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Third session of the Regional Conference on Population
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**PROPOSED INDICATORS AND METADATA FOR REGIONAL
FOLLOW-UP OF THE MONTEVIDEO CONSENSUS
ON POPULATION AND DEVELOPMENT**



This document combines the *Final report of the ad hoc working group for the preparation of a proposal on the indicators for regional follow-up of the Montevideo Consensus on Population and Development* and the *Proposed metadata sheets for the indicators for regional follow-up of the Montevideo Consensus on Population and Development*, both prepared previously by the ad hoc working group for the preparation of a proposal on the indicators for regional follow-up of the Montevideo Consensus on Population and Development, with the support of the Latin American and Caribbean Demographic Centre (CELADE)-Population Division of the Economic Commission for Latin America and the Caribbean (ECLAC) in its capacity as technical secretariat of the working group. The technical secretariat received support and assistance from the Division for Gender Affairs of ECLAC and the United Nations Population Fund (UNFPA) for the preparation of the document, which also includes contributions from civil society organizations. The documents combined here were presented separately at the special meeting of the Presiding Officers of the Regional Conference on Population and Development in Latin America and the Caribbean, held in Santiago, on 7-9 November 2017.

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FOREWORD

At their special meeting, held in Santiago from 7 to 9 November 2017, the Presiding Officers of the Regional Conference on Population and Development in Latin America and the Caribbean endorsed the *Final report of the ad hoc working group for the preparation of a proposal on the indicators for regional follow-up of the Montevideo Consensus on Population and Development*.¹ That report had been prepared pursuant to paragraph 15 of resolution 1 (II), adopted by the Regional Conference on Population and Development in Latin America and the Caribbean at its second session, held in Mexico City from 6 to 9 October 2015,² and to paragraph 12 of the agreements of the third meeting of the Presiding Officers of the Regional Conference on Population and Development in Latin America and the Caribbean, held in Santiago from 4 to 6 October 2016.³

The purpose of the report was to present, for approval by the member countries of the Presiding Officers of the Regional Conference on Population and Development in Latin America and the Caribbean, the list of indicators to be used for regional follow-up of the Montevideo Consensus on Population and Development.⁴

At their special meeting, the Presiding Officers also extended the mandate of the ad hoc working group for the preparation of a proposal on the indicators for regional follow-up of the Montevideo Consensus on Population and Development until the third session of the Regional Conference on Population and Development, so that the group could complete pending tasks related to the definition of metadata for the indicators for regional follow-up of the Montevideo Consensus.

The document *Proposed metadata sheets for the indicators for regional follow-up of the Montevideo Consensus on Population and Development*, also prepared by the ad hoc working group with the support of the technical secretariat and the United Nations Population Fund (UNFPA), was presented as a reference document at the special meeting of the Presiding Officers. Its purpose was to provide countries with methodological guidelines enabling them to calculate the indicators in a similar way.

There follows a combined version of the two documents that were prepared for the special meeting of the Presiding Officers of the Regional Conference on Population and Development in Latin America and the Caribbean.

¹ See para. 8 of the agreements [online] https://crpd.cepal.org/1e/sites/crpd1e/files/17-01123_mdp-e_agreements.pdf.

² See resolution 1 (II), para. 15 [online] http://www.cepal.org/sites/default/files/news/files/c1600275_report_crpd_2.pdf.

³ See para. 12 of the agreements [online] http://crpd.cepal.org/3m/sites/poblacion3m/files/mdp3_agreements.pdf.

⁴ See Economic Commission for Latin America and the Caribbean (ECLAC), “Montevideo Consensus on Population and Development” (LC/L.3697), Santiago, 2013.

I. BACKGROUND

The Montevideo Consensus on Population and Development was the outcome of the first session of the Regional Conference on Population and Development in Latin America and the Caribbean, held in Montevideo from 12 to 15 August 2013. It represents the most significant intergovernmental agreement signed in the region in the area of population and development, and has become a key piece of the process of reviewing the Programme of Action of the International Conference on Population and Development and its follow-up beyond 2014. In this respect, in its resolution 2014/1, the United Nations Commission on Population and Development took note of the outcome documents from the regional conferences on population and development, and recognized that they provided region-specific guidance on population and development beyond 2014.

The Montevideo Consensus on Population and Development attracted broad support in the region and brought the implementation of the Programme of Action of the International Conference on Population and Development beyond 2014 into confluence with regional needs. Although the Consensus covers major population and development issues in Latin America and the Caribbean and forms the basis for a comprehensive, up-to-date roadmap for the future of regional action in this area, it requires a number of additional clarifications to make it into an operational agenda.

Accordingly, at its second session, held in Mexico City from 6 to 9 October 2015, the Regional Conference on Population and Development welcomed the *Operational guide for the implementation and follow-up of the Montevideo Consensus on Population and Development*,⁵ which marked a major step forward, not only in terms of the implementation of the Montevideo Consensus at the national level, but also in the development of synergies with other international instruments or bodies, such as the 2030 Agenda for Sustainable Development and the Regional Conference on Women in Latin America and the Caribbean. In this respect, the implementation and follow-up of the Montevideo Consensus should be complemented by the mechanisms provided by those instruments and bodies.

At its second session, the Regional Conference on Population and Development decided to establish an ad hoc working group for the preparation of a proposal on the indicators for regional follow-up of the Montevideo Consensus on Population and Development, which it stipulated would be open-ended, composed of government-appointed experts, geographically representative and coordinated by Mexico.⁶

The working group, initially composed of Antigua and Barbuda, Argentina, the Bolivarian Republic of Venezuela, Brazil, Colombia, Costa Rica, Cuba, the Dominican Republic, Ecuador, El Salvador, Guyana, Jamaica, Panama, Peru, Puerto Rico and Uruguay, and later joined by Chile, was established to prepare, in consultation with all members of the Regional Conference on Population and Development, a proposal on the indicators to be used for regional follow-up on the Montevideo Consensus on Population and Development.⁷ This proposal was to be based on a review of the indicators suggested in the *Operational guide*, and of those proposed for follow-up of the 2030 Agenda for Sustainable Development and for monitoring the Programme of Action of the International Conference on Population and Development and its follow-up beyond 2014.

⁵ See [online] http://repositorio.cepal.org/bitstream/handle/11362/38937/1/S1500859_en.pdf.

⁶ See paragraph 13 of resolution 1 (II) adopted at the second session of the Regional Conference on Population and Development in Latin America and the Caribbean [online] http://www.cepal.org/sites/default/files/news/files/c1600275_report_crpd_2.pdf.

⁷ Ibid., para. 13.

It was also stipulated that the indicators should be precise, comparable, measurable, concrete and aligned with the indicators to be used for monitoring the 2030 Agenda for Sustainable Development and follow-up to the Programme of Action of the International Conference on Population and Development beyond 2014.⁸

In the same resolution, the Conference decided that the Economic Commission for Latin America and the Caribbean (ECLAC), with the support of the United Nations Population Fund (UNFPA), would serve as technical secretariat of the ad hoc working group, which would include the participation of representatives of civil society and other stakeholders in its tasks, and that the ad hoc working group may take into consideration the opinions of such participants when preparing its recommendations.⁹

Pursuant to the decision of the Conference, the ad hoc working group presented a progress report at the third meeting of the Presiding Officers of the Regional Conference on Population and Development, held in Santiago from 4 to 6 October 2016. During the meeting, the Presiding Officers decided to review the preliminary proposal on the indicators contained in the progress report.

Pursuant to the agreements of that meeting,¹⁰ the ad hoc working group proceeded to update its report based on the Presiding Officers' review of the progress report.

II. PROCESS OF PREPARING THE PROPOSAL ON THE INDICATORS FOR REGIONAL FOLLOW-UP OF THE MONTEVIDEO CONSENSUS ON POPULATION AND DEVELOPMENT PURSUANT

The Government of Mexico, in its capacity as Chair of the Presiding Officers of the Regional Conference on Population and Development and coordinator of the ad hoc working group, requested the technical secretariat to prepare a preliminary proposal on the indicators for regional follow-up of the Montevideo Consensus on Population and Development in order to facilitate and provide input for the efforts of the working group. In accordance with the calendar of activities drawn up by the Government of Mexico, this preliminary proposal was sent to the member countries of the ad hoc working group on 7 April 2016 for their consideration, with the request that they convey any comments in writing by 25 May.

The Chair also sent this document to a number of civil society organizations which had requested to join the working group and were admitted in accordance with the provisions of resolution 1(II) adopted at the second session of the Regional Conference on Population and Development, and consistently with these organizations' participation in the working group.

The criteria used by the technical secretariat to draw up the preliminary proposal on the indicators stemmed from the aforementioned resolution. In general, the indicators suggested were taken from the *Operational guide for the implementation and follow-up of the Montevideo Consensus on Population and Development* and from the indicators for the Sustainable Development Goals (SDGs), thus reinforcing the synergy between the Montevideo Consensus and the 2030 Agenda for Sustainable Development.

⁸ Ibid., para. 7.

⁹ Ibid., para. 14.

¹⁰ See para. 12 of the agreements [online] http://crpd.cepal.org/3m/sites/poblacion3m/files/mdp3_agreements.pdf.

The proposal consisted basically of a table setting out the priority measures, the preliminary indicators suggested and, where appropriate, additional information on the indicators, such as background, rationale, justification and metadata.

The Government of Mexico, in its capacity as Chair of the Presiding Officers and coordinator of the ad hoc working group, convened a first workshop to review progress in the preparation of the proposed indicators for regional monitoring of the Montevideo Consensus on Population and Development.¹¹

The purpose of the workshop was to review progress made thus far in the preparation of the proposed indicators for the regional monitoring of the Montevideo Consensus on Population and Development. It was proposed that the outcomes of the workshop would be used as inputs for the technical secretariat to prepare a first draft of the proposal, which was to be completed by July 2016.

The workshop was held in Mexico City on 8 and 9 June 2016 and was organized by the Government of Mexico through the National Population Council (CONAPO), with the support of ECLAC, in its capacity as technical secretariat, and UNFPA.

The workshop was attended by more than 100 participants, including official delegations from the member countries of the working group, representatives of academic and civil society organizations from the region, and United Nations agencies and other organizations.

On that occasion, the participants drew a distinction between the national review and follow-up (including national reporting) to be carried out at the special meeting of the Presiding Officers of the Regional Conference on Population and Development, in 2017, bearing in mind the agreements of the second session of the Regional Conference on Population and Development, and the regional review, which would take place in 2018 and would include follow-up to the indicators agreed upon at the special meeting of the Presiding Officers.

New elements were also mentioned that would need to be considered in relation to the third session of the Regional Conference on Population and Development and the regional evaluation of the Montevideo Consensus; in particular, the establishment of the Forum of the Countries of Latin America and the Caribbean on Sustainable Development and the holding of the high-level political forum on sustainable development under the auspices of the General Assembly in 2019, which would address follow-up to the Cairo Programme of Action beyond 2014 and its expressions at the regional level, such as the Montevideo Consensus on Population and Development.

Several countries called for special attention to be afforded to the overlapping of agendas and follow-up indicators, regular and sustainable sources of information and the necessary link between national information and regional evaluation.

The ideas and suggestions put forward at the workshop were used as input for the preparation of the first draft of the proposed indicators, which was presented to the Presiding Officers of the Regional Conference on Population and Development at their third meeting.

¹¹ See the report on the workshop to review progress in the preparation of the proposed indicators for regional monitoring of the Montevideo Consensus on Population and Development (DDR/1(MDP.3)), Santiago, 2016.

The third meeting of the Presiding Officers of the Regional Conference on Population and Development, held at ECLAC headquarters in Santiago in October 2016, was devoted to reviewing and discussing the draft proposal of indicators contained in the progress report of the working group. The review was carried out under a new work modality, through review groups, the results of which were reflected in the reports of the three groups that met at the third meeting and presented their conclusions at the plenary session. The conclusions were fundamental inputs that allowed the ad hoc working group, with the support of the secretariat, to finish refining the proposal of indicators and focus on preparing a revised version of the progress report.

In December 2016, the technical secretariat submitted this revised version of the progress report with the proposed indicators for regional follow-up of the Montevideo Consensus, which included the outcomes of the third meeting of the Presiding Officers, to the members of the working group for their consideration.

In addition, and at the request of the Chair, the technical secretariat worked on the development of proposed metadata for the indicators for regional follow-up of the Montevideo Consensus, which were presented in a reference document at the special meeting of the Presiding Officers of the Conference.

In its capacity as Chair of the Presiding Officers of the Regional Conference on Population and Development and coordinator of the ad hoc working group, the Government of Mexico then convened a second workshop to review the progress in the preparation of the proposed indicators for regional follow-up to the Montevideo Consensus on Population and Development, with the support of the technical secretariat and UNFPA, which was held in Mexico City on 30 and 31 May 2017.

The purpose of the workshop was to review progress made in the preparation of the proposed indicators for the regional monitoring of the Montevideo Consensus and the related metadata. It was attended by around 70 people, including official delegations of the member countries of the working group, and representatives of regional civil society organizations and other organizations.

On that occasion, the countries expressed their general views on the proposed indicators and metadata and highlighted the integrated nature of the proposal and the need for a cross-cutting approach. Among other things, the issue of disaggregation of the indicators was discussed once more and it was reiterated that the countries should be left to determine which disaggregations would be necessary. The disaggregations specified in SDG target 17.18 (which correspond to those set forth in the introductory paragraph of annex IV to the *Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators*,¹² adopted by the United Nations Statistical Commission at its forty-seventh session), would be kept as a reference, and it was noted that this issue went beyond the special meeting of the Presiding Officers, and that, where greater precision was necessary in relation to conceptual definitions or source of information, expert groups would have to be formed.

¹² E/CN.3/2016/2/Rev.1. At its forty-seventh session, the Statistical Commission adopted decision 47/101, which is contained in document E/2016/24 - E/CN.3/2016/34. In paragraph (d) of that decision, the Commission: “Agreed, as a practical starting point, with the proposed global indicator framework for the goals and targets of the 2030 Agenda for Sustainable Development, as reflected in the list of indicators presented in annex IV of the report, subject to future technical refinement”. See [online] <https://unstats.un.org/unsd/statcom/47th-session/documents/Draft-report-on-the-47th-session-of-the-statistical-commission-Rev1-E.pdf>.

Over June and July, the technical secretariat sent revised versions of the progress report on the proposed indicators and the document with the metadata for the indicators, incorporating the outcomes of the second workshop in Mexico, to the members of the working group and of the Regional Conference on Population and Development, respectively, for their consideration.

III. PROPOSED INDICATORS AND METADATA FOR REGIONAL FOLLOW-UP OF THE MONTEVIDEO CONSENSUS ON POPULATION AND DEVELOPMENT

Below are the proposed indicators and metadata for regional follow-up of the Montevideo Consensus. This proposal was informed by the preliminary proposal of indicators that was discussed at the workshop to review progress in the preparation of the proposed indicators for regional monitoring of the Montevideo Consensus on Population and Development, held in Mexico City, on 8 and 9 June 2016, and the review carried out at the third meeting of the Presiding Officers of the Regional Conference on Population and Development, held in Santiago from 4 to 6 October 2016, and at the second workshop to review progress in the preparation of the proposed indicators for regional monitoring of the Montevideo Consensus, held in Mexico City on 30 and 31 May 2017. The technical secretariat prepared the proposed indicators, presented herein, on the basis of the input from that review, taking into account national capacities for devising, producing and using these indicators.

It should be noted that in this proposal, chapter A has been turned into a consolidated frame of reference for the subsequent chapters and their respective indicators.

The proposed indicators should therefore be read as a whole rather than focusing only on the thematic chapters. Thus, chapters B to I should be read in the light of chapter A, which sets out many of the possible disaggregation categories. The need for some indicators to be disaggregated according to specific population groups is explained in chapter A, which is more general and includes more indicators to capture different dimensions of well-being.

Accordingly, the proposed indicators serve to follow up the priority measures in each chapter of the Montevideo Consensus in an integrated manner, without each and every priority measures necessarily having an indicator associated exclusively with it. This means that some indicators will serve to measure several priority measures, either directly or through their disaggregations.

The disaggregation criteria specified in the introductory paragraph of annex IV to the *Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators* (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session —namely, “by income, sex, age, race, ethnicity, migratory status, disability and geographic location, or other characteristics, in accordance with the Fundamental Principle of Official Statistics (General Assembly resolution 68/261)” — are a guiding reference and have a functional purpose for reading and interpreting the indicators in each of the chapters.

Thus, for the purposes of this proposal, those breakdowns —as well as those listed specifically for each indicator— should be considered a reference and a minimum threshold of disaggregation.

Because of the complexity this involves for the calculation of some of the indicators, it has required work reaching beyond the special meeting of the Presiding Officers held in Santiago, from 7 to 9 November 2017. In those cases, as well as where greater precision was needed in relation to conceptual definitions or sources of information, it will be necessary to form expert groups to continue working on the formulation of a suitable proposal.

Given that difficulties arise when trying to measure the aspirations contained in a political declaration such as the Montevideo Consensus, it must be recognized that the indicators set out in this proposal may suffer from certain limitations. By the same token, as in all measurement exercises, the indicators are not always able to capture the full complexity of the different areas covered by the chapters of the Montevideo Consensus.

The fact that some of the indicators cannot be measured immediately because suitable national data sources do not yet exist or do not allow for the information to be disaggregated as indicated, should not stop countries from starting to generate the necessary information with the support, cooperation and input of other countries in the region that already have such data.

The search for synergies with other agendas has been a long-standing goal, since regional follow-up of the Montevideo Consensus will be part of the regional contribution to the global review of the implementation of the 2030 Agenda for Sustainable Development, in accordance with the resolution on the establishment of the Forum of the Countries of Latin America and the Caribbean on Sustainable Development, adopted at the thirty-sixth session of ECLAC, in May 2016.

In this connection, particular attention is drawn to the convergence between the regional review of the Montevideo Consensus and the preparation of national reports. Although they are different processes, the national reports are crucial inputs for the regional follow-up. Accordingly, it is recommended that national reports take the indicators proposed into consideration. The reports will be presented at the third session of the Regional Conference on Population and Development in Latin America and the Caribbean, to be held in 2018; some advances were presented previously, at the special meeting of the Presiding Officers held in Santiago, in 2017.

Lastly, attention should be drawn to the leading role played by the countries in the preparation of the proposed indicators and in the prior process of discussing and exchanging ideas. Civil society has also been actively involved.

The metadata for the indicators

The purpose of the metadata is to provide countries with methodological guidelines enabling them to calculate the indicators in a similar way. The metadata provide the user with a synthetic and nimble explanation of how the data for each indicator are calculated.

At a minimum, the metadata comprise the definitions, indications, sources and procedures (including formulas or algorithms in their final format, when possible) needed to calculate the indicators for the regional monitoring of the Montevideo Consensus on Population and Development in a way that is comparable through time and across countries. The metadata must be synthetic and precise and draw attention to any measurement difficulties.

In the case of the indicators proposed for the follow-up of the Montevideo Consensus which have been taken from the Sustainable Development Goal (SDG) indicators, official metadata are used without alteration, unless the SDG indicator itself has been adapted and modified, in which case this is duly

indicated in the respective indicator. A point still under discussion concerns harmonization between national and international sources, since Agreement 7 of the Resolution of the second session of the Regional Conference on Population and Development “reiterates the call to use national official data in the generation, elaboration and analysis of indicators that will be used to monitor implementation of the Montevideo Consensus on Population and Development.”

Nonetheless, national figures appear to be the only ones that could satisfy the disaggregation conditions, since SDG estimates by agencies and international organizations would only be national (without breakdowns to lower territorial levels). Naturally, disaggregations can be obtained through models; but, in general, the current agreements aim not to proceed in this way, at least in the official domain of the United Nations.

In the case of the Operational guide indicators, and also the new ones, the natural source should be the countries themselves; and the metadata should specify the algorithms and sources to be used to ensure comparability and provide more detailed methodological information in a notes section of the record. Where necessary, an indication of the difficulty in calculating the indicator is also provided. In some cases also, there will be no current sources available and in others the source may be found in government responses to questionnaires sent by the Secretariat. In view of the above, it is advisable to include in the indicators for national monitoring, those that will be used at the regional level (and use their metadata if available), which will make it possible to exploit economies and synergies between the two levels of monitoring.

The metadata sheet, which is proposed as a nimble consultation tool, consistent with the principles of synthesis, saving and synergy (in particular with the SDG indicators), contains six basic fields, in addition to the indicator statement and the nomenclature (both of the proposed indicators and of their original nomenclature in SDGs or in the Operational guide):

- (a) The first field reflects the indicator’s link to the specific priority measure(s) of the Montevideo Consensus to which it refers.
- (b) The second field reflects the indicator’s link with indicators in other chapters.
- (c) The third provides the definition of the indicator, along with a conceptual and technical explanation of its meaning and scope (identifying the numerator and denominator in the case of a ratio, for example).
- (d) The fourth field indicates the sources where the full metadata information can be found (remember that the record is a synthetic presentation of this). It can therefore include information ranging from mention of specific instruments (household surveys, official reports, regulations, among others) to links to websites where the information is displayed in more detail (the official SDG site for example).
- (e) The fifth field refers to possible and desirable disaggregations of the indicator, where appropriate —especially when the statement does not explicitly identify any particular population group. There may also be cases where this is specified but more disaggregation possibilities exist; hence the reference to SDG 17.18 in many cases, as a guiding reference, not a mandatory indication.
- (f) Lastly, the sixth field is intended for notes, including comments, clarifications and other technical, methodological and general statements that are essential for a better understanding of the indicator’s scope.

Chapter A

**Full integration of population dynamics into sustainable development
with equality and respect for human rights**

In addition to outlining the regional vision of development, chapter A of the Montevideo Consensus on Population and Development underlines the importance of integrating population issues into public policies and planning. Seen from this perspective, development is inextricably linked to eradicating poverty and breaking the cycles of exclusion and inequality; to the centrality of human rights; and to sustainability, which means meeting the needs of the present generation without compromising the ability of future generations to meet theirs.

This chapter, which reflects the more conceptual aspects of the interlinkages between population dynamics and sustainable development, provides a general framework for the subsequent chapters. This means that the report should be read as a whole, not by thematic chapter, because this more general first chapter sets out the reasons why disaggregation by specific population group is required for certain indicators, which is not necessarily explained in the respective chapters.

This proposal endorses the disaggregate criteria specified in the previous section, namely, by income, gender, age, race, ethnicity, migratory status, disability, geographic location and other characteristics relevant in national contexts.

As it was decided to retain, where possible, the wording used for the *Operational Guide* and the SDG indicators, the indicators that specify particular types of disaggregation should also be assessed in the light of the criteria mentioned (such as indicators A.1, A.2, A.4, A.8, A.11, A.12, A.13, A.14, A.17 and A.18).

Among the ad hoc working group's most common concerns are the limitations of the selected indicator on poverty (indicator 1.1.1 of the SDGs), measurement of which is based on the poverty line method. The general consensus among the working group members was that a multidimensional approach to poverty was needed to link different aspects of inequality and to identify vulnerable population groups. The definition of a multidimensional regional indicator on poverty will depend on countries agreeing upon a common benchmark. In view of these considerations, the Presiding Officers of the Regional Conference, at their third meeting, held in Santiago in October 2016, said that the approach to inequality in this chapter should be strengthened by including an additional indicator that would allow poverty to be examined in greater depth.

Given its comprehensive nature, chapter A includes some SDG indicators that capture different dimensions of well-being, such as health, education, labour, the environment, basic services, infrastructure, human settlements and participation.

Another noteworthy aspect of this chapter is the relevance of "process-based" indicators, grounded in the understanding that the full integration of population dynamics into sustainable development with equality and respect for human rights invariably needs public institutions that are responsible for coordinating population and development issues, among other requirements.

Similarly, there must be institutionalized participation mechanisms that civil society organizations can access. Hence this chapter must address these requirements through specific process-based indicators.

Lastly, human rights are enshrined in the Universal Declaration of Human Rights and codified in a series of international and regional treaties that, when ratified by States, carry obligations to respect, protect and fulfil the human rights of all without any kind of discrimination. The obligation to respect means that States must refrain from interfering with or curtailing the enjoyment of human rights. The obligation to protect requires States to protect individuals and groups against human rights abuses. The obligation to fulfil means that States must take positive action to facilitate the enjoyment of basic human rights. National implementation of an international treaty must comply with these three obligations, an expectation that underpins this report.

Indicator	
A.1	Proportion of population below the international poverty line, by sex, age, employment status and geographical location (urban/rural) (SDG indicator 1.1.1).
A.2	Proportion of population living below the national poverty line, by sex and age (SDG indicator 1.2.1).
A.3	Proportion of men, women and children of all ages living in poverty in all its dimensions according to national definitions (SDG indicator 1.2.2).
A.4	Proportion of people living below 50 per cent of median income, by age, sex and persons with disabilities (SDG indicator 10.2.1).
A.5	Gini coefficient
A.6	Proportion of population living in households with access to basic services (SDG indicator 1.4.1).
A.7	Proportion of total government spending on essential services (education, health and social protection). (SDG indicator 1.a.2).
A.8	Life expectancy at birth, by sex.
A.9	Proportion of population with large household expenditures on health as a share of total household expenditure or income (SDG indicator 3.8.2).
A.10	Suicide mortality rate (SDG indicator 3.4.2).
A.11	Proportion of youth and adults with information and communications technology (ICT) skills, by type of skill (SDG indicator 4.4.1).
A.12	Proportion of informal employment in non-agriculture, by sex (SDG indicator 8.3.1).
A.13	Average hourly earnings of female and male employees, by occupation, age and persons with disabilities (SDG indicator 8.5.1).
A.14	Unemployment rate, by sex, age and persons with disabilities (SDG indicator 8.5.2).
A.15	Number of deaths, missing persons and directly affected persons attributed to disasters per 100,000 population (SDG indicator 11.5.1).
A.16	Proportion of land that is degraded over total land area (SDG indicator 15.3.1).
A.17	Proportion of total adult population with secure tenure rights to land, with legally recognized documentation, by sex and by type of tenure.
A.18	Number of victims of intentional homicide per 100,000 population, by sex and age (SDG indicator 16.1.1).

