



United Nations
Economic Commission for Africa



**Operational Guide
for
Implementing and Monitoring
of
The Addis Ababa Declaration on
Population and Development Beyond
2014**

February 2018

The Addis Ababa Declaration on Population and Development was adopted at the 2013 Africa Regional Population Conference by ministers from all African countries. The declaration provided the region-specific guidance on population and development, and the full implementation of the ICPD beyond 2014 in Africa. At the first meeting of the Specialized Technical Committee on Health Population and Drug Control (STC-HPDC) of the African Union on 16 to 17 April 2015, a ministerial decision was made to develop a monitoring, accountability, and reporting mechanism for the AADPD. At the second meeting of the STC-HPDC on 20-24 March 2017, the completed Operational Guide was adopted. The Operation Guide will be used during the 2018 and subsequent reviews.

Technical assistance for the development of the Operation Guide was provided by Prof Parfait Eloundou-Enyegue.

EXECUTIVE SUMMARY

The Addis Ababa Declaration on Population and Development (AADPD) is a key framework for addressing population and development issues in Africa. Its rich set of commitments can simultaneously support Africa's efforts to harness a demographic dividend, advance human rights and meet sustainable development goals. Monitoring these commitments is thus important to fulfill the ICPD Beyond 2014, the 2030 Agenda for Sustainable Development and the African Union Agenda 2063.

The present monitoring guide lays out the broad principles and methods to track the implementation and impact of this declaration. It is designed to support two complementary components of the M&E process: a macro-evaluation of the AADPD as a whole, and a micro-monitoring of each of its 88 individual commitments. Both processes begin with a detailed content analysis of individual commitments, mostly in terms of “what” (the resource inputs needed), “why” (the intended outcome), and “how” (the process leading from the input to the outcome).

Using the results of this content analysis, the macro-evaluation focuses on the declaration as a whole. It tallies the content-analysis results of all 88 commitments, to show how much the AADPD’s implementation depends on financial investments versus institutional building or policy commitment, and how it advances the goal of sustainable development. **The results of this content analysis suggest the following:**

1. **The AADPD agenda is eminently feasible.** In a majority of cases (80%), the resource inputs needed are about legislation, conventions, regulations, planning, integration, partnerships and generic improvements in the research environment, rather than new programs or budget requirements. The nature of these requirements makes it possible to implement the AADPD across a wide range of economic situations.
2. **The AADPD agenda would make a wide range of contributions to sustainable development.** Five out of six of its pillars connect directly to the 2030 Agenda for Sustainable Development and three of its pillars likewise connect with the African Union’s Agenda 2063. Only the AADPD’s “data and statistics” pillar is complementary, rather than overlapping.

3. **The AADPD's contributions to sustainable development work through three main pathways**, whether **direct** (new specific programs), **indirect** (through the demographic dividend), or **interactive** (through improvements in the institutional and policy environment). This mix of pathways is an interesting feature that spreads the reach of the AADPD to have impacts in the short, medium and long-terms, in addition to covering multiple objectives.

4. The indirect effects of the AADPD (through the demographic dividend) can operate by advancing healthy fertility transitions or enabling the conversion of the favorable age dependency ratios (that result from fertility transitions) into socioeconomic advances.

5. Altogether **the full AADPD effects are a sum of its direct, indirect and interactive effects**. Each of these three effects can thus be seen as a low-bound for the total AADPD effect. Estimation of the aggregate AADPD effect can therefore be helped by current research efforts to measure the demographic dividend in Africa.

6. Many (45%) of the commitments extend to the entire population; and the commitments targeting specific groups often **focus widely on women and girls (15%), migrants (11%), youth and children (9%)**, families (5%). Looking specifically at the distribution of these population targets by age and sex, the pyramid shows a clear focus on women (20 commitments exclusively target women versus 4 for men) and youth and children (16 commitments as against 10 for adults and 8 for older people).

7. The AADPD is **underpinned by, and strongly supports, human rights principles**, with great emphasis on civic rights (43 commitments), then economic (16) and reproductive (15) rights.

The guide's **micro-monitoring component** reviews specific indicators that can be used to track each commitment, and the extent to which these indicators are validated elsewhere, notably in current efforts to monitor the SDGs or Agenda 2063. The results show that many of the indicators required to monitor the AADPD are already considered in the SDGs or Africa 2063 frameworks. Some synergy is therefore possible as countries pursue the AADPD alongside their other commitments to development. The list of indicators for the 88 commitments, along with sources, is included in a separate document.

I. INTRODUCTION

After 20 years of implementing the Programme of Action of the International Conference on Population and Development (ICPD), a regional review in Africa was commissioned as part of the ICPD Global Survey. The findings of the survey and the regional ministerial review conferences and their outcomes constitute the core basis for report titled *Framework of Actions for the follow up to the ICPD Beyond 2014*.

The review noted the need to refocus the ICPD and respond to “new challenges relevant to population and development and to the changing development environment.” Some of the new development noted were: (a) the world has grown more unequal in both earnings and wealth; (b) demographic trends are far more diverse; (c) migration, rapid urbanization is unfolding in many countries; (d) There has been an explosion in access to information; and (e) the threats of climate change have grown, with the potential to undermine development.

The ICPD Beyond 2014 reiterated the inspiration of the 1994 Programme of Action by emphasizing the need to invest in the dignity and human rights and capabilities of all persons, including ensuring the equal rights of women and girls, and guided by a comprehensive definition of sexual and reproductive health and rights, are preconditions for building resilient societies with the capacity for long-term economic growth, sustainability and well-being in the face of social and environmental change.

At the 2013 Regional Conference on Population and Development, the African Ministers adopted the Addis Ababa Declaration on Population and Development (AADPD). The declaration reaffirmed the region’s commitment to the ICPD Programme of Action beyond 2014 as the framework for addressing issues of population and development. The theme of the AADPD was selected “*Harnessing the demographic dividend in Africa*”

The declaration comprised a total of 88 priority measures (commitments) grouped under six pillars:ⁱ dignity and equality, health, place and mobility, governance, data and statistics, and international cooperation and partnerships; and it further stressed the need to connect the AADPD to other major global and regional agendas related to sustainable development.

The AADPD rests on six thematic pillars. Each pillar covers several commitments, as follows: dignity and equality (29 commitments); place and mobility (19 commitments); health (17 commitments); partnership and international cooperation (11 commitments); data and statistics (7 commitments); and governance (5 commitments).

Beyond its sheer scope, this declaration matters for three reasons: it reaffirms and consolidates past commitments in the area of population and development; it overlaps - in content and timing - with other major development agendas, notably the 2030 Agenda for Sustainable Development and the African Union's (AU) Agenda 2063; and it was officially endorsed by African Heads of State and Government at the African Union Summit. As such, its effective implementation and impacts must be monitored and reported.

II. WHY MONITOR the AADPD?

The arguments for monitoring the AADPD are both generic and specific. As with any major public program or policy, monitoring is warranted on grounds of accountability, effectiveness and efficiency. Planners cannot assess progress without clear benchmarks and reliable metrics to track outcomes. Nor can they improve their efficient use of public resources. Countries must be able to track whether official commitments are being fulfilled, and specific steps taken to meet policy promises. Beyond simply following-up the implementation, countries must see whether the desired goals are obtained once commitments are followed. Thus, if a community commits to building a hospital as a means to reduce child mortality, the monitoring/evaluation (M&E) process must not only track whether or not the hospital is built, but also that it does indeed reduce child mortality. Taking one step further, the M&E process might also assess efficiency, in order to limit wasteful spending and achieve the best outcomes with this spending. As a prominent public policy commitment to sustainable development, the AADPD should be especially subject to M&E.

In addition, the AADPD deserves special M&E scrutiny for three other reasons. First, monitoring was specifically mandated in the declaration itself. In its clause #84, the AADPD requests to "*monitor regularly the achievement of the goals of the Declaration in the context of reporting on the post-2015 development agenda*," and it further underscores (commitment #85) the need to "*conduct*

sound monitoring and evaluation of this Declaration based on reliable population data, projections, and consideration of future scenarios.” (Addis Ababa Declaration 2013). The present monitoring guide is therefore a direct response to the AADPD itself. As such, it is both an instrument to monitor other goals and an output/indication that the expressed need for an M&E process is set in motion.

The AADPD also deserves special M&E scrutiny because of its public prominence, which itself stems from the large number of countries that endorsed this outcome at the highest political level, and the diversity, relevance and ambition of its goals. All African countries signatory to the declaration; Furthermore, the debate on population and development has evolved historically from a narrow link between population growth and GDP growth to a complex set of relations between many population and development variables operating at multiple levels. On the development side, the discourse on the meaning of development has evolved from an early emphasis of economic growth to gradual incorporation of inequality, capabilities, human development, sustainability, and the myriad of development objectives evident in today’s Sustainable Development Goals (SDGs). Similarly, population concerns are now recognized as being multi-dimensional, ranging from growth to say age structure, aging, urbanization and migration; Finally, these influences are seen as operating at multiple levels, as reflected in the ICPD Programme of Action (PoA), and the Framework of Actions for the follow up to the PoA of the ICPD Beyond 2014. Not only are these goals many, they are also lofty. Their ambition mirrors the aspirations expressed in the SDGs for instance to “*end poverty ... and ensure that all people enjoy peace and prosperity*”. The extent to which the region comes closer to these ambitious goals rests in part on a close monitoring and adjustment of policies.

There is yet another reason why monitoring is timely today. Many African countries are undergoing important demographic changes (e.g. international migration, nuptiality, changes in fertility, or changes in age structure) with potentially lasting impacts on economic prospects and the achievement of sustainable development objectives. Monitoring these demographic trends and their economic impacts is a major, additional, justification for M&E.

Granted that M&E is needed, it must be done well. Critics of monitoring usually carp less on principle but execution. Their critique usually focuses on data quality, stakeholder participation, costs, or the application of findingsⁱⁱ. Efforts to monitor the AADPD must therefore achieve participation and rigor. **Participation** means involving key stakeholders. Through consultative meetings --including a

May 2016 meeting in Addis Ababa jointly hosted by the United Nations Economic Commission for Africa (UNECA), the African Union (AU) and the United Nations Population Fund (UNFPA) -- representatives of National Population Commissions and other national experts from nearly twenty countries offered feedback on the form and content of this document. This was followed by the inaugural African Population Experts Committee (APEC) Meeting held in Addis Ababa in November 2016, where a process for consultation and feedback was established to leverage the expertise of all 54 African Member State representatives in the development of the AADPD Operational Guide and Monitoring and Evaluation Framework.

Rigor means meeting high standards of reliability. At the same time, the monitoring exercise should be both user-friendly and country-specific: it should be easy to implement, and flexible enough to fit the circumstances of each country. Finally, it should begin early. An early start makes it easier to gauge later progress, to support African countries at a critical time of their demographic transition, and to jointly monitor the AADPD, 2030, and 2063 Agendas. In turn, the joint monitoring prevents a dispersion of effort, a waste of resources and evaluation fatigue.

By rigorously monitoring its AADPD commitments, the region will advance three nested and crucial goals: a demographic dividend, inclusive economic growth, and sustainable development. In short, it will get closer to achieving ‘the Africa We Want.’

III. CHALLENGES OF MONITORING

Although M&E is necessary and useful, it is also difficult. The most basic difficulties are about logistics and resource commitments. Because it covers many countries, multiple goals, and long-term horizon, the AADPD needs a sustained and substantial budget commitment. This budget is to support direct operations (including the collection of relevant and high quality data) and special programs but also to build M&E capacity within the national institutions tasked to lead the M&E operations.

The process of M&E also faces difficulties of a more conceptual and methodological nature. One is sound measurement: analysts must find valid and

reliable indicators for each commitment. Analysts can borrow from existing lists of indicators, but the AADPD also includes original goals (not covered in other regional/global agendas) that require new metrics. Also, insofar as multiple indicators exist for any given commitment, analysts must decide on the most valid, reliable, or parsimonious measures.

Beyond measurement issues, evaluators face the even bigger challenge of impact assessment. It is a daunting task to gauge the net effects of a policy commitment - let alone those of the full set of AADPD commitments: the analyst seeking to establish causation must meet a high burden of proof. S/he must demonstrate that changes seen after the AADPD's implementation (if any) are the result of this implementation, rather than coincidental. Because "correlation is not causation," the analyst must be able to rule out all the competing explanations for post-AADPD transformations, in order to leave the AADPD as the most plausible and likely explanation. Competing explanations include "*history*" (the relevance of other historical events occurring at the same time as the AADPD is being implemented), "*maturity*," (outcomes that reflect the natural course of development) "*endogenous placement*" (the possibility that countries most likely to implement the AADPD are distinct from non-compliers in ways that affect outcomes). All of these explanations are not easily ruled out, especially—as is true here—when analysts cannot apply randomized control or econometric techniques often recommended to test causation. For these reasons, our impact evaluation uses indirect strategies. On the other hand, the micro-monitoring is expected to be fairly direct and systematic.

IV. METHOD

IV.1 Broad principles

Five main principles, all embedded in the AADPD preamble, undergird the construction of our monitoring guide:ⁱⁱⁱ They include integrity, integration, disaggregation, prioritization, and flexibility. The principle of "*integrity*" is about maintaining the letter and the spirit of the full declaration. Although the number of AADPD's commitments (88 in total) is large, it is non-negotiable. The guide does not narrow the scope of the declaration or reduce its ambition.

The principle of "*integration*" is about connecting the AADPD to contemporaneous global and regional initiatives such as the 2030 and 2063 Agendas. The overlap and synergies between these initiatives must be considered. The Addis declaration also recommends a connection to the

demographic dividend. To facilitate this integration, one needs a clear conceptual framework linking the AADPD with these other agendas.

The principle of “*disaggregation*” requires detailed attention to specific subpopulations, such as children, adolescents, girls, youth, women, and older persons. Such targeting is consistent with the demographic dividend’s focus on demographic composition as a central concept. Although many AADPD commitments are national in scope, this disaggregation draws attention to equity and group-specific responses. A central finding in the 20-year review of the ICPD (The Framework of Actions) across all regions was that aggregate trends often mask sub-national inequalities and exclusion. Disaggregation was accordingly mandated in the AADPD, with regards to data collection in particular.

The principle of “*prioritization*” means recognizing the importance of all the AADPD’s 88 commitments, but also acknowledging that they vary in urgency and potential impact. Setting priorities helps policy makers navigate the full list of commitments and make efficient choices in a context of scarcity. Priorities can be based on the size or vulnerability of target groups. They can also consider comparative advantage, i.e., whether a commitment fills a unique niche among the many commitments contained in the AADPD, the UN’s post-2015 and the AU’s 2063 agendas. Finally, they can be based on a country’s stage in the demographic, economic and political transitions.

The principle of “*flexibility*” recognizes the socioeconomic and demographic diversity of African countries: the international variations in cultural/legal environments, development priorities, or demographic trends should inform the relative relevance of different provisions of the AADPD. Although the monitoring guide applies broadly, it must adapt to each country’s development and institutional context.

As a final principle, the M&E process will distinguish between two complementary aims. The first is ***micro-monitoring***, i.e., tracking the implementation of individual AADPD commitments. This goal requires summarizing each commitment and operationalizing it with one/several indicators. A second aim, ***macro-evaluation***, is to evaluate the ultimate impacts of the AADPD as a whole: Does successful implementation of the AADPD have the expected impacts on sustainable development? How does this agenda support or complement other regional agendas? These two questions are discussed below.^{iv}

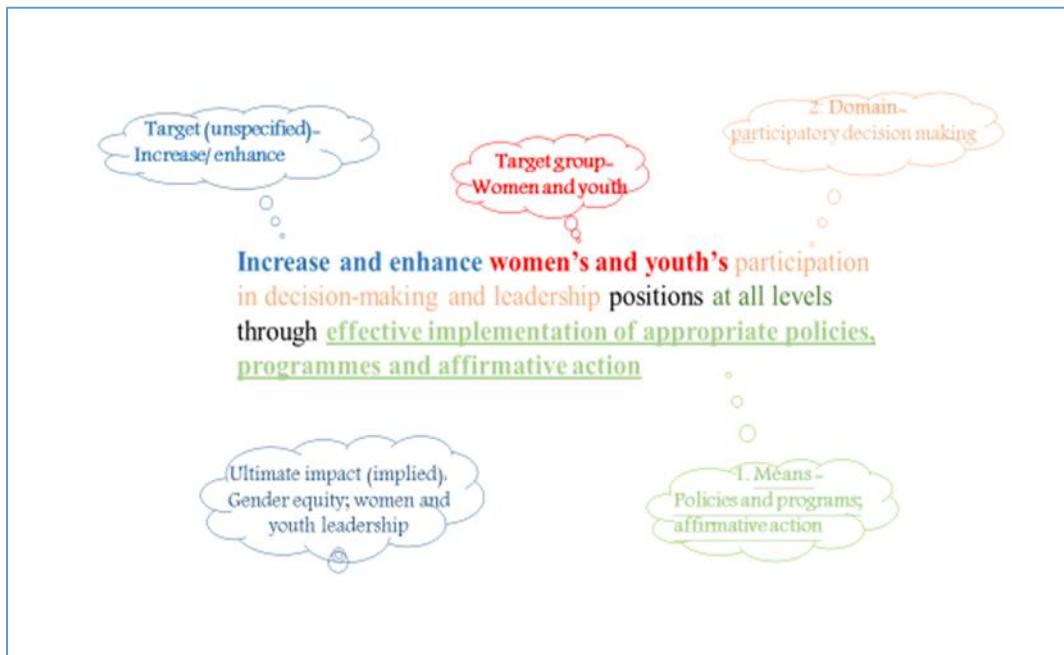
IV.2 Micro-monitoring

The process of micro-monitoring of AADPD - i.e., tracking the implementation of its individual commitments - requires converting a long commitment into a succinct and reliable indicator. This conversion, in turn, is based on a content analysis that breaks down individual commitments into (a) proposed input(s), (b) domain of intervention, (c) target groups, (d) entry point, and eventually, rationale and expected impact. After this content-analysis, it becomes easier to find a good indicator for the commitment.

Many AADPD commitments are expressed in rich detail. Through content analysis, long statements are turned into a small subset of markers that capture the action intended, its domain, target populations, and end goal. If one merely wishes to monitor implementation, one can focus on the means/inputs applied. To illustrate, consider the commitment #8 in the AADPD. One can break down this commitment as summarized below, i.e.:

1. The input (means applied) here is the ‘policies and programs of affirmative action.’
2. The dimension/domain of development targeted is ‘participatory decision making and leadership.’
3. The expected impact (mostly implied) here is ‘achieving gender equity, and boosting women and youth leadership.’
4. The target group is ‘women and youth’
5. The target (unspecified) is ‘increase and enhance’ participation in decision-making, and in leadership positions. One could well imagine a more specific and quantified target such as gender equality in participation, but such specification was not made in this particular instance.

Figure 1 Illustrative content analysis of an AADPD commitment



Ultimately, a long and fluid commitment is converted into a discrete set of constitutive components that the analyst can attempt to quantify and study. The exercise shown in this illustration was repeated for each commitment, and the results are shown in a spreadsheet attached in appendix. As these results indicate, not all AADPD commitments are equally detailed: Some components are implied rather than explicit; some commitments cover multiple actions in different domains; the target groups might be undefined.

To describe this exercise in simpler terms, it does break a commitment down into its constitutive elements. Even more specifically, it characterizes the essence of each commitment in terms of its answer to roughly three questions: What? How? Why? Each of these questions is briefly reviewed:

What is to be done? The idea here is to describe the type of action envisioned, the broad area of development covered, the type of human rights pursued, and the target group. The end goal of this process is to specify an indicator of implementation that measures whether or not (or how much) countries follow up on the recommendation.

Why is it done? The idea here is to describe the rationale undergirding the commitment; the ultimate objective/reason why the commitment is being made. Some of these ultimate objectives replicate goals listed in the SDGs or the 2063 Agenda. The end goal of this process is to formulate an impact indicator, i.e., how much the implementation of a specific AADPD commitment affects a valued development goal.

How does the commitment lead to the outcome? The idea here is to clarify the logical process linking a recommendation to its intended impact on sustainable development. The block ends with a process indicator. Our analysis of this area distinguishes between three main pathways that may be direct, indirect, or interactive.

- . In a direct pathway, in which an AADPD commitment directly affects a final development outcome, such as poverty
- . An indirect pathway through the demographic dividend; in this case, the AADPD commitment matters mostly because it supports a fertility transition and other processes that help harness a demographic dividend;
- .An interactive pathway, in which the AADPD commitment is expected to enhance existing legislation, policies, programs, or service delivery systems.

Distinguishing between these complementary pathways/ mechanisms is useful for three reasons. First, they make explicit the theoretical rationale for expecting any of the AADPD commitments to matter in realizing sustainable development. Second, each pathway suggests a different time frame of impact, with the direct pathway having the most immediate effects, the indirect having a medium term effect, and the interactive having a longer-term and diffuse but potentially greater influence ultimately. Third, this typology of pathways, especially the emphasis of the indirect pathway, connects the AADPD to current scholarship on the demographic dividend. As is argued later in the guide, efforts to assess the impact of the AADPD can benefit from existing research to measure the size of the demographic dividend in various countries. If the dividend is indeed one of the three pathways through which the AADPD enhances sustainable development, then the size of a national dividend can be considered a “lower-bound” estimate for the impact of the AADPD.

