While all developing countries – from the least developed to middle-income - can celebrate accomplishments in their progress towards achieving the Millennium Development Goals (MDGs), critical gaps remain. Despite vast diversities, African, Least Developed, Landlocked, Small Island and Middle-Income Countries share, to varying degrees, many common challenges on their path to equitable sustainable development. These include: poverty, growing inequality, hunger, food insecurity, improving public health and education, providing social protection, youth unemployment, migration, urbanization, changing age structures, growing pressures on resources, and climate change. Some countries also face conflict situations or post-conflict fragilities. In many, the globalization of inequality and social exclusion is leading to increased social unrest and dissatisfaction with current models and trends of development. In various cases, these challenges are aggravated and perpetuated by weaknesses in democratic governance and institutional capacity, weak infrastructure, debt burdens, economic crisis, corruption, funding shortfalls, and declines in development cooperation.

This brief focuses on three key pillars for achieving social, economic and environmentally sustainable development (see recommendations on page 7):

- Advancing the human rights of women and girls and gender equality;
- The rights and participation of adolescents and youth; and
- Sexual and reproductive health and rights for all.

These are essential, cross-cutting foundations for a post-2015 people-centred and planet-sensitive development agenda. They are mutually-reinforcing prerequisites for progress, relevant for all countries regardless of their stage of development. They are also smart, effective and cost-saving investments with multiple payoffs across a range of development objectives.

A human rights-based and holistic approach to sustainable development must address multiple dimensions of discrimination and exclusion, including for women and young people as the two largest demographic groups in the world facing inequality and insecurity. Sexual and reproductive health problems – which are preventable - take a huge toll on lives, families, productivity, economies and public budgets. They entrench poverty and erode development prospects, and represent costs and burdens that can and must be lifted. The limited investments in these key areas is a major reason why many of the Millennium Development Goals (MDGs) have not been achieved—an important lesson for crafting the post-2015 agenda and the Sustainable Development Goals.
Fast Facts: Current Realities & Challenges

The Least Developed Countries (LDCs), Landlocked Developing Countries (LLDCs) and Small Island Developing States (SIDS) constitute the world’s 90 most vulnerable countries.¹ They face the toughest challenges in meeting the MDGs, and are therefore furthest behind in achieving them.²

In the LDCs, more than 75% of the population lives in poverty,³ with 53% in extreme poverty.⁴ In Sub-Saharan Africa, 1 in 4 suffers chronic hunger and 220 million are undernourished.⁵ LDCs are not on track to achieve universal primary education by 2015, and more than 40 per cent of adults lack literacy skills.⁶ Many countries have persistently high rates of maternal and child mortality, HIV, malaria, tuberculosis and other preventable diseases, and non-communicable diseases (NDCs) are a growing health threat. In the Pacific, for example, 75% of all adult deaths are attributed to NCDs, such as diabetes and obesity. The rise in NCDs in turn increases the amount of women’s unpaid care work, diminishing their potential participation in the labor market.

In LDCs, the maternal mortality ratio is nearly 27 times that of the developed world;⁷ only one-third of women access modern contraception;⁸ nearly 5 million unsafe abortions occur every year;⁹ and adolescent birth rates are staggering, largely due to early and forced marriage, lack of opportunity and discrimination. In Sub-Saharan Africa, over 50% of girls give birth before age 20¹⁰ and nearly 25 million people live with HIV.¹¹ The Caribbean has the highest HIV rate outside of sub-Saharan Africa, and in both of these regions, young women are at least twice as likely to be infected as young men.¹² While HIV in the Pacific is generally not widespread, it is most prevalent among the region’s young people, who also have high levels of sexually transmitted infections.¹³ All these health concerns are exacerbated by overburdened and weak health systems that fail to reach the most remote areas, are limited in supplies of essential medicines and commodities, and inadequately staffed.