Indicator	
A.19	Proportion of population subjected to physical, psychological or sexual violence in the previous 12 months (SDG indicator 16.1.3).
A.20	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 (indicator 10.3.1 of the SDGs).
A.21	Existence of a public institution responsible for coordinating population and development issues, acting as the country's counterpart to the Regional Conference on Population and Development, before the third session of the Conference (adapted from indicator 3.2 of the <i>Operational Guide</i>).
A.22	Existence of a mechanism for broad participation, including by non-governmental stakeholders, regarding the public institution responsible for the coordinating population and development issues for the implementation and follow-up of the Montevideo Consensus (referred to in indicator A.21) (adapted from indicator 3.3 of the <i>Operational Guide</i>).
A.23	Availability of national plans, policies or sectoral strategies which interact with and include the implementation and mainstreaming of the Montevideo Consensus on Population and Development (adapted from indicator 4.1 of the <i>Operational Guide</i>).
A.24	Existence of development plans integrating population projections.
A.25	Proportion of indicators produced at the national level for the follow-up of the Montevideo Consensus, with feasible disaggregation when relevant to the target, in accordance with the Fundamental Principles of Official Statistics.

Metadata

Indicator A.1 (SDG indicator 1.1.1)

Proportion of population below the international poverty line, by sex, age, employment status and geographical location (urban/rural).

Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 5, 7, 85, 92 and 93

Related indicator(s): A.2, A.3, A.4, A.5, A.6, A.7, A.8, A.9, A.13, B.1, B.2, G.8

Definition:

World Bank: The indicator Proportion of population below the international poverty line is defined as the percentage of the population living on less than \$1.90 a day at 2011 international prices. The ‘international poverty line’ is currently set at \$1.90 a day at 2011 international prices.

International Labour Organization: Proportion of employed population below the international poverty line of \$1.90 per day, also referred to as the working poor, is defined as the proportion of the employed population living in households with per-capita consumption or income that is below the international poverty line of US\$ 1.90.

Source:

See under Notes.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016). Should also consider relevant intersections between ethnicity or race, gender and generation.

Notes:

This indicator still has more than one metadatum. Until there is a definition and a single metadatum for the indicator, the reference to both is maintained. The available metadata come from two sources, the World Bank and the International Labour Organization. For detailed information see:

- <http://unstats.un.org/sdgs/metadata/>.
 - <http://unstats.un.org/sdgs/metadata/files/Metadata-01-01-01a.pdf>.
 - <http://unstats.un.org/sdgs/metadata/files/Metadata-01-01-01b.pdf>.
-

Indicator A.2 (SDG indicator 1.2.1)

Proportion of the population living below the national poverty line, by sex and age.

Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 5, 7, 85, 92 and 93

Related indicator(s): A.1, A.3, A.4, A.5, A.6, A.7, A.8, A.9, A.13, B.1, B.2, G.8

Definition:

The national poverty rate is the percentage of the total population living below the national poverty line. The rural poverty rate is the percentage of the rural population living below the national poverty line (or in cases where a separate, rural poverty line is used, the rural poverty line). Urban poverty rate is the percentage of the urban population living below the national poverty line (or in cases where a separate, urban poverty line is used, the urban poverty line).

Source:

See under Notes.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016). Should also consider relevant intersections between ethnicity or race, gender and generation.

Notes:

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/>.
- <http://unstats.un.org/sdgs/metadata/files/Metadata-01-02-01.pdf>.

Indicator A.3 (SDG indicator 1.2.2)

Proportion of men, women and children of all ages living in poverty in all its dimensions, according to national definitions.

Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 5, 7, 85, 92 and 93

Related indicator(s): A.1, A.2, A.4, A.5, A.6, A.7, A.8, A.9, A.13, B.1, B.2, G.8

Definition:

(No metadata available yet).

Source:

See under Notes.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016). Should also consider relevant intersections between ethnicity or race, gender and generation.

Notes:

Complete metadata will be available at:

- <http://unstats.un.org/sdgs/metadata/>.
-

Indicator A.4 (SDG indicator 10.2.1)

Proportion of people living below 50 per cent of median income, by age, sex and persons with disabilities.

Relevant priority measure(s) of the Montevideo Consensus: 1,2, 5 and 7

Related indicator(s): A.1, A.2, A.3, A.5, A.6, A.7, A.8, A.9, A.13, B.1, B.2

Definition:

(No metadata available yet).

Source:

See under Notes.

Disaggregation:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Complete metadata will be available at:

- <http://unstats.un.org/sdgs/metadata/>.

Indicator A.5

Gini coefficient.

Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 5 and 7

Related indicator(s): A.1, A.2, A.3, A.4, A.6, A.7, A.8, A.9, A.13, B.1, B.2.

Definition:

This is a synthetic indicator used for the statistical analysis of inequality, which measures the deviation of the distribution of income among the individuals or households of a given country in a given period, from a perfectly equal distribution. The value 0 corresponds to absolute equality and the value 100, to absolute inequality. The Gini coefficient is therefore equal to 0 when the total income of a country is evenly distributed among its inhabitants and to 100 when all income is received by a single person.

Source:

The main sources are household surveys and income and expenditure surveys.

Disaggregations:

Those that the sources allow.

Notes:

Further information on how this coefficient is calculated, in:

- UNDP (2015), *Human Development Report 2015, Work for Human Development*, New York, ISBN: 978-92-1-326063-0, http://hdr.undp.org/sites/default/files/hdr_2015_report_sp.pdf.
 - Medina, F. (2001), *Consideraciones sobre el índice de Gini para medir la concentración del ingreso*, ECLAC, Statistics and Economic Projections Division, Santiago, LC/L.1493-P, http://repositorio.cepal.org/bitstream/handle/11362/4788/1/S01020119_es.pdf.
-

Indicator A.6 (SDG indicator 1.4.1)

Proportion of the population living in households with access to basic services.

Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 7, 18 and 77

Related indicator(s): A.1, A.2, A.3, A.4, A.5, A.7, A.8, A.9, B.1, B.2, G.8, G.9, G.15

Definition:

(No metadata available yet)

Source:

See under Notes.

Disaggregations:

Those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Complete metadata will be available at:

- <http://unstats.un.org/sdgs/metadata/>.
-

Indicator A.7 (SDG indicator 1.a.2)

Proportion of total government spending on essential services (education, health and social protection).

Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 7, 9, 29, 30, 85, 86, 92, 93 and 96

Related indicator(s): A.1, A.2, A.3, A.4, A.5, A.6, A.8, A.9, B.1, B.2, B.5, B.6, B.16, C.4, C.5, C.7, H.6, I.3

Definition:

(No metadata available yet)

Source:

See under Notes.

Disaggregations:

Not applicable.

Notes:

Complete metadata will be available at:

- <http://unstats.un.org/sdgs/metadata/>
-

Indicator A.8
Life expectancy at birth, by sex
Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 7, 85, 87, 92, 95 and 97

Related indicator(s): A.1, A.2, A.3, A.4, A.5, A.6, A.7, A.9, B.1, B.2, H.9, H.10, I.4

Definition:

Life expectancy at birth represents the average life span of individuals in a hypothetical birth cohort, subject at all ages to the mortality risks prevailing in the study period.

Source:

The information needed to calculate life expectancy at birth is obtained from vital statistics.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

At their third meeting, the Presiding Officers of the Regional Conference on Population and Development noted that “healthy life expectancy” was an indicator of currently very low applicability and needed further development. Representatives agreed to raise the issue for further development in each of their countries. It was then proposed to temporarily replace the indicator with “life expectancy at birth, by sex”.

For more information on healthy life expectancy, see:

- <http://www.who.int/healthinfo/statistics/whostat2005en2.pdf>.

Indicator A.9 (SDG indicator 3.8.2)
Proportion of population with large household expenditures on health as a share of total household expenditure or income.
Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 7, 85, 87, 92, 95 and 97

Related indicator(s): A.1, A.2, A.3, A.4, A.5, A.6, A.7, A.8, B.1, B.2, H.9, H.10, I.4

Definition:

(No metadata available yet)

Source:

See under Notes.

Disaggregations:

Those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Complete metadata will be available at:

- <http://unstats.un.org/sdgs/metadata/>.
-

Indicator A.10 (SDG indicator 3.4.2)
Suicide mortality rate.
Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 7, 85, 87, 92, 95 and 97

Related indicator(s): B.1, B.2, H.9, H.10, I.4

Definition:

The suicide mortality rate is defined as the number of suicide deaths in a year, divided by the population, and multiplied by 100,000.

Source:

See under Notes.

Disaggregations:

Those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/>.
- <http://unstats.un.org/sdgs/metadata/files/Metadata-03-04-02.pdf>.

Indicator A.11 (SDG indicator 4.4.1)
Proportion of youth and adults with information and communications technology (ICT) skills, by type of skill.
Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 7 and 9

Related indicator(s): B.1, B.2, B.5, B.6, B.16

Definition:

The proportion of youth and adults with information and communications technology (ICT) skills, by type of skill as defined as the percentage of youth (aged 15-24 years) and adults (aged 15 years and above) that have undertaken certain computer-related activities in a given time period (e.g. last three months).

Source:

See under Notes.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/>.
 - <http://unstats.un.org/sdgs/metadata/files/Metadata-04-04-01.pdf>.
-

Indicator A.12 (SDG indicator 8.3.1)

Proportion of informal employment in non-agriculture, by sex.

Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 7, 10, 28 and 54

Related indicator(s): A.14, B.1, B.2, C.2, E.8

Definition:

This indicator presents the share of non-agricultural employment which is classified as informal employment.

Source:

See under Notes.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Complete metadata are available at:

- <https://unstats.un.org/sdgs/metadata/files/Metadata-08-03-01.pdf>.
 - <http://unstats.un.org/sdgs/metadata/>.
-

Indicator A.13 (SDG indicator 8.5.1)

Average hourly earnings of female and male employees, by occupation, age and persons with disabilities.

Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 7 and 10

Related indicator(s): A.1, A.2, A.3, A.4, A.5, B.1, B.2, E.8

Definition:

This indicator provides information on the mean hourly earnings from paid employment of employees by sex, occupation, age and disability status.

Source:

See under Notes.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Complete metadata are available at:

- <https://unstats.un.org/sdgs/metadata/files/Metadata-08-05-01.pdf>.
 - <http://unstats.un.org/sdgs/metadata/>.
-

Indicator A.14 (SDG indicator 8.5.2)

Unemployment rate, by sex, age and people with disabilities.

Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 7 and 10

Related indicator(s): A.12, B.1, B.2, B.7

Definition:

The unemployment rate conveys the percentage of persons in the labour force who are unemployed.

Source:

See under Notes.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/>.
- <http://unstats.un.org/sdgs/metadata/files/Metadata-08-05-02.pdf>.

Indicator A.15 (SDG indicator 11.5.1)

Number of deaths, missing persons and directly affected persons attributed to disasters per 100,000 population.

Relevant priority measure(s) of the Montevideo Consensus: 5, 6 and 7

Related indicator(s): B.1, B.2, G.13

Definition:

Death: The number of people who died during the disaster, or directly after, as a direct result of the hazardous event.

Missing: The number of people whose whereabouts is unknown since the hazardous event. It includes people who are presumed dead although there is no physical evidence. The data on number of deaths and number of missing are mutually exclusive.

Affected: People who are affected, either directly or indirectly, by a hazardous event.

Directly affected: People who have suffered injury, illness or other health effects; who were evacuated, displaced, relocated or have suffered direct damage to their livelihoods, economic, physical, social, cultural and environmental assets.

Indirectly affected: People who have suffered consequences, other than or in addition to direct effects, over time due to disruption or changes in economy, critical infrastructures, basic services, commerce, work or social, health and psychological consequences.

Source:

See under Notes.

Disaggregations:

Those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/>.
 - <http://unstats.un.org/sdgs/metadata/files/Metadata-11-05-01.pdf>.
-

Indicator A.16 (SDG indicator 15.3.1)

Proportion of land that is degraded over total land area.

Relevant priority measure(s) of the Montevideo Consensus: 5, 6, 85 and 86

Related indicator(s): G.12

Definition:

(No metadata available yet)

Source:

See under Notes.

Disaggregations:

Geographic location (urban or rural), plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016). By indigenous territories and communities.

Notes:

Complete metadata will be available at:

- <http://unstats.un.org/sdgs/metadata/>.

Indicator A.17

Proportion of total adult population with secure tenure rights to land, with legally recognized documentation, by sex and by type of tenure.

Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 76, 77, 81, 85 and 88

Related indicator(s): H.1, H.2, H.5, H.8

Definition:

(No metadata available yet).

Source:

See under Notes.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016). By indigenous territories and communities.

Notes:

This indicator is based on SDG target 1.4.2. The official wording of the indicator is abbreviated, by eliminating the final phrase "... and who perceive their rights to land as secure, ..." At their third meeting, the Presiding Officers of the Regional Conference on Population and Development (October 2016) considered that there was no way of measuring the perception of security over these rights, and that there was a subjectivity component in the original wording that was best omitted. It was also made clear that the indicator should be disaggregated for indigenous peoples and communities as regards the collective tenure of their ancestral lands.

Complete metadata will be available at:

- <http://unstats.un.org/sdgs/metadata/>.
-

Indicator A.18 (SDG indicator 16.1.1)

Number of victims of intentional homicide per 100,000 population, by sex and age.

Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 16, 57, 58, 89 and 93

Related indicator(s): A.19, E.14, E.15, G.3

Definition:

The indicator is defined as the total count of victims of intentional homicide divided by the total population, expressed per 100,000 population. Intentional homicide is defined as the unlawful death inflicted upon a person with the intent to cause death or serious injury (Source: International Classification of Crime for Statistical Purposes, ICCS 2015); population refers to total resident population in a given country in a given year.

Source:

See under Notes.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016). Should also consider relevant intersections between ethnicity or race, gender and generation.

Notes:

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/>.
- <http://unstats.un.org/sdgs/metadata/files/Metadata-16-01-01.pdf>.

Indicator A.19 (SDG indicator 16.1.3)

Proportion of population subjected to physical, psychological or sexual violence in the previous 12 months

Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 16, 23, 52, 57, 58, 68, 79, 89 and 93

Related indicator(s): A.18, A.20, C.6, E.4, E.12, E.14, E.15, F.2, F.9, G.3

Definition:

The total number of persons who have been victim of physical, psychological or sexual violence in the previous 12 months, as a share of the total population.

Source:

See under Notes.

Disaggregations:

Those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

The disaggregations of the indicator should also include breakdown by type of violence (physical, psychological, sexual) and by age group, especially with regard to the 0-14 age group (for this age group in particular, information must be obtained using relevant and specific tools).

Should also consider relevant intersections between ethnicity or race, gender and generation.

Notes:

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/>.
 - <http://unstats.un.org/sdgs/metadata/files/Metadata-16-01-03.pdf>.
-

Indicator A.20 (SDG indicator 10.3.1)

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.

Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 33, 34, 35, 36, 46, 57, 58, 89 and 93

Related indicator(s): A.19, D.19, D.20, E.10, E.13, F.2, G.3

Definition:

(No metadata available yet).

Source:

See under Notes.

Disaggregations:

Those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016). Should also consider relevant intersections between ethnicity or race, gender and generation.

Notes:

Complete metadata will be available at:

- <http://unstats.un.org/sdgs/metadata/>.

Indicator A.21 (adapted from Operational guide priority measure 3.2)

Existence of a public institution responsible for coordinating population and development issues, acting as the country's counterpart to the Regional Conference on Population and Development, in Latin America and the Caribbean.

Relevant priority measure(s) of the Montevideo Consensus: 3, 85, 86 and 99

Related indicator(s): H.3, H.4

Definition:

Permanent government agency or entity that is officially tasked with coordinating population and development issues and with serving as the political and technical counterpart to the Regional Conference on Population and Development.

Source:

The sources of basic information on this institution, along with its scope, attributions and responsibilities, are found in each country's legal system (laws, decrees, regulations and provisions, among other instruments), concerning institutional organization (ministries, government secretariats and undersecretariats, national directorates, subdirectorates), public policies, strategies, programmes and projects addressing population and development issues, together with their corresponding budget allocation.

Disaggregations:

Not applicable.

Notes:

The need to define and implement an institutional framework for population and development issues in the countries is described in priority measure 99 of the Montevideo Consensus. This explicitly calls for the establishment or strengthening of a permanent institutional framework, along with an interagency coordination mechanism that includes civil society organizations. The absence of a coordinating institution may result in a partial or fragmented treatment of sociodemographic issues, which is inconsistent with the comprehensive vision required on population and development issues.

The indicator was adapted by deleting the time reference "before the third session of the Regional Conference".

Indicator A.22 (adapted from Operational guide priority measure 3.3)

Existence of a mechanism for broad participation, including non-governmental stakeholders, as part of the public institution responsible for coordinating population and development issues for the implementation and follow-up of the Montevideo Consensus (referred to in indicator A.21).

Related indicator(s): G.5, G.7, H.3, H.4

Relevant priority measure(s) of the Montevideo Consensus: 3, 85, 86, 99 and 107

Definition:

Formal articulation that allows the institutionalized participation and communication of civil society organizations with the permanent government body, agency or department responsible for coordinating population and development issues.

Source:

The sources of information on this articulation, along with its modalities and scope, are contained in the regulations governing the functioning of the public institutions responsible for coordinating population and development issues, and also in the national reports on such participation.

Disaggregations:

Not applicable.

Notes:

The need for a mechanism that allows significant participation by civil society as part of the institutional framework on population and development issues and the implementation and follow-up of the Montevideo Consensus on Population and Development in the countries is presented as priority measure 99 of the Consensus. The existence of a mechanism for civil society participation entails setting up channels to facilitate and encourage such participation, especially among the poorest and most marginalized groups. It also involves the implementation of discussion and feedback processes to ensure contribution from all actors, and the establishment of budgets for its regular operation.

Indicator A.23 (adapted from Operational guide priority measure 4.1)

Availability of national plans, policies or sectoral strategies which interact with and include the implementation and mainstreaming of the Montevideo Consensus on Population and Development.

Relevant priority measure(s) of the Montevideo Consensus: 4, 85, 86 and 99

Related indicator(s): F.3, F.8, G.7, H.3, H.4

Definition:

Existence of plans, policies and/or sectoral strategies which include the implementation and mainstreaming of the Montevideo Consensus and interact with other sectoral government plans.

Source:

The basic information sources are found in the laws of each country.

Disaggregations:

Not applicable.

Notes:

The need to ensure the full integration of population dynamics into sustainable development planning, sectoral policies, and public policies and programmes is stated as priority measure 4 of the Montevideo Consensus. This indicator is closely linked to A.21 regarding the institutions responsible for development plans.

Indicator A.24

Existence of development plans that include demographic projections in their formulation.

Relevant priority measure(s) of the Montevideo Consensus: 4, 19, 85 and 86

Related indicator(s): C.3, G.6, G.16, H.3, H.4

Definition:

Presence of development plans, at both the national and subnational levels, in which demographic estimates and projections are integrated from the moment they are formulated.

Source:

The basic information sources are found in the laws of each country and, more specifically, in the official body, agency or department responsible for drawing up the country's development plans.

Disaggregations:

Not applicable.

Notes:

This indicator takes a component of SDG 11.a.1 in relation to the integration of demographic projections into development plans: "Proportion of the population living in cities that implement urban and regional development plans integrating population projections and resource needs, by size of city," which seeks to reflect the inclusion of the population in development planning.

Indicator A.25

Proportion of indicators produced at the national level for monitoring the Montevideo Consensus, with feasible disaggregation when relevant to the target, in accordance with the Fundamental Principles of Official Statistics.

Relevant priority measure(s) of the Montevideo Consensus: 4, 85, 86, 90, 92, 94, 98 and 102

Related indicator(s): H.3, H.4, H.11, I.5, I.6, I.7

Definition:

Ratio between (i) **numerator:** number of indicators produced at national level for monitoring the Montevideo Consensus, with feasible breakdown when relevant to the target, and (ii) **denominator:** total number of indicators required for monitoring the Montevideo Consensus. In both cases, in accordance with the Fundamental Principles of Official Statistics.

Source:

The source of information on the indicators for monitoring the implementation of the Montevideo Consensus is centralized and systematized in the government body, agency or department officially responsible for coordinating population and development issues and serving as political and technical counterpart of the Regional Conference on Population and Development.

Disaggregations:

Not applicable.

Notes:

This is an adaptation of SDG indicator 17.18.1, which was supplemented by explicit reference to monitoring the Montevideo Consensus and to the feasibility of the disaggregation of indicators at the third meeting of the Presiding Officers of the Regional Conference on Population and Development (October 2016). The Fundamental Principles of Official Statistics were approved by General Assembly resolution 68/261 of January 29, 2014.

Further information on the SDG indicators metadata will be available at:

- <http://unstats.un.org/sdgs/metadata/>.
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Chapter B

**Rights, needs, responsibilities and requirements of girls,
boys, adolescents and youth¹³**

Following up on the progress towards the goals set forth in this chapter calls for a large number of indicators in the light of the many topics covered. As the SDG indicators included in chapter A already measure some of these topics in the overall population, those indicators are also being used here to avoid a duplication of efforts since their disaggregation by age—in accordance with annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session—¹⁴ helps determine, fully or partly, the achievement of the various priority measures of this chapter. Specifically, indicators A.1 to A.15 and A.18 to A.20¹⁵ will be used.

The specific indicators of this chapter focus on two main categories. The first includes themes that are cross-cutting, although those in the Montevideo Consensus on Population and Development differ from those in the 2030 Agenda for Sustainable Development, and require special measurement. The second category corresponds to themes that are barely touched upon or not included in the 2030 Agenda, and are part of reason that the Montevideo Consensus is original and unique. Specifically, these themes are related to comprehensive sexual education, sexual and reproductive health for adolescents and young people, and sexual and reproductive rights for adolescents and young people. Any duplication of efforts regarding these themes is also avoided through disaggregation by age as provided in the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators, for indicators on priority measures that are very similar to those in chapters B and D (the reference group is the only difference). This is the case for indicators D.1 to D.7, D.16 and D.17 (taken from both the SDGs and the *Operational Guide for the implementation and follow-up of the Montevideo Consensus on Population and Development*), which, when disaggregated by age, can be used to measure various aspects of priority measures 12 and 16 of chapter B.¹⁶ The glossary contained in annex A1 offers the necessary definitions for operationalizing and specifying the indicator metadata.

The comments column of the following table provides relevant information on the proposed indicators, including an extremely concise summary of responses to the written and oral comments made during the review of the preliminary indicators (including at a workshop held on 8-9 June in Mexico City). Moreover, the glossary in annex A1 provides definitions needed to act on and fine-tune the indicator metadata at a later date.

¹³ See glossary in annex A1.

¹⁴ For chapter B, data should be disaggregated by five-year age group from 0 to 29 years, and in some specified cases, within the group, for example by age 15 to 17 and age 18 to 19 within the 15 to 19 age group.

¹⁵ These indicators refer to different aspects of priority measures 7, 9, 10 and 16 of chapter B. Specifically, indicators A.1 to A.15 cover various aspects of priority measure 7 (freedom from poverty and violence, enjoyment of protection, human rights, a range of opportunities and access to health, education and social protection). A.11 contributes to the follow-up of priority measure 9 (education—albeit without the characteristics of the Montevideo Consensus, hence the inclusion of specific indicators for some of these in chapter B—and digital literacy). A.12 to A.14 contribute to the follow-up of priority measure 10 (training and employment), and A.18 and A.19 relate to priority measure 16 (harmonious coexistence, freedom from violence, and tolerance and justice).

¹⁶ D.4 and D.5 refer to access to sexual and reproductive health care for men, D.6 and D.7 to access to contraception and family planning, D.8 to sexual and reproductive health care, D.10 to eliminating unsafe abortions, D.12 to the exercise of reproductive rights, D.13 and D.14 to sexual and reproductive health, D.15, D.16 and D.18 to D.20 to the exercise of sexual and reproductive rights, and D.17 to combating sexual and gender-based violence.

Indicator	
B.1	Under-5 mortality rate (SDG indicator 3.2.1).
B.2	Proportion and number of children aged 5–17 years engaged in child labour, by sex and age (SDG indicator 8.7.1).
B.3	Proportion of government forums that have mechanisms for adolescents and young people to participate in public decisions that affect them (indicator 8.1 of the <i>Operational guide</i>).
B.4	Percentage of adolescents and young people who have participated in an instance of public policymaking (indicator 8.2 of the <i>Operational guide</i>).
B.5	Percentage 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 (SDG indicator 4.1.1).
B.6	Percentage of the school population attending educational establishments that offer free, secular, intercultural, non-discriminatory education (indicator 9.1 of the <i>Operational guide</i>).
B.7	Percentage of youth (aged 15-24 and 25-29) not in education, employment or training.
B.8	Consistency of the official curriculum for comprehensive sexual education with the criteria of the Montevideo Consensus on Population and Development and with international standards (indicator 11.1 of the <i>Operational guide</i>).
B.9	Percentage of children, adolescents and young people who have age-appropriate information and knowledge about sexuality and reproduction (indicator 11.3 of the <i>Operational guide</i>).
B.10	Adolescent birth rate (aged 10–14 years and aged 15–19 years) per 1,000 women in that age group (SDG indicator 3.7.2).
B.11	Percentage of women and men aged 20-24 years who first had sexual intercourse before the age of 20, disaggregated into three groups: before the age of 15, before the age of 18 and before the age of 20.
B.12	Proportion of women aged 20-24 years who were married or in a union before age 15 and before age 18 (SDG indicator 5.3.1).
B.13	Percentage of women and men aged 20-24 years who had their first child before the age of 20 years (indicator 12.4 of the <i>Operational guide</i>), disaggregated into three groups: before the age of 15, before the age of 18 and before the age of 20.
B.14	Number of health centres that offer adolescent-friendly services for every 100,000 adolescents.
B.15	Percentage of live births to adolescent and young mothers that are unplanned (indicator 12.5 of the <i>Operational guide</i>).
B.16	Percentage of adolescents who drop out of the education system as a result of pregnancy, parenthood or marriage.
B.17	Percentage of satisfied demand for emergency contraception among women aged under 30 years (indicator 14.3 of the <i>Operational guide</i>).
B.18	Percentage of adolescents who have live-born children, by number of children (indicator 15.3 of the <i>Operational guide</i>).

Note: See glossary in annex A1.

