OBJECTIVES

The objectives of this round tables are:

• provide a mutual learning space to exchange experience, propose solutions and anticipate future developments;
• identify main lessons learnt and compile a set of suggested action points and key messages that can be shared with a wider audience; and
• promote multi-stakeholder collaboration in addressing inequalities and leaving no one behind.

GUIDING QUESTIONS

• **Reduce health inequalities over the life course and inequalities in access to services**

  How can we move faster to create the conditions for all people to be able to live an equally healthy life? What is the right policy mix to close gaps in health over the life course and to increase the opportunity for the next generation to live more healthy, prosperous lives? What needs to be done to amplify achievements and secure equitable quality services such as universal health coverage and preventive services? What steps can be taken to ensure equal access to other key services such as water and sanitation and safe and affordable housing, including for vulnerable population groups and in rural areas?

• **Eliminate gender inequalities holding back the sustainable development of societies**

  How do discriminatory practices and exclusion affect the lives of women and men in the region? What are the main forms of gender-based discrimination and what groups experience multiple discrimination? How can gender equality policy accelerate progress and sustainable development for both women and men? What priority action should be taken for reducing gender inequalities in the region? How can we enhance the efforts for addressing major data gaps associated with measuring inequalities including gender related ones?
Address geographic disparities and advance inclusion of vulnerable groups

How is social inclusion addressed: over the life course, in our cities and villages where there is limited human, economic and social capital, and for groups at higher risk of poor health and social & economic vulnerability due to stigma, discrimination, lack of opportunity? How can multi-sectoral responses support people to develop their full potential, access the opportunities and resources needed to participate in society and to prosper, to increase sense of belonging and safety in the places/communities where they live and work? How can we use innovation and opportunities that technological advancement offers in order to address inequalities?

CASE STUDIES

Armenia: “Comprehensive approach to addressing skewed sex-at-birth ratio”
The sex-at-birth (SRB) ratio in Armenia decreased from 115 boys/100 girls in 2013 to 110 boys/100 girls in 2017. It was the result of seven years of intensive work of multiple partners, including the Government of Armenia and UNFPA Armenia Country Office, to tackle prenatal sex selection, all the way from identification and thorough research, wide-scale advocacy and communications efforts and alliance building to focused technical support. The case study summarizes the approach and lessons learned from Armenian experience.

Presenter: Ms. Zhanna Andreasyan, Deputy Minister of Labour and Social Affairs, Republic of Armenia

Ireland: “Men’s Sheds: Learning Through Empathy”
The purpose of this case study is to demonstrate that peer-led, informal learning environments with strong behind-the-scenes support can deliver positive, measurable outcomes for members of marginalized demographic target groups, with the example of ‘Men’s Sheds’ in Ireland. It further demonstrates the paramount importance of a sympathetic environment that encourages a sense of ownership and mutual trust amongst learners. According to Dr. Lucia Carragher’s study Men’s Sheds in Ireland: Learning through Community Contexts (Netwell Centre, 2013), over 90% of men who attend a men’s shed feel that doing so enhances their sense of wellbeing.

Presenter: Mr. Barry Sheridan, Chief Executive Officer of the Irish Men’s Sheds Association

Serbia: “Improving social inclusion of young Roma through UN Community Volunteers modality”
The main objective of the case study is to showcase how UNV programme’s UN Community Volunteer Modality, implemented for the first time in partnership with UNDP and UNHCR in Serbia, supported the development of skills and employment of 30 young Roma in local institutions to formulate, implement and monitor Roma inclusion policies at the local level.

Presenter: Mr. Nikola Josipovic, Teaching Assistant in Primary school

Tajikistan: “Comprehensive policy response to Gender Based Violence (GBV) prevention and services”
The case study summarizes the multi-sectoral efforts to create enabling environment for delivery of multi-sectoral services and address gender-based violence (GBV) and discrimination in the country. The initiative includes strengthening the legislation system, technical support for policy and strategy development,
capacity development for institutionalization and sustainability of the programme and introduction of innovative approaches in service delivery for better addressing of gender inequalities and GBV response.

**Presenter:** Ms. Marhabo Olimi, First Deputy Chairperson, Committee of Women and Family Affairs under the Government of the Republic of Tajikistan

**Turkey: “Tackling Inequality through Social Cohesion”**

Turkey currently hosts almost 4 million foreign nationals, including over 3.6 million Syrian refugees, making the country host to the largest refugee population in the world. The rapid expansion of migrant communities has understandably resulted in challenges for integration and social cohesion, in the worst cases leading to discrimination, exclusion and social tensions between resident communities and outgroups. To tackle this, International Organization for Migration (IOM) and the Government of Turkey are implementing various initiatives that promote interaction between members of the different social groups, address inequality, prevent and preempt discrimination and eventual exclusion.

**Presenters:** Ms. Sümeyye Gedikoğlu and Mr. Murat Kodaz, Foreign Relations Department of the Union of Municipality of Turkey

**BACKGROUND**

The Europe and Central Asia region has seen progress in addressing persistent inequalities. However, overall regional and national progress often obscures major inequalities, both in geographical terms and between different population groups. Particular challenges exist with regard to addressing the disparities between urban and rural areas, as well as the needs of persons with disabilities and vulnerable groups. Further, the societies in Europe and Central Asia are becoming more heterogeneous, which requires reducing the plight of ethnic minority groups – often the most socially marginalized.