While facing unmet basic needs for large shares of their populations, LDCs are also the fastest-growing group of countries, whose population is expected to double by 2050.¹⁴ As research shows, the high fertility rates contributing to population growth reflect women’s and adolescent girls’ limited life options and control over sexual and reproductive decision-making. Gender gaps persist: in political participation, in many countries, only about 20% of parliamentary seats are occupied by women, with the Pacific Islands having the lowest rates in the world;¹⁵ girls lag behind boys in secondary and tertiary education; more women are illiterate in comparison to men; and women are disproportionately found in informal, unregulated and/or low-paid sectors without productive assets, such as property of their own or financial supports. Gender-based violence is pervasive: globally, an estimated 35% of women experience physical and/or sexual violence in their lifetime, with rates as high as 45% in Africa and 60% in some parts of the Pacific region.¹⁶ Adolescent girls are especially at risk: over one-third in some sub-Saharan African countries report their first sexual experience was forced. In some countries of the Pacific, over 50% of adolescent girls have experienced gender-based violence.¹⁷

While some LDCs achieved high rates of economic growth in the past decade, much of it was jobless¹⁸ and has recently slowed.¹⁹ Decent work, especially for women and young people, remains scarce. Inadequate energy sources are impediments to development, and the particular geographies of many
countries, especially LLDCs and SIDS, exacerbate development challenges and opportunities for commerce and trade, including due to prohibitive transportation costs. SIDS are particularly vulnerable to natural disasters and rising sea levels associated with climate change, which in sub-Saharan Africa and other LDCs also intensifies threats to food security. At the same time, in some countries, including in Africa – a continent with the second highest rate of economic growth in the world – there may be new horizons of opportunity for increased domestic investments in efforts to eradicate poverty. However, international development cooperation will still be essential, especially for the least developed countries.

Middle-Income Countries (MICS) number over 100, with a total population of over 5 billion. They are major engines of global growth and represent about one-third of global GDP. But despite success in reducing poverty and improving welfare outcomes for many, MICS are home to three-quarters of the world’s poor and almost 70% of the world’s undernourished, with deprivation fueled by persistent social and economic exclusion. The inequalities prevalent in many middle-income countries are also manifested in the sexual and reproductive health outcomes that especially affect women and adolescent girls living in poverty or belonging to marginalized communities. In spite of greater levels of contraceptive use, for example, MICS continue to be plagued by high levels of maternal mortality and morbidity, including due to the over 9 million unsafe abortions that take place each year, as well as high rates of adolescent childbearing.

Gender discrimination and violence against women and girls persist, despite gains in women’s political and economic participation. Some MICS are feeling the pressures of youth unemployment as well as the concerns of growing ageing populations, with needs for pension reforms, and face increasing challenges of non-communicable diseases related to unhealthy lifestyles, including cardiovascular diseases, cancer, chronic respiratory diseases and diabetes. MICS also face pressures in managing urbanization, and remain susceptible to economic shocks and the consequences of climate change. Many MICS have enjoyed successes, but without greater investments in human capital, they will remain vulnerable to “the middle-income trap”, or worse, slipping back into poverty.

Solutions & Smart Investments

To achieve structural transformation that can trigger and sustain economic growth and preserve the environment, foster resilience and leave no one behind, investments in gender quality, the empowerment of women and young people, and sexual and reproductive health and rights are essential. They are keys to resolving many challenges: eradicating poverty, fostering inclusive economic growth, improving education and health, including to end maternal and child mortality and halt the spread of HIV, increasing labour productivity, strengthening human capital accumulation, balancing population dynamics with environmental resources by relieving population pressures on food, land, water, energy and fragile ecosystems, and enabling lasting peace and stability in conflict-affected settings.

1 MICS include several LLDCs, SIDS and sub-Saharan African countries.
Evidence shows that investing in women’s empowerment and gender equality contributes to economic growth, makes institutions function better, improves stewardship of the environment, and enables progress across development objectives. Studies across a range of countries show:

- Bringing women’s access to productive resources to the same level as men could increase their farm yields by 20-30%, and raise total agricultural output in developing countries by 2.5-4%, which could in turn reduce the number of hungry people in the world by 12-17% and the number of undernourished by as many as 100 to 150 million. This is particularly relevant for sub-Saharan Africa and least-developed countries whose economies depend largely on agriculture, where food security is an urgent concern, and where women comprise up to half the agricultural workforce.

- Expanding women’s participation in the workforce can contribute to substantial increases in GDP, with country estimates ranging from 5 to 34%. This can especially impact countries where women’s participation in the labor market is low. Women’s successful integration into the labor market is considered one of the driving forces behind the economic successes of the so-called Asian Tigers.