Metadata

Indicator B.1 (SDG indicator 3.2.1)

Under-5 mortality rate

Relevant priority measure(s) of the Montevideo Consensus: 7, 43, 45, 85, 87, 92, 95 and 97

Related indicator(s): B.2 and A.1 to A.15 which, through age disaggregation, allow follow-up to PM 7, which addresses many dimensions of the welfare of this age group (“*the chance to live a life free from poverty and violence, and to enjoy protection and exercise of their human rights, a range of opportunities and access to health, education and social protection*”). D.9, D.15, D.16 which have to do with access to reproductive and, particularly, obstetric health care. And H.9, H.10 and I.4.

Definition:

Probability of a child born in a specific year or period dying before reaching the age of 5 years, if subject to age specific mortality rates of that period, expressed per 1,000 live births.

The under-five mortality rate as defined here is, strictly speaking, not a rate (i.e. the number of deaths divided by the number of population at risk during a certain period of time) but a probability of death derived from a life table and expressed as a rate per 1,000 live births.

Source:

See under Notes.

Disaggregations:

Those included in the indicator, plus those relevant in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/files/Metadata-03-02-01.pdf>.

Indicator B.2 (SDG indicator 8.7.1)

Proportion and number of children aged 5-17 years engaged in child labour, by sex and age.

Relevant priority measure(s) of the Montevideo Consensus: 7

Related indicator(s): B.2 and A.1 to A.15 which, through age disaggregation, allow follow-up to PM 7, which addresses many dimensions of the welfare of this age group (“*the chance to live a life free from poverty and violence, and to enjoy protection and exercise of their human rights, a range of opportunities and access to health, education and social protection*”).

Definition:

Proportion (and number) of children aged 5-17 years engaged in child labour is the number of children aged 5-17 years who are reported to have been engaged in child labour in the past week divided by the total number of children aged 5-17 in the population.

Source:

See under Notes.

Disaggregations:

Those included in the indicator, plus those relevant in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/files/Metadata-08-07-01.pdf>.
-

Indicator B.3 (Operational guide 8.1)

Proportion of government forums that have mechanisms for adolescents and young people to participate in public decisions that affect them.

Relevant priority measure(s) of the Montevideo Consensus: 8

Related indicator(s): F.6

Definition:

Ratio between: (i) **numerator:** all governmental agencies that have developed policies concerning adolescents and young people and have formal mechanisms for youth and adolescent participation, and (ii) **denominator:** all governmental agencies that have developed policies affecting adolescents and young people.

Source:

Official reports

Disaggregations:

Not applicable.

Note:

The source should, at the request of the Secretariat, provide a list of relevant government bodies —those that have developed policies for adolescents— including the following natural candidates: youth agencies (ministries, institutes, services); the Ministry of Education; and ministries with programmes specifically targeting the group in question, in particular the Ministry of Health and the adolescent programme; the Ministry of Labour and the youth employment programme; the Ministry of Interior and safety and risk prevention programmes among adolescents and youth; and the Ministry of Sport and the youth sports programme, Ministries of Planning and Social Development, etc. The source should also indicate and describe formal mechanisms for participation by young people and adolescents in each of the government forums identified by the country and their application in the event of policies implemented in the reference period. The indicator refers only to national or federal entities. The countries may include subnational entities in the calculations for their national reports. Some countries may make age distinctions for participation in government entities in which public policies are formulated, in which case the reference group may be smaller (for example, adolescents and young people aged 15-29 or 18-29 years). It is agreed that more work is needed on the metadata to arrive at an expert, politically validated and measurable definition of “formal mechanisms for participation” for adolescents and young people.

Indicator B.4 (Operational guide 8.2)

Percentage of adolescents and young people who have participated in an instance of public policymaking.

Relevant priority measure(s) of the Montevideo Consensus: 8

Related indicator(s): B.3

Definition:

Ratio between: (i) **numerator:** number of young people and adolescents who participated at least once during a 12-month period in some mechanism or procedure involving governmental bodies which formulate public policies, and (ii) **denominator:** total number of young people and adolescents.

Source:

Survey with questions on participation by adolescents and young people in some governmental participation mechanism or procedure in which public policies are defined, in the 12 months prior to the survey.

Disaggregations:

Those included in the indicator, plus those relevant in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Note:

If the source does not exist, an alternative could be to use official records of participants in government forums during a calendar year, in which case the indicator would be a gross participation rate. But it is unclear whether such records exist in all countries, or the quality of them. The indicator refers only to national or federal entities. The countries may include subnational entities in the calculations for their national reports. Some countries may make age distinctions for participation in government entities in which public policies are formulated, in which case the reference group may be smaller (for example, adolescents and young people aged 15-29 or 18-29 years). It is agreed that more work is needed on the metadata to arrive at an expert, politically validated and measurable definition of “formal mechanisms for participation” for adolescents and young people.

Indicator B.5 (SDG indicator 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.

Relevant priority measure(s) of the Montevideo Consensus: 9

Related indicator(s): A.7, A.11

Definition:

Percentage of children and young people in Grade 2 or 3 of primary education, at the end of primary education and the end of lower secondary education achieving at least a minimum proficiency level in (a) reading and (b) mathematics. The minimum proficiency level will be measured relative to new common reading and mathematics scales currently in development.

Source:

School records and standardized tests of maths and reading skills.

Disaggregations:

Those included in the indicator, plus those relevant in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016). Given the contents of the PM followed by this indicator, it should be disaggregated according to the public or private status of the educational establishments.

Notes:

This is DSDG target 4.1.1 with additional disaggregation.

So far, there is no global test to allow comparative statistics for all countries, but there are standardized tests that are applied in several countries of the region.

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/files/Metadata-04-01-01.pdf>
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Indicator B.6 (Operational guide 9.1)

Percentage of the school population attending educational establishments that offer free, secular, intercultural and non-discriminatory education.

Relevant priority measure(s) of the Montevideo Consensus: 9

Related indicator(s): A.7

Definition:

Ratio between: (i) **numerator:** population attending educational establishments that offer secular, intercultural, non-discriminatory, free and quality education, and (ii) **denominator:** population attending educational establishments.

Source: National education records, surveys, censuses and reports.

Disaggregations:

Those included in the indicator, plus those relevant in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

The source should provide data and disaggregations, but it is unlikely that it will be possible to accurately identify and adequately measure all criteria that classify the educational establishments. Therefore, it will be very difficult to monitor this priority measure without adjustment (for example, by simplifying the proportion of the school population studying in free, inclusive and quality educational establishments, or free ones, at least). It is agreed that more work is needed on the metadata to arrive at an expert, politically validated and measurable definition of “educational establishments that offer free, secular, intercultural and non-discriminatory education”.

Indicator B.7 (SDG indicator 8.6.1)

Proportion of youth (aged 15–24 years and 25–29 years) who are not in education, employment or training.

Relevant priority measure(s) of the Montevideo Consensus: 9 and 10

Related indicator(s): A.14, E.9, F.6

Definition:

Number of young persons not in education, employment or training as a percentage of the total youth population.

NEET rate = (Youth – Youth in employment – Youth not in employment but in education or training) / Youth *100.

Source:

See under Notes.

Disaggregations:

Those included in the indicator, plus those relevant in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/files/Metadata-08-06-01.pdf>.

Special disaggregation is considered necessary for this indicator, to place in a separate category adolescents and young people who have children and/or are engaged in domestic and/or care work, or are seeking employment.

Indicator B.8 (Operational guide 11.1)

Consistency of the official curriculum for comprehensive sexual education with the criteria of the Montevideo Consensus on Population and Development and with international standards.

Relevant priority measure(s) of the Montevideo Consensus: 11

Related indicator(s): B.9, E.10

Definition:

Existence of comprehensive universal programme of sexuality education aligned both with the criteria of the Montevideo Consensus on Population and Development and with international standards on the subject.

Source:

National Reports and/or Expert Review.

Disaggregations:

Levels of education: (i) last three grades of primary education; and (ii) first three years of secondary education.

Notes:

At present there are civil society monitoring mechanisms based on the follow-up of the Bi-ministerial declaration “Preventing through education” signed in Mexico in 2008. There is in fact a recent review for the period 2008-2015 [online] <https://www.ippfwhr.org/es/publicaciones/evaluaci%C3%B3n-de-la-implementaci%C3%B3n-de-la-declaraci%C3%B3n-ministerial-prevenir-con-educaci%C3%B3n-2>.

In addition, UNESCO Latin America and the Caribbean, in collaboration with the International Planned Parenthood Federation (IPPF) Western Hemisphere Region, has adapted its Sexuality Education Review and Assessment Tool (SERAT), which measures alignment of official curricula with the International Guidelines on Sexuality Education. This tool could be used because, as well as its successful track record, it offers a comparative approach between countries.

The national reports should respond to specific queries on the subject by the secretariat and reflect the systematization set out in the civil society platform.

In any case, it is agreed that more work is needed on the metadata to arrive at an expert, politically validated and measurable definition of “*comprehensive sexuality education with the criteria of the Montevideo Consensus on Population and Development and with relevant international standards*”.

Indicator B.9 (Operational guide 11.3)

Percentage of children, adolescents and young people who have age-appropriate information and knowledge about sexuality and reproduction.

Relevant priority measure(s) of the Montevideo Consensus: 11

Related indicator(s): B.8, D.5

Definition:

Proportion of children, adolescents and young people with information and knowledge on sexuality and reproduction appropriate for their respective ages.

Source:

Specialized surveys or school tests that contain a standard battery of questions concerning information and knowledge on sexuality and reproduction appropriate for the respective age.

Disaggregation:

Those included in the indicator, plus those relevant in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

The standards of knowledge and information on sexuality expected at different ages (under 15, 15-19 years and 20-29 years) need to be specified, and then questions must be developed to measure them, either in surveys or school exams. In Latin America there are no such standards of regional scope, although some countries may have them. As a reference, consideration must be given to the new International Guidelines on Sexuality Education that UNESCO will issue this year and to the work of the expert group on sexuality education facilitated by UNESCO and UNFPA. There are also detailed proposals in countries such as the United States, for example: Future of Sex Education Initiative, (2012), National Sexuality Education Standards: Core Content and Skills, K-12 [a special publication of the Journal of School Health]. www.futureofsexeducation.org/documents/josh-fose-standards-web.pdf.

In any case, it is agreed that more work is needed on the metadata to arrive at an expert, politically validated and measurable definition of “*information and knowledge about sexuality and reproduction adequate for their respective ages*”.

Indicator B.10 (SDG indicator 3.7.2)

Adolescent birth rate (aged 10-14 years; aged 15-19 years) per 1,000 women in that age group.

Relevant priority measure(s) of the Montevideo Consensus: 12, 85, 87, 92, 95 and 97

Related indicator(s): B.11 a B.15, B.17, D.1, D.3, D.4, D.6, D.7, D.17, D.18, H9, H10, I.4

Definition:

Annual number of births to females aged 10-14 and, 15-19 years per 1,000 females in the respective age group.

Specific fertility rate for groups aged 20-24 years and 25-29 years (to span the reference group of the priority measure represented by this indicator).

Source:

See under Notes.

Disaggregations:

Those included in the indicator, plus those relevant in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

The Spanish version of the official list of SDG indicators refers to the fertility rate. The fact that the English version uses the expression “birth rate” should not alter the denomination in Spanish, since in English technically both denominations —“age fertility rate” and “age birth rate”— and acceptable.

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/files/Metadata-03-07-02.pdf>.

Considering that the PM refers to the sexual and reproductive health of adolescents and young people, specific fertility rates should also be calculated for the age groups 20-24 years and 25-29 years.

Some countries may have difficulties in calculating the birth rate for the 10-14 age group, since there are no specialized surveys that include this group and few censuses include this group in fertility questions. This leaves only administrative records, which tend to underestimate the rate. In any case, it is considered a priority to at least have data on the numbers of girls in the 10-14 age group who have children, because these are recognized as borderline situations usually associated with abuse and extreme vulnerability.

Indicator B.11

Percentage of women and men aged 20-24 years who first had sexual intercourse before the age of 20, disaggregated into three groups: before the age of 15, before the age of 18 and before the age of 20.

Relevant priority measure(s) of the Montevideo Consensus: 12, 85, 87, 92, 95 and 97

Related indicator(s): B.10, B12 a B.15, B.17, D.1, D.3, D.4, D.6, D.7, D.17, D18, H9, H10, I.4

Definition:

Ratio between the male and female population aged 20 to 24 years who first had sexual intercourse before 15, 18 and 20 years of age, and the male and female population aged 20 to 24 years (three ratios), multiplied by 100.

Source:

Specialized global surveys (DHS, RHS, MICS), national (household and youth) surveys with specialized modules.

Disaggregations:

Those included in the indicator, plus those relevant in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Historically available sources have focused on women. There are few examples of sources that have included men and, for that reason, the disaggregation is included in the indicator itself, since there are no technical impediments to including men. The particular age disaggregation included in this indicator is necessary because of the age-differentiated risk exposure of early sexual initiation. The percentages are cumulative, in other words, the proportion of those sexually initiated at age 18 includes those sexually initiated before age 15.

Indicator B.12 (SDG indicator 5.3.1)

Proportion of women aged 20-24 years who were married or in a union before age 15 and before age 18.

Relevant priority measure(s) of the Montevideo Consensus: 7, 11 and 12

Related indicator(s): B.10, B.11, B.13 a B.15, B.17, B.18, D.1, D.3, D.4, D.6, D.8, D.17, D18

Definition: Ratio between the male and female population aged 20 to 24 years who had their first union before 15 and 18, and the male and female population aged 20 to 24 years (two ratios), multiplied by 100.

Source:

Specialized global surveys (DHS, RHS, MICS), national (household and youth) surveys with specialized modules.

Disaggregations:

Those included in the indicator, plus those relevant in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

The indicator should be understood as the “proportion of early marriages and unions” (“and” replaces “/”), with disaggregation between the two, if possible.

Historically available sources have focused on women. There are few examples of sources that have included men and, for that reason, the disaggregation is included in the indicator itself, since there are no technical impediments to including men. The particular age disaggregation included in this indicator is necessary because of the age-differentiated risk exposure of early sexual initiation. The percentages are cumulative, in other words, the proportion of those sexually initiated at age 18 includes those sexually initiated before age 15.

Indicator B.13 (Operational guide 12.4)

Percentage of women and men aged 20-24 years who had their first child before the age of 20 years disaggregated into three groups: before the age of 15, before the age of 18 and before the age of 20.

Relevant priority measure(s) of the Montevideo Consensus: 12, 85, 87, 92, 95 and 97

Related indicator(s): B.10, B.11, B.12, B.14, B.15, B.17, B.18, D.1, D.3, D.4, D.6, D.17, D18, H9, H10, I.4

Definition:

Ratio between the male and female population aged 20 to 24 years who had their first child before 15, before 18 and before 20, and the male and female population aged 20 to 24 years (three ratios), multiplied by 100.

Source:

Specialized global surveys (DHS, RHS, MICS), national (household and youth) surveys with specialized modules and censuses (although generally this question is only asked of women) with specialized questions (such as the question on the age at which the person had their first child) or proxy indicators (such as the proportion of mothers in the age groups 10-14; 15-17, 17-19 and 19- 20).

Disaggregations:

Those included in the indicator, plus those relevant in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Historically available sources have focused on women. There are few examples of sources that have included men and, for that reason, the disaggregation is included in the indicator itself, since there are no technical impediments to including men. The focus is on adolescent —rather than youth— parenthood because it is a matter of concern in the region (and in the Montevideo Consensus). The particular age disaggregation included in this indicator is necessary because of the age-differentiated risk exposure of parenthood. The percentages are cumulative, in other words, the proportion of those with children at age 18 includes those who had children by age 15.

Indicator B.14

Number of health centres that offer adolescent-friendly services or facilities per 100,000 adolescents.

Relevant priority measure(s) of the Montevideo Consensus: 12

Related indicator(s): B.10, B.11, B.12, B.13, B.15, B.17, B.18, D.1, D.3, D.4, D.6, D.8, D.17, D.18

Definition:

Ratio between the number of health centres with user-friendly services or facilities and the population from 10 to 19 years old, multiplied by 100,000, at the mid-point of the reference year.

Source:

Statistics, records or official reports (number of health centres with user-friendly services or facilities) and national population projections (population aged 15 to 19 years).

Disaggregations:

Geographic location (urban or rural).

Note:

The definition of a user-friendly facility is included in the list of indicators in the annex, to enable identification of user-friendly facilities. Country reports may include additional information, such as the characteristics of youth-friendly facilities (and thus verify whether they coincide with the definition in the glossary) and the number of consultations provided, in order to give another measure of comparison, because the size or capacity of these centres may differ between countries.

Indicator B.15 (indicator 12.5 of the Operational guide, extended)

Percentage of live births to adolescent and young mothers that are unplanned.

Relevant priority measure(s) of the Montevideo Consensus: 12

Related indicator(s): B.10, B.11, B.12, B.13, B.14, B.17, B.18, D.1, D.3, D.4, D.6, D.17, D.18

Definition:

Ratio between the number of live-born children in the last 5 years who were unplanned at that time and the total number of live-born children in the last 5 years, born to the population aged 15-19 years and 20-29 years.

Source:

Specialized surveys.

Disaggregations:

Age groups (15-19 and 20-29) and those relevant in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Note:

This indicator is based on indicator 12.5 of the Operational guide.

Use standard questions included in DHS surveys on pregnancy desirability/planning (categories: “at that time”, “afterwards”, “I didn’t want to have (more) children”) with respect to births in the past 5 years. The under-15 age group was excluded because the notion of desirability of pregnancy for that age group is conceptually debatable and politically sensitive.

Indicator B.16

Percentage of adolescents who drop out of the education system as a result of pregnancy, parenthood or marriage.

Relevant priority measure(s) of the Montevideo Consensus: 9 and 13

Related indicator(s): B.5, B.6, B.8, B.9, A.7, A.11

Definition:

Ratio between the population aged under 20 years who dropped out of the education system due to pregnancy, parenthood or marriage and the total population aged under 20 who dropped out of school.

Source:

Surveys (DHS, MICS, household) that contain questions on school dropout and the reasons for it. Official education system records of dropout by cause.

Disaggregations:

Age groups (<15, 15-19) and those relevant in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Note: The reference period depends on the source. It could also be a period without a particulates reference. Disaggregation by sex is essential. In order to estimate the proportion of school dropout attributable to these causes, it is suggested that the derivative indicator be calculated using as the denominator the population under 20 having dropped out of school. Again, disaggregation by sex is fundamental.

Indicator B.17 (Operational guide 14.3)

Percentage of satisfied demand for emergency contraception among women aged under 30 years.

Relevant priority measure(s) of the Montevideo Consensus: 12 and 14

Related indicator(s): B.10, B.11, B.13, B.14, B.15, B.18, D.1, D.3, D.4, D.6, D.17, D18

Definition:

Proportion of women aged under 30 years who received emergency contraception when needed.

Source: Specialized surveys with a specific question on access to emergency contraception, which can be formulated in several ways according to the chosen time frame (see note).

Disaggregations:

Age groups (<15, 15-19 and 20-29) and those relevant in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Note:

See the glossary of the report of the Working Group on the definition of emergency contraception. The recommendation is to ask two questions, time-referenced and directed only to the at-risk population, such as: During the last 12 months, did you ever intend or need to use emergency contraception? If not, on that occasion (or at those times), did you finally obtain emergency contraception? Always, sometimes, never (for women who had sexual activity in the last 12 months). In this case, it is appropriate to include those aged under 15, since the desirability of pregnancy is not under discussion.

Indicator B.18 (Operational Guide 15.3)

Percentage of adolescents who have live-born children, by number of children.

Relevant priority measure(s) of the Montevideo Consensus: 12, 14 and 15

Related indicator(s): B.10, B.11, B.13, B.14, B.15, B.17, D.1, D.3, D.4, D.6, D.17, D.18

Definition:

Ratio between the population under 20 years of age by number of live-born children (including zero) and the total population under 20 years of age.

Source:

Surveys (DHS, MICS, household) or censuses with questions on the number of live-born children.

Disaggregations:

As well as those included in the indicator, a special disaggregation for age groups (under 15, 15-17 and 18-19) and those relevant in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Note:

The Gender Equality Observatory for Latin America and the Caribbean contains the “percentage of women aged 15-19 who are mothers” which may serve as an input for this indicator. Similarly, the MATERNILAC database presents the same indicator with some additional disaggregations, and also for girls aged under 15. See:

- <http://oig.cepal.org/en>.
- http://estadisticas.cepal.org/cepalstat/WEB_CEPALSTAT/estadisticasIndicadores.asp?idio ma=i.

Disaggregation by sex is necessary, although it is much less usual in the standard sources. The special disaggregation by age included in this indicator is needed because of the age-differentiated risk exposure of multiparity.

Chapter C

Ageing, social protection and socioeconomic challenges

All the proposed indicators are part of a wider and more systematic process of application, monitoring and exercise of the human rights of older persons. They are useful for measuring countries' progress in implementing the Montevideo Consensus on Population and Development, and focus on the three priority areas of the Madrid International Plan of Action on Ageing, adopted in 2002, as well as on the recommendations San José Charter on the Rights of Older Persons in Latin America and the Caribbean of 2012.

C.1 is a structural indicator that examines the States' acceptance, intention and commitment to applying measures in keeping with their human rights obligations. Some indicators (C.3 and C.5) are qualitative and descriptive, based on documentary information, while other indicators are results-based (C.2, C.4 and C.6) and evaluate the effects of the States' efforts in fostering the enjoyment of human rights by the population, with a focus on the life cycle.

The specific indicators in this chapter are useful for incorporating ageing into the more general framework of sustainable development and can be used and interpreted easily by potential users.

The indicators in this chapter complement those included in chapters A and E, primarily.

Indicator	
C.1	The country takes actions that benefit older persons and help to achieve the purposes of the Inter-American Convention on Protecting the Human Rights of Older Persons.
C.2	Percentage of employed workers contributing to the social security system, by sex and age group (adapted from indicator 28.3 of the <i>Operational guide</i>).
C.3	Existence of public policies, plans and programmes that consider the impact of the evolving age structure over the medium and long terms (indicator 19.1 of the <i>Operational guide</i>).
C.4	Proportion of population covered by social protection and social assistance 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.
C.5	Percentage of health-care centres that have included palliative care as a basic service (indicator 29.2 of the <i>Operational guide</i>).
C.6	Percentage of older persons who have been victims of violence in the previous 12 months who reported their victimization to competent authorities or other officially recognized conflict resolution mechanisms.
C.7	Percentage of government institutions that have instituted protocols for giving preferred and preferential treatment to older persons (indicator 22.2 of the <i>Operational guide</i>).
C.8	Mortality rate attributed to cardiovascular disease, cancer, diabetes or chronic respiratory disease (SDG indicator 3.4.1).

Metadata

Indicator C.1 (Operational guide 20.3)

The country takes actions that benefit older persons and help to achieve the purposes of the Inter-American Convention on Protecting the Human Rights of Older Persons.

Relevant priority measure(s) of the Montevideo Consensus: 2 and 20

Related indicator(s):

Definition:

Existence of plans, policies and programmes geared towards older persons and which help to achieve the purposes of the Inter-American Convention on Protecting the Human Rights of Older Persons.

Source:

Organization of American States (OAS). For detailed information see:

- http://www.oas.org/en/sla/dil/inter_american_treaties_A-70_human_rights_older_persons_signatories.asp.

Disaggregations:

Not applicable.

Notes:

The most recent international instrument is the Inter-American Convention on Protecting the Human Rights of Older Persons, adopted by the General Assembly of the Organization of American States (OAS) on 15 June 2015.

The objective of this Convention is to promote, protect and ensure the recognition and full enjoyment and exercise, on an equal basis, of all human rights and fundamental freedoms of older persons, in order to contribute to their full inclusion, integration and participation in society.

Full text of the treaty:

- http://www.oas.org/en/sla/dil/docs/inter_american_treaties_A-70_human_rights_older_persons.pdf.

Signatory countries: Argentina, Bolivia, Brazil, Chile, Costa Rica, Uruguay.

Ratifying countries: Argentina, Bolivia (Plurinational State of), Costa Rica, Uruguay.

Depositing countries: Costa Rica, Uruguay.

Indicator C.2 (adapted form Operational guide 28.3)

Percentage of employed workers contributing to the social security system, by sex and age group.

Relevant priority measure(s) of the Montevideo Consensus: 28

Related indicator(s): A.12

Definition:

Ratio between: (i) **numerator:** employed workers contributing to the social security system, and (ii) **denominator:** total employed workers, multiplied by 100.

Source:

National surveys, household surveys, employment surveys, social characterization survey.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

- See [online] http://www.cepal.org/ilpes/noticias/paginas/5/39245/Proteccion_social_de_car_a_al_futuro.pdf.

It is important to consider that contributors do not have a right to a pension in all countries. In this is the case, it needs to be made clear.

Indicator C.3 (Operational Guide 19.1)

Existence of public policies, plans and programmes that consider the impact of the evolving age structure over the medium and long terms.

Relevant priority measure(s) of the Montevideo Consensus: 19

Related indicator(s): A.24

Definition:

The country has at least one public policy, plan and/or programme relating to the medium- or long-run impact of changes in specific age groups of the population, such as childhood, adolescence, adulthood, older persons.

Source:

The sources of information on these public policies, plans and programmes are found in the legal regulations of each country, consisting of laws, decrees, rules and provisions, among other instruments.

Disaggregations:

Not applicable.

Notes:

As examples, policies could be measured in relation to the pension system, demographic dividend, among others.

For OECD countries see [online]:

- http://www.oecd-ilibrary.org/social-issues-migration-health/reforms-for-an-ageing-society_9789264188198-en.
-

Indicator C.4 (SDG indicator 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.

Relevant priority measure(s) of the Montevideo Consensus: 30

Related indicator(s): A.7

Definition:

This indicator reflects the proportion of the population covered by social protection floors or systems and includes the component proportion of unemployed who receive unemployment benefits which is defined as the number of unemployed persons receiving unemployment benefits divided by the total number of unemployment persons times 100.

World Bank: Coverage of social protection and labour programmes (SPL) is the percentage of population participating in social insurance, social safety net, and unemployment benefits and active labour market programmes. Estimates include both direct and indirect beneficiaries.

