of Child Abuse and Violence Against Women**
   (Establish Police Child & Women Bureau Units, Establish Women and Child Development Units, Continuation of Construction of Safe home for Women, Construction of Day care centers for Children, Construction of Widows Trading centers etc.)

2. **Economic & Social Support for Women & Children**
   (Community Based Eco-Tourism for Women Empowerment, Making National Policy for Widows, Develop Information Technology Unit, Media and Publication, Establish Women Friendly, Conducive Model Villages)
3. Develop National Policy Frame Work and National Action Plan to address SGBV.

4. Advocate to Implement, Review, Amend and Introduce Legislation/ Policies to Combat VAW.

5. Strengthen the Referral System of SGBV and Develop a Referral Mechanism/ SOPs/ Shelter Guidelines for Victims and Survivors of SGBV in selected Districts.

6. Women Empowerment and Skill Development
- Life Skill Development and Reproductive Health Programmes for Girl Child.
- Entrepreneurship and Market Promotion (Trade Fairs and Exhibition)
- Provision for the Assistance of GBV Victims (Maintenance of Safe Homes, Counseling Centers 12)
- Providing Counseling Assistance in each District and Divisional Secretariat to Resolve Family Disputes.
Projects and Programmes Cont...

8. Advocacy/ awareness raising and capacity building programme (GBV)
9. Programmes to Promote women’s participation in politics
10. Improve the Standards of ECCD Centers and Enhance the Accessibility of Children
12. Nutritional pack to pregnant women 2015- 2016

New Policies and Achievements for Women Development.

- In order to Empower Women in Politics and Decision Making, 25% Seats in the Local and Provincial Authorities have been Allocated for Women by Amending the Local Government Election Act.

- To Increase the Women Participation in Labour Force and to Uplift the Economic Status of Women, a Cabinet Approval has been taken to Allocate at least 25% Total Investment of Rural Economic Development Programme for Women.
New Policies and Achievements cont..

• Allocate Housing Loan Facilities for Widows and Vulnerable Women in Collaboration with Ministry of Housing and Construction (15 Women Beneficiaries from Each Division)
• Preparation National Policies for Day Care Centers
• Developed Guideline and Skill Standards for Day Care Center Care Givers.
• Developed a New System for Monitoring all Development Programmes of the Ministry from National to District and Divisional level.
• Establishment of Women’s Commission Bill from Legal Draftsmen Department (Pending)

New Policies and Achievements cont..

• Prevention of SGBV Five year Action Plan. Approved on June 2016 total Estimation Rs: 1964.45Mn


Key Issues Identified
Violence Against Women
Discrimination of Women’s Rights
Ensuring Gender Equality
New Policies and Achievements cont....

• National Policy on Widows and WHHs is being Developed in collaboration of INGO.

• Submitted the 08th Periodic Report on CEDAW with the Consultation of relevant Government Agencies, Provincial Councils, Civil Society Organizations and Grass Root Level Committees.

New Policies and Achievements cont....

• Prepared a Draft Action Plan on UNSCR 1325 
  Key Issues Addressed; Women Political Participation, GBV, Women’s Leadership.
  National Center for Socio- Economic Empowerment of Widows and Women Headed Households Established at Kilinochchi.

• Prepared an Action Plan to Operationalize the Center. Steps have been taken to Implement Action Plan for the above National Center with collaboration of ONUR, Australian Government and Indian SEWA.(Health, Livelihood support, entrepreneurial Training, Micro credit, psycho social assistance and counseling)
New Policies and Achievements cont....

- Women in Reconciliation Programme with ONUR (Office for National Unity and Reconciliation)

- **Core areas Addressed and Interventions**


  - Psychosocial Needs – TOT Programmes for Strengthening Existing Services, Mobile Programmes to Address Immediate Needs.

New Policies and Achievements cont....

- Referral System for 2014 – 2016
- Establishment of Gender Mainstreaming Units in the Ministries 2016.

- Key Issues Addressed
  - Eliminate All Forms of Discrimination.
  - Equity and Equality
  - Gender Budgeting
  - Prevention of Sexual Harassment Committee.
Challenges Faced in Women Empowering Process by the Ministry....

• Lack of Recognition to the Issues of Women and Children in the Governmental and Other Organization and Insensitivity to the Issues of Women and Children in the Law Enforcement and the Judiciary Eg: Gender Budgeting system, Political Participation, Delay in the Enactment of Women Commission Bill,

• Lack of Commitment of Women Empowerment among Relevant Stakeholders. Eg: Low Performance of Gender Focal Point Programme.

• Poor Information Sharing by Other Governmental Organizations. Eg: No proper Gender Disaggregated data collection and Dissemination National System.

Challenges Faced in Women Empowering Process by the Ministry....