Building on answers to the “what/why/how” questions, one can ultimately find summary indicators that capture the implementation (what), the impact (why) and the process (how) by which each AADPD commitment affects the broad goal of sustainable development. Ideally, all these indicators should be valid, reliable, and practical.

A valid indicator is one that has a logical relationship to the commitment one intends to measure. It must further cover all the dimensions of this commitment. For instance, an indicator of women’s empowerment should ideally cover empowerment in the social, economic, and political arenas. Finally, it should ideally have been validated in previous studies as well.

A reliable indicator must yield a consistent meaning across places rather than losing meaning after translation or adaptation to different national contexts. Indicators can be qualitative or quantitative. They should also be relatively easy to track; the necessary data must be easily gathered or obtained from administrative sources or survey data. In selecting indicators that meet all these specifications, the AADPD monitoring can borrow from existing monitoring frameworks developed for other global or regional agendas.

IV.3 Macro-evaluation

Just as with the micro-monitoring, the macro-evaluation process builds on the content-analysis illustrated in Figure 1. It differs however from the micro-monitoring on two crucial points. First, it attempts to evaluate (assess the impact of) the AADPD, rather than merely document its implementation: What difference does the AADPD make to the achievement of sustainable development in the region?

Second, and more fundamentally, the macro-evaluation focuses on the full set of 88 commitments contained in the AADPD declaration, rather than individual commitments. In a sense, it reprises the ‘what/why/how’ questions but from an aggregate perspective: what percentages of the 88 commitments focus on various themes, require various inputs, target various groups, and use various entry points? These specific questions are discussed below.

IV.3.1 Macro-assessment of resource commitments (what?)

This analysis gauges the relative frequency of various types of inputs, specifically, financial versus political, legal, or institutional inputs. It offers a rough gauge of feasibility: for instance, if the AADPD’s implementation mostly requires political

commitment, there is less justification for inaction on grounds of budgetary austerity. Under this broad rubric, the analysis also covers the representation of various target groups, especially vulnerable populations. It describes how often these vulnerable populations are singled out for attention, and the domains in which these groups receive special attention.

IV.3.2 Macro-assessment of goals/ targets (why?)

This analysis summarizes the distribution of various types of goals and targets for the 88 commitments. In a sense, some of this work is already done by the declaration's own grouping into six pillars. However, the new classification is expected to be finer-grained and to document the extent of overlap between the AADPD and other international agendas, including the SDGs and Agenda 2063. In addition, it documents the declaration from a human rights perspective, and examines the various types of rights emphasized in the declaration, whether economic, political, civic, etc. In the same vein, the analysis will explain the relative focus of the declaration on basic versus higher-level needs.

IV.3.2 Macro-assessment of pathways (how?)

This last analysis describes key mechanisms through which the declaration can affect sustainable development. These channels can be direct, interactive or indirect. Again, the first of these routes refers to new programs/initiatives that directly impact sustainable development, and whose impact can occur in a short-term; the second refers to commitments that enhance the effectiveness of existing policies, legislations, programs and service systems. Their contribution may be harder to isolate, but their effects can last longer insofar as they improve the country's policy environment and its institutional capacity to enforce regulations, provide services, and monitor programs. Finally, the indirect route - with the demographic dividend as an entry point - refers to commitments that will help harness the demographic dividend, which in turn promotes sustainable development. These three routes are of course not mutually exclusive, and they often interact (synergistically). Some of these interactions are explored throughout the analyses.

IV.3.4 Macro-assessment of impacts

All the macro-assessments reviewed above (in sections IV.3.1 through IV.3.3) tend to focus on intent. The macro-assessment of why's, in particular, describes the motivations/reasons why the commitment is made and the impact hoped for.

It is however important to go beyond intent and assess how much these impacts do materialize. These impact assessments can be attempted in four ways.

1. **Quasi-experimental comparisons.** This is a comparison of relevant development outcomes and how they might change after the AADPD commitments, and depending upon the country's implementation of the commitment. In that perspective, one expects sustainable development outcomes to improve after the AADPD but only or most strongly in countries implementing the commitments.
2. **Key studies:** When dealing with large-scale and complex policies, it is often difficult to isolate the net impact of a single commitment because of a potential myriad of confounding influences—many other random events or policies happening at the same time. One possibility is, in this case to rely on data from a rigorous (best-practice) study that has attempted to link the policy commitment to its development consequence and use that estimate as an approximation.
3. **Cross-system improvements:** Many of the AADPD commitments are designed to advance sustainable development through an ‘interactive’ channel, in which they improve the performance of the system. Some of the sector-specific improvements (for instance in health) can improve outcomes in other systems as well. It is therefore useful to consider the possibility of these cross-system improvements.
4. **Sum of pathways:** the AADPD was conceptualized as having three main pathways of influence on sustainable development: direct, indirect, and interactive. From that perspective, the total sum of the AADPD impact can be construed as the sum of these influences (see Figure 8, after). In case good impact data is available only for one of these pathways (e.g. the indirect pathway), then this estimate can be considered a “low-bound” estimate. The full estimate is expected to be no smaller than this low-bound estimate.

V. MAIN INSIGHTS

V.1. Macro-assessment

As indicated earlier, the macro-evaluation is organized around three central questions of “what,” “why,” and “how”. Within this large subset, the analyses focus on the following seven questions:

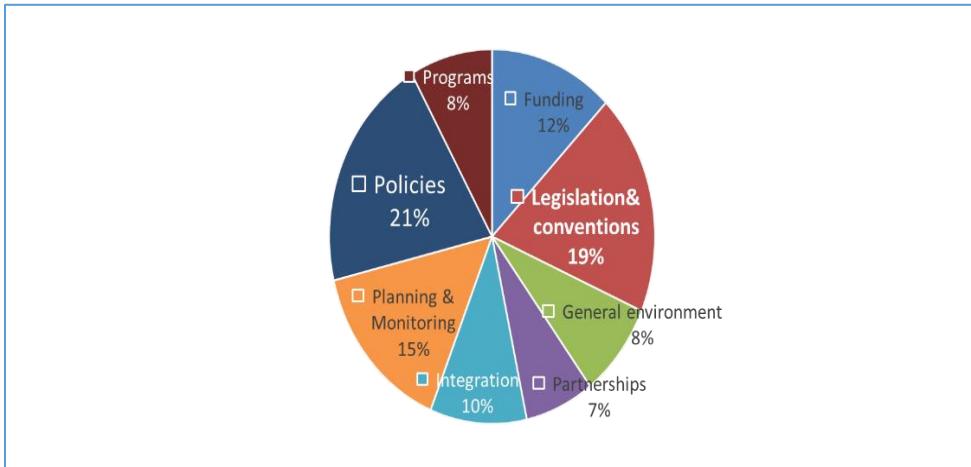
1. What are the main resources/inputs required?
2. What are the primary target populations?

3. What are the main goals pursued?
4. How much does the AADPD overlap with the SDGs and Agenda 2063?
5. What are the main rights promoted?
6. What are the main pathways through which the AADPD can advance sustainable development?
7. What is the specific contribution of the AADPD in harnessing the demographic dividend?

V.1.1. What resources are needed?

By assessing the level of resources needed to implement the AADPD project, one gets a useful indication about its economic feasibility. The higher the level of resource requirements, the more implementation will hinge upon economic conditions or be restricted to the better-off countries. Using content analytical results for all the 88 commitments, Figure 2 below shows the frequency distribution for the resource inputs needed, whether economic or otherwise. Results show that the dominant inputs required are policies (21%) and legislation/conventions (19%) that require modest budget commitments. Other inputs that similarly require modest resources include commitment calling for planning and monitoring (15%), integration (10%), partnerships (7%) and general improvements in the research environment (8%). In only 12% of the cases is funding a specific requirement, and new programs are requested in only 8% of the cases. Altogether, only these last two types of commitments (20% of cases) depend on economic resources. To be sure, some level of economic resource is always needed even in the process of enacting legislation. Still the bulk of commitments in the AADPD appear to rest on political will, and the willingness to adopt new legislation or implement existing provisions. It therefore seems hard to legitimately stall the implementation of the AADPD commitments on grounds of economic feasibility.

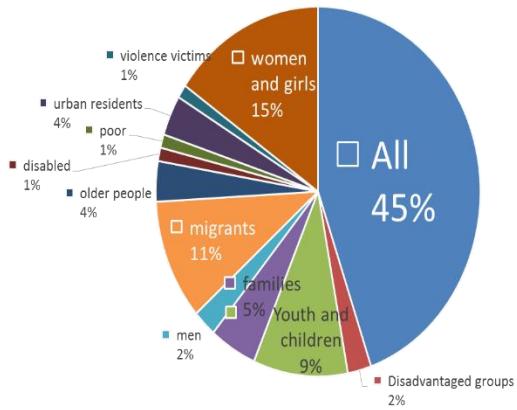
Figure 2: Frequency distribution of the AADPD commitments, by resources needed.



V.1.2. Which populations are covered?

The AADPD was purported to have a specific bent on vulnerable populations. The chart below examines the extent to which various vulnerable populations are targeted. The results shows that in 45% of the cases, coverage is generic, with no sociodemographic distinction. For the rest however, common target groups are women and girls (15%), youth and children (9%), migrants (11%) and families (5%).

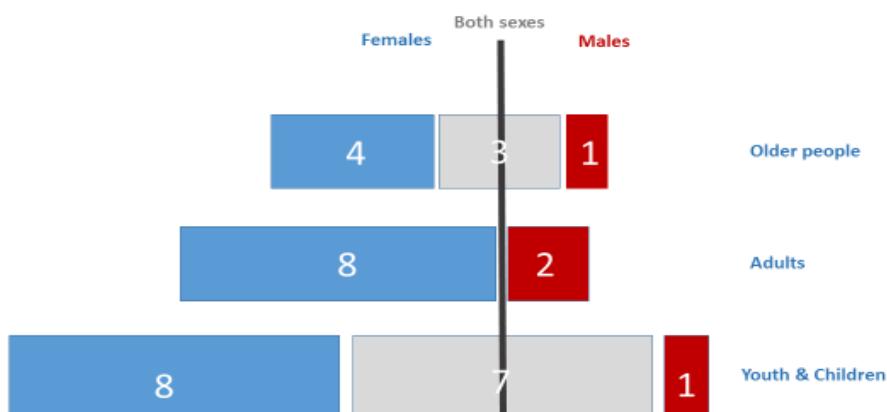
Figure 3. Frequency distribution of AADPD commitments in terms of target populations.



In sum, many of the AADPD commitments cover either the entire population or common vulnerable demographic groups. It also noteworthy however that the AADPD draws new attention to the plight of migrants, a group that is less frequently considered.

Since the AADPD is largely a demographic agenda, it is interesting to examine its coverage of different age groups. The figure below is constructed as a population pyramid. It shows that the dominant age group is youth and children (about 11 cases); and the dominant sex group is women (about 12 instances).

Figure 4. Distribution of target populations by sex and age



V.1.3. What are the main goals pursued?

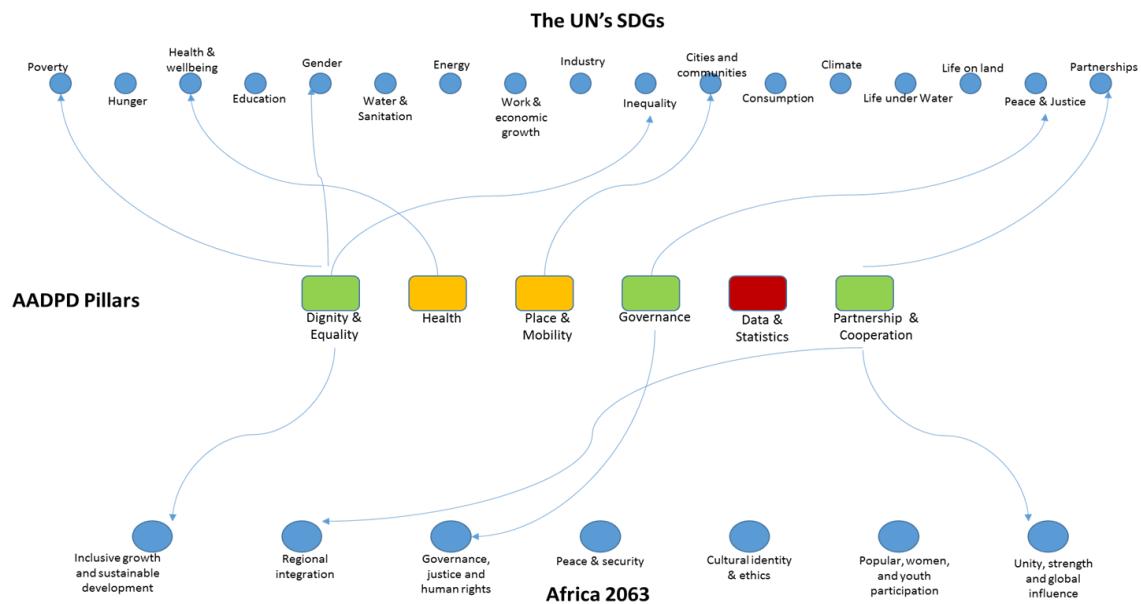
Figure 5, below, summarizes the main goals of sustainable development that are pursued in the AADPD. Focusing on the SDG's list of 17 goals, the AADPD covers at least seven major goals that include poverty (goal 1), health and wellbeing (goal 3), gender (goal 5), inequality (goal 10), cities and communities (goal 11), peace and justice (goal 16) and partnerships (goal 17).

V.1.4. How much does the AADPD overlap with SDGs and Africa 2063?

There is much overlap between the AADPD commitments and the UN's sustainable development goals, with nearly 80% of the AADPD commitments being connected to specific sustainable development goals. This underscores a need for coordination and

collaboration in the implementation of commitments, goals and targets contained in all three sustainable development agendas- AADPD, 2030 and 2063 Agendas. The overlap is not only in the detailed individual commitments but around general themes. The figure below summarizes this overlap between the AADPD and both the SDG and 2063 agendas, at the level of general themes/pillars. Of the AADPD's six pillars, three (dignity and equality, governance, partnerships and cooperation) overlap with identified pillars in the SDG and AU; An additional two pillars (health, place and mobility) overlap with only the SDG, at least at the pillar level. Only one of the AADPD six pillars (data and statistics) does not strongly overlap with a major pillar in any of the two other agendas. Yet even in these cases, themes contained within pillars of the SDG agenda or Agenda 2063 are relevant to the AADPD. For instance, targets 17.18 and 17.19 specifically speak to the need to strengthen capacities for generating good quality disaggregated data to monitor the SDGs, this is also a major point within the Agenda 2063. In sum, there is substantial overlap between these three major agendas in the region. Such overlap implies synergy in their implementation and impact but also the value of integrating their M&E efforts.

Figure 5. Overlap between AADPD pillars and other major development agendas



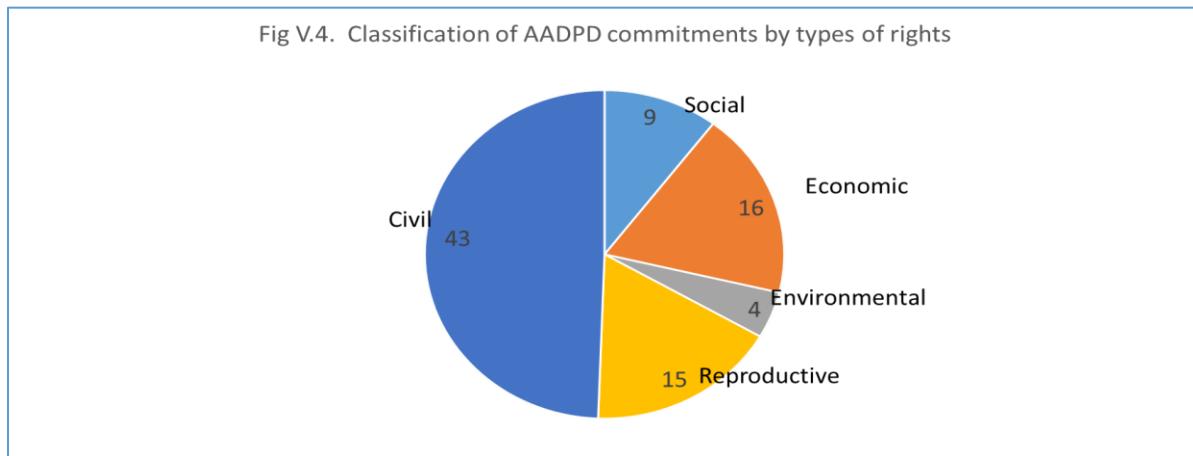
It is worth-noting however that although the AADPD overlaps with concurrent agendas, it occupies a relatively unique niche in its strong focus on demographic

outcomes related to mobility and health, issues that are of major consequence to Africa's development

V.1.5. What are the main rights promoted?

The AADPD can also be macro-evaluated based on the mix of rights it seeks to extend, whether economic, political, civic, or otherwise. The aggregation of content-analytical results for all the individual commitments shows that, as a whole, the most common categories of rights extended under the AADPD commitment will be civic (43), then economic (16), reproductive (15), social (9), and environmental (4).

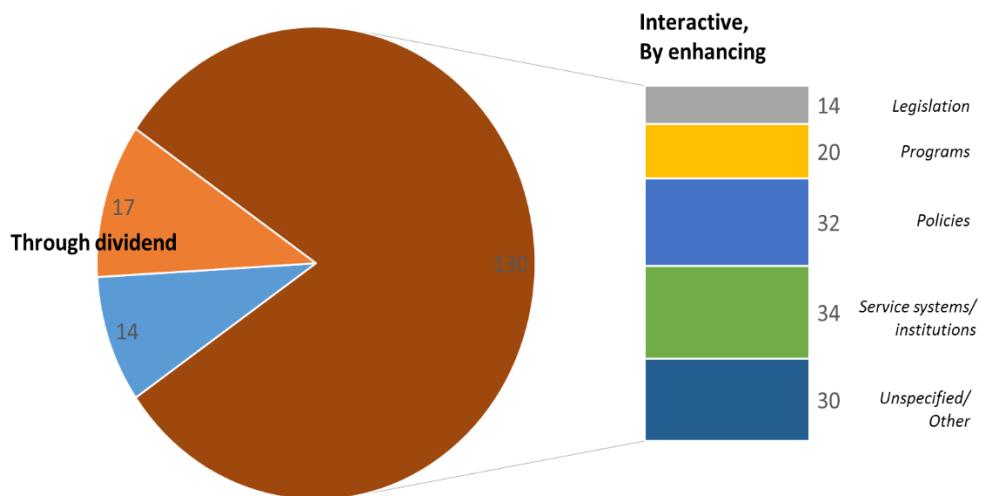
Figure 6. Distribution of AADPD commitments in terms of human rights



V.1.6. What are the main pathways through which the AADPD affects Sustainable development?

Figure 7 shows the detailed pathways leading from the AADPD to sustainable development with a focus, this time, on the interactive pathway, and the various institutional mechanisms that can be brought to bear.

Figure 7. Distribution of AADPD commitments in terms of pathways.



The interactive pathway, which is the dominant channel in the sheer number of commitments, does involve improvements in several key sub-mechanisms, namely improved service systems (34 commitments), improved policies (32 commitments), improved programs (20) and legislation (14).