The regional trends with regard to population dynamics – population ageing, low fertility, population mobility, urbanization, and environmental issues – must be considered when tackling inequalities caused by exclusion and discrimination. Though the diversity of international migration patterns affects countries of origin, transit and destination in distinct ways, persistent anti-migrant sentiments and discriminatory practices against international migrants are widely observed.

All subregions of UNECE, except Central Asia, continue to age rapidly; in many instances, older people are viewed as burdens whose human rights are overlooked. Further, rural and remote areas in many countries experience more pronounced population ageing than urban areas, resulting in a higher share of older residents. Often, rural populations have less access to services and activities, as compared with their urban counterparts, which may further aggravate their situation, particularly when paired with poorer socio-economic conditions. This can be particularly problematic for the elderly, who may face greater risk of social isolation, reduced mobility, lack of support and healthcare deficits as a result of their physical location.

While people with disabilities make an enormous contribution to societies in UNECE region, they often face barriers to opportunity that prevent them from participating in society as equals.
Addressing the social determinants of health is critical in reducing health inequalities and improving social justice for all. This will lead to higher and equitable levels of well-being, increased life-expectancy across different population groups, reduced morbidity and mortality across the region.

The forthcoming WHO Health Equity Status Report shows that:

First, 30% of the difference in self-reported mental health between those in the top and bottom income quintiles is accounted for by poor quality and insecure housing, unsafe neighbourhoods, and poor-quality local environments;

Second, there is a strong correlation between housing deprivation and lower life expectancy. Providing access to affordable, adequate, decent and sustainable housing remains an area of concern throughout the region, especially considering the rising challenges of providing affordable housing; and

Third, among the poorest 20% of households, food security is a considerable issue, one that is strongly correlated with poor health. Income and employment insecurity are strong contributors to the observed differences in self-reported mental health across income levels. A sense of belonging, trust in others and a feeling of safety are also important for human well-being. People who are more socioeconomically disadvantaged feel lower levels of trust, control, perceived safety and social support than those of greater socioeconomic means.

In 2015, over 90% of the European population had access to improved sanitation and piped drinking water. Nevertheless, inequalities in access improved sanitation and pipped drinking were reported in both urban and rural areas, with access ranging between 93.1% and 100% in the former and between 66.7% and 100% in the latter.¹

In the last few years, advances in the development of gender equality, women’s rights and the empowerment of women and girls in the region has been characterized by uneven progress with some areas even seeing a loss of past improvements. Harmful traditional practices, such as child marriage, are still persistent in areas across the region. Though hard to document, child marriage is estimated to affect between 2.7 and 27.2 percent of girls in individual countries in the Eastern Europe and Central Asia region.² The practice is reported to be more prevalent among certain population groups, making women more vulnerable to domestic violence and social exclusion in an intergenerational cycle of violence against children. Violence against women and girls in both the private and public realm is a persistent phenomenon that no country has yet managed to eliminate. Comparability of regional and global data remains a major challenge. The latest comparable data for 87 countries, including 30 countries from developed regions, between 2005 and 2019 shows that 19% of girls and women aged between 15 and 49 have experienced physical and/or sexual violence at the hands of an intimate partner in the twelve months prior. Further, women who have experienced intimate partner violence are 50% more likely to contract HIV than women who have not.³

³ Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and non-partner sexual violence. World Health Organization (WHO), London School of Hygiene and Tropical Medicine, and South Africa Medical Research Council. (2013). http://apps.who.int/iris/bitstream/10665/85239/1/9789241564625_eng.pdf?ua=1
Additionally, the digital divide most commonly disadvantages women and girls; for example, women in Central Asia have 30 percent less Internet access as compare to men, which undermines their chances to obtain relevant skills for the labour market transformation caused by the Fourth Industrial Revolution.

**SDG LINKAGES**

The implementation of SDG 10 (Reduce Inequality) will accelerate the implementation of all Sustainable Development Goals.

**PARTICIPANTS**

The round table is of particular relevance for Ministries of Health, Ministries of Social Affairs, National Women’s/Gender Equality Machineries, Ministries of Regional Development, National Parliaments, National Statistical Offices, academia, think tanks and civil society organizations.

**MODERATORS AND RAPPORTEUR**

The round table discussion will be moderated by Ms. Alanna Armitage, Regional Director, UNFPA EECA and Ms. Christine Brown, Head of the WHO European Office for Investment for Health and Development. The rapporteur for SDG 10 will be Mr. Yerlik Karazhan, Chairman of the Board, JSC "Economic Research Institute", Ministry of National Economy, Kazakhstan.

**ORGANIZERS**

This round table is organized by the United Nations Population Fund (UNFPA) and the World Health Organization (WHO) in cooperation with the International Telecommunication Union (ITU), the Food and Agriculture Organization (FAO), the United Nations Economic Commission for Europe (UNECE), the United Nations High Commissioner for Refugees (UNHCR), the United Nations Children’s Fund (UNICEF), and UN Women in the framework of the Regional UN Issue-Based Coalition on Gender Equality.