• Lack of Community Participation for the Prevention of Child Abuse and Violence Against Women.

• Existence of Stereotype and Traditional Socio Cultural Values.

• Lack of Gender Disaggregated and Age Specific Statistics Relevant to Child and Women Related Issues.
Challenges Faced in Women Empowering Process by the Ministry. ...

• Existence of Certain Applicable Laws that Discriminate Women and Child Rights Need to be Amended or Repealed.
  Eg. Prevention of Domestic Violence Act (PDVA), Vagrants Ordinance, Child and Young Persons Ordinance (CYPO), Land Development Ordinance, Buddhist Temporalities Ordinance.
• Delays/ Time Constrains in Enforcing the Laws with the Judiciary.

Challenges Faced in Women Empowering Process by the Ministry....

• Less Representation of Women in Politics and Decision Making due to Socio, Economic and Cultural Barriers.
• Inadequate Application of Modern Technologies (DNA- Electronic Technology) in Fighting Against Child Abuse and VAW and Crimes.

• Seats for female in parliament - 15
• Females in Ministerial positions - 05
• Female Headed Householders - 23%
Thank You...
Introduction

Sexual and reproductive health is a state of complete physical, mental and social well-being in all matters relating to the reproductive system.

It implies that people are able to have a satisfying and safe sex life, the capability to reproduce, and the freedom to decide if, when, and how often to do so.
Documents Related for sexual health and HIV

Searched several databases. Conducted personal communications. Collected 70 documents.

Supportive - Laws & Policies

<table>
<thead>
<tr>
<th>Constitution of Sri Lanka - Article 12</th>
<th>National AIDS Committees and Sub Committees</th>
</tr>
</thead>
<tbody>
<tr>
<td>International Human Rights Instruments Public Health care Declaration</td>
<td>National Committee on Family Health</td>
</tr>
<tr>
<td>National Health Policy??</td>
<td>Supportive Management &amp; Governances</td>
</tr>
<tr>
<td>National Maternal and Child Health Policy (2009)</td>
<td></td>
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<tr>
<td>National AIDS policy (2011)</td>
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<tr>
<td>National Youth Policy (2014)</td>
<td></td>
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<tr>
<td>Sri Lanka National Migration Health Policy (2012)</td>
<td></td>
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<tr>
<td>Prison HIV prevention care and treatment policy- Developed and awaiting to submit to the cabinet</td>
<td></td>
</tr>
</tbody>
</table>
**Plans, Programmes and Committees**

<table>
<thead>
<tr>
<th>Plans, Programmes and Committees</th>
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</thead>
<tbody>
<tr>
<td>Health Master Plan 2007-2016</td>
</tr>
<tr>
<td>National Health Development Plan</td>
</tr>
<tr>
<td>National HIV Strategic Plan-Sri Lanka 2013-2017</td>
</tr>
<tr>
<td>Country Coordinating Mechanism - Sri Lanka</td>
</tr>
<tr>
<td>GFATM Programmes for Comprehensive Sexual Healthcare Package for Key Populations</td>
</tr>
<tr>
<td>National Strategic Plan on Maternal and New-born Health(2012-2016)</td>
</tr>
<tr>
<td>Maternal Health Care Package- A Guide to Field Healthcare workers</td>
</tr>
<tr>
<td>School Curriculum</td>
</tr>
</tbody>
</table>

**Free Education & Health**

*Sri Lankan Constitution*

- **Health Rights?** Not recognized in the constitution

**Article 12**

- (2) No citizen shall be discriminated against on the grounds of race, religion, language, caste, sex, political opinion, place of birth or any of such grounds:

- No restriction to access public places

- Right to Information Act, No. 12 of 2016– Ensures right to information

- Policies and plans related to health ensure providing accessible, efficient, cost effective health care services on an equitable basis and free of charge
School Curriculum

- Comprehensive Reproductive Health Education should exist

- No comprehensive sexual education. Some parts covered in Health & Physical Education Subject (40%)

- Teach about contraceptives including condoms only in A/L Bio students

- Consent age for sex: 16 years

- Legal age of marriage: 18 years

- Depriving “Right to know” on sexual education

- No skill-based sexual health education at school level due to lack of skills among teachers

- Health care providers are supposed to provide the services on SRH to youth.

- Youth friendly services and attitudes of some health care providers???