V.1.7. Contributions to harnessing the demographic dividend(s)

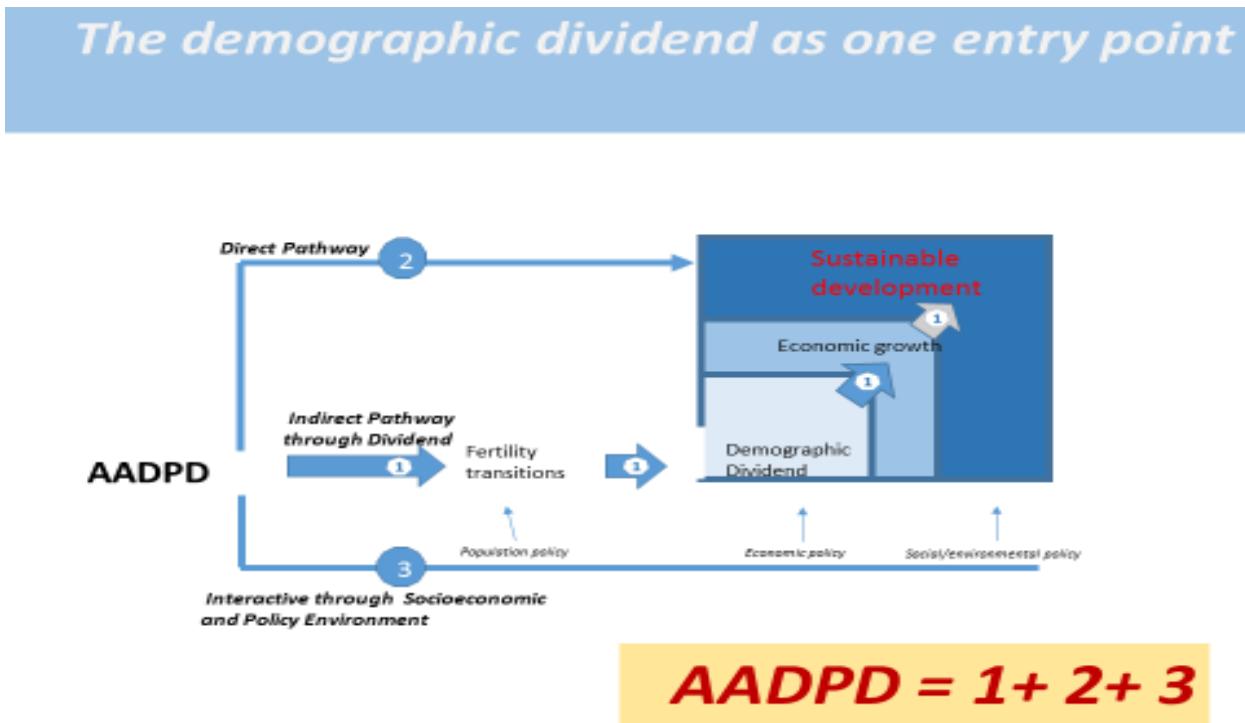
The demographic dividend is an important dimension of the AADPD agenda, for several reasons. The first is overlap: 20% of the AADPD commitments would advance the region's prospects of reaping a dividend, but the AADPD can further extend the impacts of demographic change by supporting the development of a more equitable fertility transition. With its emphasis on the economic, service, and reproductive needs of the most vulnerable populations, the AADPD can reduce the growing socioeconomic gap in fertility in most African countries. By

doing so, it would foster the extent to which the poor participate in Africa's fertility transition, and the extent to which they can reap the benefits from these transitions.^v With its human rights framing, the AADPD can serve as a standard for policies and programs that could bring about a dividend in a manner that empowers and does not constrain the choices of women and young people.

As a second reason, the AADPD and the dividend share a common turf, speaking as they both do to the connections between population and socioeconomic development. On the one hand, the AADPD is the key programmatic framework for addressing population and development issues in Africa. On the other hand, the demographic dividend is a dominant contemporary theory about the possible influences of demographic change on socioeconomic development. The connections between the two thus bear reinforcing.

A final argument why the AADPD should connect with the dividend agenda is strategic. There is much current research on Africa's dividend, and the results of this research would usefully inform questions about the macro-level impact of the AADPD agenda. As the graph below suggest, the total impact of the AADPD is the sum of its impacts through its direct, indirect, and interactive channels. Analysts interested in the overall impact of the AADPD can thus build on current research on the magnitude of the dividend, which can be taken as a lower-bound estimate of the potential impact of the AADPD.

Figure 8. Pathways from the AADPD to sustainable development



As Figure 8 further shows, the AADPD can support the achievement of sustainable development through support to population policies (that advance healthy fertility transitions) economic policies (that help the conversion of low-age dependency rates into savings and investment) and social and environmental policies (that help distribute the benefits of growth, leaving no one behind, while alleviating its harmful consequences for the environment).

V.1. Micro-monitoring

The micro-monitoring of the AADPD is about following individual commitments and their diligent implementation. To keep track of implementation, each commitment must be operationalized by one or several indicators. Indicators can focus on implementation, process or outcome. They must be both valid and reliable. Insofar as the same indicators are also used on other efforts to monitor sustainable development, some synergy is possible between the AADPD and contemporary agendas of sustainable development

(2030 and 2063 Agendas). The full list of AADPD indicators selected is described and discussed in a separate document.

VI. CONCLUSION

The present monitoring guide lays out the broad principles and methods to track the implementation and impact of this declaration. It is designed to support two complementary components of the M&E process: a **macro-evaluation of the AADPD as a whole, and a micro-monitoring** of each of its 88 individual commitments. Both processes begin with a detailed content analysis of individual commitments, mostly in terms of “what” (the resource inputs needed), “why” (the intended outcome), and “how” (the process leading from the input to the outcome).

Using the results of this content analysis, the macro-evaluation focuses on the declaration as a whole. In other words, it tallies the aggregate results of the content-analysis of all 88 commitments. Within this realm, it explores how much the AADPD’s implementation depends on financial investments versus institutional building or policy commitment, and how it advances the goal of sustainable development. It further examines whether the AADPD helps harness the demographic dividend, advance human rights, complements other existing agendas, and covers the most vulnerable populations. The results suggest the following:

The AADPD agenda is eminently feasible. In a majority of cases (80%), the resources inputs needed are about legislation, conventions, regulations, planning, integration, partnerships and generic improvements in research environment, rather than new programs or budget requirements. The nature of these requirements makes it possible to implement the AADPD across a wide range of economic situations.

The impact of this agenda is also likely to be long-lasting and have spillover effects. By strengthening service systems, the AADPD will have secondary impacts that benefit policy-making and program implementation across many sectors of the economy.

In addition to making a wide spectrum of contributions to sustainable development, the AADPD greatly overlaps with other major development agendas. For instance, five out of six of its pillars connect directly to pillars in the United Nations' SDG agenda and three of its pillars likewise connect with the African Union's 2063 agenda. Even if the AADPD's "data and statistics" pillar does not have a clear parallel at the broadest level of the SDG or Agenda 2063, specific targets within these agendas address the need to strengthen capacity for generating good quality data.

In its contributions to sustainable development, the AADPD works through three main pathways: a direct (new specific programs), an indirect (through the demographic dividend), and an interactive pathway (through improvements in the institutional and policy environment). This mix of pathways is a fundamentally interesting feature, that makes it possible for the AADPD to have impact on the short, medium and long-terms, in addition to covering multiple objectives.

The indirect effects of the AADPD (through the demographic dividend) can operate by advancing healthy fertility transitions or enabling the conversion of the favorable age dependency ratios that result from fertility transition into socioeconomic advances.

Altogether the full AADPD effects can be seen as a sum of its direct, indirect and interactive effects. Each of these three constitutive effects can thus be seen as a low-bound for the total AADPD effect. Estimation of the aggregate AADPD effect can therefore be helped by current research efforts to measure the demographic dividend in Africa.

Many (45%) of commitments extend to the entire population, and the ones targeting specific groups often focus on widely on women and girls (15%), migrants (11%), youth and children (9%), families (5%). Looking more specifically at the distribution of these population targets by age and sex, the pyramid shows a clear focus on women (20 commitments exclusively target women versus 4 for men) and youth and children (16 commitments as against 10 for adults and 8 for older people). This focus on youth is apposite in light of the demographic importance of this population and its strategic role in shaping future demographic and economic outcomes. The focus on women is likewise warranted from a human rights and socioeconomic perspective, in a context where dividends will hinge on changes in women's productive and reproductive roles.

It follows and strongly supports a human rights agenda, with great emphasis on civic rights (43 commitments), then economic (16) and reproductive (15) rights.

The guide's **micro-monitoring component** reviews specific indicators that can be used to track each commitment, and the extent to which these indicators are validated elsewhere, notably in current efforts to monitor the SDGs or Agenda 2063. The results indicate that many of the indicators required to monitor the AADPD are already considered in SDGs or Africa 2063 frameworks. Some synergy is therefore possible as countries pursue the AADPD alongside their other commitments to sustainable development. The list of indicators for the 88 commitments, along with sources, is included in a separate document.

FIRST PILLAR: DIGNITY AND EQUALITY

Commitment #1

Develop, strengthen and implement appropriate legislation, national policies and programmes that guarantee and promote human rights, dignity and equality for inclusive sustainable economic and social development in all sectors;

<u>Implementation indicator</u> →	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Percent public budget allocated to social protection programs. (SDG 8.b.1) 2. Minimum wage policies; 3. Tax policies 4. Percent of national budget allocated to public education 5. Percent of national budget in public health; 6. Existence/ enforcement of laws to guarantee human rights; 7. Public campaigns and education programs to promote awareness of human rights		1. Gini coefficient; OR Proportion of people living below 50 percent of the median income; (SDG 10.2.1) 2. Minimum wage (SHaSA 10.4.1) 3. Percent of the population benefiting from at least one social protection program; (SHaSA 10.4.1) 4. Percent poor having access to credit. % of population with an account at a formal financial institution (SHaSA 5.a.2) 5. Percent households with access to social programs related to food or housing ; or living in decent housing (SHaSA 1.5.8)	<i>By 2030, reduce economic inequality by half</i>	SDG 8.b., 10.1, and 10.2.1/ SHaSA 5.a, 1.5.8, 10.4.1	SDG 10 .2.1 Proportion of people living below 50 per cent of median income, by age, sex and persons with disabilities	10.4.1 % of people covered by minimum social protection floor, that include basic education and health packages, by age, sex, economic status, origin, place of residence, disability, and civil status (widows, partners in union outside of marriage, divorced spouses, orphan children) and other characteristics (sub groups) of relevance for each country	

Commitment #2

Develop, strengthen and implement effective national strategies aimed at **eradicating extreme poverty**, inclusive growth and economic development, as applicable, that also target disadvantaged groups, especially women, older persons, youth, unemployed persons, people living with HIV and AIDS and persons with disabilities, in both urban and rural area

<u>Implementation indicator</u>	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of national strategy to eradicate extreme poverty; 2. Percent of government budget or resources allocated directly to poverty reduction programs		1. Percent of people living on less than \$1.25 a day, by vulnerable group; (SDG 1.1.1, SHaSA 1.1.2) 2. Proportion of people living in housing with access to basic services, by vulnerable group; (SDG target 11.1) 3. Proportion of people having more than one meal per day, by vulnerable group; or prevalence of undernourishment; (SDG 2.1.1) 4. Multidimensional poverty index. (SHaSA 1.2.1)	1. By 2030, eradicate extreme poverty for all people everywhere, as measured by people living on less than 1.25 per day. 2. reduce by half the proportion of people in poverty in all its dimensions, according to national definitions	SDG 1.1.. 1.2, 2.1/ SHaSA 1.a, 1.1.2	1.1.1 Proportion of population below the international poverty line, by sex, age, employment status and geographical location (urban/rural)	1.1.2 Poverty gap index (income) 1.2.1 Multidimensional Poverty index	

Commitment #3

Harmonize national legislation with ratified international instruments and accelerate the implementation of the respective national, regional and international commitments on gender equality and women's empowerment in all sectors and eliminate all forms of *discrimination against women and girls*

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SH aSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Harmonize national legislation with international commitments on gender inequality. 2. Create an independent body responsible for promoting and protecting the right to non discrimination		1. Percentage of women/girls reporting discrimination in any sphere of life; (SDG 5.1.1) 2. Ratio of women to men in key institutions, including school, parliament, managerial positions (partially covered in SDG 5.5.1, SHaSA 5.5.1 and 5.5.5)	By 2030, eliminate all forms of discrimination against all women and girls everywhere; By 2030, achieve gender parity in all key institutions	SDG 5.1. / SHaSA 4.5., 5.5, 10.3	5.1.1 Whether or not legal frameworks are in place to promote, enforce and monitor equality and non-discrimination on the basis of sex 5.5.1 Proportion of seats held by women in national parliaments and local governments 4.5.1 Parity indices (female/male, rural/urban, bottom/top wealth quintile and others such as disability status, indigenous peoples and conflict affected, as data become available) for all education indicators on this list that can be disaggregated	5.5.1 Proportion of women in managerial positions by sector 5.5.5 Proportion of women in Parliament 4.5.1 Ratio of girls to boys in education	

Commitment #4

Review, revise, amend or abolish all laws, regulations, policies, practices and customs that have discriminatory impact on women, youth, especially girls, without distinction of any kind, and ensure that the provisions of multiple legal systems comply with international human rights regulations and laws;

<u>Implementation indicator</u> ➡	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Abolition of laws, regulations, and practices with a discriminatory impact on women; 2. Create an independent body responsible for monitoring discrimination against women		1. Gender parity in education; (SDG 4.5.1 and SHaSA 4.5.1) 2. Gender parity in labor force participation and wages; (partially covered in SDG 8.6.1, it does not include wage components) 3. Gender parity in representation in leadership and managerial positions; (SDG 5.5.2 and SHaSA 5.5.1) 4. Youth representation in leadership and mid-managerial positions	<i>By 2030, eliminate discrimination against women (and youth where relevant) in all spheres of domestic, economic, and political life</i>	SDG 5.1,5.5,4.5,/ SHASA 5.5,4.5,5.1	5.1.1 Whether or not legal frameworks are in place to promote, enforce and monitor equality and non-discrimination on the basis of sex 5.5.1 Proportion of seats held by women in national parliaments and local governments 5.5.2 Proportion of women in managerial positions 4.5.1 Parity indices (female/male, rural/urban, bottom/top wealth quintile and others such as disability status, indigenous peoples and conflict affected, as data become available) for all education indicators on this list that can be disaggregated	5.5.1 Proportion of women in Parliament 4.5.1 Ratio of girls to boys in education 5.1.1 Whether or not legal frameworks discriminate against women and girls, as identified by the CEDAW committee	

Commitment #5

Increase and enhance the *equal participation of women*, especially those living in rural areas, in high added value production by increasing their equal access to training and decent work, including, equal pay for equal work, access to social security, paid parental leave, sick and care leave, and other socio-economic benefits, through the design and implementation of gender sensitive budgets with full accountability;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/S HaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Support paid parental leave; sick and care leave 2. Offer work-place accommodations for nursing mothers; 3. Create and supoprt gender equality offices/units; 4. Create/ support institutions providing leadership training for women		1.Gender parity in education; by residence. <i>(partially covered in SDG 4.5.1)</i> 2. Gender parity in labor force participation, by economic sector; <i>(SDG 8.5.2)</i> 3. Gender parity in earnings and employment benefits <i>(SDG 8.5.1)</i> 4. Percent workers with access to parental leave	<i>By 2030, achieve gender parity in access to training, employment and decent work for women and men</i>	SDG 4.5, 5.5, 8.5/ SHASA 8.5	5.5.2 Proportion of women in managerial positions 8.5.1 Average hourly earnings of female and male employees, by occupation, age and persons with disabilities 8.5.2 Unemployment rate, by sex, age and persons with disabilities 4.5.1 Parity indices (female/male, rural/urban, bottom/top wealth quintile and others such as disability status, indigenous peoples and conflictaffected, as data become available) for all education indicators on this list that can be disaggregated	8.5.1 Unemployment rate by sex, age and disability 8.5.2 Decent employment for working age by population ratio gender, age and disability	

Commitment #6

Enhance male participation and equal and equitable sharing of responsibilities through support programmes that promote gender equality in rights and opportunities;

<u>Implementation indicator</u> ➔	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of national programs to promote gender equality in rights		1. Proportion of time spent on unpaid domestic and care work, by sex and age (SDG 5.4.1 and SHaSA 5.4.1)	<i>By 2030, substantially reduce/ eliminate gender disparity in domestic work</i>	SDG 5.4 /SHASA 5.4	5.4.1 Proportion of time spent on unpaid domestic and care work, by sex, age and location	5.4.1 Average weekly hours spent on unpaid domestic and care work, by sex, age and location	

Commitment #7

Enact and implement laws and introduce institutional reforms to ensure economic empowerment of women and young people through equal access to ownership and control of economic resources, technology and markets, including land, property and inheritance rights;

<u>Implementation indicator</u>	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/S HaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of laws guaranteeing women's equal access to ownership and control of resources; (SDG 1.4.2) 2. Existence of systems to track and make public allocations for gender equality and women's empowerment (SDG 5.c.1)		1. Proportion of people with access to inheritance, by sex and age group; (SDG 1.4.2, SHaSA 5.a.1) 2. Share of households with title deed to land, by sex; (SDG 1.4.2, SHaSA 5.a.1) 3. Percent women and young people with access to credit; (SHaSA 5.a.2)	<i>By 2030, ensure that all, including women and the young, have equal rights to ownership and control of land, property and inheritance</i>	SDG 1.4, 4.4, 5.a, 5.c / SDG 5.a., 5.b	1.4.2 Proportion of total adult population with secure tenure rights to land, with legally recognized documentation and who perceive their rights to land as secure, by sex and by type of tenure 4.4.1 Proportion of youth and adults with information and communications technology (ICT) skills, by type of skill 5.a.2 Proportion of countries where the legal framework (including customary law) guarantees women's equal rights to land ownership and/or control 5.c.1 Proportion of countries with systems to track and make public allocations for gender equality and women's empowerment	5.a.1 Proportion of adult population owning land by sex, age and location 5.a.2 Proportion of population with an account at a formal financial institution by sex and age 5.a.3 % of loan portfolios disbursed to women by size of the portfolio 5.b.1 Number of ICT platforms that promote empowerment of women (access to information for self development, business development, call centres, counselling, etc)	

Commitment #8

Increase and enhance women's and youth's participation in decision-making and leadership positions at all levels through effective implementation of appropriate policies, programmes and affirmative action;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of affirmative action policies for women's and youth participation in decision-making		1. Proportion of parliamentary seats, ministerial positions; managerial positions held by women; (SDG 5.5.1, 5.5.2 and SHaSA 5.5.1, 5.5.5) 2. Proportion of young adults (25-34) in mid-management positions; 3. Proportion of women who have a say in household decisions for large purchases, their own health, and movement	<i>By 2030, ensure women's full and effective participation and equal opportunity for leadership at all levels of decision-making in political, economic and public life</i>	SDG 5.5./ SHASA 5.5	5.5.1 Proportion of seats held by women in national parliaments and local governments 5.5.2 Proportion of women in managerial positions	5.5.1 Proportion of women in managerial positions by sector 5.5.4 Number of women that contested in the national legislative elections 5.5.5 Proportion of women in Parliament	

Commitment #9

Develop and strengthen the implementation of public, civic and adult education programmes which address issues of gender equity, equality and women's empowerment;

<u>Implementation indicator</u> ➔	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of systems to track and make public allocations for gender equality and women's empowerment (SDG 5c1)		1. Women's parliamentary representation; (SDG 5.5.1, SHaSA 5.5.) 2. Percent of women in ministerial positions; (SDG 5.5.2, SHaSA 5.5.1) 3. Local council seats; percent of women judges	<i>By 2030, achieve gender parity in women's employment and representation in leadership and managerial positions</i>	SDG5.5./ SHASA 5.5., 5..c	5.5.1 Proportion of seats held by women in national parliaments and local governments 5.5.2 Proportion of women in managerial positions	5.c.1 Percentage of countries with systems to track and make public allocations for gender equality and women's empowerment 5.5.1 Proportion of women in managerial positions by sector 5.5.5 Proportion of women in Parliament	

Commitment #10

Address the needs of all girls, boys and children with disabilities, with regard to their rights to health, nutrition and education at all levels;

<u>Implementation indicator</u>	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaS A Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of national policies/ programs to address children's rights to health, nutrition and education; infrastructures for learners with disabilities		1. Incidence of malnutrition among children (5-14); (SDG 2.1.2/2.2.2 and SHaSA 2.2.1) 2. Percent children having less than two meals a day; 3. Prevalence of stunting among children under 5; (SDG 2.1.2/2.2.2 and SHaSA 2.2.1) 4. Percent of food consumed that is produced locally. 5. Child mortality (<5), by gender; 6. Primary and Secondary school completion (20-24) by gender and disability status. (SDG 4.1.1 and SHaSA 4.1.1) 7. percent of children with required proficiency in reading and mathematics. (SDG 4.1.1)	<i>By 2030, end hunger and malnutrition for all children; reduce child mortality rates by half; and achieve universal completion of primary and secondary schooling.</i>	SDG 2.1; 2.2.and 4.1/ SHaSA 2.1 , 2.2.and 4.1	4.1.1 Percentage of children/young people: (a) in grades 2/3; (b) at the end of primary; and (c) at the end of lower secondary achieving at least a minimum proficiency level in (i) reading and (ii) mathematics. Disaggregations: sex, location, wealth (and others where data are available) 4.5.1 Parity indices (female/male, rural/urban, bottom/top wealth quintile and others such as disability status, indigenous peoples and conflict affected, as data become available) for all education indicators on this list that can be disaggregated	2.1.1 Food poverty rate 2.2.1 Prevalence of stunted under five children 4.1.1 Primary, Secondary first and second levels completion rate	

Commitment # 11

Address the causes of **high school drop-out rates**, among boys and girls while creating a conducive environment to **enroll** those who have never been to school

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of school-based programs to attract children who have never-enrolled in school; 2. Student /teacher ratio in primary and secondary, resp.; 3. Percent of certified trainers; 4. Share of public public expenditure allocated to each level of education		1. proportion of young adults not completing high school	<i>by 2030, reduce by half, the number of people (20-24) who do not complete high-school</i>				

Commitment # 12

Create a supportive environment to **keep** the girl child, including **married girls and pregnant girls, in school** at all levels of education, and ensure admission or re-entry to school after delivery;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of policies and school-based programs to keep pregnant girls and teen mothers in school; 2. Existence and number of education facilities that are gender sensitive; education institutions with counseling services for pregnant girls or young mothers		1. School re-entry rates after child birth; 2. Percentage of young mothers who are able to attend school	<i>By 2030, eliminate the percentage of school dropouts reportedly due to pregnancy or marriage</i>				