Source:

See under Notes.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/>.
 - <http://unstats.un.org/sdgs/metadata/files/Metadata-01-03-01a.pdf>.
 - <http://unstats.un.org/sdgs/metadata/files/Metadata-01-03-01b.pdf>.
-

Indicator C.5 (Operational guide 29.2)

Percentage of health-care centres that have included palliative care as a basic service.

Relevant priority measure(s) of the Montevideo Consensus: 29

Related indicator(s): A.7

Definition: Ratio between: (i) **numerator:** total number of primary health care centres that have included palliative care as a basic service, and (ii) **denominator:** total health-care centres, multiplied by 100.

Source:

Administrative records and official reports and/or follow-up questionnaires on the adoption of palliative care in the health system, health ministries.

Disaggregations:

If the information sources allow, this should be calculated for other types of care.

Notes:

The definition of health care and basic services are those defined by WHO/PAHO. Both public and private centres should be included.

The San José Charter on the Rights of Older Persons in Latin America and the Caribbean recommends promoting “the development of and access to palliative care to ensure that older persons with terminal illnesses die with dignity and free of pain.”

The Inter-American Convention on Protecting the Human Rights of Older Persons (Article 6 –“Right to life and dignity in old age”) states that “States Parties shall take steps to ensure that public and private institutions offer older persons access without discrimination to comprehensive care, including palliative care; avoid isolation; appropriately manage problems related to the fear of death of the terminally ill and pain; and prevent unnecessary suffering, and futile and useless procedures, in accordance with the right of older persons to express their informed consent.”

Indicator C.6

Percentage of older persons who have been victims of violence in the previous 12 months who reported their victimization to competent authorities or other officially recognized conflict resolution mechanisms.

Relevant priority measure(s) of the Montevideo Consensus: 23

Related indicator(s): A.19, E.12, E.14

Definition:

Ratio between (i) **numerator:** total number of persons aged 60 years or over who have been victims of violence in the previous 12 months who reported their victimization to competent authorities or other officially recognized conflict resolution mechanisms, and (ii) **denominator:** total number of persons aged 60 years or over who have been victims of violence in the previous 12 months, multiplied by 100.

Source:

See under Notes.

Disaggregations:

Those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

This indicator is adapted from SDG indicator 16.3.1. The adaptation of the SDG indicator consisted of the explicit reference to older people.

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/>.
- <http://unstats.un.org/sdgs/metadata/files/Metadata-16-03-01.pdf>.

Victimization surveys provide direct information on this indicator, since they collect data on violent criminal acts and on whether the victim has lodged a complaint with the competent authorities. The United Nations Office on Drugs and Crime (UNODC) annually collects data on violent crime reporting rates (UN-CTS).

Indicator C.7 (Operational guide 22.2)

Percentage of government institutions that have instituted protocols for giving preferred and preferential treatment to older persons.

Relevant priority measure(s) of the Montevideo Consensus: 22

Related indicator(s): A.7

Definition:

Ratio between (i) **numerator:** total number of governmental institutions that have implemented procedures and protocols of preferential care for older persons (60 years and over); and (ii) **denominator:** total number of government institutions, multiplied by 100.

Source:

Public agencies and government institutions that are responsible for a citizen care service. Laws, decrees and regulations requiring the implementation of such procedures and protocols. National reports and information from relevant sector entities.

Disaggregation:

Not applicable.

Notes:

Where the information exists, the government level should be specified (national, subnational, local).

Indicator C.8 (SDG indicator 3.4.1)

Mortality rate attributed to cardiovascular disease, cancer, diabetes or chronic respiratory disease.

Relevant priority measure(s) of the Montevideo Consensus: 20, 2

Related indicator(s):

Definition:

Mortality rate attributed to cardiovascular disease, cancer, diabetes or chronic respiratory disease. Probability of dying between the ages of 30 and 70 years from cardiovascular diseases, cancer, diabetes or chronic respiratory diseases, defined as the per cent of 30-year-old-people who would die before their 70th birthday from cardiovascular disease, cancer, diabetes, or chronic respiratory disease, assuming that s/he would experience current mortality rates at every age and s/he would not die from any other cause of death (e.g., injuries or HIV/AIDS). This indicator is calculated using life table methods (see further details in section 3.3).

Source:

See under Notes.

Disaggregations:

Those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Impact indicator relating to the priority measures referring to healthy ageing and quality of life for older persons.

Complete metadata are available at:

- <https://unstats.un.org/sdgs/metadata/>.
 - <https://unstats.un.org/sdgs/metadata/files/Metadata-03-04-01.pdf>.
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Chapter D

Universal access to sexual and reproductive health services

This chapter of the Montevideo Consensus on Population and Development recognizes sexual rights and reproductive rights as an integral component of human rights, going a step further than the recognition of reproductive rights in the Programme of Action of the International Conference on Population and Development and placing Latin America and the Caribbean at the global vanguard in terms of rights recognition. Against this backdrop, the indicators proposed for this theme in the *Operational guide for implementation and follow-up of the Montevideo Consensus on Population and Development* will take priority and data will be disaggregated as provided in the introductory paragraph of annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators, as well as by any other factors that countries may consider relevant.

The SDG indicators that refer to public spending on health and to the coverage of public health services are presented for chapter A, as they are part of the social protection that underpins the Montevideo Consensus as a whole. Hence, indicator 16.1.3 of the SDGs (percentage of the population subjected to physical, psychological or sexual violence in the previous 12 months) was included in chapter A.

Incorporating the suggestions of all stakeholders, the indicators in chapter D will also be used for the 10-14 age group and for men, except in cases where the concept is applicable only to women.

The indicators selected for the 14 priority measures of this chapter could be grouped into three main categories: universal access to sexual and reproductive health; maternal health; and legislation. With regard to the feasibility of the proposed indicators, the working group considered them to be feasible, although household surveys do not always contain relevant information. The information collection platform should therefore be expanded to cover such gaps.

Indicator	
D.1	Number of new HIV infections per 1,000 uninfected population, by sex, age and key populations (SDG indicator 3.3.1).
D.2	Percentage of health-care centres offering comprehensive sexual and reproductive health services (indicator 37.6 of the <i>Operational guide</i>).
D.3	Indicator for monitoring eradication of the epidemic: (i) percentage of persons living with HIV; (ii) percentage of persons with HIV who are receiving treatment; (iii) percentage of persons undergoing comprehensive HIV treatment who succeed in suppressing the viral load (indicator 38.1 of the <i>Operational guide</i>).
D.4	Percentage of health-care centres that have implemented updated protocols, interculturally focused and relevant to different ages, on sexual and reproductive health care, by gender (indicator 41.1 of the <i>Operational guide</i>).
D.5	Percentage of men and women who practice the basic elements of sexual and reproductive health prevention and self-care (adapted from indicator 41.3 of the <i>Operational guide</i>).
D.6	Rate of use of contraceptive methods by women and men, by method (modern or traditional) (indicator 44.2 of the <i>Operational guide</i>).
D.7	Proportion of women of reproductive age (aged 15–49 years) who have their need for family planning satisfied with modern methods (SDG indicator 3.7.1).

Indicator	
D.8	Maternal mortality ratio (SDG indicator 3.1.1).
D.9	Percentage of health-care centres that have implemented updated maternal care protocols (indicator 40.5 of the <i>Operational guide</i>).
D.10	Number of hospitalizations resulting from complications arising after abortion, by age group (indicator 42.2 of the <i>Operational guide</i>).
D.11	Existence in the country of legislation allowing the voluntary interruption of pregnancy for the following causes: (a) when the woman wishes it; (b) in the case of rape or incest; (c) when the woman's life is in danger; (d) to protect women's health; (e) other causes.
D.12	Percentage of health centres that have medications for abortion and trained personnel and materials for carrying out safe abortions and providing post-abortion care (indicator 42.6 of the <i>Operational guide</i>).
D.13	Percentage of infertile or subfertile couples and individuals receiving assisted fertility treatments (indicator 43.3 of the <i>Operational guide</i>).
D.14	Number of initiatives to establish regulatory frameworks for assisted reproduction.
D.15	Percentage of live births that were preceded by four or more antenatal check-ups (indicator 45.3 of the <i>Operational guide</i>).
D.16	Proportion of births attended by skilled health personnel (SDG indicator 3.1.2).
D.17	Proportion of women aged 15–49 years who make their own informed decisions regarding sexual relations, contraceptive use and reproductive health care (SDG indicator 5.6.1).
D.18	The country has laws and regulations that guarantee women aged 15-49 access to sexual and reproductive health services, information and education.
D.19	Percentage of people reporting that they have been victims of discrimination because of their sexual orientation or gender identity (indicator 34.3 of the <i>Operational guide</i>).
D.20	Number of programmes and campaigns specifically targeted at eliminating stereotypes and discrimination on the basis of gender identity and sexual orientation (indicator 36.7 of the <i>Operational guide</i>).
D.21	Percentage of people who are aware of their rights and the conditions for access to sexual and reproductive health care (indicator 35.2 of the <i>Operational guide</i>).
D.22	Number of public institutions running policies, programmes and projects aimed at sexual and reproductive health care, with an approach grounded in the protection of sexual and reproductive rights (indicator 36.4 of the <i>Operational guide</i>).
D.23	Percentage of women who are aware of their HIV diagnosis during pregnancy, birth and puerperium.

Metadata

Indicator D.1 (SDG indicator 3.3.1)

Number of new HIV infections per 1,000 uninfected population, by sex, age and key populations.

Relevant priority measure(s) of the Montevideo Consensus: 11, 12, 38, 39, 85, 87, 92, 95 and 97

Related indicator(s): D.2, D.3, D.4, D.5, D.6, D.19, D.20, D.21, D.22, D.23, H.9, H.10, I4

Definition:

Ratio between (i) **numerator:** new HIV infections₂ and (ii) **denominator:** uninfected population. This indicator is expressed per 1,000 uninfected people.

Source:

The main sources are the administrative records of HIV programmes in the countries' ministries of health, as well as specific surveys.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

This indicator is adapted from SDG indicator 3.3.1. The adaptation of the indicator refers to the change in the phrase "key populations" rather than "key sectors of the population", on the grounds that key populations include priority groups such as pregnant and breast-feeding mothers as well as newborns.

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/>.
 - <http://unstats.un.org/sdgs/metadata/files/Metadata-03-03-01.pdf>.
-

Indicator D.2 (Operational guide 37.6)

Percentage of health-care centres offering comprehensive sexual and reproductive health services.

Relevant priority measure(s) of the Montevideo Consensus: 12, 35, 37, 43 and 46

Related indicator(s): B.10, B.13, B.14, B.15, D.1, D.3, D.4, D.5, D.6, D.7, D.8, D.9, D.15, D.16, D.18, D.19, D.20

Definition:

Ratio between (i) **numerator:** health-care facilities offering comprehensive sexual and reproductive health services, and (ii) **denominator:** total number of health care establishments. This indicator is expressed as a percentage of primary health care establishments.

Source:

Administrative records of health services, official reports or special surveys.

Disaggregations:

Geographic location (rural or urban); second level of administrative disaggregation; by primary, secondary or tertiary health-care centre.

Notes:

The service components are likely to vary according to the standards of each country. The important thing is to assess the availability of contraception and sexual and reproductive health services in the same facility.

More information on the components of the provision of sexual and reproductive health services can be found in the glossary.

For more details on conceptual issues see:

- Proposed indicators for monitoring the goals of the International Conference on Population and Development in Latin America and the Caribbean http://repositorio.cepal.org/bitstream/handle/11362/7159/S023185_es.pdf;jsessionid=A8F4DBD7895C48E9A4355F4259D8B904?sequence=1.
 - National monitoring of achievements in terms of universal access to reproductive health care http://apps.who.int/iris/bitstream/10665/44057/1/9789243596839_spa.pdf.
-

Indicator D.3 (Operational guide 38.1)

Indicator for monitoring eradication of the epidemic: (i) percentage of persons living with HIV; (ii) percentage of persons with HIV who are receiving treatment; (iii) percentage of persons undergoing comprehensive HIV treatment who succeed in suppressing the viral load.

Relevant priority measure(s) of the Montevideo Consensus: 38, 39, 85, 87, 92, 95 and 97

Related indicator(s): D.1, D.2, D.4, D.5, D.21, D.22, D.23, H.9, H.10, I4

Definition:

- (1) Ratio between (i) **numerator:** total number of people living with HIV₂ and (ii) **denominator:** total population.
- (2) Ratio between (i) **numerator:** total number of people with HIV infection currently receiving antiretroviral treatment, and (ii) **denominator:** total number of people with HIV infection.
- (3) Ratio between (i) **numerator:** total number of people with antiretroviral treatment who succeeded in suppressing the viral load₂ and (ii) **denominator:** total number of people receiving comprehensive treatment.

The three indicators are expressed per 100 people

Source:

Administrative records of the health information system, records of special programmes or special surveys.

Disaggregations:

Those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016), and key populations: sex workers, persons of a particular sexual orientation, including men who have sex with men, and persons who inject drugs, pregnant women, children under one year of age and, if the information allows, by gender identity.

Notes:

Access to antiretroviral treatment (ARV) is understood to be included in comprehensive treatment for HIV.

WHO and UNAIDS compile information and develop Related indicator(s), which may be useful in the case of countries that do not have the information.

Available at:

- <http://apps.who.int/gho/data/node.main.617?lang=en> and.
- <http://www.unaids.org/en/dataanalysis/datatools>.

The PAHO Strategic Plan (2014-2019) includes details of this indicator and its derivatives (for example those related to mother-to-child transmission) which can be consulted at:

- http://www.paho.org/hq/index.php?option=com_content&view=article&id=10480&Itemid=41297&lang=en.
-

Indicator D.4 (Operational guide 41.1)

Percentage of health-care centres that have implemented updated protocols, interculturally focused and relevant to different ages, on sexual and reproductive health care, by gender.

Relevant priority measure(s) of the Montevideo Consensus: 12, 36, 37, 41 and 46

Related indicator(s): B.10 , B.13, B.17, B.18, D.1, D.2, D.3, D.5, D.6, D.7, D.8, D.9, D.15, D.17, D.18, D.21, D.22

Definition:

Ratio between (i) **numerator:** primary health care establishments that have implemented updated protocols on sexual and reproductive health care for men, with an intercultural and age-appropriate approach, and (ii) **denominator:** total number of primary health-care establishments. The indicator is expressed per 100 primary health care establishments.

Source:

Official reports, administrative records of health services or special surveys of health establishments.

Disaggregations:

Geographical location: second level of administrative disaggregation; rural-urban, by primary, secondary or tertiary health-care centre.

Notes:

The very nature of primary care implies the existence of updated protocols for sexual health and reproductive health care for men. The incorporation of the intercultural approach into these protocols should be reviewed.

With regard to men, “UNFPA-supported initiatives emphasize men’s positive roles in sexual and reproductive health and rights. Various programmes target different groups of men—from husbands to fathers, from soldiers to religious leaders—to achieve different goals, from HIV prevention to greater male involvement in family life. The United Nations Population Fund (UNFPA) engages boys and young men on gender issues and on sexual and reproductive health and rights, including thorough comprehensive sexuality education, to question stereotypes about masculinity and male risk-taking behaviour (especially sexual behaviour) and to promote their understanding of and support for women’s rights, especially reproductive rights, and gender equality.” For further details see <https://www.EngenderHealth.org/pubs/gender/gender-toolkit/toolkit.html>.

The components on sexual and reproductive health services are likely to vary according to the standards of each country. The important thing is to assess the availability of contraceptives and sexual reproductive health-care services in the same facility.

Further information on the components of the provision of sexual and reproductive health services can be found in the glossary.

For more details on conceptual aspects see:

- Proposed indicators for the follow-up of the goals of the International Conference on Population and Development in Latin America and the Caribbean http://repositorio.cepal.org/bitstream/handle/11362/7159/S023185_es.pdf;jsessionid=A8F4DBD7895C48E9A4355F4259D8B904?sequence=1.
 - National monitoring of achievements in terms of universal access to reproductive health http://apps.who.int/iris/bitstream/10665/44057/1/9789243596839_spa.pdf.
-

Indicator D.5 (Operational guide 41.3, adapted)

Percentage of men and women who practise the basic elements of sexual and reproductive health prevention and self-care.

Relevant priority measure(s) of the Montevideo Consensus: 11, 33, 41, 46, 85, 87, 92, 95 and 97

Related indicator(s): B.10, B.13, B.17, B.18, D.1, D.2, D.3, D.4, D.6, D.7, D.8, D.9, D.12, D.15, D.16, D.17, D.18, D.21, D.22, F.7, H.9, H.10, I4

Definition:

Ratio between (i) **numerator:** population aged 15 years and over who state that they practise the basic elements of prevention and self-care of their sexual and reproductive health, and (ii) **denominator:** population aged 15 years and over. This indicator is expressed per 100 people aged 10 and over.

Source:

Special surveys, EDS or MICS.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

“Reproductive health is a general state of physical, mental and social well-being. It is the ability to enjoy a satisfying sex life without risk of procreation, and the freedom to decide whether or not to procreate.”

The United Nations Population Fund (UNFPA) states that reproductive health includes a set of methods, techniques and services that contribute to reproductive health and well-being by avoiding and resolving reproductive health problems that contribute to the prevention and self-care of sexual and reproductive health. See <http://www.unfpa.org.mx/salud%20sexual%20y%20reproductiva.php> and also http://www.who.int/reproductivehealth/topics/countries/strategic_approach/en/.

It is agreed that more work is needed on the metadata to arrive at an expert, politically validated and measurable definition of “basic elements of sexual and reproductive health prevention and self-care”.

Indicator D.6 (Operational guide 44.2)

Rate of use of contraceptive methods by women and men, by method (modern or traditional).

Relevant priority measure(s) of the Montevideo Consensus: 11, 12, 14, 15, 44, 46, 85, 87, 92, 95 and 97

Related indicator(s): D.1, D.2, D.4, D.5, D.7, D.8, D.9, D.17, D.18, D.21, D.22, H.9, H.10, I4

Definition:

- (1) Women: Ratio between (i) **numerator:** total number of 15-49-year-old sexually active women reporting using contraceptive methods or having their partner use them, and (ii) **denominator:** total number of sexually active women aged 15-49 years.
- (2) Men: Ratio of (i) **numerator:** total number of men aged 15 years or over who are sexually active and report using contraceptives, or that their partner is using them, and (ii) **denominator:** total number of men aged 15 years or over who are sexually active. The indicator is calculated separately for each sex and is expressed per 100 sexually active men or women, respectively, according to corresponding ages.

Source:

Demographic and health surveys, reproductive health surveys, or multiple indicator cluster surveys (MICS).

Disaggregations:

Those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

For more on modern contraceptive methods see the glossary.

A wider age range for men should be considered.

Indicator D.7 (SDG indicator 3.7.1)

Proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods.

Relevant priority measure(s) of the Montevideo Consensus: 34, 35, 44, 85, 87, 92, 95 and 97

Related indicator(s): D.2, D.5, D.5, D.6, D.9, D.17, D.18, D.21, D.22, H.9, H.10, I4

Definition:

The percentage of women of reproductive age (15-49 years) who desire either to have no (additional) children or to postpone the next child and who are currently using a modern contraceptive method.

Source:

Demographic and health surveys, reproductive health surveys, or MICS.

Disaggregations:

Type of method, married women and sexually active unmarried women, and disaggregations specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

With the specification that this indicator should also be calculated for sexually active women who are not in a union, complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/>.
- <http://unstats.un.org/sdgs/metadata/files/Metadata-03-07-01.pdf>.

For more on modern contraceptive methods see the glossary.

For more information, see:

- "Universal Access to Reproductive Health. Progress and Challenges", available at: http://www.unfpa.org/sites/default/files/pub-pdf/UNFPA_Reproductive_Paper_20160120_online.pdf.
 - "Trends in Contraceptive Use Worldwide", available at: <http://www.un.org/en/development/desa/population/publications/pdf/family/trendsContraceptiveUse2015Report.pdf>.
-

Indicator D.8 (SDG indicator 3.1.1)

Maternal mortality ratio.

Relevant priority measure(s) of the Montevideo Consensus: 39, 40, 42, 43, 45, 85, 87, 92, 95 and 97

Related indicator(s): B.10, B.13, B.17, B.18, D.4, D.5, D.6, D.9, D.10, D.11, D.12, D.15, D.16, D.17, D.18, D.21, D.22, H.9, H.10, I4

Definition:

Ratio between (i) **numerator:** annual number of deaths among women for any cause related to or aggravated by the pregnancy itself or its care (excluding accidental or incidental causes) during pregnancy and delivery, or within 42 days after termination of pregnancy regardless of duration and location of the pregnancy, and (ii) **denominator:** number of live births in a given time period. This indicator is expressed per 100,000 live births, in a specified time period.

Source:

The maternal mortality ratio can be calculated directly from data collected through civil registration systems, household surveys or other sources.

See under Notes.

Disaggregations:

By causes of death, including abortion, and disaggregations specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Although the Spanish version of the official list of SDG indicators refers to an index, it should be made clear that this is the maternal mortality “ratio”. Until the Spanish translation is officially corrected, the current version of the Spanish will be maintained, but bearing in mind this clarification.

Often data quality problems arise because of under-reporting and the misclassification of maternal deaths. Accordingly, the data are frequently adjusted to take account of such quality problems in the reported information.

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/>.
 - <http://unstats.un.org/sdgs/metadata/files/Metadata-03-01-01.pdf>.
-

Indicator D.9 (Operational guide 40.5)

Percentage of health centres that have implemented updated maternal care protocols.

Relevant priority measure(s) of the Montevideo Consensus: 39, 40, 42, 43, 45, 85, 87, 92, 95 and 97

Related indicator(s): D.4, D.5, D.6, D.7, D.8, D.10, D.11, D.12, D.13, D.14, D.15, D.16, D.21, D.22, H.9, H.10, I4

Definition:

Ratio of (i) **numerator:** total number of health centres that have implemented updated protocols for maternal care, and (ii) **denominator:** total number of health-care centres. The indicator is expressed per 100 health centres.

Source:

Official reports, registration of institutions and services, administrative records of health services or special surveys.

Disaggregations:

Geographic location (rural or urban), second level of administrative disaggregation; by primary, secondary or tertiary health-care centre.

Notes:

The very nature of health care implies the existence of updated maternal care protocols. The incorporation of the intercultural approach in these protocols should be reviewed.

The components of sexual and reproductive health services are likely to vary according to the standards of each country.

More information on the components of the provision of sexual and reproductive health services can be found in the glossary.

This metadata has been compiled from:

- (1) Proposed indicators for the follow-up of the goals of the International Conference on Population and Development in Latin America and the Caribbean http://repositorio.cepal.org/bitstream/handle/11362/7159/S023185_es.pdf;jsessionid=A8F4DBD7895C48E9A4355F4259D8B904?sequence=1.
- (2) National monitoring of achievements in terms of universal access to reproductive health http://apps.who.int/iris/bitstream/10665/44057/1/9789243596839_spa.pdf.

This objective and others related to maternal and child health in the Context of sexual and reproductive health are framed in the global strategy for women's, children's and adolescents' health (2016-2030): http://www.who.int/pmnch/media/events/2015/gs_2016_30.pdf.

Indicator D.10 (Operational guide 42.2)

Number of hospitalizations resulting from complications arising after abortion, by age group.

Relevant priority measure(s) of the Montevideo Consensus: 40 and 42

Related indicator(s): B.14, B.15, B.17, B.18, D.8, D.9, D.11, D.12, D.18, D.21, D.22

Definition:

Ratio of (i) **numerator:** total number of hospitalizations recorded as owing to complications arising after abortion, and (ii) **denominator:** total number of hospitalizations related to pregnancy and childbirth (pregnancy, delivery and puerperium). This indicator is expressed per 100 hospitalizations related to pregnancy and childbirth.

Source:

Official reports, administrative records from health information systems and special maternal health programmes.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016). Disaggregation by age group is recommended: under 15, 15-19, 20-29 and 30 and over.

Notes:

For a better interpretation of this indicator, it is defined as the proportion of hospitalizations for abortion over the total number of hospitalizations. It might be more precise if the denominator referred to hospitalizations due to problems related to pregnancy, childbirth and puerperium defined internationally. The well-known under-reporting of abortion, especially in the majority of countries in the region where the procedure is illegal (with the exception of certain grounds such as rape, danger to the woman's life) has led countries and agencies to propose estimation methodologies that are accessible in specialized agencies and academia.

Additional indicators of universal access, maternal health, and legislation (institutional) related to this issue can be found in the annexes at: http://apps.who.int/iris/bitstream/10665/44057/1/9789243596839_spa.pdf.

Indicator D.11

Existence in the country of legislation allowing on the voluntary interruption of pregnancy for the following causes: (a) when the woman wishes it; (b) in the case of rape or incest; (c) when the woman's life is in danger; (d) to protect women's health; (e) other causes.

Relevant priority measure(s) of the Montevideo Consensus: 40, 42, 85, 87, 92, 95 and 97

Related indicator(s): B.14, B.15, B.17, B.18, D.8, D.9, D.10 D.12, D.17, D.18, D.21, D.22, H.9, H.10, I4

Definition:

There is legislation in the country that allows the voluntary interruption of pregnancy in the cases listed.

Source:

Legal regulations of each country (Constitution, laws, decrees, regulations and provisions, among other instruments), official government documentation, public reports, studies, registers or policy observatories. All (institutional) indicators related to legislation on sexual and reproductive health can be measured through a comprehensive consultation of governments by an international agency.

Disaggregations:

As listed in the indicator.

Notes:

Two sources for international comparisons are: the database on abortion legislation maintained by the United Nations Population Division and the Gender Equality Observatory for Latin America and the Caribbean of ECLAC. See:

- https://esa.un.org/PopPolicy/about_policy_section.aspx.
 - https://esa.un.org/PopPolicy/img/Definitions_of_Policy_Variables.pdf.
 - <http://oig.cepal.org/en>.
 - <http://oig.cepal.org/es/leyes/leyes-sobre-aborto>.
-

Indicator D.12 (Operational guide 42.6)

Percentage of health centres that have medications for abortion and trained personnel and materials for carrying out safe abortions and providing post-abortion care.