- Lack of knowledge, cultural norms and legal age of marriage hinders access for services
Abortions

- Abortions are a criminal offence under the Sri Lankan penal code except for therapeutic reasons.
- Socio cultural reasons direct them to illegal abortions.
- Female youth between below 18 are exposed to unqualified private places where youth are put in to life threatening situations.
- Number of teenage pregnancies are increasing
  - in certain areas
- National data – 2013- 5.3% 2014- 4.9% 2015 5.25%

**UNDP 2013- Youth survey - revealed that 50% of youth were unaware of contraception**

**Vicious Cycle for Poor Sexual Reproductive Health**

Cultural norms ——> Poverty Low education Lack of life skills ——> Decreased autonomy for life events ——> Early marriage or sexual exploitation ——> Lack of power & Violence ——> Increased infant mortality ——> Less access for health and other services ——> Increased maternal morbidity and mortality ——> Increase infant mortality

**Survival child**
Medical officers do not have legal duties to report to the law enforcement authorities about teenage pregnancies among under 16 year-old adolescents.

When providing reproductive health services to the adolescents, consider the best interest of the adolescents & Medical officer of Health can provide reproductive health services even in the absence of guardians.

This care include: pre pregnancy care, pregnancy care, Delivery care, Lactating care, Family Planning care, STI/HIV prevention care and care for gender based violence.

Restrictive environment due to misleading legal frame work in Sri Lanka

- Vagrants Ordinance - Year 1841- Soliciting sex in public places

- 365 A of Penal code - Year 1995- any person of, any act of gross indecency with another, in public or private places

- Two laws in the Sri Lankan penal code hinders high risk population access for sexual and reproductive health services and use of condoms

- Condoms are in the essential drug list in the country
LGBT Community
Lesbians, Gay, Bisexual & Transgender

• Sri Lanka does not provide specific protection of human rights under anti-discrimination laws for LGBT community including youth.

• Sri Lanka signed the relevant international conventions

Key populations are more likely to acquire HIV

Lack of school education on sexual health

Cultural barriers for the sexual orientation

7 permanent partner-Multiple relationships

Problems of keeping condoms

Experienced homophobic stigma, discrimination and violence

Hiding of sexual orientation

Depression, Social isolation

Less access for health services

Stigma leads to less access for health care services
Sri Lanka Family Planning Association is implementing and monitoring the interventions to KPs and MOH provide technical support

<table>
<thead>
<tr>
<th>FSW Project Locations</th>
<th>MSM Project Locations</th>
<th>DU Project Locations</th>
<th>BB Project Locations</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>11 Districts</strong></td>
<td><strong>11 Districts</strong></td>
<td><strong>8 Districts</strong></td>
<td><strong>7 Districts</strong></td>
</tr>
<tr>
<td>Colombo</td>
<td>Colombo</td>
<td>Colombo</td>
<td>Galle</td>
</tr>
<tr>
<td>Gampaha</td>
<td>Gampaha</td>
<td>Gampaha</td>
<td>Matara</td>
</tr>
<tr>
<td>Galle</td>
<td>Galle</td>
<td>Ratnapura</td>
<td>Hambantota</td>
</tr>
<tr>
<td>Ratnapura</td>
<td>Kandy</td>
<td>Matale</td>
<td>Galle</td>
</tr>
<tr>
<td>Matara</td>
<td>Anuradhapura</td>
<td>Kandy</td>
<td>Matara</td>
</tr>
<tr>
<td>Hambantota</td>
<td>Kandy</td>
<td>Kurunegala</td>
<td>Kandy</td>
</tr>
<tr>
<td>Kurunegala</td>
<td>Mathele</td>
<td>Puttalam</td>
<td>Kurunegala</td>
</tr>
<tr>
<td>Anuradhapura</td>
<td>Kurunagala</td>
<td>Puttalam</td>
<td>Puttalama</td>
</tr>
<tr>
<td>Polonnaruwa</td>
<td>Kandy</td>
<td>Jaffna</td>
<td>Hambanthota</td>
</tr>
<tr>
<td>Kandy</td>
<td></td>
<td></td>
<td>Matara</td>
</tr>
<tr>
<td>Puttalam</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

HIV testing and counseling among most-at-risk populations in 2014

![Graph showing HIV testing and counseling among most-at-risk populations in 2014]
**Transgender certificate**

Gender certificated issued by the Ministry of Health to Registrar General

Director General of Health General Circular Number 01-34/2016

---

**People living with HIV**

- No separate laws for PLHIV
- General laws cover their rights including Health and Education
- Kuliypitiya Case – Further confirmed the right for education at the Supreme court
Situation assessment of condom programming -2015

- MSM have difficulties in keeping condoms due to cultural barriers and misinterpretation of laws
- Stigma is associated with condom use
- Knowledge on condoms – Vary among youth groups

Do we provide services only for well disciplined children?

- Requesting pregnancy report from schools
- Ella area- for an ice-cream or yogurt cup
- Walikanda area
- Three school Girls Story 2016
- Effects for small children of teenage exploited mothers
Do we provide services only for well disciplined children?