- In a globalized world, expanding women’s economic participation enhances countries’ ability to compete internationally, and industries’ prospects of expanding.

- Removing barriers for women to join male-dominated occupations or sectors could increase worker productivity by up to 25%.

- Supporting women to enter and remain in the labor force can help dampen the adverse impact of shrinking working-age populations, a concern facing many middle-income countries.

- Improvements in women’s educational achievement lead to healthier, smaller, better educated families and better outcomes for their children, especially when women influence decisions on the use of household income.

- Empowered women can be effective stewards of their local environments and natural resources, and build resilience in times of crises. In many countries, women work closely with the land, including as farmers and in fisheries. In India and Nepal, when women had greater input into managing forests, conservation outcomes significantly improved. Conversely, in the Pacific islands, women’s exclusion from decision-making within the family was found to make their households more vulnerable to disaster.

- Increasing women’s political participation can improve governance: A study in India found improvements in services and less corruption.

Achieving sustainable development depends on expanding opportunities for adolescents and youth, especially adolescent girls. These investments—particularly in education, sexual and reproductive health, and decent jobs—directly improve the well-being of large segments of the population, yield returns for generations to come and build the resilience of next generations, including to break out of poverty and avoid slipping back:

- Such investments are the foundations of any country’s prospects for development and prosperity. In LDCs, 60% of the population is under 25. In sub-Saharan Africa, 1 in 3 people are between the ages of 10 and 24, and young populations are growing in many countries of Asia and the Pacific. Many of these young people live in poverty, social exclusion, orphaned or neglected, are out of school, unemployed or underemployed, subjected to violence and
exploitation. Not only are their rights unfulfilled, but the opportunity costs in terms of human capital accumulation are tremendous.

- **Inclusive economic growth for any country requires investments in human capital from an early age,** especially through adolescence, by ensuring access to quality education, health, including mental health, and other social services, freedom from discrimination and violence, skills-building and decent work opportunities for all young women and men. With the **largest generation of adolescents in history**, at 1.2 billion globally and with 88% of them living in developing countries, it is especially important to ensure that investments made in childhood health and development are capitalized on and sustained through adolescence. Research shows this is a critical stage in the life-cycle, with risks but also unique opportunities. Adolescents are more open to absorbing new ideas, healthy habits and positive social and gender norms that can last through adulthood, with potential **long-term effects for societies and economies** as a whole. This is also the generation set to fully embrace and **advance ‘green’ mindsets, practices and innovative approaches**. Despite the evidence, this age group is still inadequately addressed by public policies and budgets.

- For governments and public budgets, especially in countries with large shares of young people, **investing in adolescents and youth can fuel economic growth** - if the right policies are put in place. Preparing an educated, healthy and skilled workforce - with access to sexual and reproductive health, alternatives to early marriage and childbearing, and to training and decent jobs - can enable shifts from high to low-fertility, to smaller families with fewer dependents, increased spending per child, and overall savings and investment. The result is a ‘demographic dividend’, credited with having accelerated economic growth and poverty reduction in countries across several regions.

- Ensuring opportunities for young people can also help **reverse the brain drain from migration** observed in many developing countries.

- Even in countries more concerned with **ageing populations**, investing in the current and future workforce can help **bolster pension systems that provide for older generations**.

- **Sexual and reproductive health and rights** underpin poverty eradication and sustainable development, human capital accumulation, gender equality and the empowerment of women and young people.

- **Sexual and reproductive health problems** impose huge costs and burdens on individuals, families, societies, public budgets, productivity and economies — but they are preventable. Maternal mortality and morbidity leads to reduced labor supply and lost wages. The costs of HIV drain budgets, generate productivity losses and slow economic growth. Treating unsafe abortion complications consumes up to 50% of hospital budgets for obstetrics in low- and middle-income countries, and costs over $130 million annually to health systems in Latin America and the Caribbean -- home to many Middle-Income Countries and Small Island Developing States.
• **Sexual and reproductive health problems push families into poverty and keep them there.** In Sub-Saharan Africa alone, families spend USD$200 million a year out of their own pockets to treat complications from unsafe abortion, which generates losses to societies as a whole on the order of nearly USD$1 billion in foregone income from death and disability.