Relevant priority measure(s) of the Montevideo Consensus: 40 and 42

Related indicator(s): B.14, B.15, B.17, B.18, D.5, D.8, D.9, D.10, D.11, D.17, D.18, D.21, D.22

Definition:

Ratio between (i) **numerator:** total number of health centres (including primary care) that have medications for abortion and trained personnel and materials and inputs for carrying out safe abortions and providing post-abortion care, and (ii) **denominator:** total number of health centres. The indicator is expressed per 100 health centres.

Source:

Administrative records of health-care providers or surveys of establishments, registers and/or official reports, academic studies.

Disaggregations:

Region, geographical location (rural or urban), second level of administrative disaggregation; by primary, secondary or tertiary health establishment.

Notes:

This indicator contains at least four indicators, which should be measured individually: whether (1) the health centres (including primary care) have medicines for abortion; (2) the centres have trained personnel to perform safe abortions; (3) the centres have the necessary materials to perform safe abortions; and (4) the centres can provide post-abortion care.

This indicator applies in countries where legislation allows for abortions or in cases of miscarriage. Post-abortion care refers to that indicates in the WHO publication “Safe abortion: technical and policy guidance for health systems”.

More information on the components of the provision of sexual and reproductive health services can be found in the glossary.

This metadata has been compiled from:

- (1) Proposal on indicators for follow-up to the goals of the International Conference on Population and Development in Latin America and the Caribbean http://repositorio.cepal.org/bitstream/handle/11362/7159/S023185_es.pdf;jsessionid=A8F4DBD7895C48E9A4355F4259D8B904?sequence=1.
- (2) National-level monitoring of the achievement of universal access to reproductive health http://apps.who.int/iris/bitstream/10665/44057/1/9789243596839_spa.pdf.

This objective and others related to maternal and child health in the context of sexual and reproductive health is framed in “The global strategy for women’s, children’s and adolescents’ health (2016-2030)” at http://www.who.int/pmnch/media/events/2015/g_s_2016_30.pdf.

Indicator D.13 (Operational guide 43.3)

Percentage of infertile or subfertile couples and individuals receiving assisted fertility treatments.
Relevant priority measure(s) of the Montevideo Consensus: 43, 85, 87, 92, 95 and 97

Related indicator(s): B.10, B.13, B.17, B.18, D.2, D.9, D.14, D.17, D.18, D.21, D.22, H.9, H.10, I4

Definition:

- (1) Ratio of (i) **numerator:** total number of infertile or subfertile couples who wish to have children and are receiving assisted fertilization treatments, and (ii) **denominator:** total number of infertile or subfertile couples who wish to have children.
- (2) Ratio of (i) **numerator:** total number of infertile or subfertile individuals who wish to have children and are receiving assisted fertilization treatments, and (ii) **denominator:** total number of infertile or subfertile individuals who wish to have children.

The two indicators are expressed per 100 infertile or subfertile couples who wish to have children or 100 infertile or subfertile individuals who wish to have children, respectively.

Source:

Specialized surveys and reproductive health programmes.

Disaggregations:

Those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

This indicator should take account of the legal regulations in force in the country regarding assisted fertilization and the existence of centres that perform these procedures.

On related concepts, see http://www.who.int/reproductivehealth/publications/infertility/art_terminology_es.pdf?ua=1.

Indicator D.14

Number of initiatives to establish regulatory frameworks for assisted reproduction.
Relevant priority measure(s) of the Montevideo Consensus: 35 and 43

Related indicator(s): B.10, B.13, B.17, B.18, D.2, D.9, D.12, D.17, D.18, D.21, D.22

Definition:

Total number of legislative initiatives to establish regulatory frameworks for assisted reproduction submitted within the country's legal system.

Source:

Legislation of each country (Constitution, laws, decrees, regulations and provisions, among other instruments), registers and parliamentary reports. Academic analyses.

Disaggregations:

Not applicable.

Notes:

See glossary for the definition of medically assisted fertilization.

Indicator D.15 (Operational guide 45.3)

Percentage of live births that were preceded by four or more antenatal check-ups.

Relevant priority measure(s) of the Montevideo Consensus: 40, 43, 45, 85, 87, 92, 95 and 97

Related indicator(s): B.14, B.15, B.17, B.18, D.2, D.4, D.5, D.8, D.9, D.16, D.18, D.21, D.22, H.9, H.10, I4

Definition:

Ratio of (i) **numerator**: total number of live births that were preceded by four or more antenatal check-ups with a skilled health-care provider, and (ii) **denominator**: total number of live births. The indicator is expressed per 100 live births.

Source:

Demographic and health surveys or MICS, administrative records of sexual and reproductive health programmes or perinatal information system.

Disaggregations:

Mother age groups, mother's schooling and disaggregations specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

In the case of surveys, the measurement is generally made with respect to the woman's most recent delivery and in a fixed period prior to the survey (3 or 5 years).

The prenatal period provides opportunities to reach pregnant women, with interventions that can be vital to their health and well-being and that of their children. The World Health Organization (WHO) recommends a minimum of four antenatal check-ups based on a review of the effectiveness of different models of antenatal care. WHO guidelines are specific to the content of antenatal check-ups, which should include:

- Measurement of blood pressure
- Urine tests for bacteriuria and proteinuria
- Blood tests for syphilis and severe anaemia
- Weight and height control (optional)

For more details on this topic see:

- <http://apps.who.int/iris/bitstream/10665/250802/1/WHO-RHR-16.12-spa.pdf>.
-

Indicator D.16 (SDG indicator 3.1.2)

Proportion of births attended by skilled health personnel.
Relevant priority measure(s) of the Montevideo Consensus: 43, 45, 85, 87, 92, 95 and 97

Related indicator(s): B.14, B.15, B.17, B.18, D.2, D.5, D.8, D.9, D.15, D.18, D.21, D.22, H.9, H.10, I4

Definition:

Ratio of (i) **numerator**: total number of births attended by skilled health personnel (usually doctors, midwives or nurses), and (ii) **denominator**: total number of births. The indicator is expressed per 100 live births.

Source:

Administrative records of births and perinatal care services. Specialized surveys (EDS, MICS, etc.).
See under Notes.

Disaggregations:

Those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

In the case of records the information is captured for a given year. Surveys indicate a defined period of time, usually the five years prior to the survey.

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/>.
 - <http://unstats.un.org/sdgs/metadata/files/Metadata-03-01-02.pdf>.
-

Indicator D.17 (SDG indicator 5.6.1)

Proportion of women aged 15-49 years who make their own informed decisions regarding sexual relations, contraceptive use and reproductive healthcare.
Relevant priority measure(s) of the Montevideo Consensus: 34, 35, 37, 43 and 44

Related indicator(s): E.12, E.13, E.14, E.15, D.4, D.5, D.6, D.7, D.8, D.11, D.12, D.13, D.14, D.18, D.21, D.22, H.9, H.10, I4

Definition:

Proportion of women aged 15-49 years (married or in union) who make their own decision on all three selected areas i.e. can say no to sexual intercourse with their husband or partner if they do not want; decide on use of contraception; and decide on their own health care. Only women who provide a “yes” answer to all three components are considered as women who “make her own decisions regarding sexual and reproductive” (see metadata).

Source:

Special surveys such as EDS, MICS. Records of sexual and reproductive health programmes.
See under Notes.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Complete metadata are available at:

- <https://unstats.un.org/sdgs/metadata/files/Metadata-05-06-01.pdf>.
 - <http://unstats.un.org/sdgs/metadata/>.
-

Indicator D.18

The country has laws and regulations that guarantee women aged 15-49 years access to sexual and reproductive health services, information and education.

Relevant priority measure(s) of the Montevideo Consensus: 33, 34, 35, 37, 43, 46, 85, 87, 92, 95 and 97

Related indicator(s): B.14, B.15, B.17, B.18, D.2, D.4, D.5, D.6, D.7, D.8, D.10, D.11, D.12, D.13, D.14, D.15, D.16, D.17, D.21, D.22, H.9, H.10, I4

Definition:

(No metadata available yet)

Source:

See under Notes.

Disaggregations:

Not applicable.

Notes:

This indicator is based on SDG indicator 5.6.2.

Complete metadata will be available at:

- <http://unstats.un.org/sdgs/metadata/>

Further information at:

- <http://unstats.un.org/sdgs/files/metadata-compilation/Metadata-Goal-5.pdf>.

According to the document *Work Plans for Tier III Indicators*, dated March 3, 2017, UNFPA, in collaboration with UN Women and WHO, is leading the process to develop the methodology for this indicator. The data collection methodology consists of information that is initially self-reported by governments through a survey that will be developed to compare government responses. See [online]:https://unstats.un.org/sdgs/files/meetings/iaeg-sdgs-meeting-05/TierIII_Work_Plans_03_03_2017.pdf.

Indicator D.19 (Operational guide 34.3)

Percentage of people reporting that they have been victims of discrimination because of their sexual orientation or gender identity.

Relevant priority measure(s) of the Montevideo Consensus: 33, 34, 36 and 46

Related indicator(s): A.20, B.14, B.15, B.17, B.18, D.20, D.21, D.22, F.2

Definition:

Ratio between (i) **numerator:** people reporting that they have been victims of discrimination because of their sexual orientation or gender identity in the previous 12 months; and (ii) **denominator:** total population. The indicator is expressed per 100 people.

Source:

Household surveys or special surveys. Administrative records of specialized agencies.

Disaggregations:

Those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Considering that there may be difficulties in measuring whether the child population (under 10 years of age, for example) has been discriminated against on the grounds of sexual orientation or gender identity, it is recommended to present the indicator by age group, excluding children under 10 years.

The metadata developed for SDG indicator 16b.1 should serve as a guideline for this indicator, despite having a broader scope.

Indicator D.20 (Operational Guide 36.7)

Number of programmes and campaigns specifically targeted at eliminating stereotypes and discrimination on the basis of gender identity and sexual orientation.

Relevant priority measure(s) of the Montevideo Consensus: 33, 34, 36 and 46

Related indicator(s): A.20, B.14, B.15, B.17, B.18, D.19, D.21, D.22, F.2

Definition:

Number of programmes and campaigns specifically targeted at eliminating stereotypes and discrimination on the basis of gender identity and sexual orientation developed by the competent authority.

Source:

Official reports. This information can be obtained from a survey conducted by an agency to be defined, to investigate institutional indicators in the countries.

Disaggregations:

Type of campaign (television, radio, Internet, others) and its scope (national, regional, local).

Notes:

Specify whether only national programmes and campaigns are considered, or whether regional or local ones should be included; and if they are included whether they can be disaggregated accordingly.

Indicator D.21 (Operational Guide 35.2)

Percentage of people who are aware of their rights and the conditions for access to sexual and reproductive health care.

Relevant priority measure(s) of the Montevideo Consensus: 33, 34, 35, 37, 46, 85, 87, 92, 95 and 97

Related indicator(s): D.1, D.2, D.3, D.4, D.5, D.6, D.7, D.8, D.9, D.10, D.11, D.12, D.13, D.14, D.15, D.16, D.17, D.18, D.19, D.20, D.22, H.9, H.10, I4

Definition:

Ratio between (i) **numerator:** The total population aged 10 years or over who are aware of their rights and the conditions for access to sexual and reproductive health care; and (ii), and (ii) **denominator:** total population aged 10 and over. The indicator is expressed per 100 people aged 10 years and over

Source:

Demographic and health surveys or special surveys.

Disaggregations:

Those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

To the extent possible, this indicator should take into consideration the remarks made at the third meeting of the Presiding Officers of the Regional Conference on Population and Development on including the 10-14 age group in the measurement of this indicator.

Indicator D.22 (Operational guide 36.4)

Number of public institutions running policies, programmes and projects aimed at sexual and reproductive health care, with an approach grounded in the protection of sexual and reproductive rights.

Relevant priority measure(s) of the Montevideo Consensus: 34, 35, 36, 37 and 46

Related indicator(s): D.1, D.2, D.3, D.4, D.5, D.6, D.7, D.8, D.9, D.10, D.11, D.12, D.13, D.14, D.15, D.16, D.17, D.18, D.19, D.20, D.21

Definition:

Number of public institutions at the national level that are currently running policies, programmes and projects aimed at sexual and reproductive health care, with an approach grounded in the protection of sexual and reproductive rights.

Source:

Official reports.

Disaggregations:

Not applicable.

Notes:

It should be specified whether regional, provincial and / or local institutions are included, in addition to national ones.

More information on the concept of sexual and reproductive health can be found in the glossary.

Indicator D.23

Percentage of women who are aware of their HIV diagnosis during pregnancy, birth and puerperium.

Relevant priority measure(s) of the Montevideo Consensus: 37, 38, 39, 40, 42, 43 and 45

Related indicator(s): D.1, D.3

Definition:

- (i) **numerator:** the sum of categories a, b and c indicated below:
 - (a) pregnant women who have had an HIV test and receive the result during an antenatal check-up;
 - (b) pregnant women with unknown HIV-serological status who attended health-care facilities during labour and delivery, were screened for HIV and received the result; and
 - (c) women with unknown HIV status who received puerperal care within 72 hours of birth, were screened for HIV and received the result; and
 - (ii) **denominator:** estimated number of pregnant women in the last 12 months.
-

Source:

The numerator is calculated on the basis of the records of national programmes obtained from the records of antenatal care establishments, care during labour, delivery and the puerperium.

Disaggregations:

States of pregnancy: antenatal, labour and delivery, and puerperium.

Reception of results: the test was performed, or the test was performed and the result delivered.

And the (relevant) disaggregations specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Chapter E

Gender equality

Some of the indicators in this chapter stem from other existing instruments, in addition to the 2030 Agenda for Sustainable Development, such as the Plan of Action of the Fourth World Conference on Women (Beijing, 1995), the Santo Domingo Consensus (2013), the Brasilia Consensus (2010), the Quito Consensus (2007), the Convention on the Elimination of All Forms of Discrimination against Women (1979) and the Inter-American Convention on the Prevention, Punishment and Eradication of Violence against Women (Belém do Pará, 1994).

Three SDG indicators (8.5.1, 8.5.2 and 16.7.1) that were originally included in chapter E were moved to chapter A as they are related to well-being.

For the new indicator on femicide, feminicide and gender-related killings (according to the nomenclature established by the laws of each country), participants reviewed and drew on the Follow-up Mechanism to the Convention of Belém do Pará (MESECVI), the Latin American Model Protocol for the investigation of gender-related killings of women and the work of the Gender Equality Observatory for Latin America and the Caribbean.

One element to highlight in this instrument is the inclusion of indicator E.4 from the *Operational guide*, concerning sanctions and punishments for political harassment of women, despite the clear lag in legislation on this matter at the regional level. In the light of the absence of regionally accepted terms, the glossary contained in annex A1 includes the definition of political harassment and political violence used in the Declaration on Political Harassment and Violence against Women of MESECVI. The definitions contained in legislative instruments developed by countries of the region that have made such efforts were also reviewed, such as Law No. 243 against political harassment and violence against women enacted by the Plurinational State of Bolivia, the bill against political harassment and/or violence against women in Costa Rica, the bill against gender-based political discrimination, harassment and violence in Ecuador and the bill defining and criminalizing political harassment in Peru.

Lastly, this review reiterates the relevance of disaggregating information, in accordance with the introductory paragraph of annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators, when the indicator and the source allow.

Indicator	
E.1	Existence of systems to track and make public allocations for gender equality and women's empowerment.
E.2	Percentage of government budgets with funds specifically allocated to gender equality (indicator 49.2 of the <i>Operational guide</i>).
E.3	Percentage of municipal and local governments that have gender mechanisms for the advancement of women (indicator 47.3 of the <i>Operational guide</i>).
E.4	Existence of legislation and rules to sanction and punish political harassment of women (indicator 52.2 of the <i>Operational guide</i>).
E.5	Existence of laws and policies that ensure gender parity and women's access to power (adapted from indicator 51.3 of the <i>Operational guide</i>).

Indicator	
E.6	Proportion of seats held by women in (a) national parliaments and (b) local governments (SDG indicator 5.5.1).
E.7	Proportion of women in managerial positions (SDG indicator 5.5.2).
E.8	Total time worked (number of working hours paid and unpaid), by sex (indicator 64.1 of the <i>Operational guide</i>).
E.9	Proportion of time spent on unpaid domestic and care work, by sex, age and location (indicator 5.4.1 of the SDGs).
E.10	Incorporation of gender equality into minimum required content of basic and secondary school curricula, including the issue of discrimination on the basis of gender identity and sexual orientation.
E.11	Incorporation of new concepts of masculinity into the minimum required content of basic and secondary school curricula.
E.12	Proportion of women aged 15 years or older subjected to physical, sexual or psychological violence, in the previous 12 months, by form of violence, by age and by whether the violent act was perpetrated by a current or former intimate partner or not.
E.13	Number (and percentage) of reported cases of discrimination based on sexual orientation and gender identity that are resolved through formal redress mechanisms. (indicator 36.3 of the <i>Operational guide</i>).
E.14	Rate of femicide or feminicide (gender-related killings of women aged 15 years and older per 100,000 women).
E.15	Existence of gender-based violence prevention and care policies that have an earmarked budget (adapted from indicator 57.3 of the <i>Operational guide</i>).
E.16	Percentage of official indicators at the population level that are disaggregated by sex.
E.17	Percentage of official systems of indicators that incorporate the gender perspective by sector (indicator 62.2 of the <i>Operational guide</i>).

Metadata

Indicator E.1

Existence of systems to track and make public allocations for gender equality and women's empowerment.

Relevant priority measure(s) of the Montevideo Consensus: 47, 49 and 81

Related indicator(s): G.7

Definition:

(No metadata available yet)

Source:

Responses to completed questionnaires from the ministries of finance in coordination with relevant sector ministries and national women's mechanisms in each country.

The United Nations Entity for Gender Equality and the Empowerment of Women (UN Women), the United Nations Development Programme and the Organization for Economic Co-operation and Development will develop an instrument to compile data on this indicator.

See under Notes.

Disaggregations:

Not applicable.

Notes:

Indicator E.1 is a regional indicator adapted from SDG 5.c.1 "Proportion of countries with systems to track and make public allocations for gender equality and women's empowerment and allocate public funds for that purpose, to reflect the situation of each country vis-à-vis the institutions and the resources used to follow-up systems to monitor gender equality and women's empowerment. UN-Women presented concepts related to public finance management systems that incorporate gender equality, together with characteristics of public allocations and expenditures that make it possible to monitor gender equality. This information is contained in a preliminary version of the March 2016 metadata. Further information at: <https://unstats.un.org/sdgs/files/metadata-compilation/Metadata-Goal-5.pdf>.

Complete metadata will be available at:

- <http://unstats.un.org/sdgs/metadata/>.
-

Indicator E.2 (Operational guide 49.2)

Percentage of government budgets with funds specifically allocated to gender equality.

Relevant priority measure(s) of the Montevideo Consensus: 47 and 49

Related indicator(s):

Definition:

Ratio of: (i) **numerator**: total number of budgets with funds specifically allocated to gender equality programmes, and (ii) **denominator**: total number of budgets in the country, multiplied by 100.

Source:

The basic information sources are each country's annual budget programming, replies to completed questionnaire by ministries of finance in coordination with relevant sector ministries and national mechanisms for women in each country.

Disaggregations:

Preferably disaggregated by national and subnational budgets.

Notes:

Information may be collected at the regional level, based on replies to questionnaires sent to the Ministry of Finance and data from national mechanisms for the advancement of women.

It is useful for this indicator to include the following note from the SDG indicator 5.c.1 metadata:

For the purpose of this indicator, allocations for gender equality and women's empowerment are therefore defined as:

- Resources allocated for programmes that specifically target only women or girls.
- Resources allocated to programmes that target both women and men but where gender equality is a primary objective. For example an action that promotes employment of women and men, equal representation within management posts, and equal pay.
- Resources allocated to programmes where gender equality is not a primary objective but where action is being taken to close gender gaps. For example, an infrastructure project that does not include gender equality as the primary objective but has specific measures to ensure that women and girls benefit equally with men and boys.

This information is in a preliminary version of the March 2016 metadata. Further information at: <https://unstats.un.org/sdgs/files/metadata-compilation/Metadata-Goal-5.pdf>.

Indicator E.3 (Operational guide 47.3)
Percentage of municipal and local governments that have gender mechanisms for the advancement of women.
Relevant priority measure(s) of the Montevideo Consensus: 47 and 81

Related indicator(s): G.7

Definition:

Ratio between: (i) **numerator:** total number of municipal and local governments that include in their structure an office or unit of gender equality for the advancement of women, and (ii) **denominator:** total number of municipal and local governments in the country, multiplied by 100.

Source:

National reports.

Disaggregations:

DAM, municipality/commune and localities.

Notes:

The source should provide the list of municipal and local governments included in the numerator. The data can be strengthened with information obtained from the national mechanisms for the advancement of women:

- <http://www.cepal.org/es/directorio-de-mecanismos-para-el-adelanto-de-la-mujer>.

Indicator E.4 (Operational guide 52.2)
Existence of legislation and rules to sanction and punish political harassment of women.
Relevant priority measure(s) of the Montevideo Consensus: 48, 51 and 52

Related indicator(s): A.19

Definition:

Existence in the country of legislation and rules to sanction and punish political harassment of women.

Source:

The basic sources of information are in the laws of each country and must be reported in the national reports.

Disaggregations:

Not applicable.

Notes:

The data could be strengthened through the national mechanisms for the advancement of women. The existence of laws aimed at punishing and penalizing political harassment enables women to participate effectively in the decisions and political life of their countries.

A useful reference on this issue is the Declaration on Violence and Political Harassment against Women of the Follow-up Mechanism of the Belem do Pará Convention: <http://www.oas.org/es/mesecvi/docs/declaration-esp.pdf>.

This definition of political harassment is included in the glossary.

Indicator E.5

Existence of laws and policies that ensure parity and women's access to power.

Relevant priority measure(s) of the Montevideo Consensus: 48, 51 and 52

Related indicator(s):

Definition:

Existence in the country of policies that explicitly ensure parity and women's access to power.

Source:

The basic sources of information are in the legislation of each country and must be reported in the national reports.

Disaggregations:

Not applicable.

Notes:

This indicator is based on indicator 51.3 of the Operational Guide.

The data can be strengthened through the national mechanisms for the advancement of women.

The content of this indicator is aligned with SDG target 5.c (“Adopt and strengthen sound policies and enforceable legislation for the promotion of gender equality and the empowerment of all women and girls at all levels”) and Based on indicator 51.3 of the Operational guide (“Number of standards that ensure gender parity and women's access to power”). It also has its correlates in Chapter E of the Santo Domingo Consensus – http://repositorio.cepal.org/bitstream/handle/11362/40450/1/Consenso_Santo_Domingo_es.pdf; the Brasilia Consensus http://www.cepal.org/mujer/noticias/paginas/5/40235/ConsensoBrasilia_ESP.pdf; the Quito Consensus <http://www.cepal.org/publicaciones/xml/9/29489/dsc1e.pdf>, and the Convention on the Elimination of All Forms of Discrimination against Women, <http://www.un.org/womenwatch/daw/cedaw/cedaw25years/content/spanish/Convention-CEDAW-English.pdf> among other international and regional instruments.

The concept of gender parity can be consulted at:

- <https://trainingcentre.unwomen.org/mod/glossary/view.php?id=150&mode=letter&hook=P&sortkey=&sortorder=asc>.
-

Indicator E.6 (SDG indicator 5.5.1)

Proportion of seats held by women in (a) national parliaments and (b) local governments.

Relevant priority measure(s) of the Montevideo Consensus: 48 and 52

Related indicator(s):

Definition:

The proportion of seats held by women in (a) national parliaments, currently as at 1 February of reporting year, is currently measured as the number of seats held by women members in single or lower chambers of national parliaments, expressed as a percentage of all occupied seats (see metadata).

Source:

See under Notes.

Disaggregations:

The indicator can be disaggregated for analysis by region, type of legislature (single or lower chamber, parliamentary or presidential), the method by which the seats are occupied (direct election, indirect election or designation) and the use of special measures. Disaggregation by age is recommended in order to permit analysis of youth participation.

Notes:

For methodology on local governments, see Gender Equality Observatory for Latin America and the Caribbean of ECLAC:

- <http://oig.cepal.org/en>.
- http://interwp.cepal.org/sisgen/SisGen_MuestraFicha_puntual.asp?id_aplicacion=17&id_estudio=223&indicador=1708&idioma=e.

Some methodological issues on the measurement of the indicator are discussed in a preliminary version of the March 2016 metadata. Further information at:

- <https://unstats.un.org/sdgs/files/metadata-compilation/Metadata-Goal-5.pdf>.

Complete metadata are available at:

- <https://unstats.un.org/sdgs/metadata/files/Metadata-05-05-01a.pdf>.
 - <http://unstats.un.org/sdgs/metadata/>.
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Indicator E.7 (SDG indicator 5.5.2)

Proportion of women in managerial positions.

Relevant priority measure(s) of the Montevideo Consensus: 54 and 55

Related indicator(s):

Definition:

This indicator refers to the proportion of females in the total number of persons employed in senior and middle management. For the purposes of this indicator, senior and middle management correspond to major group 1 in both ISCO-08 and ISCO-88 minus category 14 in ISCO-08 (hospitality, retail and other services managers) and minus category 13 in ISCO-88 (general managers), since these comprise mainly managers of small enterprises. If statistics are not disaggregated at the sub-major level, then major group 1 of ISCO-88 and ISCO-08 could be used as a proxy.

Source:

Labour force surveys, household surveys including employment modules, establishment surveys, or administrative records to obtain information on required groups.

See under Notes.

Disaggregations:

Those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/>.
- <http://unstats.un.org/sdgs/metadata/files/Metadata-05-05-02.pdf>.

This indicator's main limitation is that it does not reflect differences in the levels of responsibility of women in these high and middle level positions or the importance of the enterprises and organizations in which they are employed. Its quality is also heavily dependent on the reliability of the employment statistics by occupation at the two-digit level of the ISCO.

Updated information from the ILO database can be viewed at:

- http://www.ilo.org/ilostat/faces/wcnav_defaultSelection?_afLoop=14968891385262&_afWindowMode=0&_afWindowId=9z6i4ct6v_1!%40%40%3F_afWindowId%3D9z6i4ct6v_1%26_afLoop%3D14968891385262%26_afWindowMode%3D0%26_adf.ctrl-state%3D9z6i4ct6v_33.
-

Indicator E.8 (Operational guide 64.1)

Total time worked (number of working hours paid and unpaid), by sex.