- Requesting pregnancy report from schools
- Three school Girls Story 2016
- Ella area- for an ice-cream or yogurt cup
- Walikanda

Study on Sex Work and Violence in Colombo, Sri Lanka- 2014

- Evidence of Violence and mal treatment from parents and immediate family members
- ½ went for child labour
- Strict families who penalized them for interactions with boys
- Ill treatment for transgender and kicked out of their family home in adolescence
A sex worker who started sex work at the age of 12 years

When my client takes out a condom from his pocket, “I thought it was a balloon. I blew it up”

Conclusions

• There are a number of laws, policies, plans and programmes available to access sexual & reproductive health

• Some laws which affect the key populations for accessing the sexual health services

• Existing sexual health curriculum in the school setup does not cover comprehensive sexual education.

• No separate laws for HIV infected
Happy and Healthy Community

Repealing of Existing punitive Laws & Age appropriate Sexual Education

Conducive Environment

Access for health Care

Girl child Effect
Delivering Sexual & Reproductive Health through MISP during Emergencies & Crisis Situations

Madu Dissanayake (Anthropologist)
Director Public Affairs, Policy & Advocacy
The Family Planning association of Sri Lanka

What is the MISP?

- The **Minimum Initial Service Package (MISP)** for Sexual & Reproductive Health is a priority set of life-saving activities to be implemented at the onset of every humanitarian crisis.

- It forms the starting point for sexual and reproductive health programming and should be sustained and built upon with comprehensive sexual and reproductive health services throughout protracted crises and recovery.
Why is MISP important?

- The MISP saves lives and prevents illness, trauma and disability, especially among women and girls.

Why is MISP important?

- Neglecting the MISP in humanitarian settings has serious consequences:
  - Preventable maternal and newborn deaths;
  - Sexual violence and subsequent trauma;
  - Sexually transmitted infections;
  - Unwanted pregnancies and unsafe abortions;
  - The possible spread of HIV.
Why is MISP a priority?

The goal of the MISP is to reduce mortality, morbidity & disability among populations affected by crises particularly by women and girls.

- These populations may be Locally (internally) displaced persons or populations hosting Displaced Persons.

Implementing the MISP is not optional: it is an international standard of care that should be implemented at the onset of every emergency.
The RH kit is designed for use for a 3-month period for a varying population number, depending on which block of sub-kits is ordered.

### Minimum Initial Service Package (MISP) for Reproductive Health

**Objective 1**
- Ensure health cluster/sector identifies agency to LSAD implementation of MISP
- RH Officer in place
- Meetings to discuss RH implementation held
- RH Officer reports back to health cluster/sector

**Objective 2**
- Prevent SEXUAL VIOLENCE & assist survivors
  - Protection system in place especially for women & girls
  - Medical services & psychosocial support available for survivors
  - Community aware of services

**Objective 3**
- Reduce transmission of HIV
  - Safe and sterile birth technique in place
  - Standard precautions practiced
  - Free condoms available

**Objective 4**
- Prevent excess MATERNAL & NEWBORN mortality & mortality
  - Emergency obstetric and newborn care services available
  - Z24 referral system established
  - Client delivery kits provided to 4th attendants and visibly pregnant women
  - Community aware of services

**Objective 5**
- Plan for COMPREHENSIVE RH services, integrated into primary health care
  - Background data collected
  - Sites identified for future delivery of comprehensive RH
  - Staff capacity assessed and trainings planned
  - RH equipment and supplies ordered

---

**GOAL**
- Decrease mortality, morbidity & disability in crisis-affected populations (refugees/IDPs or populations hosting them)

---

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**Block 1: Six kits to be used at the community and primary health care level for 10,000 persons / 3 months**

<table>
<thead>
<tr>
<th>KIT NUMBERS</th>
<th>KIT NAME</th>
<th>COLOR CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kit 0</td>
<td>Administration</td>
<td>Orange</td>
</tr>
<tr>
<td>Kit 1</td>
<td>Condom (Part A is male condoms + Part B is female condoms)</td>
<td>Red</td>
</tr>
<tr>
<td>Kit 2</td>
<td>Clean Delivery (Individual) (Part A + B)</td>
<td>Dark blue</td>
</tr>
<tr>
<td>Kit 3</td>
<td>Post-Rape (Part A + B)</td>
<td>Pink</td>
</tr>
<tr>
<td>Kit 4</td>
<td>Oral and Injectable Contraception</td>
<td>White</td>
</tr>
<tr>
<td>Kit 5</td>
<td>STI</td>
<td>Turquoise</td>
</tr>
</tbody>
</table>
### Block 2: Five kits to be used at the community and primary health care level for 30,000 persons / 3 months