Commitment # 13

Develop and ensure full implementation and enforcement of policies to prevent all forms of child abuse, including school-based violence, violence against girls, sexual violence and harassment and the promotion of safe space programmes for girls;

<u>Implementation indicator</u>	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of policies to prevent school-based violence; 2. Existence of legal framework to prevent, report, address sexual violence and harassment. (SHaSA 5.1.1, 5.1.2) 3. Percent of schools with safe spaces for girls		1.. Proportion of children reporting physical punishment; incidence of psychological abuse against children; (SDG 11.7.2, 16.2.1) 2. Proportion of women and girls subjected to sexual violence, by age. (SHaSA 5.2.2 -) 3. Number of reported cases of domestic violence against women and girls; 4. Incidence of sexual harassment (SDG 11.7.2)	By 2030, eliminate all forms of child abuse, including school-based violence, gender-based violence, sexual violence and harassment	SDG 11.7, 16.2, / SHASA 5.1, 5.2	11.7.2 Proportion of persons victim of physical or sexual harassment, by sex, age, disability status and place of occurrence, in the previous 12 months 16.2.1 Proportion of children aged 1-17 years who experienced any physical punishment and/or psychological aggression by caregivers in the past month	5.1.1 Whether or not legal frameworks discriminate against women and girls, as identified by the CEDAW committee 5.2.2 Proportion of girls under 15 subjected to sexual violence	

Commitment # 14

Enact and enforce as a matter of urgency, the *legal age of marriage* in accordance with Article 6 (b) of the Protocol to The African Charter on Human and Peoples' Rights on the Rights of Women in Africa;

<u>Implementation indicator</u>	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
<p>1. Legal age of marriage set in accordance with Article 6(b).</p> <p>2. Public campaigns against child and early marriages.</p> <p>3. Existence of an institutional mechanism to prevent child marriage</p>		<p>1. Percentage of women aged 20-24 who were married or in a union before age 15; 18, respectively. (SDG 5.3.1)</p>	<i>By 2030 halve the percentage of unions occurring before age 18</i>	SDG 5.3./ SHASA 5.3	5.3.1 Proportion of women aged 20-24 years who were married or in a union before age 15 and before age 18	5.3.1 Percentage of women aged 18-24 who were married or in a union before the age 18	

Commitment # 15

Protect the dignity and rights of women and girls by eradicating all harmful practices, including **early and/or forced marriages, female genital mutilation /cutting**, through adopting and enforcing laws that prohibit such practices and creating awareness around the harmful health consequences;

<u>Implementation indicator</u>	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Adoption of laws against early and forced marriages, and female genital mutilation		<p>1. Proportion of girls and women aged 15-49 years who have undergone female genital mutilation/cutting, by age (SDG 5.3.2 and SHaSA 5.3.2)</p> <p>2. Proportion of women aged 20-24 who were married or in union before age 18. (SDG 5.3.1)</p> <p>3. Proportion of ever-married women in forced unions</p>	<i>Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation</i>	SDG 5.3./ SHASA 5.3	<p>5.3.1 Proportion of women aged 20-24 years who were married or in a union before age 15 and before age 18</p> <p>5.3.2 Proportion of girls and women aged 15-49 years who have undergone female genital mutilation/cutting, by age</p>	<p>5.3.1 Percentage of women aged 18-24 who were married or in a union before the age 18</p> <p>5.3.2 Percentage of girls and women aged 15-49 years who have gone undergone FGM/C, by age group</p> <p>5.3.4 Existence of legislation that prohibits FGM</p> <p>5.3.5 Percentage of reported cases for FGM</p>	

Commitment # 16

Adopt and implement legislation, policies and measures that prevent, punish and eradicate gender-based violence within and outside of the family, as well as in conflict and post-conflict situations;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of laws against gender-based violence within and outside the family		<p>1. Proportion of ever-partnered women and girls >15 ever subjected to physical, sexual, or psychological violence by current or former partner in the last 12 months; (SDG 5.2.1)</p> <p>2. Proportion of women or girls >15 subjected to sexual violence by person other than intimate partner (SDG 5.2.2)</p>	<i>By 2030, eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and other forms of exploitation</i>	SDG 5.2/ SHASA 5.2, 5.c	<p>5.2.1 Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months, by form of violence and by age</p> <p>5.2.2 Proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner in the previous 12 months, by age and place of occurrence</p>	<p>5.2.1 Proportion of women and girls subjected to sexual violence</p> <p>5.2.3 Number of reported cases of domestic violence against women and girls</p> <p>5.c.2 Percentage of law enforcement officers and judicial personnel trained to adequately deal with issues of discrimination against women and girls</p>	

Commitment # 17

*Adopt and protect the human rights of all individuals, without distinction of any kind, and guarantee **equality before the law** and non-discrimination for all people, in accordance with national policies, laws, religious, ethical values and cultural backgrounds;*

<u>Implementation indicator</u>	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of laws guaranteeing human rights for all, and equality before the law; 2. Number of centers, public agencies and CSOs devoted to the protection of human rights		1. Percent of population reporting discrimination; (SDG 16.b.1) 2. Percent of poor having free access to legal representation; 3. Rates of incarceration by socioeconomic category;	<i>By 2030, eliminate discrimination, promote equality before the law, and equal opportunity; reduce inequalities of outcomes.</i>	SDG 16.a., 16.b	16.a.1 Existence of independent national human rights institutions in compliance with the Paris Principles 16.b.1 Proportion of population reporting having personally felt discriminated against or harassed in the previous 12 months on the basis of a ground of discrimination prohibited under international human rights law		

Commitment # 18

Promulgate, where absent, and enforce laws to prevent and punish any kind of **hate crimes** without distinction of any kind, and take active steps to protect all persons from discrimination, stigmatization and violence; in accordance with national laws and policies;

<i>Implementation indicator</i> →	<i>Process Indicator</i>	<i>Impact indicator</i>	<i>TARGET</i>	<i>SDG/SHaSA Targets</i>	<i>SDG indicators</i>	<i>SHaSA indicators</i>	<i>Notes</i>
1. Promulgation and enforcement of laws against discrimination, stigmatization and violence		1. Incidence of hate crimes; 2. Percentage of the population reporting hate crimes (SDG 16.b.1 and SHaSA 16.b.1)	<i>By 2030, eliminate the incidence of hate crimes of any type</i>	SDG 16.b/ SHaSA 16.b	16.b.1 Proportion of population reporting having personally felt discriminated against or harassed in the previous 12 months on the basis of a ground of discrimination prohibited under international human rights law	16.b.1: Proportion of the population reporting and perceiving to be discriminated against directly and/or indirectly, and hate crimes	

Commitment # 19

Provide **universal access to affordable quality, comprehensive education and skills development, including retention and completion, in a safe and participatory environment, at all levels of education as well as free elementary education, to adequately respond to labour market needs;**

<u>Implementation indicator</u> →	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/ SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Note s</u>
1. Provision of free elementary , education and universal		<p>1. Percent of children completing primary (secondary, resp.). (SDG 4.1.1 SHaSA 4.1.1)</p> <p>2. Percent of children at the end of primary (secondary, resp.) achieving at least a minimum proficiency level in reading and mathematics, by sex; (SDG 4.1.1)</p> <p>3. Percent youth/adults who are computer and information literate; (SDG 4.4.1)</p> <p>4. Percent schools that mainstream life skills in the curriculum (SHaSA 4.7.4 A195)</p>	<i>By 2030, ensure that all girls and boys complete free, equitable, and quality primary and secondary education, leading to relevant and effective learning outcomes</i>	SDG 4.1.4.3, 4.4., 4.7/ SHaSA 4.1, 4.3, 4.4 and 4.7	4.1.1 Proportion of children and young people: (a) in grades 2/3; (b) at the end of primary; and (c) at the end of lower secondary achieving at least a minimum proficiency level in (i) reading and (ii) mathematics, by sex 4.3.1 Participation rate of youth and adults in formal and non-formal education and training in the previous 12 months, by sex 4.4.1 Percentage of youth/adults with information and communications technology (ICT) skills by type of skill 4.7.1 Extent to which (i) global citizenship education and (ii) education for sustainable development, including gender equality and human rights, are mainstreamed at all levels in: (a) national education policies, (b) curricula, (c) teacher education and (d) student assessment (new indicator)	4.1.1 Primary, Secondary first and second levels completion rate 4.3.1 Gross enrolment rate at primary, secondary first and second levels 4.4.1 proportion of the population of 25 years to retirement age who received skilled training in the last 12 months 4.7.4 Percentage of schools that mainstream life skills in the curricula specify the level (secondary schools)(list categories)	

Commitment # 20

Provide **equitable access**, retention and completion, to comprehensive and quality education **for all disadvantaged persons and groups**, as well as meeting the learning needs of individuals requiring different pedagogical styles;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/S HaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence and number of education facilities that are gender and disability sensitive.(SDG 4.a.1 and SHaSA 4.a.1) 2. Existence of legal provisions to provide a safe, non-violent and inclusive learning environment for all.		1. Parity in education (by gender, residence, wealth quintile, disability status,) in enrollment and primary and secondary school completion. (SDG 4.5.1, SHaSA 4.1.1 and 4.5.1)	<i>By 2030, eliminate inequality in access to quality education, for all vulnerable populations, including persons with different learning needs</i>	SDG 4.5, 4.a/ SHASA 4.1, 4.5, 4.7, 4.a	4.5.1 Parity indices (female/male, rural/urban, bottom/top wealth quintile and others such as disability status, indigenous peoples and conflictaffected, as data become available) for all education indicators on this list that can be disaggregated 4.a.1 Percentage of schools with access to: (a) electricity; (b) the Internet for pedagogical purposes; (c) computers for pedagogical purposes; (d) adapted infrastructure and materials for students with disabilities; (e) single-sex basic sanitation facilities; and (f) basic handwashing facilities (as per the Water, Sanitation and Hygiene for All (WASH) indicator definitions)	4.5.1 Ratio of girls to boys in education 4.1.1 Primary, Secondary first and second levels completion rate 4.a.1 proportion of schools that have adapted infrastructure and learning materials for learners with disabilities 4.7.4 Percentage of schools that mainstream life skills in the curricula specify the level (secondary schools)(list categories)	

Commitment #21

Provide *decent work and appropriate skills for young people* through effective policies and programmes that generate employment and sustainable work, consistent with international conventions and regional declarations, to ensure higher social, economic and human development returns from the demographic dividend

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/S HaSA Target S</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of policies and programs to generate employment; 2. School institutions that mainstream training in life skills; (SHaSA 4.7.4) 3. Percent educational institutions in vocational schools		1. Proportion of youth and young adults (15-24) with ICT skills, by type of skill; (SDG 4.4.1) 2. Proportion of out-of school youth that is unemployed; (SDG 8.6.1) 3. Proportion of out-of-school youth employed in the formal sector (or with decent jobs); (C114SDG 8.6.1)	<i>By 2030, reduce by half the percentage of youth and young adults without relevant technical and vocational skills for decent employment and entrepreneurship; or without employment</i>	SDG 4.3., 4.4, 8.5, 8.6/ SHASA 4.3, 4.4, 4.7, 8.6	4.3.1 Participation rate of youth and adults in formal and non-formal education and training in the previous 12 months, by sex 4.4.1 Proportion of youth and adults with information and communications technology (ICT) skills, by type of skill 8.5.2 Unemployment rate, by sex, age and persons with disabilities 8.6.1 Proportion of youth (aged 15-24 years) not in education, employment or training	4.3.2 Number of students (use enrolment rate) in technical and vocational training at secondary 1st, 2nd and 3rd levels and tertiary 1st, 2nd and 3rd levels 4.4.2 Youths/adults who are computer and information literate (<i>delete adults</i>) 4.7.4 Percentage of schools that mainstream life skills in the curricula specify the level (secondary schools)(list categories) 8.6.1 NEET(percentage of youth Not in education, employment or training - NEET)	

Commitment #2

*Maximize the benefits of the demographic dividend by investing in creating opportunities and a supportive environment for innovation, creativity and entrepreneurship for **young people to create and access jobs** and realize their full potential;*

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of programs to create opportunities and a supportive environment for innovation and entrepreneurship for young people; 2. Formal training opportunities in entrepreneurship		1. Proportion of youth (15-24) in private sector employment; 2. Proportion of youth (15-24) self-employed	<i>By 2030, reduce by 2/3 the duration of first unemployment spell between school completion and first employment or business creation</i>	SHASA 8.b		8.b.1 Total government spending in social protection and employment programmes for youth as percentage of national budgets and GDP	

Commitment #23

Address and improve the welfare, livelihoods and stability of families and communities and the longevity of people through inclusive social protection policies and programmes

<u>Implementation indicator</u>	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of social protection programmes for families; 2. Percent public expenditure on social protection programs;		1. Life expectancy; 2. Disability-free life expectancy; 3. Proportion of families in severe debt; 4. Proportion of families with secure housing; 5. Percent of elderly (>65) benefiting from old-age pension SHaSA 1.3.2	<i>Improve the longevity, stability and wellbeing of families</i>	SDG 1.3/ SHaSa 1.3	1.3.1 Proportion of population covered by social protection floors/systems, by sex, distinguishing children, unemployed persons, older persons, persons with disabilities, pregnant women, newborns, workinjury victims and the poor and the vulnerable	1.3.2 % of elderly person benefiting from old-age pension	

Commitment # 24

Develop and strengthen family-related programmes that would address **challenges facing emerging family structures** such as female-headed households, child-headed households and households headed by older persons;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of programs addressing the economic (housing, food and health) needs of emerging family structures		1. Poverty rates for female-headed, child-headed, or elderly-headed households ; 2. Malnutrition rates in female headed, child-headed or elderly headed households;	Reduce by half the poverty rates among emerging and vulnerable family structures				

Commitment # 25

Promote a culture of respect, support, *active and healthy ageing for older persons* to ensure that they receive needed long-term care, equitable access to social services, and protection against violence, abuse and social discrimination

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of programs and policies to support active and healthy ageing		1. Percent of older people (>65) in different situations of vulnerability or neglect (lacking care, access to social services, social participation, old-age pension, protection against violence and abuse; living alone or with no economically active relative)	<i>Reduce the percentage of older people (>65) with no physical or social protection and access</i>	SDG 1.3/ SHaSA 1.3	1.3.1 Proportion of population covered by social protection floors/systems, by sex, distinguishing children, unemployed persons, older persons, persons with disabilities, pregnant women, newborns, workinjury victims and the poor and the vulnerable	1.3.2 % of elderly person benefiting from old-age pension	

Commitment # 26

Introduce and strengthen policies that promote lifelong learning and facilitate the integration and participation of older persons in society, and benefit from the accumulated life experience and knowledge in all spheres of life

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of programs and policies to support lifelong learning and the integration of older persons in society.		1. Proportion of elderly (> 65) that is literate; (partially covered in SDG 4.6.1) 2. Percent elderly active in community and local policy-making; 3. Percent of elderly living below poverty line; (SDG 1.1.1 can measure this indicator if disaggregated by age)	<i>Significantly increase the economic, social and political participation of the elderly (>65) in local communities</i>	SDG 4.6	4.6.1 Percentage of population in a given age group achieving at least a fixed level of proficiency in functional (a) literacy and (b) numeracy skills.		

Commitment # 27

Eliminate *child labour and all forms of child exploitation* including trafficking, abuse and neglect, and provide adequate care for the development and welfare of children including the establishment of child protection units at the national and sub-national levels;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of child protection units at national and subnational levels		1. Percent of children aged 5-17 engaged in child labour; (SDG 8.7.1) 2. Incidence of child neglect and abuse (% of children aged 1-17 who experienced any physical punishment and/or psychological aggression in past month; (SDG 16.2.1) 3. Incidence of child trafficking (number of children victims of human trafficking per 100,000 population, by sex and age (SDG 16.2.2 and SHaSA 16.2.2 if disaggregated by age)	<i>by 2025, eradicate child labour, neglect, and exploitation</i>	SDG 8.7./ SDG 16.2.1/ SDG 16.2.2	8.7.1 Proportion and number of children aged 5-17 years engaged in child labour, by sex and age 16.2.1 Proportion of children aged 1-17 years who experienced any physical punishment and/or psychological aggression by caregivers in the past month 16.2.2 Number of victims of human trafficking per 100,000 population, by sex, age and form of exploitation	1.3.3 % of children covered by social protection programs 8.7.1 Percentage and number of children aged 5-14 years engaged in child labour, per sex and age group 16.2.2 Number of victims of human trafficking per 100,000 people (add disaggregation by age)	

Commitment # 28

Protect and fulfill the **rights of all migrants**, including economic migrants, internally displaced people and forced migrants as a result of humanitarian crisis, natural disasters and conflicts and victims of human trafficking, through policy and programmes that ensure their access to work and basic social services as well as enhancing the capacity of security and law enforcement agencies to protect the rights of such persons;

<u>Implementation indicator</u>	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SH aSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of policies and programs to facilitate migrants' access to work; 2. Existence of law enforcement units to protect their rights; consular services for migrants		1. Percent of migrants having access to employment; 2. Wage differentials between migrant and non-migrant workers.	By 2030, protect labour rights of migrants; and significantly expand access to services for migrants	SDG 8.8, 10.7 / SHASA 10.7	8.8.1 Frequency rates of fatal and non-fatal occupational injuries, by sex and migrant status 8.8.2 Increase in national compliance of labour rights (freedom of association and collective bargaining) based on International Labour Organization (ILO) textual sources and national legislation, by sex and migrant status 10.7.2* International Migration Policy Index	10.7.1 Index on Human Mobility Governance measuring key features of good governance of migration 10.7.2 % of migrants that lose their life, injured or victims of crime while attempting to cross maritime, land, air borders by region as a % of total migrants	

Commitment # 29

Accelerate the implementation of the provisions of the Convention on the Rights of Persons with **Disabilities** to ensure **non-discrimination** and equitable access to basic social services and access to physical environment and structures.