• Conversely, investing in sexual and reproductive health has high pay-offs:
  - When women can decide if, when and the number of children to have, they tend to opt for fewer children that they can better provide for and nurture – resulting in a healthier and better educated next generation.
  - Good sexual and reproductive health is associated with increased female workforce participation and higher productivity.\(^{50}\)
  - Young people, especially girls, who can prevent pregnancy as well as STIs and HIV, are more likely to complete their education and earn higher wages in the future.\(^{51}\) Studies in Brazil and India show that delaying adolescent childbearing would increase their productivity by $3.5 billion and $7.7 billion, respectively.\(^{52}\) Similarly, if Kenya's more than 220,000 adolescent mothers had opportunities to delay childbearing and secure jobs instead, this would have added $3.4 billion to the economy, an amount equal to the nation's entire construction sector.\(^{53}\)
  - **Investing in sexual and reproductive health yields savings to public budgets.** Meeting the demand for family planning in 16 sub-Saharan African countries could save the education sector over one billion dollars.\(^{54}\) Satisfying the demand for family planning in both low- and middle-income countries could save them $5.7 billion in maternal and newborn healthcare costs alone.\(^{55}\)
  - Healthier and smaller families can be more resilient to crises, displacement or environmental challenges, and can relieve local pressures on limited resources and fragile ecosystems.\(^{56}\)
**Guiding Principles and Policy Recommendations**

Guided by a human rights-based and people-centred approach, strategic investments based on evidence, as presented in this brief and reflected in the recommendations below, can bolster human capabilities and resilience and generate more equitable sustainable development. Building on the achievements and lessons learned from the MDGs, the new post-2015 agenda should reflect the empowerment of women and young people, gender equality and sexual and reproductive health and rights as essential pillars, fundamental to achieving social, economic and environmental justice. Accountability systems should be guided by principles of transparency, rule of law, good governance, and participation, especially of women, young people and marginalized groups—so that the people and issues ‘left behind’ under the existing MDGs become leading drivers and agents of positive transformation in decades to come.

1. The sustainable development agenda must be rooted in **principles of human rights**, human security, equality and equity, with emphasis on poverty eradication, non-discrimination, social inclusion and gender equality. Meaningful progress toward sustainable development will not be achieved unless the needs and rights are fulfilled of populations living in poverty or marginalized, in conflict-affected settings and environmentally-fragile areas, including slum dwellers, rural populations, indigenous communities, migrants, older persons, people living with HIV and disabilities; those in high-risk occupations, domestic work and other parts of the informal sector; and those who are discriminated against based on any other factor. This means:

   ✓ **Guaranteeing equality before the law and non-discrimination for all people in the exercise of their human rights and fundamental freedoms**, across the range of social, cultural, economic, civil and political rights, including in accessing social benefits, health services, educational and employment opportunities, in forming a family, in fulfilling their right to self-expression, to seek and impart information, to freedom of organization and assembly, and to freedom from violence and harassment, regardless of sex, age, race, ethnicity, income, occupation, marital, HIV, disability or migrant status, sexual orientation and gender identity, or any other grounds.

   ✓ **Amending or enacting laws and policies to respect and protect the sexual and reproductive health and rights of all individuals** without discrimination, coercion or violence, supporting public education campaigns to create an enabling environment for their exercise, and removing all discriminatory barriers to sexual and reproductive health information, education and services, including to sexuality education.

2. Under a stand-alone goal on the **human rights and empowerment of women and girls and gender equality**, and as a cross-cutting aspect of the new development agenda:

   ✓ Enacting and revising legislation and policies to protect the human rights of women and girls and **revoking all discriminatory legislation** to eliminate gender- and age-discriminatory provisions across social, cultural, economic, civil and political rights;

   ✓ Eliminating female illiteracy and continuing to **close gender gaps at all levels of education**;

   ✓ Protecting women’s equal access to economic and income-earning opportunities, and social protection (see Recommendation 5 on employment);
Expanding leadership in decision-making, including affirmative action measures to increase political participation at local and national levels, and to further inclusive, participatory governance and democracy;

Respecting, protecting and fulfilling the sexual and reproductive rights of women and adolescent girls through legal, policy and regulatory provisions, and prohibiting violations of these rights, including spousal and parental consent requirements that limit access to health services; prohibitions on contraceptive methods; forced sterilization and forced abortion, including of women living with HIV, indigenous women or women with disabilities; and mandatory testing for pregnancy or HIV;