<table>
<thead>
<tr>
<th>KIT NUMBERS</th>
<th>KIT NAME</th>
<th>COLOR CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kit 6</td>
<td>Delivery (Health Facility)</td>
<td>Brown</td>
</tr>
<tr>
<td>Kit 7</td>
<td>IUD</td>
<td>Black</td>
</tr>
<tr>
<td>Kit 8</td>
<td>Management of Complications of Abortion</td>
<td>Yellow</td>
</tr>
<tr>
<td>Kit 9</td>
<td>Suture of Tears (Cervical and vaginal) and Vaginal Examination</td>
<td>Purple</td>
</tr>
<tr>
<td>Kit 10</td>
<td>Vacuum Extraction for Delivery (Manual)</td>
<td>Grey</td>
</tr>
</tbody>
</table>

### Block 3: Two kits to be used at referral hospital level for 150,000 persons / 3 months

<table>
<thead>
<tr>
<th>KIT NUMBERS</th>
<th>KIT NAME</th>
<th>COLOR CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kit 11</td>
<td>Referral level for Reproductive health (Part A + B)</td>
<td>Fluorescent Green</td>
</tr>
<tr>
<td>Kit 12</td>
<td>Blood Transfusion</td>
<td>Dark Green</td>
</tr>
</tbody>
</table>
Coordination of the MISP

- Coordination of MISP activities is necessary at multiple levels including:
  - local/camp,
  - Organizations/agencies,
  - Provincial /District (sub-regional),
  - National/country level
  - and international levels.

Coordination within and among these various levels and across sectors is aimed at ensuring that efforts are not duplicated, useful data and information are shared among humanitarian actors and scarce resources are used efficiently.
Objective - Prevent and Manage the Consequences of Sexual Violence

- **MISP** - Sexual Violence Monitoring:
  - Coordinated multi-sectoral systems to prevent sexual violence happening in sites
  - Confidential health and psychosocial services to manage cases of sexual violence made available and accessible
  - Number of staff trained in sexual violence prevention and response

Reduce the Transmission of HIV

- The relationship between conflict and vulnerability to STIs and HIV is complex.
- **Displaced populations in crisis situations are especially vulnerable to STIs and HIV.**

STIs, including HIV, have the potential to thrive under crisis conditions where access to means of prevention, treatment and care are limited.
Objective - to reduce the transmission of HIV by:

- ensuring safe blood transfusions;
- enforcing respect for universal precautions;
- guaranteeing the availability of free condoms.

Objective

✓ Prevent excess neonatal and Maternal Mortality and Morbidity.
Knowing the following basic data can help ordering the correct supplies.

(Default estimates are provided in case requested data are not available.)

<table>
<thead>
<tr>
<th>Kit number and helpful information when completing an order form to UNFPA</th>
<th>Default estimate %</th>
<th>Your estimate %</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>GENERAL</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of women of reproductive age (YRA, 15 to 49 years) in the population</td>
<td>25</td>
<td></td>
</tr>
<tr>
<td>Crude birth rate</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Percentage of WRA who use modern contraceptives</td>
<td>15</td>
<td></td>
</tr>
<tr>
<td><strong>KIT 1</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of sexually active men in the population</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td>Percentage of sexually active men who use condoms</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td>Percentage of WRA who use female condoms</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td><strong>KIT 3</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prevalence of sexual violence (percent of WRA at risk of rape)</td>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>
How quickly will Interagency RH Kits arrive at the site?

- In crisis situations, kits should arrive within two to seven days after an order is placed and the funds are transferred. Transport to field sites is dependent upon the ordering agency’s local transport and storage arrangements.

<table>
<thead>
<tr>
<th>Kit</th>
<th>Description</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>KIT 4</td>
<td>Percentage of women using modern methods of contraception who use combined oral contraceptive pills</td>
<td>30</td>
</tr>
<tr>
<td></td>
<td>Percentage of women using modern methods of contraception who use injectable contraception</td>
<td>55</td>
</tr>
<tr>
<td>KIT 5</td>
<td>Percentage of all women who deliver who will give birth in a health center</td>
<td>15</td>
</tr>
<tr>
<td>KIT 6</td>
<td>Percentage of women using modern methods of contraception who use an IUD</td>
<td>5</td>
</tr>
<tr>
<td>KIT 7</td>
<td>Pregnancy that end in miscarriage or unsafe abortion (estimated as an additional percentage of live births)</td>
<td>15</td>
</tr>
<tr>
<td>KIT 8</td>
<td>Percentage of women who deliver who will need suturing of vaginal tears</td>
<td>15</td>
</tr>
<tr>
<td>KIT 9</td>
<td>Percentage of deliveries requiring a c-section</td>
<td>5-15</td>
</tr>
</tbody>
</table>
How can I get more information on MISP?

- Contact MOH/FHB/UNFPA/FPA Sri Lanka to obtain a copy of the information sheet on Kits for Crisis Situations and also for training requirements.