Relevant priority measure(s) of the Montevideo Consensus: 54, 61 and 64

Related indicator(s): A.13

Definition:

According to the resolution of the Nineteenth International Conference of Labour Statisticians: work includes all activities carried out by persons of any sex or age, to produce goods or provide services for third party or self-consumption.

ECLAC has processed time-use surveys and time-use modules to calculate the indicator of total work time following the resolution of the Nineteenth International Conference of Labour Statisticians and the latest revision of CAUTAL 2015:

- Total working hours is the sum of remunerated working hours and unpaid working hours.
- Paid work refers to the work performed to produce goods or services for the market and is calculated as the sum of the time spent on employment, job search and travel to work.
- Unpaid work refers to work that is performed without payment and is undertaken mostly in the private domain. It is measured by quantifying the time a person spends working for self-consumption of goods, domestic work and unpaid care for his own home or in providing support to other households.

Total working hours = Paid working hours + Unpaid working hours

Paid working hours are calculated as the quotient between the sum of hours spent on paid work and the total number of people who reported having done some kind of work (paid and / or unpaid).

Unpaid working time is calculated as the ratio between the sum of hours spent on unpaid work activities and the total number of people who reported having performed some type of work (paid and unpaid).

It is expressed in hours (weekly / daily) and tenths.

Source:

Time-use surveys and time-use modules integrated into household surveys or multipurpose surveys conducted at the national level.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

The available data and metadata correspond to the Gender Equality Observatory for Latin America and the Caribbean. For detailed information see:

- <http://oig.cepal.org/en>.
- http://interwp.cepal.org/sisgen/SisGen_MuestraFicha_puntual.asp?id_aplicacion=17&id_estudio=221&indicador=2503&idioma=e.

A key element for analysing gender gaps in well-being concerns the use of time and the distribution of unpaid work within the home (Gender Equality Observatory for Latin America and the Caribbean).

Indicator E.9 (SDG indicator 5.4.1)

Proportion of time spent on unpaid domestic and care work, by sex, age and location.

Relevant priority measure(s) of the Montevideo Consensus: 10, 53, 54, 61 and 64

Related indicator(s): B.7

Definition:

Proportion of time spent on unpaid domestic and care work is calculated by dividing the average number of hours spent on unpaid domestic and care work each day by 24 hours.

Time spent on unpaid domestic and care work refers to the average time women and men spend on household provision of services for own consumption. Domestic and care work includes food preparation, dishwashing, cleaning and upkeep of a dwelling, laundry, ironing, gardening, caring for pets, shopping, installation, servicing and repair of personal and household goods, childcare, and care of the sick, elderly or disabled household members, among others. Time spent on unpaid domestic and care work as well as on community or volunteer work constitutes the overall time spent on “unpaid work”. Community or volunteer work includes volunteer services for organizations, unpaid community work and informal help to other households, among other activities. Activities included in unpaid work are not included within the SNA production boundary but are part of the SNA General Production Boundary. As much as possible, data compiled by UNSD are based on the International Classification of Activities for Time Use Statistics (ICATUS), according to which paid and unpaid work are delineated by the SNA production boundary.

Source:

See under Notes.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/>.
- <http://unstats.un.org/sdgs/metadata/files/Metadata-05-04-01.pdf>.

For the region, there is the “Time-use classification for Latin America and the Caribbean (CAUTAL)”, which is developed from the gender perspective and is adapted to the specific features of the region. See:

- http://repositorio.cepal.org/bitstream/handle/11362/39624/4/S1600508_es.pdf.
-

Indicator E.10 (Operational guide 59.1, adapted)

Incorporation of gender equality into the minimum content of basic and secondary school curricula, including the issue of discrimination on grounds of gender identity and sexual orientation.

Relevant priority measure(s) of the Montevideo Consensus: 59

Related indicator(s): A.20, B.8

Definition:

Existence of basic and secondary education curricula that explicitly incorporate gender equality into their minimum content, including the issue of discrimination on grounds of gender identity and sexual orientation.

Source:

National reports and information from relevant sectoral entities or expert review.

Disaggregations:

Basic education/secondary education. Public schools/private schools.

Notes:

Indicator 59.1 of the Operational guide (Percentage of public and private schools that include gender equality in the basic education curriculum), refers only to basic education whereas this instrument also includes secondary education.

This indicator has its correlates in various international and regional instruments such as the Convention on the Elimination of All Forms of Discrimination against Women, the Santo Domingo Consensus and the Quito Consensus. Definitions of the concepts of gender equality, gender discrimination and sexual orientation for the correct measurement of this indicator can be consulted online at: <https://trainingcentre.unwomen.org/mod/glossary/view.php?id=150&mode=letter&hook=V&sortkey=&sortorder=asc>.

For establishing curricular content, the UNESCO publication “International Technical Guidance on Sexuality Education” is recommended.

Indicator E.11

Incorporation of new concepts of masculinity into the minimum required content of basic and secondary school curricula.

Relevant priority measure(s) of the Montevideo Consensus: 59

Related indicator(s):

Definition:

Existence of basic and secondary education curricula that incorporate the new masculinities approach in their minimum contents.

Source:

National reports and information from relevant sector entities or expert review.

Disaggregations:

Basic education / Secondary education.

Notes:

An important basis for understanding the “new masculinities” concept is the content of section C (Male responsibilities and participation) of chapter IV of the Programme of Action of the 1994 International Conference on Population and Development (https://www.unfpa.org/sites/default/files/event-pdf/icpd_spa_2.pdf), where one of its measures states: “Special efforts should be made to emphasize men’s shared responsibility and promote their active involvement in responsible parenthood, sexual and reproductive behaviour, including family planning; prenatal, maternal and child health; prevention of sexually transmitted diseases, including HIV; prevention of unwanted and high-risk pregnancies; shared control and contribution to family income, children’s education, health and nutrition; and recognition and promotion of the equal value of children of both sexes. Male responsibilities in family life must be included in the education of children from the earliest ages. Special emphasis should be placed on the prevention of violence against women and children.”

The new masculinities refer to the new ways of “being a man”; and, according to UN Women, these changes include: breaking the link between masculinity and violence, changing the way one exercises rights, being more cooperative rather than dominant, improving communication, sharing responsibilities at home and ensuring equal access to opportunities.

The information will be provided by each country’s Ministry of Education and reinforced by the national mechanisms for the advancement of women.

Indicator E.12

Proportion of women aged 15 years or older subjected to physical, sexual or psychological violence, in the previous 12 months, by form of violence, by age and by whether the violent act was perpetrated by a current or former intimate partner or not.

Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 23, 56, 57, 58 and 65

Related indicator(s): A.19, C.6, E.14, G.3

Definition:

(No metadata available yet for indicator 5.2.2).

This indicator is drawn from a combination of SDG indicators 5.2.1 and 5.2.2, which differ from each other by the relationship between the woman or girl and the person who has inflicted violence on them. The present indicator includes acts of violence committed by persons who are or have been close companions, as well as those committed by others; but it breaks down this relationship between the perpetrator and the victim.

Source:

Demographic and health surveys, reproductive health surveys and victimization surveys. See under Notes.

Disaggregations:

As well as those specified in the indicator, it is necessary to disaggregate by type of violence, age and place of occurrence, plus breakdowns specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

This indicator is adapted from SDG indicators 5.2.1 and 5.2.2.

The information may be reinforced by data from health information systems and from judicial, social service and police databases. However, because a very large number of cases are not reported, this information should not form the basis for measurement of this indicator.

A detailed definition of physical, sexual and psychological violence against women can be found in the following document of the United Nations Statistics Division: *Guidelines for Producing Statistics on Violence against Women* (https://unstats.un.org/unsd/gender/docs/Guidelines_Statistics_VAW.pdf).

Some methodological aspects related to measurement of the indicator are considered in a preliminary version of the metadata of March 2016. Further information at: <https://unstats.un.org/sdgs/files/metadata-compilation/Metadata-Goal-5.pdf>.

Complete metadata will be available at:

- <https://unstats.un.org/sdgs/metadata/files/Metadata-05-02-01.pdf>.
 - <http://unstats.un.org/sdgs/metadata/>.
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Indicator E.13 (Operational guide 36.3)

Number (and percentage) of reported cases of discrimination based on sexual orientation and gender identity that are resolved through formal redress mechanisms.

Relevant priority measure(s) of the Montevideo Consensus: 36 and 58

Related indicator(s): A.20

Definition:

Two data will be obtained:

- (1) Total number of cases resolved through formal redress mechanisms in the country.
 - (2) Ratio between (i) **numerator**: total number of cases resolved through formal redress mechanisms in the country, and (ii) **denominator**: total number of reported cases of discrimination.
-

Source:

National reports.

Disaggregations:

Not applicable.

Notes:

National reports should be produced by mechanisms for the advancement of women, based on information obtained from judicial institutions, national police or other agencies.

Review the concepts of sexual orientation and gender identity at: (<https://trainingcentre.unwomen.org/mod/glossary/view.php?id=150&mode=letter&hook=V&sortkey=&sortorder=asc>).

The measurement of this indicator should consider the first paragraph of Principle 2 of the Yogyakarta Declaration:

“Everyone is entitled to enjoy all human rights without discrimination on the basis of sexual orientation or gender identity. Everyone is entitled to equality before the law and the equal protection of the law without any such discrimination whether or not the enjoyment of another human right is also affected. The law shall prohibit any such discrimination and guarantee to all persons equal and effective protection against any such discrimination.” (http://www.yogyakartaprinciples.org/wp/wp-content/uploads/2016/08/principles_en.pdf).

It is possible that one individual may be the victim in more than one case of discrimination. In order to simplify the calculation of the numerator, all records of discrimination cases are counted regardless of whether the victim’s name is repeated in other cases.

Indicator E.14

Rate of femicide or feminicide (gender-related killings of women aged 15 years and older per 100,000 women).

Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 23, 57 and 58

Related indicator(s): A.18, A.19, C.6, E.12

Definition:

Ratio between: (i) **numerator:** total number of recorded homicides of women 15 years and over, perpetrated for reasons of gender, and (ii) **denominator:** total number of women aged 15 and over, multiplied by 100,000.

Source:

Numerator: official reports. Denominator: censuses, official estimates and projections.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Official reports should be produced by the national mechanisms for the advancement of women, based on information from judicial institutions, national police or other agencies. The Gender Equality Observatory for Latin America and the Caribbean and CEPALSTAT list the institutions that provide the data:

- <http://oig.cepal.org/en>.
- http://interwp.cepal.org/sisgen/SisGen_MuestraFicha.asp?indicador=2780&id_estudio=275.

This indicator focuses on priority actions 57 and 58 of the Montevideo Consensus.

Femicides or feminicides are the violent deaths of women based on gender; a broader definition and the corresponding sources are included in the glossary. In addition, a useful reference to the gender issues considered in the legislation of some countries of the region can be found in the document “The regulation of the crime of femicide / femicide in Latin America and the Caribbean”: (http://www.un.org/en/women/endviolence/pdf/reg_del_femicidio.pdf).

The Observatory on Gender Equality in Latin America and the Caribbean collects information on the feminicides that have occurred and are reported by several countries in the region: (<http://oig.cepal.org/en/indicators/feminicidio>). According to this source, the absolute number of deaths of women as a result of gender-based violence is requested annually from the authorities of the national mechanisms for the advancement of women, which obtain the information in question from institutions of the judiciary, national police or other competent bodies in the country.

Indicator E.15 (Operational guide 57.3)

Existence of gender-based violence prevention and care policies that have an earmarked budget.

Relevant priority measure(s) of the Montevideo Consensus: 33, 34, 36, 46, 57 and 58

Related indicator(s): A.18, A.19, D19, D20

Definition:

Ratio between: (i) **numerator:** total number of gender-based violence prevention and care policies that have earmarked funds in the national expenditure budget, and (ii) **denominator:** total number of gender-based violence prevention and care policies, multiplied by 100.

Source:

Official reports and regulatory instruments (including budgets approved for such purposes).

Disaggregations:

Not applicable.

Notes:

The data can be strengthened through national mechanisms for the advancement of women.

Although the indicator as defined does not refer to a proportion, it is advisable to measure it as a percentage, ideally it should be 100%. For progress review, it is recommended to examine whether an executed budget is associated with the policies.

Indicator E.16 (Operational guide 62.1, adapted)

Percentage of official indicators at the population level that are disaggregated by sex.

Relevant priority measure(s) of the Montevideo Consensus: 62, 63, 102 and 103

Related indicator(s): E.17

Definition:

Ratio between: (i) **numerator:** total number of official indicators at the population level that have gender-disaggregated information, and (ii) **denominator:** total number of official indicators at the population level, multiplied by 100.

Source:

Official reports or questionnaires to follow up the national mechanisms for the advancement of women.

Disaggregations:

By area or sector of indicators.

Notes:

The data can be obtained through national statistical offices and reinforced with information from the national mechanisms for the advancement of women. The source should provide the detail of this indicator, with breakdowns by area or sector.

Increasing the number and proportion of official indicators relating to the population for which there is gender-disaggregated information makes it possible to monitor progress towards gender equality more effectively.

Indicator E.17 (Operational guide 62.2)

Percentage of official systems of indicators that incorporate the gender perspective by sector.

Relevant priority measure(s) of the Montevideo Consensus: 62, 63, 102 and 103

Related indicator(s): E.16

Definition:

Ratio between: (i) **numerator:** total number of indicator systems that adequately incorporate the gender perspective in their formulation, and (ii) **denominator:** total number of official systems of indicators in the country, multiplied by 100.

Source:

Official reports or questionnaires to follow up the national mechanisms for the advancement of women.

Disaggregations:

By sector.

Notes:

The data can be obtained through national statistical offices and strengthened with information from national mechanisms for the advancement of women. The source should provide the detail of this indicator, with breakdowns by area or sector.

According to UN Women and adopting the conclusions agreed upon by the United Nations Economic and Social Council in 1997, “Mainstreaming a gender perspective is the process of assessing the implications for women and men of any planned action, including legislation, policies or programmes, in all areas and at all levels. It is a strategy for making women's as well as men's concerns and experiences an integral dimension of the design, implementation, monitoring and evaluation of policies and programmes in all political, economic and societal spheres so that women and men benefit equally and inequality is not perpetuated. The ultimate goal is to achieve [substantive] gender equality” <http://www.unwomen.org/en/how-we-work/un-system-coordination/gender-mainstreaming>.

Greater gender mainstreaming in national indicator systems allows for progress in the two aspects of priority measures 62 and 63 of the Montevideo Consensus: advancing towards the full recognition of women's economic and social contribution to the development of society; and preparing and disseminating the gender statistics needed for the formulation of public policies on gender equality and the empowerment of women.

Chapter F

**International migration and protection of the human rights
of all migrants**

The indicators proposed in this chapter combine processes and results, and some, where indicated, are related to the SDG targets and indicators on international migration. In some cases, the results-based indicators should be adapted to each country.

As chapter A represents a general framework compared with the other chapters in this document, and in the light of the introductory paragraph of annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators in relation to the possibilities for disaggregating data, the SDG indicators on the different aspects of well-being incorporated into that chapter also apply to the migrant population, as the target text states clearly.

Each country has a wide range of possibilities at its disposal for formulating the content of indicator F.3 (adapted from indicator 10.7.2 of the SDGs, International Migration Policy Index).

Efforts have been made to emphasize the original purpose of the chapter and its priority measures, namely addressing international migration issues through regulations, policies and agreements between countries with a long-term view, focused on protecting the human rights of migrants (which by definition includes not only combating discrimination, but also addressing human trafficking and migrant smuggling, irregular migration, asylum seeking and asylum) without distinction as to migration condition or status.

The influence of employment on migratory movement and its associated dimensions, which range from gender, childhood and adolescence to return flows, emigration and immigration, should be acknowledged, as well as the different forms of mobility related to these dimensions.

The indicators are based on the international human rights framework, regional consensuses (which include the participation of civil society) and the general proposals of the 2030 Agenda for Sustainable Development, as well as the Brazil Declaration, “A Framework for Cooperation and Regional Solidarity to Strengthen the International Protection of Refugees, Displaced and Stateless Persons in Latin America and the Caribbean” (2014).

Indicator	
F.1	Ratification and application by the country of the International Convention on Protection of the Rights of All Migrant Workers and Members of Their Families (<i>Operational guide</i> indicator 67.1).
F.2	Number of laws and measures in place to prevent and combat discrimination against migrants (<i>Operational guide</i> indicator 67.6).
F.3	The country has applied migration policies based explicitly on rights protection.
F.4	Remittance costs as a proportion of the amount remitted (SDG indicator 10.c.1).

Indicator	
F.5	Percentage and number of direct beneficiaries covered by the Ibero-American Multilateral Convention on Social Security in each destination country, in relation to the total number of immigrant workers in the labour force (adapted from indicator 69.1 of the <i>Operational guide</i>).
F.6	Number (and relative share) of unaccompanied children and adolescents among migrants (indicator 72.1 of the <i>Operational guide</i>).
F.7	Number (and relative share) of prophylactic treatments for sexually transmitted infections and provisions of emergency contraception for immigrant women (adapted from indicator 72.3 of the <i>Operational guide</i>).
F.8	Number of consultations provided to returnees and emigrants each year, by type of initiative (adapted from indicator 70.2 of the <i>Operational guide</i>).
F.9	Number of victims of human trafficking per 100,000 population, by sex, age and form of exploitation (SDG indicator 16.2.2).

Metadata

Indicator F.1 (Operational guide 67.1)

Ratification and implementation by the country of the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families.

Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 20, 67, 70, 72, 85 and 88

Related indicator(s): C.1, H.1, H.8

Definition:

The country has ratified and implemented the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families. The indicator should be broken down into: (a) the country has ratified the Convention, and (b) the country has implemented the Convention.

Source:

Public information is available for item (a). For item (b) national reports to the treaty body may be used. The available metadata correspond to the OHCHR record: http://tbinternet.ohchr.org/_layouts/treatybodyexternal/TBSearch.aspx?Lang=en&TreatyID=7&DocTypeID=45&DocTypeID=29.

Disaggregations:

Not applicable.

Notes:

The national reports to the treaty body are voluntary, but they objectively express the implementation status of the convention's precepts. When reviewing such reports, the recommendations of the treaty committee should be checked. It must be recalled that the Convention refers to immigrants and emigrants.

Indicator F.2 (Operational guide 67.6)

Number of laws and measures in place to prevent and combat discrimination against migrants.

Relevant priority measure(s) of the Montevideo Consensus: 1, 2 and 67

Related indicator(s): A.19, A.20, D.19, D.20

Definition:

Refers to the number of legislative and administrative or policy measures that explicitly seek to prevent, combat and punish discrimination against migrants.

Source:

The basic information sources are contained in the laws and regulations of each country, official reports, public reports, studies, registers and policy observatories.

Disaggregations:

Not applicable.

Notes:

The aim is to identify the existence of initiatives targeting immigrants, whether or not related to those targeting other population groups.

Indicator F.3

The country has applied migration policies based explicitly on rights protection.

Relevant priority measure(s) of the Montevideo Consensus: 4, 67, 68, 70, 72 and 74

Related indicator(s): A.23

Definition:

The country applies policies aimed at the eradication of human trafficking and migrant smuggling, irregular migrant status, and the creation and implementation of protocols to deal with the migration of unaccompanied children and adolescents.

Source:

The basic information sources are the laws and regulations of each country, official reports, public reports, studies, registers and policy observatories.

See under Notes.

Disaggregations:

Not applicable.

Notes:

This indicator is adapted from SDG indicator 10.7.2.

This indicator can also be based on the metadata of indicator F.1. An explicit human-rights-based migration policy is defined most directly in the adoption of international instruments and obligations.

The SDG indicator speaks of “well-managed migration policies”, but the countries in the region explicitly recognize the rights approach.

The metadata of the SDG indicator itself will be available at:

- <http://unstats.un.org/sdgs/metadata/>.

Indicator F.4 (SDG indicator 10.c.1)

Remittance costs as a proportion of the amount remitted.

Relevant priority measure(s) of the Montevideo Consensus: 68

Related indicator(s):

Definition:

(See metadata)

Source:

See under Notes.

Disaggregations:

Not applicable.

Notes:

SDG indicator 10.c says “By 2030, reduce to less than 3 per cent the transaction costs of migrant remittances and eliminate remittance corridors with costs higher than 5 per cent.”

Complete metadata are available at:

- <https://unstats.un.org/sdgs/metadata/files/Metadata-10-0C-01.pdf>.
 - <http://unstats.un.org/sdgs/metadata/>.
-

Indicator F.5 (Operational guide 69.1, adapted)

Percentage and number of direct beneficiaries covered by the Ibero-American Multilateral Social Security Convention in each destination country in relation to the total number of immigrant workers in the labour force.

Relevant priority measure(s) of the Montevideo Consensus: 28 and 69

Related indicator(s): C.2

Definition:

In the case of the percentage, it is the ratio between (i) **numerator:** total number of direct beneficiaries covered by the Ibero-American Multilateral Social Security Convention in each country of immigration, and (ii) **denominator:** total number of migrant workers in the labour force of the country of immigration.

Source:

Metadata with country reports would be available at: <http://www.oiss.org/-Convenio-Multilateral-.html>, and at the competent national institutions or liaison body of each State Party.

Disaggregations:

Those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Indicator F.6 (Operational guide 72.1)

Number (and relative share) of unaccompanied children and adolescents among migrants.

Relevant priority measure(s) of the Montevideo Consensus: 8, 9, 10 and 72

Related indicator(s): B.3

Definition:

Anyone under 18 years of age who is separated from both parents and is not under the care of any adult who is responsible for them by law or custom (United Nations High Commissioner for Refugees, (UNHCR), as well as those who are left alone after entering a country. Children and adolescents in this situation are recognized as unaccompanied foreign minors (UAM).

Their relative presence is calculated on the basis of the populations of nationals of the respective age group of the country of origin, per 100,000 children aged under 18 years.

Source:

Information refers to emigrants and is available from non-governmental and international institutions specializing in asylum and refugee issues (UNHCR, for example). It can also be consulted in migration, refugee and police records, and at civil society reception centres.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

This indicator should be calculated on a provisional basis in each country, with a view to fine-tuning it, to make it regionally comparable. This clarification is needed since the countries of the region have not agreed on care protocols (fifth meeting on Migration of CELAC, Santiago, November 2016) although the Regional Conference on Migration (RCM) has developed guidelines in successive versions (see [online] <http://www.rcmvs.org/Publicaciones/Publicaciones.htm>). Several countries have acceded to the reports of the Homeland Security of the United States, and institutions such as the National Institute of Migration (INAMI) in Mexico are releasing information. Must be calculated annually.

Indicator F.7 (Operational guide 72.3, adapted)

Number (and relative share) of prophylactic treatments for sexually transmitted infections and provisions of emergency contraception for migrant women.

Relevant priority measure(s) of the Montevideo Consensus: 33, 41, 46 and 72

Related indicator(s): D.5

Definition:

Number of specific prophylactic treatments for sexually transmitted infections (STIs) and provisions of emergency contraception for immigrant women.

In the case of relative incidence, the ratio between (i) **numerator:** total number of immigrant women who received prophylactic treatment for STIs and emergency contraception, and (ii) **denominator:** total number of women who received prophylactic treatment for STIs and emergency contraception, per 100,000.

Source:

The information is available in the health service registries of each country and in official reports on the subject.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

This indicator should be calculated using health service records that identify the country of birth and the nationality of the women attended. Must be calculated annually.

Indicator F.8 (Operational guide 70.2, adapted)

Number of consultations provided to returnees and emigrants each year, by type of initiative.

Relevant priority measure(s) of the Montevideo Consensus: 4 and 70

Related indicator(s): A.23

Definition:

Refers to the number of consultations provided to returnee nationals and emigrant nationals residing abroad who are taking part in the country's initiatives. Consultations refer to linking, support and networking initiatives and service provision, among others.

Source:

The information might be available in reports from the foreign ministries and consular services in each country that have pioneered care for returnees and migrants, as well as consular records, reports of returnee programmes and official reports.

Disaggregations:

By country of residence of the emigrant, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

This indicator refers to the number of consultations, not people, and should be based on the sources indicated in each country, in accordance with national reality.

Indicator F.9 (SDG indicator 16.2.2)

Number of victims of human trafficking per 100,000 population, by sex, age and form of exploitation.

Relevant priority measure(s) of the Montevideo Consensus: 72

Related indicator(s): F.19

Definition:

The indicator is defined as the ratio between the total number of victims of trafficking in persons detected or living in a country and the population resident in the country, expressed per 100,000 population.

Source:

See under Notes.

Disaggregations:

Those included in the indicator, plus those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/>.
 - <https://unstats.un.org/sdgs/metadata/files/Metadata-16-02-02.pdf>.
-

Chapter G

Territorial inequality, spatial mobility and vulnerability

This chapter addresses various interrelated themes in which territory plays a significant role, including population development and well-being and access to basic services (G.8, G.15), decentralization (G.1) and citizen participation at the local level (G.4). It also examines citizen security (G.3) and creative leisure (G.4) as ways to prevent social problems. Territorial and urban planning (G.5, G.6 and G.7) are presented from the perspective, on the one hand, of sustainable urban development and the strengthening of city systems and their rural environments (G.11), and, on the other, of preventing and mitigating the impact of socioenvironmental disasters (G.12 and G.13) and environmental vulnerability (G.9 and G.10). All of the above involves the use of georeferenced sociodemographic analysis, disaggregated by specific population groups (G.16) to analyse and follow up on the aforementioned themes.

Some indicators that were being considered for this chapter,¹⁷ related mainly to well-being and inequality, were ultimately included in chapter A. As mentioned earlier, chapter A serves as a sort of “umbrella” compared with the other thematic chapters and their respective indicators for the regional monitoring of the Montevideo Consensus. Chapter A thus sets out the reasons why disaggregation by specific population group is required for certain indicators. Although territorial disaggregation and the specificity of subpopulations are relevant in this chapter, beyond the disaggregation specified in the introductory paragraph of annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators —which represents a minimum or basic level for this proposal— each country can decide the most convenient approach, taking national realities into account.