Enacting and enforcing legislation against all forms of gender-based violence against women and girls, including sexual harassment, sexual violence and trafficking, domestic violence and marital rape, including revising laws and practices that exonerate perpetrators from punishment, such as if they marry the victim or are partners or husbands of the victim, and by eliminating sexual violence from amnesty provisions in post-conflict settings;

Ensuring legal measures, policies and public education to protect the human rights of girls and eliminate all forms of violence, exploitation, abuse and harmful practices, including early and forced marriage and female genital mutilation, by ending gender disparities in the legal age of marriage and raising and enforcing the minimum legal age of marriage where needed;

Adopting and implementing adequately-resourced national multi-sectoral plans of action to prevent and respond to gender-based violence against women and girls and ensure access to justice;

Undertaking sustained primary prevention programmes and social mobilization campaigns, with particular attention to engaging men and young people, including through comprehensive sexuality education programmes;

Ensuring universal access to critical services for all victims/survivors of gender-based violence, to include, at a minimum: 24-hour hotlines; psychosocial and mental health support; treatment of injuries; post-rape care, including emergency contraception, post-exposure prophylaxis for HIV prevention and access to safe abortion services in all cases of violence, rape and incest; police protection, safe housing and shelter; documentation of cases, forensic services and legal aid; and referrals and longer-term support for women and their children.

3. In the area of health, accelerate implementation of universal access to quality, integrated and comprehensive sexual and reproductive health information, education and services throughout the life-cycle, with priority attention to women, adolescent girls and youth, poor and marginalized communities. This involves:

- Increasing and sustaining investments in sexual and reproductive health as a priority of national health plans and health system strengthening, public budgets and development cooperation;

- Ensuring equitable access and affordability for all individuals to sexual and reproductive health information, contraceptives and services, including as a core component of universal health coverage schemes, by improving geographical distribution of services, and through technological innovations (such as mobile phones, telemedicine);

- Adopting or strengthening national plans and implementation for delivering an integrated, essential package of sexual and reproductive health information and services through the primary health care
system, focused on prevention, that includes: availability of a wide range of effective, voluntary family planning and modern methods of contraception, including male and female condoms and emergency contraception; quality maternity care for all pregnant women and adolescent girls, including to address anemia, malnutrition, malaria, STI and HIV prevention, and newborn health and survival; access to compassionate treatment of unsafe abortion complications and expanding access to safe abortion services; prevention, diagnosis, treatment and care related to HIV and sexually transmitted infections; prevention, care and support for survivors of gender-based violence, including post-rape care for victims of sexual violence; prevention, early detection of and referrals for non-communicable diseases of the reproductive system, in particular breast and cervical cancers; and information and referrals for infertility and assisted reproduction;

✓ Rapidly expanding access to youth-friendly sexual and reproductive health information, education and services for adolescents and youth that is nonjudgmental and protects their rights to privacy and confidentiality, with a focus on adolescent girls and prevention of pregnancy, maternal deaths and morbidities, HIV and sexually transmitted infections, and timely support in cases of sexual assault and other forms of violence;

✓ Ensuring services are equipped to meet the information and service needs of older women and men, including to prevent sexual health problems and address the life-long effects of cumulative reproductive health problems in women.

4. In the area of education, emphasis should be placed on:

✓ Access to quality education, including universal access to secondary education for all children, with particular attention to girls’ retention and completion rates;

✓ Improving functional literacy skills for all children, adolescents and youth;

✓ Prohibiting the expulsion of girls from school due to pregnancy, motherhood or marital status, and providing special supports for pregnant girls, young mothers and fathers, to enable them to complete their education and balance education, work and family responsibilities;

✓ Improving the quality and content of education for today’s employment market, including by eliminating gender stereotypes and biases in curricula and teaching practices, as well as regarding occupational aspirations;

✓ As part of overall improvements in the quality and relevance of education, providing universal access to comprehensive sexuality education² for all adolescents and youth, in and out of school, linked to youth-friendly sexual and reproductive health services, as a basic right and to help young people stay healthy, prevent pregnancy, HIV and sexually transmitted diseases, complete school, prevent tobacco use, alcohol and drug abuse, avoid violence and abuse, plan their lives and navigate their passage into adulthood, while acquiring values of respect for human rights, tolerance, gender equality and non-violence;