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Implementation of the provision of the rights of persons with disabilities; 2. Percent of public accommodations to meet the needs of persons with disabilities		1. Percent of disabled having access to public accommodations; (SDG 4.a.1 covers access to education for disabled students) 2. Percent of disabled covered by social protection programs (SHaSA 1.3.6)	<i>Significantly increase the equitable access of persons with disabilities to social services and physical structures.</i>	SHaSA 1.3.6, 4.a.1/ SDG 4.a.1	4.a.1 Proportion of schools with access to: (d) adapted infrastructure and materials for students with disabilities;	1.3.6 % of disabled people covered by social protection programs 4.a.1 proportion of schools that have adapted infrastructure and learning materials for learners with disabilities	

SECOND PILLAR: HEALTH

Commitment # 30

Strengthen health systems, down to the primary health care level, towards the provision of equitable and universal access to a comprehensive range of health care services by ensuring, sustainable health financing and addressing the critical shortage of resources including human resources for health, and infrastructure;

<u>Implementation indicator</u>	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Level of health financing; 2. Trained health personnel; (SHaSA 3.c.2) 3. Share of national budget allocated to health (SHaSA 3.c.1)		1. Percentage of people with access to health insurance, by group; (SDG 3.8.2, SHaSA 3.8.1) 2. Universal Health coverage (SDG 3.8.1)	Achieve equitable and universal health coverage, including financial risk protection, access to quality essential health services.	SDG. 3.8., 3.c/ SHASA 3.8, 3.c	3.8.1 Coverage of essential health services (defined as the average coverage of essential services based on tracer interventions that include reproductive, maternal, newborn and child health, infectious diseases, non-communicable diseases and service capacity and access, among the general and the most disadvantaged population) 3.8.2 Number of people covered by health insurance or a public health system per 1,000 population 3.c.1 Health worker density and distribution	3.8.1 proportion of the population covered by health insurance per 1000 inhabitants 3.8.3 Ratio of qualified health care professionals as a percentage of the population (disaggregate by type of health professional) 3.c.1 the share of the national budget allocated to health 3.c.2 The share of the health budget allocated to the training of health personnel Indicator refers to spending in dept of health on training of health personnel	

Commitment # 31

Operationalize the right to the highest attainable standard of health by adopting equity and rights based planning and resource-allocation, facilitating community participation in health decision-making and programming, educating health care providers and communities on what the right to health means in service provision and ensuring the delivery of health care that is free from stigma, coercion, discrimination, violence and respects human rights, including the rights to confidentiality, privacy, and informed consent;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SHaS A Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Adoption of equity and rights-based planning in health; policies and programs to facilitate community 2. Existence of programs to train public in participation in health decision making; 3. Programs to educate HCP on the right to health		1. Percent of people with access to quality health care; (<i>SDG 3.8.1, 3.b.1</i>) 2. Percent of patients reporting stigmatization <i>GAP</i>	<i>By 2030, increase the percent of people who receive quality health care that is stigma-free, coercion-free, and discrimination-free.</i>	SDG 3.8, 3.c / SHASA 3.8	3.8.1 Coverage of essential health services (defined as the average coverage of essential services based on tracer interventions that include reproductive, maternal, newborn and child health, infectious diseases, non-communicable diseases and service capacity and access, among the general and the most disadvantaged population) 3.b.1 Proportion of the population with access to affordable medicines and vaccines on a sustainable basis (partial coverage)	3.8.3 (a) Mechanism of medical care for indigents (low-income) (b) Ratio of qualified health care professionals as a percentage of the population (disaggregate by type of health professional) (c) Percentage of population having access to basic health care 3.8.4 Accessibility to public health facility	

Commitment # 32

Create a supportive environment to **eliminate preventable, communicable and non-communicable diseases**, including HIV and AIDS, sexually transmitted infections, Tuberculosis and Malaria and heart-related diseases and cancers;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Financial support to medical and public health research on risk factors; 2. Public health campaigns against tobacco, alcohol, and for the use of mosquito nets; 3. Invest in public services to facilitate early detection;		1..Number of new HIV infections per 1000 uninfected people, by sex and age; (SDG 3.3.1 and SHaSA 3.3.1) 2. Mortality rate attributed to cardiovascular disease, cancer, diabetes or chronic respiratory disease; tuberculosis incidence by 1,000 population; (SDG 3.4.1, SHaSA 3.4.1 and 3.4.2) 3. Malaria incidence per 1,000 population; hepatitis B incidence per 100,000 population. (SDG 3.3.3 and 3.3.4, SHaSA 3.3.8)	<i>by 2030, reduce by one third premature deaths from non communicable diseases; end the epidemics of AIDS, tuberculosis ; combat hepatitis, water-borne diseases and other communicable diseases</i>	SDG 3.3/ SDG 3.4.	3.3.1 Number of new HIV infections per 1,000 uninfected population, by sex, age and key populations 3.3.2 Tuberculosis incidence per 1,000 population 3.3.3 Malaria incidence per 1,000 population 3.3.4 Hepatitis B incidence per 100,000 population	3.3.1 incidence of HIV AIDS 3.3.5 Include an indicator on percentage of key population who indicate facing discrimination when accessing HIV services (relevant experts to formulate indicator) 3.3.8 incidence TB per 1000 people 3.4.1 deaths from cardiovascular diseases and respiratory diseases per 1000 inhabitants aged between 30 and 70 years 3.4.2 Indicator on cancers (relevant experts to formulate indicator)	

Commitment # 33

Intensify efforts to achieve universal access to HIV prevention, treatment, care and support for people living with HIV, and to eliminate mother-to-child transmission

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/S HaSA Target s</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Development of new programs/resources to prevent HIV transmission or the treatment/ care/support for people living with HIV		1. Rates of new HIV infection (per 1000 inhabitants); (SDG 3.3.1) 2. Annual deaths from HIV/AIDS, disaggregated by sex and age; (SHaSA 3.3.2) 3. HIV incidence (SDG 3.3.1 and SHaSA 3.3.2)	<i>by 2030, end new infections, and reduce by one third the deaths from AIDS</i>	SDG 3.3/ SHASA 3.3	3.3.1 Number of new HIV infections per 1,000 uninfected population, by sex, age and key populations	3.3.2 HIV AIDS deaths per 100 000 inhabitants	

Commitment # 34

Achieve **universal access to sexual and reproductive health services**, free from all forms of discrimination by providing an essential package of comprehensive sexual and reproductive health services including through the primary health care system for women and men, with particular attention to the needs of adolescents, youth, older persons, persons with disabilities and indigenous people, especially in the most remote areas;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SH aSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Increase in the number of health centres that offer an essential package of SRH services (SHaSA 3.7.2 (b))		1. Percent people with access to reproductive health services, disaggregated ; (SDG 3.8.1) 2. Need for FP satisfied with modern methods (SDG 3.7.1., SHaSA 3.7.2 (a)); 3. Adolescent Birth Rate (SDG 3.7.2, SHaSA 3.7.1)	<i>by 2030, achieve universal access to sexual and reproductive services, including for family planning, information and education.</i>	SDG 3.7, 3.8/ SHASA 3.7	3.7.1 Proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods 3.7.2 Adolescent birth rate (aged 10-14 years; aged 15-19 years) per 1,000 women in that age group 3.8.1 Coverage of essential health services (defined as the average coverage of essential services based on tracer interventions that include reproductive, maternal, newborn and child health, infectious diseases, non-communicable diseases and service capacity and access, among the general and the most disadvantaged population)	3.7.1 fertility rates for adolescents (10-14, 15-19) 3.7.2 (a) satisfaction of the demand for modern contraceptive Proposed: Demand met (b) Number of health centres who have reproductive health information, services and commodities (Include indicator for integration to national development strategies/national programs) 3.7.3 Contraceptive prevalence rate	

Commitment # 35

Enact and enforce laws and policies within the national political and legal framework to respect and protect sexual and reproductive health and rights of all individuals;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/S HaSA Target S</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of laws and regulations that guarantee women and adolescents informed choices regarding their SRH rights (SHaSA 5.6.3); 2. Laws and regulations that guarantee women and men access to SRH care, information and education (SDG 5.6.2)		1. Percent of women and girls who make decisions about their own sexual and reproductive health; (SHaSA 5.6.1 and SDG 5.6.1) 2. Women's informed decisions on sexual relations, contraceptive use and reproductive health care (SDG 5.6.1)	By 2030, guarantee and extend sexual and reproductive rights to all groups	SDG 5.6/ SHASA 5.6	5.6.1 Proportion of women aged 15-49 years who make their own informed decisions regarding sexual relations, contraceptive use and reproductive health care 5.6.2 Number of countries with laws and regulations that guarantee full and equal access to women and men aged 15 years and older to sexual and reproductive health care, information and education	5.6.1 % of women and girls who make decisions about their own sexual and reproductive health by age, location, income, disability and other characteristics relevant to each country 5.6.3 Existence of laws and regulations that guarantee women and adolescents (minimum age for adolescents to be determined by specific countries) informed choices regarding their sexual reproductive rights regardless of marital status	

Commitment # 36

Support the *integration of sexual and reproductive health services, HIV and AIDS and family planning;*

<u>Implementation indicator</u>	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaS A Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Administrative integration of SRH, HIV/AIDS and family planning. 2. Budget and other resources allocated to the integration of these services	1. SDG 3.8 Universal health coverage (includes marker SRH services)	1. Existence of mechanism to integrate programming for SRHS, HIV, and family planning (SHaSA 3.7.2 -)	<i>Achieve the integration of sexual and reproductive health services, HIV/AIDS, and family planning; and integrate reproductive health into national development strategies</i>	SHASA. 3.7.		3.7.2 Number of primary health centres who have integrated reproductive health information, services and commodities	

Commitment # 37

Eliminate preventable maternal mortality and neonatal mortality through ensuring that births are attended by skilled health personnel, and that there is universal access to prenatal and postnatal care and family planning, emergency obstetric and neonatal care, and management of pregnancy-related complications and preventable complications arising from unsafe abortion in order to protect the health and safeguard the lives of women, adolescent girls and neonates;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Increase in number of qualified health care professionals (by type), as a % of the total population. 2. Improvement in the % of health facilities with skilled personnel (by type); 3. Share of national budget allocated to (maternal) health		1. Maternal mortality ratio per 100 000 live births; neonatal mortality rate (SDG 3.1.1); 2. Proportion of births attended by skilled personnel (SDG 3.1.2 .); 3. Proportion of short-spaced births (<18 months); proportion of high parity births (>4); incidence of late births (>40); antenatal care; postnatal care for mother and child within 2 days of delivery. (SHaSA 3.1.7)	<i>By 2030, reduce the regional maternal mortality ratio by 2/3; reduce the neo-maternal mortality by half and end preventable deaths of children under 5.</i>	SDG 3.1 and 3.2, 3.c/ SHaSA 3.1and 3.2.	3.1.1 Maternal mortality ratio 3.1.2 Proportion of births attended by skilled health personnel 3.2.1 Under-five mortality rate 3.2.2 Neonatal mortality rate 3.c.1 Health worker density and distribution	3.1.3 Antenatal care coverage (at least four visits for the duration of pregnancy) 3.1.7 Post natal care for mother and child either at home or in a facility and within 2 days of delivery (1+visit) 3.1.4 fertility rate for less 20-aged women (early births) 3.2.4 stillbirth rate	

Commitment # 38

Expand access for all women and adolescent girls to timely, humane and compassionate treatment of unsafe abortion complications and, in accordance with national laws and policies, provide access to safe abortion services;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/S HaSA Target S</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Increase in the percent of health centers providing safe abortion services; 2. Increase in the percent of health centers providing access to treatment of complications from unsafe abortion;		1. Incidence of unsafe abortion 2. Percentage of women with access to safe abortion 3. Percentage of women with access to treatment of complications from unsafe abortion	<i>By 2030, reduce the percent of unsafe abortions by 2/3 and achieve universal access to treatment of complications from unsafe abortions</i>				

Commitment # 39

*Create supportive conditions to **eliminate preventable maternal morbidities**, especially obstetric fistula*

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/S HaSA Target S</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Campaigns for antenatal care. 2. Develop programs to monitor high-risk pregnancies	1. SDG 3.7.1 Need for FP satisfied with modern methods	1. Incidence of maternal morbidities 2. Incidence of fistula	By 2030, eliminate preventable maternal morbidities	SHASA 3.1		3.1.3 Antenatal care coverage (at least four visits for the duration of pregnancy)	

Commitment # 40

*Adopt and implement relevant comprehensive **sexuality education programmes**, both in and out of school, that are linked to sexual and reproductive health services, with the active involvement of parents, community, traditional, religious and opinion leaders; and young people themselves;*

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/S HaSA Target s</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Create/expand health centres that have reproductive health information, services and commodities; 2. Existence of comprehensive sexuality education programmes		1. Percent of children, adolescents and young adults with who have completed a comprehensive course of sexuality education; 2. Percentage of children, adolescents and young adults who have age-appropriate information and knowledge about sexual and reproductive topics	Achieve universal access to sexuality education programs	SDG 3.7/ SHASA 3.7	3.7.2 Adolescent birth rate (aged 10-14 years; aged 15-19 years) per 1,000 women in that age group	3.7.1 fertility rates for adolescents (10-14, 15-19)+G86	

Commitment # 41

Enact and implement fertility-related policies that promote the rights of individuals and couples to decide freely and responsibly, the number and spacing of their births and to have the information and means to do so, taking into account the need for such policies to be based on evidence from research and best practices;

<u>Implementation indicator</u>	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/S HaSA Target S</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of policies promoting the right of people/couples to freely choose their number and spacing of births		1. Unmet need for contraception (SDG 5.6.1); 2. Percent of births to adolescent mothers that are unplanned (SHaSA 3.7.1 - adolescents from 10-14); 3. Need for FP satisfied with modern methods (SDG 3.7.1 and SHaSA 3.7.2)	By 2030, reduce by half the number of unplanned pregnancies;	SDG 3.7, 5.6/ SHASA 3.7, 5.6	3.7.1 Proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods 5.6.1 Proportion of women aged 15-49 years who make their own informed decisions regarding sexual relations, contraceptive use and reproductive health care	3.7.2 satisfaction of the demand for modern contraceptive Proposed: Demand met 5.6.1 % of women and girls who make decisions about their own sexual and reproductive <u>health</u> by age, location, income, disability and other characteristics relevant to each country 5.6.2 % of women and girls (minimum age to be determine by each country) who make decisions about their own reproductive <u>rights</u> by age, location, income, disability and other characteristics relevant to each country	

Commitment # 42

Institute measures to **prevent unplanned pregnancies** through improving access to information, technologies, commodities and services including emergency contraception, that increase the ability of individuals and couples to make free and informed decisions about the number and timing of births;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SH aSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Improvements in access to contraceptive information, technology, commodities and services		1. Unmet need for contraception 2. Percent of births to adolescent mothers that are unplanned GAP ; 3. Need for FP satisfied with modern methods (SDG 3.7.1); 4. Skilled Birth Attendant at birth (SDG 3.1.2)	By 2030, reduce by half the number of unplanned pregnancies	SDG 3.1, 3.7, 5.6/ SHASA 5.6	3.1.2 Proportion of births attended by skilled health personnel 3.7.1 Proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods 5.6.2 Number of countries with laws and regulationsthat guarantee full and equal access to women andmen aged 15 years and older to sexual andreproductive health care, information and education	5.6.1 % of women and girls who make decisions about their own sexual and reproductive health by age, location, income, disability and other characteristics relevant to each country 5.6.2 % of women and girls (minimum age to be determine by each country) who make decisions about their own reproductive rights by age, location, income, disability and other characteristics relevant to each country 5.6.3 Existence of laws and regulations that guarantee women and adolescents (minimum age for adolescents to be determined by specific countries) informed choices regarding their sexual reproductive rights regardless of marital status	

Commitment # 43

Take deliberate and concerted actions to provide affordable and accurate rapid diagnostic tests (RDT) for HIV, other sexually transmitted infections and reproductive tract infections, as well as information, education, and treatment to all women and men;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/S HaSA Target S</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of programs providing RDT for HIV and other STIs		1. Percentage of people with access to rapid diagnostic tests 2. HIV incidence (SDG 3.3.1 and SHaSA 3.3.1)	<i>By 2030, achieve universal access to rapid diagnostic tests for HIV and other STIs and RTIs; and achieve universal access to information, education, and treatment of these STIs.</i>	SDG 3.3 / SHASA 3.3	3.3.1 Number of new HIV infections per 1,000 uninfected population, by sex, age and key populations	3.3.1 incidence of HIV AIDS	

Commitment # 44

Put in place measures that facilitate men and boys to access sexual and reproductive health information, counseling and services, promote male participation and equal sharing of responsibilities such as care work, as well as shared decision-making between men and women on sexual and reproductive health;

<u>Implementation indicator</u>	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>
1. New measures/programs to facilitate males access to RH information, counseling and services		1. Percentage of adolescent and adult males with access to sexual and reproductive health information; 2. Number of health centers that offer youth and adolescent-friendly services; 3. Skilled Birth Attendant at birth (SDG 3.1.2)	<i>by 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education for men and boys.</i>	SDG 3.1, 5.6, 5.4 / SHASA 3.7, 5.4	3.1.2 Proportion of births attended by skilled health personnel 5.6.2 Number of countries with laws and regulations that guarantee full and equal access to women and men aged 15 years and older to sexual and reproductive health care, information and education 5.4.1 Proportion of time spent on unpaid domestic and care work, by sex, age and location	3.7.2 Number of health centres who have reproductive health information, services and commodities (Include indicator for integration to national development strategies/national programs) 5.4.1 Average weekly hours spent on unpaid domestic and care work, by sex, age and location

Commitment # 45

Ensure that all victims/survivors of gender-based violence have immediate and cost free **access to appropriate psychosocial and health services**, including 24-hour hotlines; treatment of injuries; post-rape care, emergency contraception, and post-exposure prophylaxis for HIV prevention;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	SDG/SHaSA Targets	SDG indicators	SHaSA indicators
1. Number of centers providing medical and psychological support to victims/survivors of gender-based violence; 2. Public awareness campaigns on violence against women; 3. Budget to support actions against GBV		1. GBV from a current or former intimate partner (SDG 5.2.1); 2. GBV from a non-intimate partners (SDG 5.2.2)	by 2030, provide universal access to psychological and health services to victims of gender-based violence	SDG 5.2	5.2.1 Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months, by form of violence and by age 5.2.2 Proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner in the previous 12 months, by age and place of occurrence	

Commitment # 46

Integrate responses to gender-based violence in all sexual and reproductive health programmes and services including in humanitarian situations, as part of a broader, multi-sectoral, coordinated response, which include maternal and child health, family planning, and HIV-related services

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/S HaSA Target S</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Integration of gender based violence in all SRH programs and services		1. GBV from a current or former intimate partner (SDG 5.2.1); 2. GBV from a non-intimate partners; (SDG 5.2.2)	Achieve the integration of programs to respond to gender-based violence into sexual and reproductive health programs [ALSO SEE COMMITMENT # 36 ABOVE]	SDG 5.2	5.2.1 Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months, by form of violence and by age 5.2.2 Proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner in the previous 12 months, by age and place of occurrence		

THIRD PILLAR : PLACE AND MOBILITY

Commitment # 47

Facilitate *free movement of people and goods within countries* to foster rural-urban inter-linkages, and regional integration;

<u>Implementation indicator</u> ➡	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/S HaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Free movement of goods and services within countries; administrative restrictions on mobility; 2. Per km cost of transportation; 3. Road and rail density; 4. Share of non paved roads.	1. SDG 11.a.1 Support positive economic, social, and environmental links between urban, peri-urban and rural areas by strengthening national and regional development planning	1. Number of passengers transported by road, railways, air (monthly average); (SHaSA 9.1.3) 2. Tonnage of goods transported by air, water, road, rail (SHaSA 9.1.4); 3. Number of mobile phone (internet, resp) subscribers as a percentage. (SHaSA 9.1.8)	<i>Significantly increase investment in rural infrastructure and transportation infrastructure between rural and urban areas</i>	SHaSA 9.1.		9.1.3 Number of passengers transported BY Air, water, and rails; 9.1.4 Goods transported by rails, water and air in Ton-km	

Commitment # 48

Adopt selective migration policies, maximize the benefits and minimize the costs and repercussions of international migration, and manage irregular migration;

<u>Implementation indicator</u> →	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of migration policies to maximize the benefits of international migration and manage irregular migration		1. Existence of migration policy (SDG 10.7.2 , SHaSA 10.7.1 and 10.7.3)	TARGET : By 2030, formulate migration policies that consider the costs and benefits of migration	SDG 10.7/ SHASA 10.7	10.7.2 Number of countries that have implemented well-managed migration policies	10.7.1 Index on Human Mobility Governance measuring key features of good governance of migration 10.7.3 Number of countries with migration policies	

Commitment # 49

Formulate and adopt **evidence-based migration policies**, particularly those aimed at vulnerable groups, especially women and youth; maximize the benefits and minimize the costs and repercussions of international migration, and to protect the rights of migrants and citizens;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of evidence-based migration policies		1. Existence of migration policy (SDG 10.7.2 and SHaSA 10.7.3)	By 2030, formulate and adopt a national migration policy	SDG 10.7/ SHASA 10.7	10.7.2 Number of countries that have implemented well-managed migration policies	10.7.3 Number of countries with migration policies	

Commitment # 50

Integrate migration issues in national development plans and strategies;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of mechanism to integrate migration in national planning		1. Data on migration flows, costs, and remittances added to national development planning	<i>By 2030, integrate migration issues and data in national development strategies</i>	SDG 10.7/ SHASA 10.7	10.7.2 Number of countries that have implemented well-managed migration policies	10.7.3 Number of countries with migration policies	

Commitment # 51

*Address, as a priority, the living conditions of people in urban and peri-urban areas through systematic **city planning** and management while ensuring **equal access to quality and affordable basic health and social services** for all people;*

<u>Implementation indicator</u>	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of systematic city planning that ensures access to health and social services to all	1. SDG 11.a. Support positive economic, social, and environmental links between urban, peri-urban and rural areas by strengthening national and regional development planning	1. Percent of people with access to adequate housing; including electricity, water, 2. (SDG 11.1 Proportion of urban population living in slums, informal settlements or inadequate housing	<i>By 2030, ensure access for all urban and peri-urban residents to adequate, safe and affordable housing and basic social services</i>	SDG 11.1, 11.a/ SHASA 11.3	11.1.1 Proportion of urban population living in slums, informal settlements or inadequate housing 11.a.1 Proportion of population living in cities that implement urban and regional development plans integrating population projections and resource needs, by size of city	11.3.2. Percentage of cities with more than 100,000 inhabitants that implement urban and regional development plans integrating population projections and resources needs	

Commitment #52

Ensure **equity in access to services** by making them sufficiently and geographically available in both urban and rural areas;

<u>Implementation indicator</u>	 <u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Increase in the investment in rural services	1. SDG 11.a. Support positive economic, social, and environmental links between urban, peri-urban and rural areas by strengthening national and regional development planning	1. Percent of people with access to electricity, water, education, health by rural/urban residence	By 2030, reduce the rural-urban gap in access to basic social services, including electricity, water, and education and health services				

Commitment #53

Develop innovative plans for urbanization and creation of **sustainable cities**, and incorporate these plans into the national planning frameworks;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of plans for urbanization and the creation of sustainable cities		1. Urban population density (SDG 11.7.1 and SHaSA 11.3.1); 2. Urban growth rate (SDG 11.3.1 , SHaSA 11.3.1 - partial coverage); 3. Area of green and public space as a proportion of total city space (SDG 11.7.1)	<i>By 2030, enhance inclusive and sustainable urbanization and capacity for integrated and sustainable human settlement planning</i>	SDG 11.1, 11.3, 11.7/ SHaSA 11.3	11.1.1 Proportion of urban population living in slums, informal settlements or inadequate housing 11.3.1 Ratio of land consumption rate to population growth rate 11.7.1 Average share of the built-up area of cities that is open space for public use for all, by sex, age and persons with disabilities	11.3.1 Ratio of land consumption rate to population growth rate at comparable scale Consider: Ratio of land use rate to population growth rate at comparable scale 11.3.2 . Percentage of cities with more than 100,000 inhabitants that implement urban and regional development plans integrating population projections and resources needs	