What Sri Lanka has so far done

- National level sensitization of key decision makers, such as minister of Disaster Management, Minister of Women & Child Affairs, Minister of Health had been conducted since 2008 by MOH, FHB,UNFPA & FPA Sri Lanka.
- Through Co-trainers - MISP Teaching curricula made and delivered at university level at some universities and attempts are made to work with others.
- Delivering of MISP is included in the prevention of SGBV strategic framework approved by the Cabinet in 2016.
- Provincial level capacity building trainings are being conducted for frontline workers of health & social care including administrative bodies.
- Assembling of kits at Local level and pre-positioning is carried out & Delivering suitable IEC materials is also underway.
Thank you!

- MISP Video
Sustainable Development Bill

Dr. Sugath Yalegama
Director
Ministry of National Policies and Economic Affairs

Talking points

• Why Sustainable Development Act?
• The process followed
• What is proposed in the Act?
Why SD Act?

- Ensure Sustainability and Sustainable development
- Sustainability – Capacity of a thing, action, activity or process to be maintained indefinitely
- Sustainable Development – Development that meets the needs of the present without compromising the ability of future generations to meet their needs

Sustainable Development
– A balancing act
SD Act Process

- A brain-child of Hon. Prime Minister and the process was guided by the Hon. Prime Minister
- Developed through a Committee appointed by Hon. Prime Minister under the chairmanship of Hon. Dr Harsha de Silva, then Deputy Minister of Policy Planning, Economic Affairs, Child, Youth and Cultural Affairs that consisted members from government and civil society
- First committee meeting held in June 2015
- M/Sustainable Development and Wildlife provided their inputs after formation of the Ministry
- After studying similar Acts like those in Canada, Finland, New Zealand, Costa Rica and Bhutan, and giving due consideration to local context, the draft Bill was presented to the Cabinet of Ministers for approval in December 2015
- Cabinet of Ministers on 13.01.2016 directed the Legal Draftsman to draft the Act incorporating the proposed amendments by Hon. Ministers and Secretary to the President to obtain concurrence of all Provincial Councils before presenting to Parliament
- The amended Bill approved by Cabinet of Ministers on 12.07.2016 was gazetted 15.08.2016 and forwarded for the concurrence of PCs by the Secretary to the President

Response of PCs

- Southern and Sabaragamuwa Provincial Councils: Approved
- Central Provincial Council: Concurrence given subject to submission of revisions, if any later
- Uva, North Central, Wayamba & Western Provincial Councils: Approved subject to certain amendments
- Eastern Provincial Council: Consider after new Constitution enacted
- Northern Provincial Council: Not approved

Next Step
- Second reading in Parliament due shortly
What is proposed

• To promote the integration of environmental, economic and social factors in the decision making by the government

• Every government organisation to carry out environmental, and social audits on the new development projects and ensure the environmental and social security

• Set national targets guided by the global level of ambition but taking into account national interest and circumstances in incorporating 17 Sustainable Development Goals in the national planning processes, policies and strategies
What is proposed

- To provide the legal framework for developing and implementing a National Policy and Strategy to achieve Sustainable Development in Sri Lanka in a holistic and inclusive approach

- To establish a Sustainable Development Council to facilitate the process

The Process of SD Council

[Diagram showing the process involving Sustainable Development Council, Ministries/Departments/PCs, National Policy and Strategy, Cabinet, Parliament, and Sustainable Development Council.]
Sustainable Development Council

Some Authorities

• To prepare National Policy and Strategy on SD in consultation and with concurrence of all ministries/departments/PCs

• To review and update the National Policy and Strategy on SD periodically

• To issue guidelines relating to SD in respect of new development projects

• To facilitate and monitor the mechanisms and progress review processes of the implementation of the National Policy and Strategy on SD

• To identify SD standards and ecological footprint indicators

Members of the Council

• Three ex-officio members
  • Secretary to the Ministry of SD
  • Secretary to the Ministry of National Planning or his nominee
  • Secretary to the Ministry of Environment or his nominee

• Eight members appointed by the President as follows:
  • two members appointed by him on his own volition;
  • one member nominated by the Prime Minister;
  • two members nominated by the Minister of Sustainable Development; and
  • three members out of the nine persons nominated by the Provincial Councils; at the expiration of the term of office of such members appointed under this sub-paragraph, the balance number of persons nominated by the Provincial Councils shall be considered for second and third appointment in rotation.
The SD Council

• The Chairman of the Council will be appointed by the President from among its members.

• Every appointed member shall possess academic or professional qualifications and wide experience in environment or economics or social science and possesses specific experience in relation to SD.

• Every appointed member other than those representing PCs hold office for a term of three years and are eligible for reappointment.