✓ Protecting children and adolescents from violence, discrimination, sexual harassment and bullying in schools, with particular attention to all forms of sexual violence against girls in and en route to and

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² Comprehensive sexuality education goes beyond basic biology to promote human rights, gender equality, tolerance and mutual respect, and non-violence, including for the elimination of violence against women and girls. It enables young people to develop critical thinking and decision-making skills for their safety, self-care and health. Such programmes should begin early with age-appropriate content, based on accurate information and scientific evidence. Supportive legal and policy reforms, teacher training and gender-sensitive curriculae, and the involvement of parents, traditional and other community leaders, and ensuring young people’s involvement at all stages of the development of such programmes, are essential.
from school; and providing all girls and boys with confidential, youth-friendly supports and services in cases of violence, abuse and harassment;

- Facilitating young people’s successful school-to-work transitions, and expanding training and access to ICTs, with particular attention to equal opportunities for young women, including through partnerships between schools, businesses, the private sector and community organizations.

5. In the area of employment, decent work and livelihoods, particular emphasis should be placed on ensuring:

- Strengthened policies, legislation and enforcement to protect human and labour rights and eliminate exploitation in all its forms, with particular attention to children, women, low-income workers and migrants;

- Women’s equal access to economic, employment and livelihood opportunities, including through legal and policy provisions, for decent work and equal pay with men; social protection, including for informal sector workers; equal land, property and inheritance rights; access to farming supports, productive assets, banking and financial services, technologies and ICTs, and the ability to start and register a business; and creation of employment opportunities for older women, especially important in countries without strong pension or social security systems;

- Prohibiting employment discrimination against women based on pregnancy or motherhood;

- Adopting and strengthening gender-responsive, family-friendly labour policies and social protection systems that can support women’s equal opportunities for full, productive and decent work, by addressing their disproportionate burden of unpaid care work, inter alia, through maternity and paternity leave policies, flexible work arrangements, the provision of affordable child and elderly care and supports for the care of people living with HIV, disabilities or illness;

- Investments to reduce time-use burdens on women and girls in managing household tasks and family basic needs (e.g. for water, fuel), that also limit female labour force participation and productivity;

- Creating full, productive and decent employment and livelihood opportunities for youth, with decent wages and attention to young women’s equal opportunities, including expanding access to productive assets and financial services to foster youth entrepreneurship, and skills-building that can also help spur technological innovation and ‘green’ solutions;

- Undertaking public education on the importance of gender equality and shared rights and responsibilities of men and boys, including in household management, sexual and reproductive health and rights, and childrearing;

- Adopting legal, policy and institutional employer-based measures to prevent sexual harassment and any form of gender-based violence in workplaces, including through complaint and redress mechanisms, and establishing supportive and flexible policies and programmes for women subjected to domestic abuse and violence.\(^3\)

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\(^3\) For example, to seek mental health counselling for them or their children, for court appearances, to seek new housing and social benefits where available, etc.
For the ‘future we want’ for all to become a reality, robust accountability systems and clear monitoring and evaluation mechanisms at the national, regional and international levels should be established, involving a range of actors and stakeholders, from national governments and parliamentarians, to international development cooperation partners, donors, the UN System, the private sector, the mass media, and with the active participation of civil society, women’s, youth and marginalized groups. Increased national budgets, as well as the fulfillment of ODA commitments, including donors’ pledge to channel .15-.20% of their Gross National Product to LDCs, will also be critical to facilitate and intensify poverty eradication and sustainable development efforts. This includes fulfilling commitments to gender equality (also by utilizing gender-responsive budgeting), young people, and sexual and reproductive health and rights. Staying on track and ‘leaving no one behind’ will require particular attention to disaggregated data collection, with emphasis on the most impoverished and excluded groups of society.

2 Ibid.
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28 UNFPA (2012), Bulletin UNFPA LACRO Issue 1: The Work in Middle-Income Countries Seeks to Tackle Inequalities
29 World Bank (2013) Middle Income Countries Overview
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40 Ibid.
47 World Bank (2012) Investing in Women’s Reproductive Health: Closing the deadline gap between what we know and what we do.
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