Commitment #54

Promote the social use of space by attending to the **land, housing and service needs of the poor**, and improve the functioning of land markets;

<u>Implementation indicator</u> ➡	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Programs to attend to the land and housing needs of the poor and to improve land markets		1. Ratio of public to private space in urban areas. 2. Area of green space as a proportion of total city space (SHaSA 11.7.1); 3. Proportion of the poor satisfied with the quality of public services, disaggregated by service	by 2030, provide universal access to safe, inclusive and accessible, green and public spaces as well as land and housing for the poor	SDG 11.7/ SHaSA 16.6	11.7.1 Average share of the built-up area of cities that is open space for public use for all, by sex, age and persons with disabilities	11.7.1 Area of green and public space as a proportion of total city space	

Commitment #55

Plan ahead and invest in urban and rural areas by anticipating future growth and population needs, as well as conducting coordinated regional approaches that include peri-urban areas

<u>Implementation indicator</u> →	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/ SH aSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Efforts to plan future growth and population needs; 2. Existence of a long-term urbanization plan		availability of population projection data for all major cities; availability of population projection data for major peri-urban areas.	by 2030, having the national planning capacity to anticipate future growth and spatial distribution of population.	SDG 11.3, 11.a/ SHASA 11.3	11.3.2 Proportion of cities with a direct participation structure of civil society in urban planning and management that operate regularly and democratically (partial coverage) 11.a.1 Proportion of population living in cities that implement urban and regional development plans integrating population projections and resource needs, by size of city	11.3.1 Ratio of land consumption rate to population growth rate at comparable scale Consider: Ratio of land use rate to population growth rate at comparable scale 11.3.2 . Percentage of cities with more than 100,000 inhabitants that implement urban and regional development plans integrating population projections and resources needs	

Commitment # 56

Develop and strengthen plans, programmes and systems for addressing the needs of people living in fragile ecosystems

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of plans, programs to address the needs of people in fragile ecosystems		1. Percent of environmentally displaced persons (SHaSA 11.5.1)	<i>by 2030, strengthen the resilience of the poor and those living in fragile ecosystems and reduce their vulnerability to economic, social and environmental shocks and disasters.</i>	SDG 11.5, 11.b/ SHASA 11.5	11.5.1 Number of deaths, missing persons and persons affected by disaster per 100,000 people 11.b.1 Proportion of local governments that adopt and implement local disaster risk reduction strategies in line with the Sendai Framework for Disaster Risk Reduction 2015-2030 11.b.2 Number of countries with national and local disaster risk reduction strategies	11.5.1 Number of people killed, injured, displaced, evacuated, relocated or otherwise affected by disasters 11.5.3 . Percentage of countries with early detection system and Disaster Management Plans at the level of villages/ communities 11.5.4 Percentage of countries utilizing science-based methodologies and tools to record and share climate disaster losses and relevant disaggregated data and statistics and early warning systems	

Commitment # 57

Promote the sustainable use of space, by promoting **urban growth within a systematic concern for environmental values**, minimizing the size and impact of the urban blot, favouring energy-saving and well-integrated mass transportation, as well as density and compact cities;

<u>Implementation indicator</u> →	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SH aSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Programs to promote the sustainable use of urban space		1. Percentage of individuals using mass transportation. 2. Percent of people using energy-saving vehicles 3. Average distance to work 4. (fluidity of traffic)	<i>By 2030, reduce the per-capita energy consumption associated with urban transportation;</i>				

Commitment # 58

The development of both rural and urban areas in order to strengthen their symbiotic relations in terms of markets and remittances;

<u>Implementation indicator</u>	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SH aSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Investments in rural infrastructure (mostly roads) 2. Investments in financial services in rural areas		1. Percentage of rural communities connected to urban centers by a paved road 2. Percentage of rural households owning a phone 3. Percentage of rural households with access to electronic banking	<i>By 2030, increase physical, economic, and social connections between rural communities and urban markets</i>				

Commitment # 59

*Reinforce and establish bilateral, regional and global partnerships on migration to progressively **reduce barriers on movement while upholding the fundamental human rights of all migrants, and make migration an instrument of mutual development** for the benefit of migrants and countries;*

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SH aSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence /reinforcement of international partnerships on migration		1. Percent of migrants with proper legal status; 2. number of migrants reporting discrimination	By 2030, significantly reduce legal barriers to migration and transactional barriers to remittances	SDG 10.7/ SHASA 10.7	10.7.2 Number of countries that have implemented well-managed migration policies (partial coverage)	10.7.1. Index on Human Mobility Governance measuring key features of good governance of migration	

Commitment # 60

Promote policies that foster the *integration and reintegration of migrants and returning migrants*;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SH aSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of policies to foster the integration/reintegration of migrants		1. Consular services available for emigrants;	TARGET : By 2030, formulate migration policies that consider the insertion of immigrants and the re-insertion of return migrants	SDG 10.7/ SHASA 10.7	10.7.2 Number of countries that have implemented well-managed migration policies	10.7.1. Index on Human Mobility Governance measuring key features of good governance of migration	

Commitment # 61

Work towards the regional and international portability of acquired benefits and rights from migration;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SH aSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Programs to increase the portability of benefits and rights from migration		1. Percent of international migrants earning pensions;	TARGET : By 2030, formulate migration policies that consider the portability of benefits from migration				

Commitment # 62

Ensure that migrants have access to *secure and low cost remittance transfer options*;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SH aSA Targets</u>	SDG indicators	SHaSA indicators	Notes
1. Availability and access to secure and low-cost remittances transfer		1. Average cost of remittance transfers (as a percentage) (SDG 10.c.1)	<i>By 2030, reduce to less than 3 percent the transaction cost of migrant remittances;</i>	SDG 10c? SHASA 10c, 17.3	10.c.1 Remittance costs as a proportion of the amount remitted	10.c.1 Percentage of remittances spent as transfer cost less than 3% (Recommend: Reformulation) 17.3.1: Percentage reduction in the transaction cost of Diaspora remittance	

Commitment # 63

Forecast the consequences of climate change-related migration in vulnerable areas, especially cities and coastal areas;

<u>Implementation indicator</u> →	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SH aSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of programs (tools) to forecast the consequences of climate change-related migration			<i>TARGET : By 2030, develop national systems to monitor the effects of migration into coastal areas and cities</i>	SHASA 13.1		13.1.5 Percentage of countries utilizing science-based methodologies and tools to record and share climate -related disaster losses and relevant disaggregated data and statistics and early warning systems	

Commitment # 64

Fund regular national and regional *surveys to ensure current migration data* for studying migration and development in the region;

<u>Implementation indicator</u> →	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SH aSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Level of funding of migration data collection		1. Existence of large scale migration data sets	<i>By 2030, have a regular program of data collection on migration flows and impacts</i>				

Commitment # 65

Recognize the **rights of refugees** and guarantee their **physical and social protection** in conformity with international conventions and work towards facilitating their repatriation to their countries of origin.

<u>Implementation indicator</u> ➡	<u>Process Indicators or</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Programs to gaurantee the rights and protection of refugees and their repatriation		1. Percent refugees that are victims of violence or discrimination 2. SDG 1.3.1 Proportion of population covered by social protection floors/systems, by sex, distinguishing children, unemployed persons, older persons, persons with disabilities, pregnant women, newborns, work-injury victims and the poor and the vulnerable - <i>add disaggregation by refugee status</i>	<i>By 2030, significantly increase the physical and social protection of refugees and facilitate their safe repatriation</i>				

Commitment # 66

Remove barriers to sustainability inter alia through increased use of technology, including innovation, sound governance, systematic awareness creation and sensitization of the public and sustainable consumption behaviour that are beneficial to the environment;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/S HaSA Targets</u>	SDG indicators	SHaSA indicators	Notes
1. Programs to use technology in promoting sound governance and public behavior that are beneficial to the environment		1. Percent households using solar energy; 2. Percent of households using bicycles and energy saving vehicles; 3. Average commuting distance 4. Percent households (recycling ...)	<i>By 2030, significantly increase public commitment to, and public infrastructure for environmental sustainability</i>	SDG 12.5, 12.8 SHASA 12.5	12.5.1 National recycling rate, tons of material recycled 12.8.1 Extent to which (i) global citizenship education and (ii) education for sustainable development (including climate change education) are mainstreamed in (a) national education policies; (b) curricula; (c) teacher education; and (d) student assessment	12.5.1. National waste generation (solid waste to landfill and incineration and disaggregated data for e-waste) in kg per capita/year 12.5.2. National recycling rate, tonnes of material recycled 12.5.3. Number of countries with taxes or restrictions on plastics use, including ban of single use plastics, and programmes to improve waste management and increase circular use.	

FOURTH PILLAR: GOVERNANCE

Commitment # 67

Further integrate population dynamics into development planning at the national and sub-national levels in order to comprehensively respond to population and development issues, including population dynamics and its implications for human rights, dignity, quality of life, poverty eradication and sustainable development;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of mechanism to integrate population data in development planning; 2. Budget investments to integrate population data in planning	1. SDG 17.18.1 SD indicators produced at national level with full disaggregation	1. Available population data 2. Available expertise. 3. Available analytical infrastructure (modeling tools) 4. Level of aggregation 5. Number of population experts in economic planning 6. Census in last 10 years and CRVS (100% birth and 80% deaths registration) SDG 17.19.2	By 2030, improve the availability of detailed population data and its integration to development planning	SDG 17.19	17.19.2 Proportion of countries that (a) have conducted at least one population and housing census in the last 10 years; and (b) have achieved 100 per cent birth registration and 80 per cent death registration		

Commitment # 68

Create and strengthen relevant *institutions with the necessary capacity to ensure effective integration of population dynamics into development planning with a rights-based approach as well as efficiency and accountability, including ensuring effective coordination of all relevant social and planning bodies;*

<u>Implementation indicator</u>	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHa SA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence/capacity of institutions to integrate population in development planning	1. SDG 17.18.1 SD indicators produced at national level with full disaggregation	1. Institutions with relevant capacity to analyze population data	<i>By 2030, significantly strengthen the staffing and analytical capacity of national institutions to integrate population data into development planning</i>	SDG 17.18/ SHASA 17.18	17.18.1 Proportion of sustainable development indicators produced at the national level with full disaggregation when relevant to the target, in accordance with the Fundamental Principles of Official Statistics	17.18.1a: Number of countries that have national statistical legislation that ensures adequate funding and which complies with the fundamental principles of Official statistics. 17.18.1b: Number of countries that have access to adequate funding for the implementation of functional statistical systems 17.18.2: Number of countries that have formal institutional arrangements for the coordination of the compilation of official statistics (at international, national and regional level)	

Commitment # 69

Implement policies where needed that ensure the *inclusive and effective participation* of the whole society *inter alia* women, young persons, older persons, persons with disabilities, indigenous people and other marginalized groups in all aspects and levels of governance;

<i>Implementation indicator</i> 	<i>Process Indicator or</i>	<i>Impact indicator</i>	TARGET	<i>SDG/SH aSA Targets</i>	<i>SDG indicators</i>	<i>SHaSA indicators</i>	<i>Notes</i>
1. Existence of policies to foster population participation in all aspects/levels of governance		1. Percentage of women in parliament (<i>SDG 5.5.1, SHaSA 5.5.5</i>) 2. Representation of people with disabilities, and indigenous people in parliament (<i>SDG 16.7.1, SHaSA 16.7.1</i>)	<i>ensure the full participation of women, young people, older persons, persons with disabilities, indigenous people and other marginalized groups to all levels of decision-making in political, economic, and public life</i>	SDG 5.5, 16.7 /SHASA 5.5, 16.7	5.5.1 Proportion of seats held by women in national parliaments and local governments 16.7.1 Proportions of positions (by sex, age, persons with disabilities and population groups) in public institutions (national and local legislatures, public service, and judiciary) compared to national distributions	5.5.5 Proportion of women in Parliament 16.7.1: Diversity in representation in key decision-making bodies (legislature, executive, and judiciary)	

Commitment # 70

Institute monitoring and evaluation mechanisms to effectively assess performance in order to ensure accountability.

<u>Implementation indicator</u>	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of monitoring and evaluation mechanisms to asses performance		1. Available baseline data on performance	<i>[Immediately] put in place a mechanism to monitor and evaluate performance</i>				

FIFTH PILLAR: DATA AND STATISTICS

Commitment # 71

Strengthen national statistical capacity to undertake evidence-based analysis and policy studies, as well as the ability to conduct sound monitoring and evaluation programmes, while increasing investment in the collection, analysis and utilization of population-based data, including population and housing censuses, surveys, civil registration, administrative records, and other studies, together with social, economic and environmental data;

<u>Implementation indicator</u>	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaS A Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of institutions to undertake evidence-based and policy studies		1. National institutions with relevant capacity to analyze population data (SDG 17.18.2, SHaSA 17.18.2); Professionals trained in population analysis or statistics	By 2030, significantly strengthen the staffing and analytical capacity to collect and analyze population-based data; and to evaluate programs	SDG 17.18/ SHASA 17.18	17.18.1 Proportion of sustainable development indicators produced at the national level with full disaggregation when relevant to the target, in accordance with the Fundamental Principles of Official Statistics 17.18.2 Number of countries that have national statistical legislation that complies with the Fundamental Principles of Official Statistics	17.18.1a: Number of countries that have national statistical legislation that ensures adequate funding and which complies with the fundamental principles of Official statistics. 17.18.1b: Number of countries that have access to adequate funding for the implementation of functional statistical systems 17.18.2: Number of countries that have formal institutional arrangements for the coordination of the compilation of official statistics (at international, national and regional level) International indicator 17.18.3: Availability and accessibility of high-quality, timely and reliable data by 2020	

Commitment # 72

Establish a *functional system of civil registration* at national, sub-national and community level using existing traditional and local institutions to ensure the availability of relevant data for planning at all levels;

<u>Implementation indicator</u> ➡	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SH aSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of a functioning system of civil registration		1. Availability of civil registration data (SDG 17.19.2, SHaSA 17.18.4) ; 2. Birth registration (SDG 16.9.1, SHaSA 16.9.1)	<i>By 2030, have a fully functioning system of civil registration</i>	SDG 16.9, 17.19 ? SHASA 16.9. 17 18	16.9.1 Proportion of children under 5 years of age whose births have been registered with a civil authority, by age 17.19.2 Proportion of countries that (a) have conducted at least one population and housing census in the last 10 years; and (b) have achieved 100 per cent birth registration and 80 per cent death registration	16.9.1: Percentage of children under 5 whose births have been registered with civil authority 17.18.4 At least one census [1) population and 2) economic] of good quality conducted, processed, analyzed and disseminated following internationally agreed recommendations (during the last 10 years)	

Commitment # 73

Generate, collect, and **use quality and timely data** from censuses, surveys, vital and civil registration systems, administrative records, studies and research, disaggregated by sex and population groups, **for the purposes of planning, monitoring and evaluation;**

<u>Implementation indicator</u> →	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/S HaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of systems to collect and analyze social data for planning purposes	1. SDG 17.18.1 SD indicators produced at national level with full disaggregation	1. Availability of social science data for the purpose of planning, monitoring and evaluation (SHaSA 17.18.3)	<i>By 2030, have a coordinated system of collecting and assembling and policy analysis of population and socioeconomic data</i>	SDG 17.18/ SHASA 17.18	17.18.1 Proportion of sustainable development indicators produced at the national level with full disaggregation when relevant to the target, in accordance with the Fundamental Principles of Official Statistics	17.18.2: Number of countries that have formal institutional arrangements for the coordination of the compilation of official statistics (at international, national and regional level) 17.18.3: Availability and accessibility of high-quality, timely and reliable data by 2020	

Commitment # 74

*Undertake qualitative and quantitative **research and policy studies**;*

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SH aSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Funding for quantitative and qualitative research and policy studies			<i>By 2030, establish a steady mechanism for undertaking timely, high-quality, and policy-relevant studies</i>				

Commitment # 75

Emphasize the importance of collecting data on older persons and persons with disabilities for planning and research, to take into account their specific needs in implementing policies and programmes;

<u>Implementation indicator</u> 	<u>Process Indicators</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SH aSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of adequate data on older persons and persons with disabilities for planning and research		1. Morbidity rates, physical functioning statistics among the elderly (>65) and persons with disabilities; 2. Time use statistics among the elderly (>65) and persons with disabilities	<i>By 2030, achieve full statistical coverage of elderly, ageing process, and persons with disabilities</i>		17.18.1 Proportion of sustainable development indicators produced at the national level with full disaggregation when relevant to the target, in accordance with the Fundamental Principles of Official Statistics (partial coverage - add disaggregation by age and persons with disabilities)	17.18.3: Availability and accessibility of high-quality, timely and reliable data by 2020 (partial coverage - add disaggregation by age and persons with disabilities)	

Commitment # 76

Conduct regular national censuses according to international standards, in order to generate timely quality data as an essential component of national and regional development frameworks;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. A funding and institutional mechanism to guarantee the regular conduct of national censuses, the rapid analysis of these data, and the inclusion of this information in the national development process.		1..Availability of regular census data ; 2. Accessibility of public use samples	<i>By 2030, develop a regular system of census data collection, analysis, and policy dissemination</i>	SDG 17.19/ SHASA 17.18	17.19.2 Proportion of countries that (a) have conducted at least one population and housing census in the last 10 years; and (b) have achieved 100 per cent birth registration and 80 per cent death registration	17.18.1b: Number of countries that have access to adequate funding for the implementation of functional statistical systems 17.18.3: Availability and accessibility of high-quality, timely and reliable data by 2020 17.18.4 At least one census [1] population and 2) economic] of good quality conducted, processed, analyzed and disseminated following internationally agreed recommendations (during the last 10 years)	

Commitment # 77

Undertake periodic assessment of the national civil registration systems and vital statistics and prepare a plan for needed improvements where necessary

<u>Implementation indicator</u> ➡	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SH aSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of programs to assess/ improve national CRVSs	supportive institutional environment to improve data collection systems	1. Availability of civil registration data and vital statistics 2. Birth registration (SDG 16.9.1)	<i>By 2030, establish a formal system for periodic review and improvement of the national civil registration system and its vital statistics</i>	SDG 16.9/ SHASA 16.9	16.9.1 Proportion of children under 5 years of age whose births have been registered with a civil authority, by age	16.9.1: Percentage of children under 5 whose births have been registered with civil authority 16.9.2: Percentage of the adult population possessing a national identity document	

SIXTH PILLAR: INTERNAL COOPERATION AND PARTNERSHIPS

Commitment # 78

Promote strengthened partnerships with local, national and international civil society organizations in the design, implementation, coordination, monitoring and evaluation of population and development programmes and policies, and encourage the promotion of activities directed at increasing the **participation and building the capacity of these organizations**;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SH aSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Formal agreements between government agencies and civil society organizations; 2. Formal meetings and consultations between government agencies and CSOs; 3. formal sharing of resources (data, training) between government agencies and CSOs		1. Number of active CSOs; 2. Number of international partnerships available to work on population and development issues	<i>Build and maintain a strong partnership at the national level between government population agencies and civil society organizations</i>	SDG 17.16, 17.17 / SHASA 17.16, 17.17	17.16.1 Number of countries reporting progress in multi-stakeholder development effectiveness monitoring frameworks that support the achievement of the sustainable development goals 17.17.1 Amount of United States dollars committed to public-private and civil society partnerships	17.16.1: Number of multi-stakeholder partnership(s) participants active in developing countries 17.16.2: Classification and trajectory of the above in terms of: a) Nature of partnership, b) Region: Global, regional, c) Objectives: Sharing technology, expertise etc. and d) Country type (where partnership is active) 17.17.1: Number of PPP and civil society partnership projects	

Commitment # 79

Recognize the *role of civil society organizations* including NGOs and youth in the formulation, monitoring and evaluation of population and development policies and programmes including for achieving the goals of sexual and reproductive health and rights;

<u>Implementation indicator</u> ➡	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SHaS A Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Formal agreements between government agencies and civil society organizations; 2. Formal meetings and consultations between government agencies and CSOs; 3. formal sharing of resources (data, training) between government agencies and CSOs 4. National budget investments to train youth in the process and methods of policy evaluation		1. Number of independent evaluations of population and development policies by national NGOs. 2. Number (%) of youth representation in NGOs involved in the formulation and evaluation of population and development programs	<i>Significantly raise the participation of CSOs in the design and evaluation of population and development policies</i>	SDG 17.17/ SHASA 17.17	17.17.1 Amount of United States dollars committed to public-private and civil society partnerships	17.17.1: Number of PPP and civil society partnership projects	

Commitment # 80

Promote strengthened partnerships with the **private sector** in the design, implementation, coordination, monitoring and evaluation of population and development programmes and policies, in particular in the areas of service delivery and commodity production, security and distribution;

<u>Implementation indicator</u> →	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SHaS A Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of formal agreements between government agencies and private-sector institutions; 2. Number of formal consultations between government agencies and private institutions in population and development programmes; 3. Existence of public mechanisms of quality control in the private production/delivery of commodities and services; 4. Existence of public mechanisms of cost control in the private delivery of services; 5. Existence of public mechanisms of subsidization of		1. Active partnership and involvement of the private sector in working on population and development issues	<i>Build effective public-private partnerships in population-development programmes</i>	SDG17.17 / SHASA 17.17	17.17.1 Amount of United States dollars committed to public-private and civil society partnerships	17.17.1: Number of PPP and civil society partnership projects 17.17.2: Contribution of PPP projects as % of investment/fixed capital formation implemented by developing countries	

commodities and services for vulnerable populations.						
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Commitment # 81

Promote international cooperation efforts, including the development of joint programmes and initiatives, the strengthening of policy dialogue and coordination, the transfer of knowledge and technology, and the allocation and mobilization of financial and technical resources, for **international cooperation** in the area of population and development.