Some of the indicators proposed here are linked directly to other international instruments, forums and mechanisms, including the 2030 Agenda for Sustainable Development and the Sustainable Development Goals, and the United Nations Conference on Housing and Sustainable Urban Development (Habitat III), which was held in October 2016, and the New Urban Agenda presented on that occasion. It is therefore fundamental to generate synergies with the follow-up and review processes of regional and international initiatives, as the outcomes of other conferences and the review of the indicators associated with them should be linked to the indicators proposed in this chapter.

Indicator	
G.1	Percentage of metropolitan, city or local governments that have information systems and use new technologies in planning and management decisions (indicator 80.4 of the <i>Operational guide</i> , modified).
G.2	Average travel time to work, in minutes (UN-Habitat key indicator 16).
G.3	Percentage of households that report being assaulted, suffering aggression or being the victim of a crime in the past 12 months, by minor administrative division (indicator 79.1 of the <i>Operational guide</i>).
G.4	Percentage of the population participating in community recreational activities, by age group and minor administrative division (indicator 79.3 of the <i>Operational guide</i>).
G.5	Proportion of cities with a direct participation structure of civil society in urban planning and management that operate regularly and democratically (SDG indicator 11.3.2).

¹⁷ For example, number of deaths, missing persons and persons affected by disaster per 100,000 people (SDG indicator 11.5.1).

Indicator	
G.6	Proportion of population living in cities that implement urban and regional development plans integrating population projections and resource needs, by size of city (SDG indicator 11.a.1).
G.7	Percentage of urban and territorial development plans that incorporate the rights, gender and interculturality perspectives (indicator 81.1 of the <i>Operational guide</i>).
G.8	Proportion of urban population living in slums, informal settlements or inadequate housing (SDG indicator 11.1.1).
G.9	Proportion of urban solid waste regularly collected and with adequate final discharge out of total urban solid waste generated, by cities (SDG indicator 11.6.1).
G.10	Annual mean levels of fine particulate matter (e.g. PM2.5 and PM10) in cities (population weighted) (SDG indicator 11.6.2).
G.11	Proportion of the rural population who live within 2 km of an all-season road (SDG indicator 9.1.1).
G.12	Houses in hazardous locations: proportion of housing units built on hazardous locations per 100,000 housing units.
G.13	The country has integrated mitigation, adaptation, impact reduction and early warning through the implementation of multidimensional strategies and policies.
G.14	Percentage of energy generated through sustainable, clean and renewable production processes (adapted from indicator 80.3 of the <i>Operational guide</i>).
G.15	The country has sustainable consumption and production national action plans mainstreamed as a priority or a target in national policies which cover, inter alia, wastewater treatment.
G.16	Percentage of municipal or local master plans that, in their preamble, provide for disaggregated and georeferenced sociodemographic analysis (indicator 84.2 of the <i>Operational guide</i>).

Metadata

Indicator G.1 (Operational guide 80.4, adapted)

Percentage of metropolitan, city or local governments that have information systems and use new technologies in planning and management decisions.

Relevant priority measure(s) of the Montevideo Consensus: 4, 5, 76, 80 and 90

Related indicator(s): A.22

Definition:

Ratio between: (i) **numerator:** all metropolitan, city or local governments (at minor administrative division level) that have information systems and use new technologies in territorial planning and management decisions, and (ii) **denominator:** all metropolitan or city governments or local governments (minor administrative division level), multiplied by 100.

Source:

Registries of the ministries of land management, regional development, cities, planning, housing and/or urban development, national heritage, or national institutes of statistics and geography). Official reports at minor administrative division or city level.

Disaggregations:

Not applicable.

Notes:

Involves information that is not always easy to obtain.

Indicator G.2

(United Nations Human Settlements Programme (UN-HABITAT) key indicator 16: “travel time”)

Average travel time to work, in minutes.

Relevant priority measure(s) of the Montevideo Consensus: 76, 77, 80 and 81

Related indicator(s): G.11

Definition:

Ratio between: (i) **numerator:** sum of all economically active population (EAP) transfer times, and (ii) **denominator:** total EAP that travels to the workplace using some mode of transport.

Source:

Origin-destination surveys.

Disaggregations:

By major administrative divisions (MAD). Where possible, by means of transport as well.

Notes:

This figure is an average for all means of transport.

At the third meeting of the Presiding Officers it was suggested that this indicator would be disaggregated at the MAD level.

Indicator G.3 (Operational guide 79.1)

Percentage of households that report being assaulted, suffering aggression or being the victim of a crime in the past 12 months, by minor administrative division.

Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 56, 57, 58, 76, 77 and 79

Related indicator(s): A.18, A.20, E.12

Definition:

Ratio between: (i) **numerator:** number of households that have been assaulted, suffered aggression or been victims of crime on the past 12 months, and (ii) **denominator:** total number of households, multiplied by 100.

Source:

Victimization surveys.

Disaggregations:

Minor administrative division, sex of the head of household and the disaggregations specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

May include households in which at least one member has been assaulted, while bearing in mind that the indicator is at the household level.

The sources are specialized surveys, such as victimization, that are being conducted in most of the countries of the region. The minimum level of disaggregation requested cannot always be calculated with the information from surveys.

Indicator G.4 (Operational guide 79.3)

Percentage of the population participating in community recreational activities, by age group and minor administrative division.

Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 17, 28, 61, 76 and 79

Related indicator(s):

Definition:

Ratio between: (i) **numerator:** Population that participated in community recreational activities at least once in the last month, and (ii) **denominator:** total population.

Source:

Household surveys, municipal (minor administrative division) register.

Disaggregations:

(a) Age, the following disaggregations are recommended: under 15, 15 to 24, 25 to 39, 40 to 59, 60 years and over, (b) sex, (c) minor administrative division, and those specified in annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2/Rev.1), adopted by the United Nations Statistical Commission at its forty-seventh session (8-11 March 2016).

Notes:

The sources for this indicator are household surveys, which ask about participation. Administrative records of municipalities can also be used, since several of these community recreational activities relate to local government, such as activities carried out for older adults, adults and youth in sports clubs, among others. It is important to set a reference period; the surveys usually ask whether the respondent participated at least once in the last month.

Although the indicator only refers to age as a disaggregation, it is also recommended to include a gender breakdown.

Indicator G.5 (SDG indicator 11.3.2)

Proportion of cities with a direct participation structure of civil society in urban planning and management that operate regularly and democratically.

Relevant priority measure(s) of the Montevideo Consensus: 8, 19, 20, 78, 80, 81, 88 and 96

Related indicator(s): A.22, B.3

Definition:

(No metadata available yet).

Source:

See under Notes.

Disaggregations:

Not applicable.

Notes:

Complete metadata will be available at:

- <http://unstats.un.org/sdgs/metadata/>
-

Indicator G.6 (SDG indicator 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.

Relevant priority measure(s) of the Montevideo Consensus: 4, 5, 18, 19, 20 and 80

Related indicator(s): G.1, A.22, A.24

Definition:

(No metadata available yet).

Source:

See under Notes.

Disaggregations:

Not applicable

Notes:

Complete metadata will be available at:

- <http://unstats.un.org/sdgs/metadata/>
-

Indicator G.7 (Operational guide 81.1)

Percentage of urban and territorial development plans that incorporate the rights, gender and interculturality perspectives.

Relevant priority measure(s) of the Montevideo Consensus: 4, 5, 18, 19, 20, 50, 76, 81, 85, 88 and 96

Related indicator(s): A.17, A.22, A.23, E.1, E.3, H.5, H.8

Definition:

Ratio between: (i) **numerator:** number of urban and territorial development plans that incorporate the rights, gender and interculturality perspective, and (ii) **denominator:** total urban and territorial development plans, multiplied by 100.

Source:

Records of the Ministry of Urban Development.

Disaggregations:

Not applicable. By territories and indigenous communities.

Notes:

In general, the ministries have a register of approved urban and territorial development plans and their characteristics; or, in some cases they have platforms where all of the country's territorial planning instruments are recorded and monitored, at the stage of formulation or modification.

See the glossary for references to a rights, gender and intercultural approach, respectively.

Indicator G.8 (SDG indicator 11.1.1)

Proportion of urban population living in slums, informal settlements or inadequate housing.

Relevant priority measure(s) of the Montevideo Consensus: 1, 5, 18, 76 and 77

Related indicator(s): A.1, A.2, A.3, A.4, A.6, A.17

Definition:

This indicator considers three components to be computed as follows:

- (a) Slum households (SH): = $100[(\text{Number of people living in slum})/(\text{City population})]$.
- (b) Informal settlements households (ISH): = $100[(\text{No. of people living in informal settlements households})/(\text{City population})]$.
- (c) Inadequate housing households (IHH): = $100[(\text{No. of people living in inadequate housing})/(\text{City population})]$.

Source:

See under Notes.

Disaggregations:

Major Administrative Division (MAD).

Notes:

To demonstrate its calculation, the definition of SDG indicator 11.1.1 presented in this record refers to the calculation methodology, which is available in the indicator metadata in the methodology section.

At the third meeting of the Presiding Officers it was suggested that this indicator be disaggregated at the major administrative division level (MAD).

The unit of measurements for all these indicators will be %. At a later stage an index of measurements will be developed that will incorporate all measures and provide one estimate.

The data for this indicator is already being reported in nearly all developing countries in what refers to the slum component. We expect to carry this success, lessons learnt and experiences to the reporting of informal settlements and inadequate housing data for all countries.

Complete metadata are available at:

- <http://unstats.un.org/sdgs/metadata/>.
 - <http://unstats.un.org/sdgs/metadata/files/Metadata-11-01-01.pdf>.
-

Indicator G.9 (SDG indicator 11.6.1)

Proportion of urban solid waste regularly collected and with adequate final discharge out of total urban solid waste generated, by cities

Relevant priority measure(s) of the Montevideo Consensus: 5, 6, 76, 77 and 80

Related indicator(s): A.6

Definition:

In order to generate the proportion of urban solid waste regularly collected and that is adequately discharged out of all the total urban waste generated by the city, there is a need to define the two components that are core to this indicator i.e. what constitutes urban waste and appropriate final discharge.

A two-stage process is proposed for computing this indicator. First, cities will have to monitor the total waste generated by the city. Out of this tonnage, they will have to compute the proportion of the waste that was regularly collected from the various sources that generate city waste.

Solid waste regularly collected = Summation in tonnes of all regularly collected waste for all sources.

Total solid waste generated = Sum of all waste generated by the city or urban area including collected and uncollected solid waste.

At the second stage, cities will have to estimate the proportion of all waste that was regularly collected and was adequately discharged.

Adequately discharged solid waste = Regularly collected Solid waste that is reported as adequately discharged.

Solid waste regularly collected and with adequate final discharge = $100 \left[\frac{\text{Adequately discharged urban solid waste}}{\text{total tonnage of waste generated by the city}} \right]$.

Source:

See under Notes.

Disaggregations:

Cities. It is also recommended to disaggregate by location within the city, and by income groups, sources of waste generation (residential, industrial, and work).

Notes:

To demonstrate its calculation, the definition of SDG indicator 11.6.1 presented in this record refers to the calculation methodology, which is available in the indicator metadata in the methodology section.

Complete metadata are available at:

- <https://unstats.un.org/sdgs/metadata>.
 - <https://unstats.un.org/sdgs/metadata/files/Metadata-11-06-01.pdf>.
-

Indicator G.10 (SDG indicator 11.6.2)

Annual mean levels of fine particulate matter (e.g. PM_{2.5} and PM₁₀) in cities (population weighted)

Relevant priority measure(s) of the Montevideo Consensus: 5, 6, 76 and 80

Related indicator(s):

Definition:

The mean annual concentration of fine suspended particles of less than 2.5 microns in diameters (PM_{2.5}) is a common measure of air pollution. The mean is a population-weighted average for urban population in a country.

Source:

See under Notes.

Disaggregations:

By cities.

Notes:

Complete metadata are available at:

- <https://unstats.un.org/sdgs/metadata>.
 - <https://unstats.un.org/sdgs/metadata/files/Metadata-11-06-02.pdf>.
-

Indicator G.11 (SDG indicator 9.1.1)

Proportion of the rural population who live within 2 km of an all-season road

Relevant priority measure(s) of the Montevideo Consensus: 18, 76, 77, 80 and 81

Related indicator(s): A.17, G.2

Definition:

(No metadata available yet).

Source:

See under Notes.

Disaggregations:

Those included in the indicator, plus those specified under SDG 17.18.

Notes:

Complete metadata will be available at:

- <http://unstats.un.org/sdgs/metadata/>.
-

**Indicator G.12 (United Nations Human Settlements Programme
(UN-Habitat) Extensive Indicator 10)**

Housing in hazardous locations: number of homes built on hazardous locations per 100,000 housing units

Relevant priority measure(s) of the Montevideo Consensus: 5, 76, 77, 81, 82 and 84

Related indicator(s): A.16, A.17

Definition:

Ratio between: (i) **numerator:** houses built in irrigation areas, and, (ii) **denominator:** total housing

Source:

Registries of the ministries of housing and urban development: usually, these sources obtain information through geographic information systems, risk maps or cadastral registries of houses located in hazardous areas. Housing and population census: total housing.

Disaggregations:

Major administrative divisions (MAD).

Notes:

It is necessary to define what is understood by hazardous areas. While the hazard may encompass different areas, flood prone areas (near rivers, sea or other waterways), areas close to volcanoes (whether or not active), areas close to mine tailings, areas located near or over a tectonic fault, eroded areas, areas near zones of high or medium fire hazard (forests).

Indicator G.13

The country has integrated mitigation, adaptation, impact reduction and early warning through the implementation of multidimensional strategies and policies.

Relevant priority measure(s) of the Montevideo Consensus: 4, 5,6, 24, 76, 81 and 82

Related indicator(s):

Definition:

(No metadata available yet).

Source:

See under Notes.

Disaggregations:

Not applicable.

Notes:

This indicator is adapted from SDG indicator 13.3.1.

Complete metadata will be available at:

- <http://unstats.un.org/sdgs/metadata/>.

The recommended strategies could include incorporating these issues in primary, secondary and tertiary curricula and training workers on emergency prevention and response.

Indicator G.14 (Operational guide 80.3, adapted)

Percentage of energy generated through sustainable, clean and renewable production processes.

Relevant priority measure(s) of the Montevideo Consensus: 5, 6, 76, 77, 80 and 83

Related indicator(s):

Definition:

Ratio between: (i) **numerator:** consumption and production of sustainable, clean and renewable energies, and (ii) **denominator:** total final energy supply and production. The percentage of sustainable, clean and renewable sources of electricity is that generated from renewable energies divided by total electricity use.

Energy use is measured in terms of heat content based on specific net calorific values (NCV).

Source:

Data needed to compile the indicator: total primary energy supply (TPES), total final consumption (TFC) and total power generation and generation capacity. Primary energy from renewable sources, power generation and generation capacity from sustainable, clean and renewable energy modalities.

Data on fuel-disaggregated energy supply is obtained from statistical yearbooks on energy from National statistical institutes and country publications, and from a number of international sources, such as the International Energy Agency (IEA), the World Bank and Eurostat.

Disaggregations:

Major administrative divisions (MAD).

Notes:

It was suggested that this indicator be disaggregated at the level of major administrative divisions (MAD).

This indicator considers non-conventional renewable energy (NCRE).

The original wording of the indicator was altered following a suggestion to express it in a general way so as to include other forms of energy generation.

This indicator measures the percentage of renewable energy sources in TPES, TFC, and in power generation and generation capacity.

Renewable energy sources include both combustible and non-combustible materials.

Shortcomings of the indicator: In some developing countries, the difficulty of obtaining data on certain renewable sources can be a limitation.

For more information check the following link:

- http://www-pub.iaea.org/MTCD/publications/PDF/Pub1222s_web.pdf.
-

Indicator G.15

The country has sustainable consumption and production national action plans mainstreamed as a priority or a target in national policies which cover, inter alia, wastewater treatment.

Relevant priority measure(s) of the Montevideo Consensus: 6, 76, 80 and 83

Related indicator(s): A.6

Definition:

Existence of sustainable consumption and production national action plans mainstreamed as a priority or a target in national policies which cover, inter alia, wastewater treatment.

Source:

See under Notes.

Disaggregations:

Major administrative divisions (MAD).

Notes:

It was suggested that this indicator be disaggregated at the level of major administrative divisions (MAD). This indicator is adapted from SDG indicator 12.1.1.

Complete metadata will be available at:

- <http://unstats.un.org/sdgs/metadata/>.
-

Indicator G.16 (Operational guide 84.2)

Percentage of municipal or local master plans that, in their preamble, provide for disaggregated and georeferenced sociodemographic analysis.

Relevant priority measure(s) of the Montevideo Consensus: 4, 6, 76, 84, 88, 90 and 98

Related indicator(s): G.1, A.24, A.23, H.14

Definition:

Ratio between, (i) **Numerator:** number of municipal or local master plans that, in their preamble, provide for disaggregated and georeferenced sociodemographic analysis, and (ii) **denominator:** total number of municipal or local master plans.

Source:

Records of the Ministry of Urban Development.

Disaggregations:

Not applicable.

Notes:

Ministries usually have a record of approved community regulatory plans and their characteristics; or in some cases they have platforms where the monitoring of all of the country's Territorial Planning Instruments are recorded, at the stage of formulation or modification.

Chapter H

Indigenous peoples: interculturalism and rights

The proposed indicators have been defined in the framework of the United Nations Declaration on the Rights of Indigenous Peoples and the Indigenous and Tribal Peoples Convention, 1989 (No. 169) of the International Labour Organization (ILO). The indicators should be calculated for the indigenous population as a whole, in keeping with the emphasis placed on the collective rights of indigenous peoples, but should also be disaggregated by indigenous group or ethno-linguistic community.

The implementation of the priority measures of the Montevideo Consensus on Population and Development should combine collective rights and individual rights, shedding light on the specific situation of indigenous boys and girls, young people, women, older persons and persons with disabilities. For this reason, the indicators of all chapters should be disaggregated for the indigenous population in accordance with the variables established in the introductory paragraph of annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators (sex, age and others).

In particular, all of the indicators in chapter A should be disaggregated. Indicator A.3 on poverty in all its dimensions provides an opportunity to define a complementary indicator that takes indigenous cosmovisions into account. Indicators A.15 and A.16 should take indigenous territories into consideration, and indicator A.17 should examine indigenous peoples and communities. These three indicators are crucial to the follow-up of territorial rights included in priority measure 88 of the Montevideo Consensus.

Given that the Montevideo Consensus highlights the situation of boy and girls, young people and women with respect to the right to health and a life free from violence, disaggregation based on indigenous condition, sex and age of the indicators in chapters B, D and E is particularly important. Specifically, indicator B.1 (on the under-five mortality rate) and D.8 (on maternal mortality) clearly show the urgent need to include the identification of indigenous persons in vital statistics and health records. Strengthening data sources to include the identification of indigenous peoples and individuals is one of the main challenges facing the region in terms of developing the proposed indicators.

Indicator	
H.1	Ratification of Convention 169 on the Rights of Indigenous and Tribal Peoples of the International Labour Organization.
H.2	Existence of laws, decrees or other legal documents that recognize the rights included in the United Nations Declaration on the Rights of Indigenous Peoples.
H.3	Existence of national planning tools to integrate population and indigenous peoples' issues into development plans, in accordance with legal standards concerning indigenous peoples.
H.4	Existence of participation platforms between the State and indigenous peoples that include population issues, in compliance with international standards.
H.5	Percentage of projects of extractive-industry or other major investment projects subject to prior, free and informed consultation of indigenous peoples and which have their consent.
H.6	Percentage of the public budget earmarked/executed for actions aimed at guaranteeing the rights of indigenous peoples, by sector (indicator 86.1 of the <i>Operational guide</i> , modified).

Indicator	
H.7	Number of indigenous peoples or communities at risk of extinction (indicator 86.2 of the <i>Operational guide</i>).
H.8	Percentage of the indigenous population displaced from their territories.
H.9	Existence of a health policy or programmes compliant with international standards for the right to health of indigenous peoples, including sexual and reproductive rights.
H.10	Existence of intercultural sexual and reproductive health services, including preventive measures and culturally and linguistically relevant information (indicator 87.5 of the <i>Operational guide</i>).
H.11	Percentage of relevant data sources that include indigenous self-identification, including censuses, surveys and administrative records in the different sectors.
H.12	Existence of mechanisms that guarantee the full participation of indigenous peoples in the production of official statistics.
H.13	Number and percentage of indigenous experts (male and female) working on information production and analysis in government offices.
H.14	Existence of culturally and linguistically relevant information systems.
H.15	Presence of representatives of indigenous peoples in national delegations participating in relevant intergovernmental decision-making.
H.16	Proportion of seats held by indigenous people in national parliaments and local governments.

Metadata

Indicator H.1

Ratification of Convention 169 on the Rights of Indigenous and Tribal Peoples of the International Labour Organization

Relevant priority measure(s) of the Montevideo Consensus: 85. Given that measure 85 refers to respecting and applying the Declaration of the Rights of Indigenous Peoples and ILO Convention No. 169, all the measures under the Consensus that specifically refer to indigenous peoples under the standards of these instruments contribute to achieving it.

Related indicator(s): all the Consensus indicators that can be disaggregated for indigenous individuals and peoples contribute to following up priority measure 85.

Definition:

Ratification of Convention 169 on the Rights of Indigenous and Tribal Peoples of the International Labour Organization (ILO, 1989).

Source:

ILO, the following link shows whether or not the country has ratified Convention 169: http://www.ilo.org/dyn/normlex/en/f?p=NORMLEXPUB:11300:0::NO::P11300_INSTRUMENT_ID:312314.

Disaggregation:

Not applicable.

Notes:

As of March 2017, 15 of the 22 countries that have ratified ILO Convention 169 belong to the region. As the processes for implementing the Convention are at different stages in each country, the indicator should be complemented by qualitative information on the progress made.

Indicator H.2

Existence of laws, decrees or other legal documents that recognize the rights included in the United Nations Declaration on the Rights of Indigenous Peoples.

Relevant priority measure(s) of the Montevideo Consensus: 1, 2 and 85

Related indicator(s): H.1 and its respective comments, A.17

Definition:

List of laws, decrees or other legal documents recognizing the rights included in the United Nations Declaration on the Rights of Indigenous Peoples.

Source:

The information is contained in the legislation of each country and should be included in the national reports.

Disaggregation:

At the national and subnational level (in the case of federal countries).

Notes:

Information can be reinforced by consulting government institutions responsible for indigenous peoples' affairs in each country.

Indicator H.3

Existence of national planning tools to integrate population and indigenous peoples' issues into development plans, in accordance with legal standards concerning indigenous peoples.

Relevant priority measure(s) of the Montevideo Consensus: 2, 3, 85 and 86

Related indicator(s): A.21, A.22, A.23, A.24, A.25, observing the inclusion of indigenous people explicitly.

Definition:

Existence of one or more national planning tools to integrate population and indigenous peoples' issues into development plans, which explicitly consider free, prior and informed consent and the right to self-development.

Source:

Agency responsible for indigenous peoples' affairs, or another relevant agency. The information should be included in the national reports.

Disaggregation:

Not applicable.

Notes:

Should be complemented by a qualitative review of existing planning tools in key areas, such as the allocated budget (total and relative to the percentage of indigenous population), inclusion of specific actions for endangered peoples and territorial rights.

Indicator H.4

Existence of participation platforms between the State and indigenous peoples that include population issues, in compliance with international standards.

Relevant priority measure(s) of the Montevideo Consensus: 2, 3, 85 and 86

Related indicator(s): H.3; A21, A22, A23, A24, A25, observing the inclusion of indigenous people explicitly.

Definition:

Existence of mechanisms for substantive participation between the State and indigenous peoples that explicitly include population issues and recognize the collective rights of indigenous peoples.

Source:

The information is contained in the legislation of each country and should be included in the national reports.

Disaggregation:

National and subnational level.

Notes:

Substantive participation means that indigenous peoples participate in the entire cycle of public policies that affect them. The right to participation is enshrined in ILO Convention 169 (arts. 6 and 7) and in the United Nations Declaration on the Rights of Indigenous Peoples (art. 18).

Information can be reinforced by consulting government institutions responsible for indigenous peoples' affairs and indigenous organizations in each country.

Indicator H.5

Percentage of projects of extractive-industry or other major investment projects subject to prior, free and informed consultation of indigenous peoples and which have their consent.

Relevant priority measure(s) of the Montevideo Consensus: 5, 6, 85 and 88

Related indicator(s): H.2 and H.8; A.16, A.17 and G.7, wherever disaggregation by territory and indigenous community is included.

Definition: Ratio between: (i) **numerator:** total number of extractive-industry or other major investment projects that were subject to prior free, informed and informed consultation of indigenous peoples, and (ii) **denominator:** total number of extractive-industry or other major investment projects that affect indigenous peoples.

Source:

Information may be provided by the institutions responsible for indigenous peoples' affairs or other relevant bodies in each country. It should be included in the national reports.

Disaggregation:

National level and by indigenous territories or communities.

Notes:

Some countries have developed databanks on socioenvironmental conflicts that can reinforce or complement the information needed to calculate the indicator. For example, in Chile, the National Institute of Human Rights developed the interactive website "Mapa de conflictos socioambientales en Chile" [Map of socioenvironmental conflicts in Chile], which records current conflicts and those that have been resolved, with a description of the stakeholders involved, the rights at stake, the causes of conflict and the profile of the community (further detail at <http://www.indh.cl/mapadeconflictos>). In the case of Argentina, Amnesty International developed a website with similar characteristics, with a typology of conflicts based on: territorial, environmental, violence, eviction, legal status, criminalization, case-study groups. This can be consulted at <http://www.territorioindigena.com.ar/>. At the regional level, the Latin American Observatory of Environmental Conflicts contains detailed information by country, which can be viewed at <http://www.olca.cl/oca/index.htm>.

Indicator H.6. (86.1 Operational guide, modified)

Percentage of the public budget earmarked/executed for actions aimed at guaranteeing the rights of indigenous peoples, by sector.

Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 85 and 86

Related indicator(s): A.7

Definition: Ratio between (i) **numerator:** public expenditure for actions to guarantee the rights of indigenous peoples, and (ii) **denominator:** total public expenditure (per cent).