• Every appointed member representing PCs hold office for a term of one year and are eligible for reappointment

Thank You!
Contents

1. What is Sustainable Development
2. Sustainable Development Goals
3. Youth Contribution to Implementation & Achievements of Sustainable Development Goals
5. Comparison with the Results of 2013 Commonwealth Youth Development Index
6. SDG targets most relevant to young people
What is Sustainable Development?

“development that meets the needs of the present without compromising the ability of future generations to meet their own needs.”

(World Commission on Environment and Development, 1987)

Sustainable Development Goals

1. End poverty in all its forms everywhere – **No Poverty**
2. End hunger, achieve food security and improved nutrition and promote sustainable agriculture – **No Hunger**
3. Ensure healthy lives and promote well-being for all at all ages – **Good Health**
4. Ensure inclusive and quality education for all and promote lifelong learning – **Quality Education**
5. Ensure inclusive and Gender Equality education for all and promote lifelong learning – **Gender Equality**
6. Ensure access to water and sanitation for all – **Clean Water and Sanitation**
Sustainable Development Goals

7. Ensure access to affordable, reliable, sustainable and modern energy for all – **Renewable Energy**
8. Promote inclusive and sustainable economic growth, employment and decent work for all – **Good Jobs and Economic Growth**
9. Build resilient infrastructure, promote sustainable industrialization and foster innovation – **Innovation and Infrastructure**
10. Reduce inequality within and among countries – **Reduced Inequalities**
11. Make cities inclusive, safe, resilient and sustainable – **Sustainable Cities and Communities**
12. Ensure sustainable consumption and production patterns – **Responsible Consumption**

Sustainable Development Goals

13. Take urgent action to combat climate change and its impacts – **Climate Action**
14. Conserve and sustainably use the oceans, seas and marine resources – **Life Below Water**
15. Sustainably manage forests, combat desertification, halt and reverse land degradation, halt biodiversity loss – **Life on Land**
16. Promote just, peaceful and inclusive societies – **Peace and Justice**
17. Revitalize the global partnership for sustainable development - **Partnership for the Goals**
Youth Contribution to Implementation & Achievement of Sustainable Development Goals

Goal 1 - No Poverty
1. “Swashakthi” SED Business Programme
2. “Yowun Puraya” – Livelihood Development Projects

Goal 3 - Good Health
1. NCD (Non Communicable Diseases) Prevention Programmes
2. 4 Days Programme - Inherit a Healthy Generation with Physical and Mental Equilibrium/ Balance and Mould Those Who Process Talents in Sports as Successful Athletes

Goal 4 – Quality Education
1. YC (Youth Corps) Programme

Goal 8 – Good Jobs and Economic Growth
1. “Swashakthi” SED Business Programme
2. “Yowun Puraya” – Livelihood Development Projects

Goal 10 – Reduced Inequalities
1. Signing MOU’s
2. “Yowun Puraya” – Participating 100 Youths from 15 Countries

Goal 16 – Peace and Justice
1. NYSC Programmes
2. “Yowun Puraya”
## Our Achievements

### Position of Sri Lanka According to the Global Youth Development Index and Report 2016

<table>
<thead>
<tr>
<th>Domains</th>
<th>Score/ Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>Global Rank</td>
<td>31</td>
</tr>
<tr>
<td>2016 YDI Overall Score</td>
<td>0.731</td>
</tr>
<tr>
<td>Health &amp; Well-being Rank</td>
<td>95</td>
</tr>
<tr>
<td>Health &amp; Well-being Score</td>
<td>0.700</td>
</tr>
<tr>
<td>Education Rank</td>
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</tr>
<tr>
<td>Education Score</td>
<td>0.721</td>
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<tr>
<td>Employment and Opportunity Rank</td>
<td>24</td>
</tr>
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<td>Employment and Opportunity Score</td>
<td>0.751</td>
</tr>
<tr>
<td>Civic Participation Rank</td>
<td>17</td>
</tr>
<tr>
<td>Civic Participation Score</td>
<td>0.820</td>
</tr>
<tr>
<td>Political Participation Rank</td>
<td>54</td>
</tr>
<tr>
<td>Political Participation Score</td>
<td>0.703</td>
</tr>
<tr>
<td>2016 YDI level</td>
<td>Very high</td>
</tr>
<tr>
<td>2010 YDI Overall Score</td>
<td>0.650</td>
</tr>
</tbody>
</table>
Comparison with the Results of 2013 Commonwealth Youth Development Index