<u>Implementation indicator</u> →	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/S HaSA Target S</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of mechanisms and forums of international collaboration and exchange between national population programs; 2. Number of formal,		1. Existence of a regular platform of exchange GAP 2. Number and frequency	Build a regular program of coordination of national efforts	SDG 17.2, 17.3, 17.6, 17.7/ SHASA 17.1, 17.2, 17.5	17.2.1 Net official development assistance, total and to least developed countries, as a proportion of the Organization for Economic Cooperation and Development (OECD) Development Assistance Committee donors' gross national income (GNI) 17.3.1 Foreign direct investments (FDI), official development assistance and South-South Cooperation as a proportion of total domestic budget (<i>partial coverage - no mention of populatoin</i>)	17.1.1 # of dev countries receiving international support to improve their collection systems. 17.2.1: Net Total ODA as percentage of OECD/Development	

<p>international, meetings between national agencies to exchange experiences;</p> <p>3. Existence of mechanism of regular communication of experiences</p> <p>4. Level of resources mobilized to foster international exchanges</p> <p>5. Exchange of technical expertise between countries</p>	<p>of international meetings to share and coordinate national experiences GAP</p>	<p><i>and experiences (in the area of population and development)</i></p>	<p><i>& development)</i></p> <p>Number of science and/or technology cooperation agreements and programmes between countries, by type of cooperation</p> <p>17.6.1</p> <p>17.7.1 Total amount of approved funding for developing countries to promote the development, transfer, dissemination and diffusion of environmentally sound technologies</p> <p>17.9.1 Dollar value of financial and technical assistance (including through North-South, South-South and triangular cooperation) committed to developing countries</p> <p>17.16.1 Number of countries reporting progress in multi-stakeholder development effectiveness monitoring frameworks that support the achievement of the sustainable development goals</p>	<p>Assistance Committee (DAC) donors' gross national income (GNI)</p> <p>17.5.2: Number of South-South, North-South, triangular science and technology partnership signed and implemented</p> <p>17.5.3: Number of scientists and technological human resources exchanged</p>
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Commitment # 82

Mainstream the Addis Ababa Declaration on Population and Development in Africa beyond 2014 into the work plans of the bodies of the African Union and United Nations Economic Commission for Africa;

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHa SA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
AADPD mainstreamed in the work of the AU and UNECA		Incorporation of key, unique AADPD indicators into the work of the AU and UNECA	<i>AADPD mainstreamed in the work of the AU and UNECA</i>				

Commitment # 83

Also *mainstream the inclusion of the Addis Ababa Declaration in the Post-2015 development agenda*

<u>Implementation indicator</u>	 <u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaSA Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
AADPD mainstreamed in the UN's post-2015 development agenda		Incorporation of key, unique AADPD indicators (especially migration and sexual and reproductive health indicators) into the monitoring of SDGs in Africa	<i>AADPD mainstreamed in the work of the SDG agenda</i>				

Commitment # 84

Monitor regularly the achievement of the goals of the Declaration in the context of reporting on the po

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaS A Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Development of a monitoring framework. 2. Development of a monitoring guide. 3. Allocation of resources to the monitoring process		1. Data on trends and impacts of the AADPD goals	<i>Regularly monitor of the commitments in the AADPD declaration and their impacts</i>				

Commitment # 85

Conduct sound monitoring and evaluation of this Declaration based on reliable population data, projections, and consideration of future scenarios;

<u>Implementation indicator</u>	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaS A Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
Monitoring and evaluation of the AADPD		1. Data on trends and impacts of the AADPD goals	<i>Sound monitoring and impact evaluation of commitments in the AADPD declaration</i>				

Commitment # 86

Enhance coordination and cooperation among government departments dealing with population and development matters for harmonizing population and policy within sectoral policies on education, youth and health and the need to build capacity and provide funding to national and regional population programmes;

<u>Implementation indicator</u>	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaS A Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
1. Existence of focal point/responsible institution for population and development issues		1. existence of national coordination mechanism for department units dealing with population policy	<i>Achieve strong inter-departmental coordination of key departments dealing with population issues</i>				

Commitment # 87

Periodically *review the outcomes of the African regional conferences on ICPD beyond 2014*

<u>Implementation indicator</u> 	<u>Process Indicator</u>	<u>Impact indicator</u>	TARGET	<u>SDG/SHaS A Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
Reviews of the outcomes of African regional conferences on ICPD post 2014			<i>Regular review of regional conferences on ICPD (sequenced and synchronized with the review of the 2030 Agenda and Agenda 2063) to ensure effective integration of the population dimension for the achievement of sustainable development</i>				

Commitment # 88

In doing so, we take into account the concerns of all strata of the continent's stakeholders – including the public sector; private sector; civil society including NGOs, faith-based organizations, youth, women, trade unions and academia; Members of Parliament; and regional and subregional development institutions.

<u>Implementation indicator</u> ➔	<u>Process Indicator</u>	<u>Impact indicator</u>	<u>TARGET</u>	<u>SDG/SHaS A Targets</u>	<u>SDG indicators</u>	<u>SHaSA indicators</u>	<u>Notes</u>
	Existence of process to include the concerns of all stakeholders	percent of stakeholder groups represented in the periodic reviews of the ICPD Beyond 2014 in Africa	<i>Review the concerns of all stakeholders in population and development policy</i>				

Appendix 2

Pillar	Nº	FULL TEXT OF RECOMMENDATION	Total Priority Score						
			#1 <i>modest spending requirement</i>	#2 <i>vulnerable population</i>	#3 <i>UNFPA priority areas</i>	#5 <i>Basic need</i>	#6 <i>Not covered by other agendas</i>	#7 <i>Relevant to the demographic dividend</i>	Total Score
DIGNITY AND EQUALITY	1	Develop, strengthen and implement appropriate legislation, national policies and programmes that guarantee and promote human rights, dignity and equality for inclusive sustainable economic and social development in all sectors;	1	0	0	0	0	0	1
	2	Develop, strengthen and implement effective national strategies aimed at eradicating extreme poverty, inclusive growth and economic development, as applicable, that also target disadvantaged groups, especially women, older persons, youth, unemployed persons, people living with HIV and AIDS and persons with disabilities, in both urban and rural areas	0	1	0	1	0	0	2
	3	Harmonize national legislation with ratified international instruments and accelerate the implementation of the respective national, regional and international commitments on gender equality and women's empowerment in all sectors and eliminate all forms of discrimination against women and girls	1	1	0	0	0	0	2

	4	Review, revise, amend or abolish all laws, regulations, policies, practices and customs that have discriminatory impact on women, youth, especially girls, without distinction of any kind, and ensure that the provisions of multiple legal systems comply with international human rights regulations and laws;	1	1	0	0	0	0	2
	5	Increase and enhance the equal participation of women, especially those living in rural areas, in high added value production by increasing their equal access to training and decent work, including, equal pay for equal work, access to social security, paid parental leave, sick and care leave, and other socio-economic benefits, through the design and implementation of gender sensitive budgets with full accountability;	0	1	0	0	0	0	1
	6	Enhance male participation and equal and equitable sharing of responsibilities through support programmes that promote gender equality in rights and opportunities;	0	0	0	0	0	0	0
	7	Enact and implement laws and introduce institutional reforms to ensure economic empowerment of women and young people through equal access to ownership and control of economic resources, technology and markets, including land, property and inheritance rights;	1	1	1	0	0	0	3
	8	Increase and enhance women's and youth's participation in decision-making and leadership positions at all levels through effective implementation of appropriate policies, programmes and affirmative action;	0	1	0	0	0	0	1

	9	Develop and strengthen the implementation of public, civic and adult education programmes which address issues of gender equity, equality and women's empowerment;	0	1	0	0	0	0	1
	10	Address the needs of all girls, boys and children with disabilities, with regard to their rights to health, nutrition and education at all levels;	0	1	0	1	0	0	2
	11	Address the causes of high school drop-out rates, among boys and girls while creating a conducive environment to enroll those who have never been to school	0	1	0	1	0	1	3
	12	Create a supportive environment to keep the girl child, including married girls and pregnant girls, in school at all levels of education, and ensure admission or re-entry to school after delivery;	0	1	0	1	0	1	3
	13	Develop and ensure full implementation and enforcement of policies to prevent all forms of child abuse, including school-based violence, violence against girls, sexual violence and harassment and the promotion of safe space programmes for girls;	0	1	1	1	0	0	3
	14	Enact and enforce as a matter of urgency, the legal age of marriage in accordance with Article 6 (b) of the Protocol to The African Charter on Human and Peoples' Rights on the Rights of Women in Africa;	1	0	0				
	15	Protect the dignity and rights of women and girls by eradicating all harmful practices, including early and/or forced marriages, female genital mutilation /cutting, through adopting and enforcing laws that prohibit such practices and creating awareness around the harmful health consequences;	1	1	1	0	0	0	3

	16	Adopt and implement legislation, policies and measures that prevent, punish and eradicate gender based violence within and outside of the family, as well as in conflict and post-conflict situations;	1	0	1	0	0
	17	Adopt and protect the human rights of all individuals, without distinction of any kind, and guarantee equality before the law and non-discrimination for all people, in accordance with national policies, laws, religious, ethical values and cultural backgrounds;	1	0	1	0	0
	18	Promulgate, where absent, and enforce laws to prevent and punish any kind of hate crimes without distinction of any kind, and take active steps to protect all persons from discrimination, stigmatization and violence; in accordance with national laws and policies;	1	0	1	0	0
	19	Provide universal access to affordable quality, comprehensive education and skills development, including retention and completion, in a safe and participatory environment, at all levels of education as well as free elementary education, to adequately respond to labour market needs;	0	0	0	1	1
	20	Provide equitable access, retention and completion, to comprehensive and quality education for all disadvantaged persons and groups, as well as meeting the learning needs of individuals requiring different pedagogical styles;	0	1	0	1	0

	21	Provide decent work and appropriate skills for young people through effective policies and programmes that generate employment and sustainable work, consistent with international conventions and regional declarations, to ensure higher social, economic and human development returns from the demographic dividend	0	1	1	0	0	1	3
	22	Maximize the benefits of the demographic dividend by investing in creating opportunities and a supportive environment for innovation, creativity and entrepreneurship for young people to create and access jobs and realize their full potential;	0	1	0	0	0	1	2
	23	Address and improve the welfare, livelihoods and stability of families and communities and the longevity of people through inclusive social protection policies and programmes	0	0	1	1	0	1	3
	24	Develop and strengthen family-related programmes that would address challenges facing emerging family structures such as female-headed households, child-headed households and households headed by older persons;	0	0	0	0	1	0	1
	25	Promote a culture of respect, support, active and healthy ageing for older persons to ensure that they receive needed long-term care, equitable access to social services, and protection against violence, abuse and social discrimination	0	1	0	0	1	1	3
	26	Introduce and strengthen policies that promote lifelong learning and facilitate the integration and participation of older persons in society, and benefit from the accumulated life experience and knowledge in all spheres of life	0	1	0	0	1	0	2

	27	Eliminate child labour and all forms of child exploitation including trafficking, abuse and neglect, and provide adequate care for the development and welfare of children including the establishment of child protection units at the national and sub-national levels;	0	0	1	0	0	1	2
	28	Protect and fulfill the rights of all migrants, including economic migrants, internally displaced people and forced migrants as a result of humanitarian crisis, natural disasters and conflicts and victims of human trafficking, through policy and programmes that ensure their access to work and basic social services as well as enhancing the capacity of security and law enforcement agencies to protect the rights of such persons;	1	1	0	0	0	0	2
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	29	Accelerate the implementation of the provisions of the Convention on the Rights of Persons with Disabilities to ensure non-discrimination and equitable access to basic social services and access to physical environment and structures.	1	1	0	0	1	1	4
HEALTH	30	Strengthen health systems, down to the primary health care level, towards the provision of equitable and universal access to a comprehensive range of health care services by ensuring, sustainable health financing and addressing the critical shortage of resources including human resources for health, and infrastructure;	0	0	0	1	0	0	1

	31	Operationalize the right to the highest attainable standard of health by adopting equity and rights based planning and resource-allocation , facilitating community participation in health decision-making and programming, educating health care providers and communities on what the right to health means in service provision and ensuring the delivery of health care that is free from stigma, coercion, discrimination, violence and respects human rights, including the rights to confidentiality, privacy, and informed consent;	0	0	0	1	0	0	1
	32	Create a supportive environment to eliminate preventable, communicable and non-communicable diseases , including HIV and AIDS, sexually transmitted infections, Tuberculosis and Malaria and heart-related diseases and cancers;	0	0	1	1	0	0	2
	33	Intensify efforts to achieve universal access to HIV prevention, treatment, care and support for people living with HIV, and to eliminate mother-to-child transmission	0	1	1	1	0	0	3
	34	Achieve universal access to sexual and reproductive health services , free from all forms of discrimination by providing an essential package of comprehensive sexual and reproductive health services including through the primary health care system for women and men, with particular attention to the needs of adolescents, youth, older persons, persons with disabilities and indigenous people, especially in the most remote areas;	0	0	1	1	0	0	2
	35	Enact and enforce laws and policies within the national political and legal framework to respect and protect sexual and reproductive health and rights of all individuals ;	1	0	0	1	0	1	3

	36	Support the integration of sexual and reproductive health services, HIV and AIDS and family planning;	0	0	0	1	0	0	1
	37	Eliminate preventable maternal mortality and neonatal mortality through ensuring that births are attended by skilled health personnel, and that there is universal access to prenatal and postnatal care and family planning, emergency obstetric and neonatal care, and management of pregnancy-related complications and preventable complications arising from unsafe abortion in order to protect the health and safeguard the lives of women, adolescent girls and neonates;	0	1	1	1	0	1	4
	38	Expand access for all women and adolescent girls to timely, humane and compassionate treatment of unsafe abortion complications and, in accordance with national laws and policies, provide access to safe abortion services;	1	1	0	1	0	0	3
	39	Create supportive conditions to eliminate preventable maternal morbidities, especially obstetric fistula;	0	1	1	1	0	0	3

	40	Adopt and implement relevant comprehensive sexuality education programmes , both in and out of school, that are linked to sexual and reproductive health services, with the active involvement of parents, community, traditional, religious and opinion leaders; and young people themselves;	0	1	1	1	0	1	4
	41	Enact and implement fertility-related policies that promote the rights of individuals and couples to decide freely and responsibly, the number and spacing of their births and to have the information and means to do so, taking into account the need for such policies to be based on evidence from research and best practices;	0	0	1	1	0	1	3
	42	Institute measures to prevent unplanned pregnancies through improving access to information, technologies, commodities and services including emergency contraception, that increase the ability of individuals and couples to make free and informed decisions about the number and timing of births;	0	0	1	1	0	1	3
	43	Take deliberate and concerted actions to provide affordable and accurate rapid diagnostic tests (RDT) for HIV, other sexually transmitted infections and reproductive tract infections , as well as information, education, and treatment to all women and men;	0	0	0	1	0	0	1
	44	Put in place measures that facilitate men and boys to access sexual and reproductive health information, counseling and services, promote male participation and equal sharing of responsibilities such as care work, as well as shared decision-making between men and women on sexual and reproductive health;	0	0	1	1	0	1	3

	45	Ensure that all victims/survivors of gender-based violence have immediate and cost free access to appropriate psychosocial and health services, including 24-hour hotlines; treatment of injuries; post-rape care, emergency contraception, and post-exposure prophylaxis for HIV prevention;	0	1	1	0	0	0	2
	46	Integrate responses to gender-based violence in all sexual and reproductive health programmes and services including in humanitarian situations, as part of a broader, multi-sectoral, coordinated response, which include maternal and child health, family planning, and HIV-related services	0	0	0	0	0	0	0
PLACE AND MOBILITY	47	Facilitate free movement of people and goods within countries to foster rural-urban inter-linkages, and regional integration;	0	1	1	0	0	0	2
	48	Adopt selective migration policies, maximize the benefits and minimize the costs and repercussions of international migration, and manage irregular migration;	0	1	1	0	0	0	2
	49	Formulate and adopt evidence-based migration policies, particularly those aimed at vulnerable groups, especially women and youth; maximize the benefits and minimize the costs and repercussions of international migration, and to protect the rights of migrants and citizens;	0	1	1	0	0	0	2

	50	Integrate migration issues in national development plans and strategies;	0	0	1	0	0	0	1
	51	Address, as a priority, the living conditions of people in urban and peri-urban areas through systematic city planning and management while ensuring equal access to quality and affordable basic health and social services for all people;	0	0	0	0	0	0	0
	52	Ensure equity in access to services by making them sufficiently and geographically available in both urban and rural areas;	0	0	0	0	0	0	0
	53	Develop innovative plans for urbanization and creation of sustainable cities, and incorporate these plans into the national planning frameworks;	0	0	1	0	0	0	1
	54	Promote the social use of space by attending to the land, housing and service needs of the poor, and improve the functioning of land markets;	0	1	0	0	0	0	1
	55	Plan ahead and invest in urban and rural areas by anticipating future growth and population needs, as well as conducting coordinated regional approaches that include peri-urban areas	0	0	1	0	0	0	1
	56	Develop and strengthen plans, programmes and systems for addressing the needs of people living in fragile ecosystems;	0	1	0	0	0	0	1

	57	Promote the sustainable use of space, by promoting urban growth within a systematic concern for environmental values, minimizing the size and impact of the urban blot, favouring energy-saving and well-integrated mass transportation, as well as density and compact cities;	0	0	0	0	0	0	0
	58	The development of both rural and urban areas in order to strengthen their symbiotic relations in terms of markets and remittances;	0	0	0	0	1	0	1
	59	Reinforce and establish bilateral, regional and global partnerships on migration to progressively reduce barriers on movement while upholding the fundamental human rights of all migrants, and make migration an instrument of mutual development for the benefit of migrants and countries;	0	1	1	0	0	0	2
	60	Promote policies that foster the integration and reintegration of migrants and returning migrants;	0	1	1	0	0	0	2
	61	Work towards the regional and international portability of acquired benefits and rights from migration;	0	1	1	0	0	0	2
	62	Ensure that migrants have access to secure and low cost remittance transfer options;	0	1	1	0	0	0	2
	63	Forecast the consequences of climate change-related migration in vulnerable areas, especially cities and coastal areas;	0	1	1	0	0	0	2

	64	Fund regular national and regional surveys to ensure current migration data for studying migration and development in the region;	0	0	1	0	0	0	1
	65	Recognize the rights of refugees and guarantee their physical and social protection in conformity with international conventions and work towards facilitating their repatriation to their countries of origin.	1	1	1	0	0	0	3
GOVERNANCE	66	Remove barriers to sustainability <i>inter alia</i> through increased use of technology, including innovation, sound governance, systematic awareness creation and sensitization of the public and sustainable consumption behaviour that are beneficial to the environment;	0	0	0	0	0	0	0
	67	Further integrate population dynamics into development planning at the national and sub-national levels in order to comprehensively respond to population and development issues, including population dynamics and its implications for human rights, dignity, quality of life, poverty eradication and sustainable development;	0	0		0	1	1	2
	68	Create and strengthen relevant institutions with the necessary capacity to ensure effective integration of population dynamics into development planning with a rights-based approach as well as efficiency and accountability, including ensuring effective coordination of all relevant social and planning bodies;	0	0		0	1	1	2
	69	Implement policies where needed that ensure the inclusive and effective participation of the whole society <i>inter alia</i> women, young persons, older persons, persons with disabilities, indigenous people	0	1	1	0	0	0	2

		and other marginalized groups in all aspects and levels of governance;						
	70	Institute monitoring and evaluation mechanisms to effectively assess performance in order to ensure accountability.	0	0	0	0	0	0
DATA AND STATISTICS	71	Strengthen national statistical capacity to undertake evidence-based analysis and policy studies, as well as the ability to conduct sound monitoring and evaluation programmes, while increasing investment in the collection, analysis and utilization of population-based data, including population and housing censuses, surveys, civil registration, administrative records, and other studies, together with social, economic and environmental data;	0	0	1	0	0	1
	72	Establish a functional system of civil registration at national, sub-national and community level using existing traditional and local institutions to ensure the availability of relevant data for planning at all levels;	0	0	1	0	0	1
	73	Generate, collect, and use quality and timely data from censuses, surveys, vital and civil registration systems, administrative records, studies and research, disaggregated by sex and population groups, for the purposes of planning, monitoring and evaluation;	0	0	1	0	0	1
	74	Undertake qualitative and quantitative research and policy studies;	0	0	0	0	1	0