<table>
<thead>
<tr>
<th>Domains</th>
<th>2016 Global Youth Development Index</th>
<th>2013 Commonwealth Youth Development Index</th>
</tr>
</thead>
<tbody>
<tr>
<td>Global Rank</td>
<td>31</td>
<td>72</td>
</tr>
<tr>
<td>YDI Overall Score</td>
<td>0.731</td>
<td>0.67</td>
</tr>
<tr>
<td>Health &amp; Well-being Rank</td>
<td>95</td>
<td>16</td>
</tr>
<tr>
<td>Health &amp; Well-being Score</td>
<td>0.700</td>
<td>0.799</td>
</tr>
<tr>
<td>Education Rank</td>
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<td>26</td>
</tr>
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<td>Education Score</td>
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<td>0.739</td>
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<td>28</td>
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<td>Employment and Opportunity Score</td>
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<td>0.634</td>
</tr>
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<td>Civic Participation Score</td>
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<td>0.456</td>
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<tr>
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<td>28</td>
</tr>
<tr>
<td>Political Participation Score</td>
<td>0.703</td>
<td>0.375</td>
</tr>
<tr>
<td>YDI level</td>
<td>Very high</td>
<td>Medium</td>
</tr>
</tbody>
</table>

What We Should Focus on..
## SDG targets most relevant to young people

### SDG 1  End poverty in all its forms everywhere

<table>
<thead>
<tr>
<th>Target 1.2</th>
<th>By 2030, reduce at least by half the proportion of men, women and children of all ages living in poverty in all its dimensions according to national definitions</th>
</tr>
</thead>
</table>

### SDG 2  End hunger, achieve food security and improved nutrition and promote sustainable agriculture

<table>
<thead>
<tr>
<th>Target 2.2</th>
<th>By 2030, end all forms of malnutrition, including achieving, by 2025, the internationally agreed targets on stunting and wasting in children under 5 years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women and older persons</th>
</tr>
</thead>
</table>

### SDG 4  Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all

<table>
<thead>
<tr>
<th>Target 4.1</th>
<th>By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target 4.3</td>
<td>By 2030, ensure equal access for all women and men to affordable and quality technical, vocational and tertiary education, including university</td>
</tr>
<tr>
<td>Target 4.4</td>
<td>By 2030, ensure that all youth and adults have relevant skills, including technical and vocational skills, for employment, decent work and entrepreneurship</td>
</tr>
<tr>
<td>Target 4.6</td>
<td>By 2030, ensure that all youth and adults, both men and women, reach a proficiency level in literacy and numeracy sufficient to fully participate in society</td>
</tr>
</tbody>
</table>

### SDG 5  Achieve gender equality and empower all women and girls

<table>
<thead>
<tr>
<th>Target 5.1</th>
<th>End all forms of discrimination against all women and girls everywhere</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target 5.2</td>
<td>Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation</td>
</tr>
<tr>
<td>Target 5.3</td>
<td>Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation</td>
</tr>
<tr>
<td>Target 5.5</td>
<td>Adopt and strengthen sound policies and enforceable legislation for the promotion of gender equality and the empowerment of all women and girls at all levels</td>
</tr>
</tbody>
</table>

### SDG 6  Ensure availability and sustainable management of water and sanitation for all

| Target 6.2 | By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations |

### SDG 8  Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all

<table>
<thead>
<tr>
<th>Target 8.5</th>
<th>By 2030, 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</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target 8.6</td>
<td>By 2020, substantially reduce the proportion of youth not in employment, education or training</td>
</tr>
<tr>
<td>Target 8.7</td>
<td>Take immediate and effective measures to eradicate forced labour, end modern slavery and human trafficking and secure the prohibition and elimination of the worst forms of child labour, including recruitment and use of child soldiers, and by 2025 end child labour in all its forms</td>
</tr>
<tr>
<td>Target 8.8</td>
<td>By 2020, develop and operationalize a global strategy for youth employment and implement the Global Jobs Pact of the International Labour Organization</td>
</tr>
</tbody>
</table>
### SDG targets most relevant to young people Cont.

#### SDG 13
**Take urgent action to combat climate change and its impacts**

| 13.b | Promote mechanisms for raising capacity for effective climate change-related planning and management in least developed countries, including focusing on women, youth and local and marginalized communities |

#### SDG 16
**Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels**

| 16.1 | Significantly reduce all forms of violence and related death rates everywhere |
| 16.2 | End abuse, exploitation, trafficking and all forms of violence against and torture of children |
| 16.3 | Promote the rule of law at the national and international levels and ensure equal access to justice for all |
| 16.7 | Ensure responsive, inclusive, participatory and representative decision-making at all levels |
| 16.a | Strengthen relevant national institutions, including through international cooperation, for building capacity at all levels, in particular in developing countries, to prevent violence and combat terrorism and crime |

Source: Transforming Our World: 2030 Agenda for Sustainable Development
Youth Development Index and Report 2016

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**Take in your everyday life to contribute to a sustainable future**
Thank You