	75	Emphasize the importance of collecting data on older persons and persons with disabilities for planning and research, to take into account their specific needs in implementing policies and programmes;	0	1	0	0	1	0	2
	76	Conduct regular national censuses according to international standards, in order to generate timely quality data as an essential component of national and regional development frameworks;	0	0	1	0	0	0	1
	77	Undertake periodic assessment of the national civil registration systems and vital statistics and prepare a plan for needed improvements where necessary.	0	0	1	0	0	0	1
International Cooperation & Partnerships	78	Promote strengthened partnerships with local, national and international civil society organizations in the design, implementation, coordination, monitoring and evaluation of population and development programmes and policies, and encourage the promotion of activities directed at increasing the participation and building the capacity of these organizations;	0	0	0	0	0	0	0
	79	Recognize the role of civil society organizations including NGOs and youth in the formulation, monitoring and evaluation of population and development policies and programmes including for achieving the goals of sexual and reproductive health and rights;	0	1	1	0	0	0	2
	80	Promote strengthened partnerships with the private sector in the design, implementation, coordination, monitoring and evaluation of population and development programmes and policies, in particular in the areas of service delivery and commodity production, security and distribution;	0	0	1	0	0	0	1

	81	Promote international cooperation efforts, including the development of joint programmes and initiatives, the strengthening of policy dialogue and coordination, the transfer of knowledge and technology, and the allocation and mobilization of financial and technical resources, for international cooperation in the area of population and development.	0	0	0	0	0	0	0
	82	Mainstream the Addis Ababa Declaration on Population and Development in Africa beyond 2014 into the work plans of the bodies of the African Union and United Nations Economic Commission for Africa;	0	0	0	0	1	0	1
	83	Also mainstream the inclusion of the Addis Ababa Declaration in the Post-2015 development agenda;	0	0	0	0	1	0	1
	84	Monitor regularly the achievement of the goals of the Declaration in the context of reporting on the post-2015 development agenda;	0	0	0	0	1	0	1
	85	Conduct sound monitoring and evaluation of this Declaration based on reliable population data, projections, and consideration of future scenarios;	0	0	0	0	1	0	1
	86	Enhance coordination and cooperation among government departments dealing with population and development matters for harmonizing population and policy within sectoral policies on education, youth and health and the need to build capacity and provide funding to national and regional population programmes;	0	0	0	0	0	0	0

	87	Periodically review the outcomes of the African regional conferences on ICPD beyond 2014;	0	0	0	0	1	0	1
	88	In doing so, we take into account the concerns of all strata of the continent's stakeholders – including the public sector; private sector; civil society including NGOs, faith-based organizations, youth, women, trade unions and academia; Members of Parliament; and regional and sub-regional development institutions.	0	0	0	0	1		1
			<i>items are coded 1 if they focus on a subpopulation and if they require special programs (rather than legislation or broad policies)</i>	<i>*as defined in the UNFPA's proposals for ICPD-based priority SDGs</i>	<i>items are coded 1 if they address factors affecting the dividend (fertility, youth employment, old-age security) if they are NOT included in the SDG agenda</i>		<i>items are coded 1 if they address factors affecting the dividend (fertility, youth employment, old-age security) if they are NOT included in the SDG agenda</i>		<i>(sum of scores on all criteria)</i>

Appendix3

Pillar	Nº	FULL TEXT OF RECOMMENDATION	Overlap Score		
			Overlap with SDG	Overlap with DD agenda	Total Score
DIGNITY AND EQUALITY	1	Develop, strengthen and implement appropriate legislation, national policies and programmes that guarantee and promote human rights, dignity and equality for inclusive sustainable economic and social development in all sectors;	1	0	1
	2	Develop, strengthen and implement effective national strategies aimed at eradicating extreme poverty, inclusive growth and economic development, as applicable, that also target disadvantaged groups, especially women, older persons, youth, unemployed persons, people living with HIV and AIDS and persons with disabilities, in both urban and rural areas	2	0	2
	3	Harmonize national legislation with ratified international instruments and accelerate the implementation of the respective national, regional and international commitments on gender equality and women's empowerment in all sectors and eliminate all forms of discrimination against women and girls	2	0	2

	4	Review, revise, amend or abolish all laws, regulations, policies, practices and customs that have discriminatory impact on women, youth, especially girls, without distinction of any kind, and ensure that the provisions of multiple legal systems comply with international human rights regulations and laws;	2	0	2
	5	Increase and enhance the equal participation of women, especially those living in rural areas, in high added value production by increasing their equal access to training and decent work, including, equal pay for equal work, access to social security, paid parental leave, sick and care leave, and other socio-economic benefits, through the design and implementation of gender sensitive budgets with full accountability;	3	0	3
	6	Enhance male participation and equal and equitable sharing of responsibilities through support programmes that promote gender equality in rights and opportunities;	2	0	2
	7	Enact and implement laws and introduce institutional reforms to ensure economic empowerment of women and young people through equal access to ownership and control of economic resources, technology and markets, including land, property and inheritance rights;	2	0	2
	8	Increase and enhance women's and youth's participation in decision-making and leadership positions at all levels through effective implementation of appropriate policies, programmes and affirmative action;	2	0	2

	9	Develop and strengthen the implementation of public, civic and adult education programmes which address issues of gender equity, equality and women's empowerment;	2	0	2
	10	Address the needs of all girls, boys and children with disabilities, with regard to their rights to health, nutrition and education at all levels;	3	0	3
	11	Address the causes of high school drop-out rates, among boys and girls while creating a conducive environment to enroll those who have never been to school	2	1	3
	12	Create a supportive environment to keep the girl child, including married girls and pregnant girls, in school at all levels of education, and ensure admission or re-entry to school after delivery;	2	1	3
	13	Develop and ensure full implementation and enforcement of policies to prevent all forms of child abuse, including school-based violence, violence against girls, sexual violence and harassment and the promotion of safe space programmes for girls;	3	0	3
	14	Enact and enforce as a matter of urgency, the legal age of marriage in accordance with Article 6 (b) of the Protocol to The African Charter on Human and Peoples' Rights on the Rights of Women in Africa;	0	1	1

	15	Protect the dignity and rights of women and girls by eradicating all harmful practices, including early and/or forced marriages, female genital mutilation /cutting, through adopting and enforcing laws that prohibit such practices and creating awareness around the harmful health consequences;	2	0	2
	16	Adopt and implement legislation, policies and measures that prevent, punish and eradicate gender based violence within and outside of the family, as well as in conflict and post-conflict situations;	2	0	2
	17	Adopt and protect the human rights of all individuals , without distinction of any kind, and guarantee equality before the law and non-discrimination for all people, in accordance with national policies, laws, religious, ethical values and cultural backgrounds;	2	0	2
	18	Promulgate, where absent, and enforce laws to prevent and punish any kind of hate crimes without distinction of any kind, and take active steps to protect all persons from discrimination, stigmatization and violence ; in accordance with national laws and policies;	2	0	2
	19	Provide universal access to affordable quality, comprehensive education and skills development , including retention and completion, in a safe and participatory environment, at all levels of education as well as free elementary education, to adequately respond to labour market needs;	2	1	3
	20	Provide equitable access, retention and completion, to comprehensive and quality education for all disadvantaged persons and groups , as well as meeting the learning needs of individuals requiring different pedagogical styles;	2	0	2

	21	Provide decent work and appropriate skills for young people through effective policies and programmes that generate employment and sustainable work, consistent with international conventions and regional declarations, to ensure higher social, economic and human development returns from the demographic dividend	2	1	3
	22	Maximize the benefits of the demographic dividend by investing in creating opportunities and a supportive environment for innovation, creativity and entrepreneurship for young people to create and access jobs and realize their full potential;	2	1	3
	23	Address and improve the welfare, livelihoods and stability of families and communities and the longevity of people through inclusive social protection policies and programmes	2	1	3
	24	Develop and strengthen family-related programmes that would address challenges facing emerging family structures such as female-headed households, child-headed households and households headed by older persons;	0	0	0
	25	Promote a culture of respect, support, active and healthy ageing for older persons to ensure that they receive needed long-term care, equitable access to social services, and protection against violence, abuse and social discrimination	0	1	1
	26	Introduce and strengthen policies that promote lifelong learning and facilitate the integration and participation of older persons in society, and benefit from the accumulated life experience and knowledge in all spheres of life	0	0	0
	27	Eliminate child labour and all forms of child exploitation including trafficking, abuse and neglect, and provide adequate care for the development and welfare of children including the establishment of child protection units at the national and sub-national levels;	2	1	3

HEALTH	28	Protect and fulfill the rights of all migrants , including economic migrants, internally displaced people and forced migrants as a result of humanitarian crisis, natural disasters and conflicts and victims of human trafficking, through policy and programmes that ensure their access to work and basic social services as well as enhancing the capacity of security and law enforcement agencies to protect the rights of such persons;	2	0	2
	29	Accelerate the implementation of the provisions of the Convention on the Rights of Persons with Disabilities to ensure non-discrimination and equitable access to basic social services and access to physical environment and structures.	0	1	1
	30	Strengthen health systems, down to the primary health care level, towards the provision of equitable and universal access to a comprehensive range of health care services by ensuring, sustainable health financing and addressing the critical shortage of resources including human resources for health, and infrastructure;	2	0	2
	31	Operationalize the right to the highest attainable standard of health by adopting equity and rights based planning and resource-allocation , facilitating community participation in health decision-making and programming , educating health care providers and communities on what the right to health means in service provision and ensuring the delivery of health care that is free from stigma, coercion, discrimination, violence and respects human rights, including the rights to confidentiality, privacy, and informed consent;	2	0	2
	32	Create a supportive environment to eliminate preventable, communicable and non-communicable diseases , including HIV and AIDS, sexually transmitted infections, Tuberculosis and Malaria and heart-related diseases and cancers;	2	0	2
	33	Intensify efforts to achieve universal access to HIV prevention, treatment, care and support for people living with HIV, and to eliminate mother-to-child transmission	2	0	2

	34	Achieve universal access to sexual and reproductive health services, free from all forms of discrimination by providing an essential package of comprehensive sexual and reproductive health services including through the primary health care system for women and men, with particular attention to the needs of adolescents, youth, older persons, persons with disabilities and indigenous people, especially in the most remote areas;	2	0	2
	35	Enact and enforce laws and policies within the national political and legal framework to respect and protect sexual and reproductive health and rights of all individuals;	2	1	3
	36	Support the integration of sexual and reproductive health services, HIV and AIDS and family planning;	2	0	2
	37	Eliminate preventable maternal mortality and neonatal mortality through ensuring that births are attended by skilled health personnel, and that there is universal access to prenatal and postnatal care and family planning, emergency obstetric and neonatal care, and management of pregnancy-related complications and preventable complications arising from unsafe abortion in order to protect the health and safeguard the lives of women, adolescent girls and neonates;	2	1	3
	38	Expand access for all women and adolescent girls to timely, humane and compassionate treatment of unsafe abortion complications and, in accordance with national laws and policies, provide access to safe abortion services;	2	0	2
	39	Create supportive conditions to eliminate preventable maternal morbidities, especially obstetric fistula;	2	0	2
	40	Adopt and implement relevant comprehensive sexuality education programmes, both in and out of school, that are linked to sexual and reproductive health services, with the active involvement of parents, community, traditional, religious and opinion leaders; and young people themselves;	2	1	3
	41	Enact and implement fertility-related policies that promote the rights of individuals and couples to decide freely and responsibly, the number and spacing of their births and to have the information and means to do so, taking into account the need for such policies to be based on evidence from research and best practices;	3	1	4

	42	Institute measures to prevent unplanned pregnancies through improving access to information, technologies, commodities and services including emergency contraception, that increase the ability of individuals and couples to make free and informed decisions about the number and timing of births;	2	1	3
	43	Take deliberate and concerted actions to provide affordable and accurate rapid diagnostic tests (RDT) for HIV, other sexually transmitted infections and reproductive tract infections, as well as information, education, and treatment to all women and men;	2	0	2
	44	Put in place measures that facilitate men and boys to access sexual and reproductive health information, counseling and services, promote male participation and equal sharing of responsibilities such as care work, as well as shared decision-making between men and women on sexual and reproductive health;	3	1	4
	45	Ensure that all victims/survivors of gender-based violence have immediate and cost free access to appropriate psychosocial and health services, including 24-hour hotlines; treatment of injuries; post-rape care, emergency contraception, and post-exposure prophylaxis for HIV prevention;	2	0	2
	46	Integrate responses to gender-based violence in all sexual and reproductive health programmes and services including in humanitarian situations, as part of a broader, multi-sectoral, coordinated response, which include maternal and child health, family planning, and HIV-related services	2	0	2
	47	Facilitate free movement of people and goods within countries to foster rural-urban inter-linkages, and regional integration;	1	0	1
PLACE AND MOBILITY	48	Adopt selective migration policies, maximize the benefits and minimize the costs and repercussions of international migration, and manage irregular migration;	1	0	1
	49	Formulate and adopt evidence-based migration policies, particularly those aimed at vulnerable groups, especially women and youth; maximize the benefits and minimize the costs and repercussions of international migration, and to protect the rights of migrants and citizens;	1	0	1
	50	Integrate migration issues in national development plans and strategies;	1	0	1

GOVERNANCE	51	Address, as a priority, the living conditions of people in urban and peri-urban areas through systematic city planning and management while ensuring equal access to quality and affordable basic health and social services for all people;	2	0	2
	52	Ensure equity in access to services by making them sufficiently and geographically available in both urban and rural areas;	2	0	2
	53	Develop innovative plans for urbanization and creation of sustainable cities, and incorporate these plans into the national planning frameworks;	2	0	2
	54	Promote the social use of space by attending to the land, housing and service needs of the poor, and improve the functioning of land markets;	2	0	2
	55	Plan ahead and invest in urban and rural areas by anticipating future growth and population needs, as well as conducting coordinated regional approaches that include peri-urban areas	2	0	2
	56	Develop and strengthen plans, programmes and systems for addressing the needs of people living in fragile ecosystems;	2	0	2
	57	Promote the sustainable use of space, by promoting urban growth within a systematic concern for environmental values, minimizing the size and impact of the urban blot, favouring energy-saving and well-integrated mass transportation, as well as density and compact cities;	2	0	2
	58	The development of both rural and urban areas in order to strengthen their symbiotic relations in terms of markets and remittances;	0	0	0
	59	Reinforce and establish bilateral, regional and global partnerships on migration to progressively reduce barriers on movement while upholding the fundamental human rights of all migrants, and make migration an instrument of mutual development for the benefit of migrants and countries;	1	0	1
	60	Promote policies that foster the integration and reintegration of migrants and returning migrants;	1	0	1
	61	Work towards the regional and international portability of acquired benefits and rights from migration;	1	0	1
	62	Ensure that migrants have access to secure and low cost remittance transfer options;	1	0	1

	63	Forecast the consequences of climate change-related migration in vulnerable areas, especially cities and coastal areas;	1	0	1
	64	Fund regular national and regional surveys to ensure current migration data for studying migration and development in the region;	1	0	1
	65	Recognize the rights of refugees and guarantee their physical and social protection in conformity with international conventions and work towards facilitating their repatriation to their countries of origin.	1	0	1
	66	Remove barriers to sustainability <i>inter alia</i> through increased use of technology, including innovation, sound governance, systematic awareness creation and sensitization of the public and sustainable consumption behaviour that are beneficial to the environment;	2	0	2
	67	Further integrate population dynamics into development planning at the national and sub-national levels in order to comprehensively respond to population and development issues, including population dynamics and its implications for human rights, dignity, quality of life, poverty eradication and sustainable development;	0	1	1
	68	Create and strengthen relevant institutions with the necessary capacity to ensure effective integration of population dynamics into development planning with a rights-based approach as well as efficiency and accountability, including ensuring effective coordination of all relevant social and planning bodies;	0	1	1
	69	Implement policies where needed that ensure the inclusive and effective participation of the whole society <i>inter alia</i> women, young persons, older persons, persons with disabilities, indigenous people and other marginalized groups in all aspects and levels of governance;	1	0	1
	70	Institute monitoring and evaluation mechanisms to effectively assess performance in order to ensure accountability.	1	0	1

DATA AND STATISTICS	71	Strengthen national statistical capacity to undertake evidence-based analysis and policy studies , as well as the ability to conduct sound monitoring and evaluation programmes, while increasing investment in the collection, analysis and utilization of population-based data, including population and housing censuses, surveys, civil registration, administrative records, and other studies, together with social, economic and environmental data;	1	0	1
	72	Establish a functional system of civil registration at national, sub-national and community level using existing traditional and local institutions to ensure the availability of relevant data for planning at all levels;	1	0	1
	73	Generate, collect, and use quality and timely data from censuses, surveys, vital and civil registration systems, administrative records, studies and research , disaggregated by sex and population groups, for the purposes of planning, monitoring and evaluation;	1	0	1
	74	Undertake qualitative and quantitative research and policy studies;	0	0	0
	75	Emphasize the importance of collecting data on older persons and persons with disabilities for planning and research, to take into account their specific needs in implementing policies and programmes ;	0	0	0
	76	Conduct regular national censuses according to international standards , in order to generate timely quality data as an essential component of national and regional development frameworks ;	1	0	1
	77	Undertake periodic assessment of the national civil registration systems and vital statistics and prepare a plan for needed improvements where necessary.	1	0	1
	78	Promote strengthened partnerships with local, national and international civil society organizations in the design, implementation, coordination, monitoring and evaluation of population and development programmes and policies, and encourage the promotion of activities directed at increasing the participation and building the capacity of these organizations;	2	0	2

	79	Recognize the role of civil society organizations including NGOs and youth in the formulation, monitoring and evaluation of population and development policies and programmes including for achieving the goals of sexual and reproductive health and rights;	1	0	1
	80	Promote strengthened partnerships with the private sector in the design, implementation, coordination, monitoring and evaluation of population and development programmes and policies, in particular in the areas of service delivery and commodity production, security and distribution;	1	0	1
	81	Promote international cooperation efforts, including the development of joint programmes and initiatives, the strengthening of policy dialogue and coordination, the transfer of knowledge and technology, and the allocation and mobilization of financial and technical resources, for international cooperation in the area of population and development.	2	0	2
	82	Mainstream the Addis Ababa Declaration on Population and Development in Africa beyond 2014 into the work plans of the bodies of the African Union and United Nations Economic Commission for Africa;	0	0	0
	83	Also mainstream the inclusion of the Addis Ababa Declaration in the Post-2015 development agenda;	0	0	0
	84	Monitor regularly the achievement of the goals of the Declaration in the context of reporting on the post-2015 development agenda;	0	0	0
	85	Conduct sound monitoring and evaluation of this Declaration based on reliable population data, projections, and consideration of future scenarios;	0	0	0
	86	Enhance coordination and cooperation among government departments dealing with population and development matters for harmonizing population and policy within sectoral policies on education, youth and health and the need to build capacity and provide funding to national and regional population programmes;	1	0	1
	87	Periodically review the outcomes of the African regional conferences on ICPD beyond 2014;	0	0	0

	88	In doing so, we take into account the concerns of all strata of the continent's stakeholders – including the public sector; private sector; civil society including NGOs, faith-based organizations, youth, women, trade unions and academia; Members of Parliament; and regional and subregional development institutions.	0	0	0
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i The structure mirrors that of the report of the Programme of Action of the ICPD Beyond 2014 A/69/62. The five pillars in this report included the following: (dignity and human rights, health, place and mobility, governance and accountability, sustainability)

ii Teele, D.L. (2014). *Field experiments and their Critics. Essays on the Uses and Abuses of Experimentation in the Social Sciences*. Yale University Press, New Haven.

iii The preamble, among others, emphasizes the need to '*reinforce the integration of population and development*'; the ability to operate in a "*changing development environment*"; the attention to '*inclusive growth and sustainable development*'; the '*sovereign right of each country to implement the recommendations consistent with national laws and development priorities*'; and specific attention to various subpopulations including '*children, adolescents, girls, youth, women, older persons, groups marginalized on the basis of culture or history or indigenous people, persons with disabilities, migrants, refugees, and displaced persons*'.'

iv Strictly speaking, one could list four, rather than the two goals of micro-monitoring and macro-evaluation emphasized here. This longer list would include a) micro-monitoring (follow how individual commitments are being implemented), b) micro-evaluation (assess the impact of each individual commitment), c) macro-monitoring (follow how the full agenda is implemented as a whole), and d) macro-evaluation (assess the total impact of the full set of commitments). The 2-item list is preferred here for the sake of simplicity and because these two goals do cover both extremes of the continuum between monitoring and impact assessment as well and micro and macro-focus.

^v See Shapiro, D., & Tambashe, B. O. 2002. Fertility transition in urban and rural sub-Saharan Africa: preliminary evidence of a three-stage process. *Journal of African Policy Studies*, 8(2-3):105–130. Also see Eloundou-Enyegue P., S. Giroux, and M. Tenikue (forthcoming). African Transitions and Fertility Inequality. A Demographic Kuznets Hypothesis. *Population and Development Review*.