Source:

Information may be provided by institutions responsible for indigenous peoples' affairs or other relevant bodies in each country. It should be included in the national reports.

Disaggregation:

By sector (at minimum: health, education, social security, territorial development and indigenous peoples in voluntary isolation) and by indigenous peoples or communities.

Notes:

The United Nations Population Fund (UNFPA) published methodologies for estimating public spending on youth, which represents an opportunity to develop a viable and comparable methodology among the countries of the region. It is based on Damián Bonari (2014 and 2015), *Desarrollo de una propuesta de metodología para la medición del gasto público dirigido a adolescencia y juventud en los países de América Latina*; [Development of a methodology proposal for the measurement of public expenditure targeting adolescence and youth in the countries of Latin America]; and, *Medición del gasto público dirigido a la adolescencia y juventud en los países de América Latina. Nota técnica* [Measuring public expenditure for adolescents and youth in Latin American countries. Technical Note] "(UNFPA-LACRO 008/2014). The feasibility of calculating the indicator with the earmarked and executed budget must be reviewed.

Indicator H.7 (86.2 Operational guide)

Number of indigenous peoples or communities at risk of extinction.**Relevant priority measure(s) of the Montevideo Consensus:** 85, 86 and 88**Related indicator(s):** H.2, H.3, H.4 and H.6, with the observation that peoples or communities at risk of extinction are considered.**Definition:**

Number of indigenous peoples or communities at risk of extinction

Source:

Depends on the methodology adopted to establish whether a people is at risk of extinction. If this is done through the demographic factor, population censuses can be used, provided they include questions identifying indigenous peoples. If socioenvironmental and territorial vulnerability factors are also considered, the sources will vary and could be provided by the institutions responsible for indigenous peoples' affairs or other relevant agencies of each country, and also by registries of indigenous organizations. Once comparable criteria have been agreed upon, they should be included in the national reports.

Disaggregation:

By indigenous people or community.

Notes:

To calculate the indicator, criteria should be agreed on for determining whether an indigenous people or community is at risk of extinction, and the corresponding methodology. For example, risk of extinction could be determined by demographic criteria alone (considering population size, age and sex structure, reproduction rates and mortality levels), or else by including criteria to identify socioenvironmental and territorial vulnerability, such as forced displacement, food, water pollution, soil degradation, malnutrition, to name a few, which would further complicate the calculation of the indicator. The indicator could also be complemented by one tracking indigenous languages at risk of extinction. Agreements on these issues should be reached in conjunction with indigenous peoples' organizations.

Indicator H.8

Percentage of the indigenous population displaced from their territories.

Relevant priority measure(s) of the Montevideo Consensus: 85 and 88

Related indicator(s): F.1, H.2 y H.5; A.16, A.17 and G.7, providing that disaggregation is included for indigenous territories and communities.

Definition:

Ratio between (i) **numerator:** size of indigenous population displaced from its territory, and (ii) **denominator:** total indigenous population (per cent).

Source:

Information may be provided by the institutions responsible for indigenous peoples' affairs or other relevant bodies in each country. It should be included in the national reports.

Disaggregation:

By type of displacement (investment projects, violence, pollution and land degradation, among others).

Notes:

The indicator should be built considering indigenous territoriality, beyond the boundaries established by land titling or administrative processes within each country and even across national border. Population censuses can provide some information on this topic, since some countries in the region include a question about the cause of recent migration, with displacement being one of the options. It is also necessary to review the administrative records that exist, to collect basic information and the ethnic identification included in such records. In Colombia, for example, the Unified Victims Register classifies the act of victimization, including abandonment or forced dispossession of land, and also ethnic identification, which makes it possible to disaggregate the information for indigenous people. Further details at <http://rni.unidadvictimas.gov.co/RUV>). With respect to the denominator, the population estimates derived from the census are crucial.

Indicator H.9

Existence of a health policy or programmes compliant with international standards on the right to health of indigenous peoples, including sexual and reproductive rights.

Relevant priority measure(s) of the Montevideo Consensus: 7, 12, 26, 33, 37, 38, 39, 40, 43, 44, 46, 78, 85 and 87

Related indicator(s): A.8, A.9, A.10, B.1, B.10, B.13, B.15, D.1, D.3, D.5, D.6, D.7, D.8, D.9, D.11, D.13, D.15, D.16, D.17, D.18, D.21, H.10. When the indicator refers to persons or individuals, it means that disaggregation should be done for indigenous people—male and female children, women and men— considering specific age groups where appropriate. When the indicator refers to the supply of services or the existence of laws, policies and programmes, it is necessary to verify the explicit inclusion of indigenous peoples and coherence with rights standards, especially with cultural integrity rights.

Definition:

Existence of health policies or programmes, including sexual and reproductive rights that explicitly promote collective rights.

Source:

Ministry of Health and institutions responsible for indigenous peoples' affairs. The information should be included in the national reports.

Disaggregation:

At national and subnational levels.

Notes:

The dimensions of compliance with international standards on collective rights are: ensuring universal and quality access to health care for the indigenous population; the provision of intercultural health services, particularly sexual and reproductive health services; implementation of preventive and informative actions with cultural and linguistic relevance; promotion and reinforcement of traditional indigenous practices integrated into the national health system; participation by indigenous peoples in health management; existence of health information systems capable of capturing the morbidity and mortality profiles of indigenous peoples, and the budget allocation according to the requirements. Accordingly, to develop the methodology for this indicator, the following at least must be agreed: (1) what criteria will be used to decide whether the policy meets the standard in each of the dimensions mentioned; (2) although there is an indicator that suggests two alternatives—"exists" and "does not exist"—possibly at least three options should be considered ("does not exist", "partially complies" or "fully complies with standards") and/or an index on the subject should be constructed. Agreements on these issues should be reached in conjunction with indigenous peoples' organizations.

Indicator H.10 (Operational guide 87.5)

Existence of intercultural sexual and reproductive health services, including preventative measures and culturally and linguistically relevant information.

Relevant priority measure(s) of the Montevideo Consensus: 7, 12, 26, 33, 37, 38, 39, 40, 43, 44, 46, 78, 85 and 87

Related indicator(s): A.8, A.9, A.10, B.1, B.10, B.13, B.15, D.1, D.3, D.5, D.6, D.7, D.8, D.9, D.11, D.13, D.15, D.16, D.17, D.18, D.21, H.9. When the indicator refers to persons or individuals, it means that disaggregation should be done for indigenous people—male and female children, women and men— considering specific age groups where appropriate. When the indicator refers to the supply of services or the existence of laws, policies and programmes, it is necessary to verify the explicit inclusion of indigenous peoples and coherence with rights standards, especially with cultural integrity rights.

Definition:

Existence of intercultural sexual and reproductive health (SRH) services that include culturally and linguistically relevant prevention and information measures.

Source:

Ministry of Health and institutions responsible for indigenous peoples' affairs. The information should be included in the national reports.

Disaggregation:

National and subnational (indigenous territories and major and minor administrative areas with a large proportion of indigenous peoples).

Notes:

The definition of the indicator should be revised, to make it meaningful and sensitive to the changes, which would not be the case if it merely said “exist - do not exist” (at least one in the whole country?). A simple alternative would be to specify “geographic areas” (such as municipalities, boroughs) that have indigenous populations and define the indicator as the percentage of geographic areas with indigenous population that have intercultural SRH services and culturally and linguistically relevant prevention and information measures (numerator: total number of geographic areas with indigenous populations that have at least one intercultural SRH service, denominator: total number of geographic areas with indigenous populations).

Indicator H.11

Percentage of relevant data sources that include indigenous self-identification, including censuses, surveys and administrative records in the different sectors

Relevant priority measure(s) of the Montevideo Consensus: 4, 85 and 90

Related indicator(s): A.25, H.12, H.13, H.14

Definition:

Ratio between: (i) **numerator:** number of data sources of the national statistical system that include indigenous identification, and (ii) **denominator:** total number of data sources of the national statistical system (per cent).

Source:

National statistical institutes and the statistical units of the sectoral ministries (health, education, housing, among others).

Disaggregation:

Data sources or specific statistical operations (see under Notes).

Notes:

This indicator is fundamental since it reflects the spirit of SDG 17.18 to provide, by 2020, timely and quality data with an ethnicity and race breakdown. In order to determine who is indigenous in the statistical data, there is an international consensus that self-identification should be used, establishing categories that make sense to indigenous people, including different varieties of self-denomination. Other elements of indigenous identity, such as language or territoriality, are important for characterizing (but not for quantifying) indigenous peoples, so it is important to evaluate the feasibility of including such variables, for each data source (Del Popolo and Schkolnik, 2013 <http://www.cepal.org/es/publicaciones/37682-notas-poblacion-vol40-ndeg-97> and ECLAC, 2009 <http://www.cepal.org/es/publicaciones/6940-censos-2010-la-inclusion-enfoque-etnico-construccion-participativa-pueblos>).

A minimum set of data sources needs to be defined for the indicator to be comparable at the regional level, including population and housing censuses, agricultural censuses, surveys of living conditions (income, employment, multipurpose, among others), demographic and health surveys, vital records, continuous records of health, education, housing, and other continuous records that constitute the primary data source for other indicators of the Montevideo Consensus and the 2030 Agenda. The indicator can also be calculated for specific statistical operations, such as the percentage of continuous household surveys that include indigenous self-identification.

Indicator H.12

Existence of mechanisms that guarantee the full participation of indigenous peoples in the production of official statistics.

Relevant priority measure(s) of the Montevideo Consensus: 4, 85 and 90

Related indicator(s): H.11, H.13, H.14

Definition:

Existence of a mechanism at the national level that guarantees full participation by indigenous peoples in the production of official statistics.

Source:

National Institute of Statistics; should be included in the national reports.

Disaggregation:

Not applicable.

Notes:

The criteria used to operationally define “full participation” need to be agreed on. Nonetheless, the spirit of this indicator is that it can be reported if the mechanism considers deliberative participation, in other words if it enables representatives of indigenous peoples to make decisions. Participation must be at all stages, from the design of instruments to the collection, processing and analysis of the data. These conceptual and operational agreements should be defined in conjunction with indigenous peoples’ organizations.

Indicator H.13

Number and percentage of indigenous experts (male and female) working on information production and analysis in government offices.

Relevant priority measure(s) of the Montevideo Consensus: 4, 85 and 90

Related indicator(s): H.11, H.12, H.14

Definition:

- (1) Number of indigenous experts (male and female) working on the production and analysis of information in government offices.
- (2) Ratio between: (i) **numerator:** number of indigenous experts (male and female) working on the production and analysis of information in government offices, and (ii) **denominator:** total number of experts (male and female) working on the production and analysis of information in government offices (per cent).

Source:

National statistical institutes and the statistical units of the sectoral ministries (health, education, housing, etc.).

Disaggregation:

Government entities agreed on and by area of work or speciality.

Notes:

Government entities responsible for the data sources identified in indicator H.11 should be considered, starting with the national statistical institutes. The concept of “expert” also remains to be defined.

Indicator H.14

Existence of culturally and linguistically relevant information systems.

Relevant priority measure(s) of the Montevideo Consensus: 4, 85 and 90

Related indicator(s): H.11, H.12, H.13, G.1, G.16

Definition:

Existence of culturally and linguistically relevant information systems.

Source:

Statistical institutes, agencies responsible for indigenous people's affairs.

Disaggregation:

Type of "relevance".

Notes:

Operational criteria need to be agreed on for measuring cultural and linguistic relevance. Nonetheless, the spirit of this indicator is that indigenous cosmovisions are taken into account in the conceptual and operational definitions of information systems, and not merely the translation into indigenous languages of conventional information reflecting hegemonic ideologies and concepts. These agreements should be reached in conjunction with indigenous peoples' organizations. The disaggregation proposed by "type of relevance" may include categories.

Indicator H.15

Presence of representatives of indigenous peoples in national delegations participating in relevant intergovernmental decision-making.

Relevant priority measure(s) of the Montevideo Consensus: 91

Related indicator(s): H.4

Definition:

Presence of indigenous representatives in national delegations participating in intergovernmental decision-making in a given period.

Source:

Official reports or protocols of the intergovernmental bodies or secretariats of the delegations.

Disaggregation:

Not applicable.

Notes:

To measure the indicator, the intergovernmental mechanisms to be considered must be agreed upon, namely:

- All intergovernmental bodies and conferences in which the country is a party and has the right to vote (this would exclude countries with observer status only)
- All intergovernmental organizations and conferences of the United Nations system in which the country is a party and has the right to vote (restriction in relation to the body).
- All Latin American (or American) intergovernmental organizations and conferences in which the country participates and has the right to vote (geographical limitation, for example, only OAS, ECLAC, etc.)

If the criterion adopted is to consider various intergovernmental mechanisms, it may be more appropriate to define an indicator on this scale and in relative terms, such as the percentage of intergovernmental mechanisms with indigenous representatives in national delegations. To ensure equitable participation by indigenous peoples in intergovernmental mechanisms, their participation should be guaranteed ex ante, for example throughout the national political process that is used to make up the delegations.

Indicator H.16

Proportion of seats held by indigenous people in national parliaments and local governments.

Relevant priority measure(s) of the Montevideo Consensus: 85

Related indicator(s): H.2, observing the legislation regarding quotas or other laws on political participation; E.6

Definition:

The proportion of seats held by indigenous people in (a) national parliaments, currently as at 1 February of reporting year, is currently measured as the number of seats held by indigenous people members in single or lower chambers of national parliaments, expressed as a percentage of all occupied seats (adaptation of SDG indicator 5.5.1 referring originally to women).

Source:

See “Notes”.

Disaggregation:

By sex.

Notes:

SDG Indicator 5.5.1 was defined for women and adapted here for indigenous people. There is data and information on the proportion of seats held by women in national parliaments, but there is no established methodology for the proportion of seats held by women in local governments. Some methodological issues related to the measurement of the indicator are contained in a preliminary version of the metadata of March 2016. Further information at:

- <https://unstats.un.org/sdgs/metadata/files/Metadata-05-05-01a.pdf>
 - <https://unstats.un.org/sdgs/files/metadata-compilation/Metadata-Goal-5.pdf>
-

Chapter I

Afrodescendants: rights and combating racial discrimination

The proposed indicators have been defined in the framework of international human rights instruments, primarily the International Convention on the Elimination of All Forms of Racial Discrimination and the Durban Declaration and Programme of Action of the World Conference against Racism, Racial Discrimination, Xenophobia and Related Intolerance.

Indicators for all chapters of the Montevideo Consensus on Population and Development must be disaggregated to take into account Afrodescendent persons, in accordance with the introductory paragraph of annex IV to the Report of the Inter-Agency and Expert Group on Sustainable Development Goal Indicators, with a view to shedding light on the particular situation of Afrodescendent boys, girls, young people, women, older persons and persons with disabilities.

All the indicators in chapter A must be disaggregated, but indicators A.1 to A.5, A.7 to A.14 and A.17 to A.21, in particular, must be disaggregated by ethnic and racial background and by sex in order to reveal the extent to which inequalities overlap.

Given the focus of the Consensus on the situation of boys, girls, young people and women with regard to the rights to health and to a life free from violence, the disaggregation by race and ethnicity, sex and age of the indicators set out in chapters B, D and E is particularly important. Specifically, indicator B.1 (on child mortality), D.8 (on maternal mortality) and D.14 (on care in childbirth) clearly point to the urgent need to include the identification of Afrodescendants in vital statistics and health records. Strengthening data sources to include ethnic and racial identification is one of the main challenges facing the region in terms of developing the proposed indicators.

Indicator	
I.1	Existence of a State policy, plan or strategy that includes the provisions of the Durban Declaration and Programme of Action.
I.2	Existence of a national mechanism governing racial equality policies.
I.3	Percentage of the public budget earmarked/executed for actions aimed at guaranteeing the rights of the Afrodescendent population, by sector, and percentage allocated to a governing institution on Afrodescendent affairs.
I.4	Existence of intercultural sexual and reproductive health services, including preventive measures and culturally and linguistically relevant information.
I.5	Percentage of relevant data sources that include self-identification of Afrodescendants, such as censuses, surveys and administrative records in the different sectors.
I.6	Existence of mechanisms that guarantee Afrodescendants' full participation in the production of official statistics.
I.7	Number and percentage of Afrodescendent experts (male and female) working on information production and analysis in government offices.
I.8	Proportion of seats held by Afrodescendent people in national parliaments and local governments.

Metadata

Indicator I.1

Existence of a State policy, plan or strategy that includes the provisions of the Durban Declaration and Programme of Action.

Relevant priority measure(s) of the Montevideo Consensus: 92; all the measures of the Consensus that specifically consider Afrodescendent persons contribute to achieving this priority measure. In countries where Afrodescendent populations are recognized as “peoples”, the priority measures under chapter H also apply.

Related indicator(s): all indicators under the Consensus that can be disaggregated for Afrodescendent persons contribute to following up priority measure 92.

Definition:

Existence of a State policy, plan or strategy that includes the promotion and implementation of the provisions of the Durban Declaration and Programme of Action.

Source:

Agency in charge of Afrodescendent or other relevant issues. The information should be included in the national reports.

Disaggregation:

Not applicable.

Notes:

The indicator should be complemented by a qualitative review of the policy, plan or strategy in some key areas, such as the budget assigned (total and relative to the percentage of Afrodescendent population), participation by Afrodescendants in the definition and execution of the policy, plan or strategy and the areas it covers. To define the indicator’s operational criteria see:

- Durban Declaration and Programme of Action at https://www.un.org/es/events/pastevents/cmcr/durban_sp.pdf, and
- World Conference against Racism held in Durban: <https://www.un.org/es/events/pastevents/cmcr/>.

It is also important to consider the provisions of the International Decade for People of African Descent (2015-2024), which was declared by the United Nations after the adoption of the Montevideo Consensus.

Indicator I.2

Existence of a national mechanism governing racial equality policies.

Relevant priority measure(s) of the Montevideo Consensus: 92 and 93

Related indicator(s): I.3 (observing the budget allocated to the mechanism).

Definition:

Existence of a mechanism directed by a State organization, agency or department that guarantees the promotion, application and monitoring of racial equality policies.

Source:

Ministry or body responsible for coordinating said mechanism.

Disaggregation:

Not applicable.

Notes:

Useful reference: Chapter III of the Durban Declaration and Programme of Action, on prevention, education and protection aimed at the eradication of racism, racial discrimination, xenophobia and related intolerance at the national, regional and international levels: Durban Declaration and Programme of Action: https://www.un.org/es/events/pastevents/cmcr/durban_sp.pdf.

Indicator I.3

Percentage of the public budget earmarked/executed for actions aimed at guaranteeing the rights of the Afrodescendent population, by sector, and percentage allocated to a governing institution on Afrodescendent affairs.

Relevant priority measure(s) of the Montevideo Consensus: 1, 2, 92, 93 and 96

Related indicator(s): A.7, I.2

Definition:

- (1) Ratio between: (i) **numerator:** public expenditure earmarked/executed for actions aimed at guaranteeing the rights of the Afrodescendent population, and (ii) **denominator:** total public expenditure. Expressed as a percentage.
- (2) Ratio between: (i) **numerator:** public expenditure earmarked for/executed by institutions responsible for Afrodescendent affairs, and (ii) **denominator:** total public expenditure. Expressed as a percentage.

Source:

The information may be provided by the institutions responsible for Afrodescendent affairs or other relevant agencies in each country. It should be included in the national reports.

Disaggregation:

By sectors (at minimum: health, education, social security) and community.

Notes:

The United Nations Population Fund (UNFPA) provided methodologies for estimating public spending on youth, which represents an opportunity to develop a viable and comparable methodology among the countries of the region. It is based on Damián Bonari (2014 and 2015), “Desarrollo de una propuesta de metodología para la medición del gasto público dirigido a adolescencia y juventud en los países de América Latina”; and “Medición del gasto público dirigido a la adolescencia y juventud en los países de América Latina. Nota técnica (UNFPA-LACRO 008/2014). The feasibility of calculating the indicator must be reviewed in light of the assigned and executed budget.

Indicator I.4

Existence of intercultural sexual and reproductive health services, including preventive measures and culturally and linguistically relevant information.

Relevant priority measure(s) of the Montevideo Consensus: 7, 12, 26, 33, 37, 38, 39, 40, 43, 44, 46, 78, 92, 95 and 97

Related indicator(s): A.8, A.9, A.10, B.1, B.10, B.13, B.15, D.1, D.3, D.5, D.6, D.7, D.8, D.9, D.11, D.13, D.15, D.16, D.17, D.18, D.21. When the indicator refers to persons or individuals, it means that disaggregation should be done for Afrodescendants —male and female children, women and men— considering specific age groups where appropriate. When the indicator refers to the supply of services or the existence of laws, policies and programmes, it is necessary to verify the explicit inclusion of Afrodescendent populations (peoples) and coherence with rights standards, especially with cultural integrity rights.

Definition: Existence of intercultural sexual and reproductive health services that include culturally and linguistically relevant prevention and information actions.

Source:

Ministry of Health and institutions responsible for Afrodescendent affairs. The information should be included in the national reports.

Disaggregation:

National and subnational (major and/or minor administrative areas and areas with a large proportion of Afrodescendent population).

Notes:

The definition of the indicator should be revised, to make it meaningful and sensitive to the changes, which would not be the case if it merely said “exist - do not exist” (at least one in the whole country?). A simple alternative would be to specify “geographic areas” (such as municipalities, boroughs) that have Afrodescendent populations and define the indicator as the percentage of geographic areas with indigenous population that have intercultural SRH services and culturally and linguistically relevant prevention and information measures (numerator: total number of geographic areas with Afrodescendent populations that have at least one intercultural SRH service, denominator: total number of geographic areas with Afrodescendent populations).

Indicator I.5

Percentage of relevant data sources that include self-identification of Afrodescendants, such as censuses, surveys and administrative records in the different sectors.

Relevant priority measure(s) of the Montevideo Consensus: 4, 92, 94 and 98

Related indicator(s): A.25, I.6, I.7

Definition:

Ratio between: (i) **numerator:** number of data sources of the national statistical system that include Afrodescendent identification, and (ii) **denominator:** total number of data sources of the national statistical system (per cent).

Source:

National statistical institutes and the statistical units of the sectoral ministries (health, education, housing, among others).

Disaggregation:

Data sources or specific statistical operations (see under Notes).

Notes:

This indicator is fundamental since it reflects the spirit of SDG 17.18 to provide, by 2020, timely and quality data with an ethnicity and race breakdown. In order to determine who is Afrodescendent in the statistical data, there is an international consensus that self-identification should be used, establishing categories that make sense to Afrodescendent people and communities, including different varieties of self-denomination, be these racial or ethnic (Del Popolo and Schkolnik, 2013 <http://www.cepal.org/es/publicaciones/37682-notas-poblacion-vol40-ndeg-97> and ECLAC, 2009 <http://www.cepal.org/es/publicaciones/6940-censos-2010-la-inclusion-enfoque-etnico-construccion-participativa-pueblos>).

A minimum set of data sources needs to be defined for the indicator to be comparable at the regional level, including population and housing censuses, agricultural censuses, surveys of living conditions (income, employment, multipurpose, among others), demographic and health surveys, vital records, continuous records of health, education, housing, and other continuous records that constitute the primary data source for other indicators of the Montevideo Consensus and the 2030 Agenda. The indicator can also be calculated for specific statistical operations, such as the percentage of continuous household surveys that include Afrodescendent self-identification.

Indicator I.6

Existence of mechanisms that guarantee Afrodescendants' full participation in the production of official statistics.

Relevant priority measure(s) of the Montevideo Consensus: 4, 92, 94 and 98

Related indicator(s): A.25, I.5, I.7

Definition:

Existence of a mechanism at the national level that guarantees full participation by Afrodescendent populations in the production of official statistics.

Source:

National Institute of Statistics; should be included in the national reports.

Disaggregation:

Not applicable.

Notes:

The criteria used to operationally define “full participation” need to be agreed on. Nonetheless, the spirit of this indicator is that it can be reported if the mechanism considers deliberative participation, in other words if it enables representatives of Afrodescendent peoples to make decisions. Participation must be at all stages, from design of the instruments to collection, processing and analysis of data. These conceptual and operational agreements should be defined in conjunction with Afrodescendent peoples’ organizations.

Indicator I.7

Number and percentage of Afrodescendent experts (male and female) working on information production and analysis in government offices.

Relevant priority measure(s) of the Montevideo Consensus: 4, 92, 94 and 98

Related indicator(s): A.25, I.5, I.7

Definition:

- (1) Number of Afrodescendent experts (male and female) working in the production and analysis of information in government offices.
- (2) Ratio between: (i) **numerator:** number of Afrodescendent experts (male and female) working on the production and analysis of information in government offices, and (ii) **denominator:** total number of experts (male and female) working on the production and analysis of information in government offices (per cent).

Source:

National statistical institutes and the statistical units of the sectoral ministries (health, education, housing, among others).

Disaggregation:

Government agencies agreed upon and by areas of work of speciality.

Notes:

State entities responsible for the data sources identified in indicator I.5 should be considered, starting with the national statistical institutes. The concept of “expert” also remains to be defined.

Indicator I.8***Proportion of seats held by Afrodescendent people in national parliaments and local governments.*****Relevant priority measure(s) of the Montevideo Consensus:** 92 and 93**Related indicator(s):** I.1, observing the legislation regarding quotas or other laws on political participation; E.6.**Definition:** The proportion of seats held by Afrodescendent people in (a) national parliaments, currently as at 1 February of reporting year, is currently measured as the number of seats held by Afrodescendant people members in single or lower chambers of national parliaments, expressed as a percentage of all occupied seats (adaptation of SDG indicator 5.5.1 originally referring to women).**Source:**

See Notes.

Disaggregation:

By sex

Notes:

SDG indicator 5.5.1 was defined for women and adapted here for people of African descent.

There is data and information on the proportion of seats held by Afrodescendants in national parliaments, but there is no established methodology for the proportion of seats held by Afrodescendants in local governments.

Some methodological issues related to the measurement of the indicator are contained in a preliminary version of the March 2016 metadata.

Further information at:

- <https://unstats.un.org/sdgs/metadata/files/Metadata-05-05-01a.pdf>.
 - <https://unstats.un.org/sdgs/files/metadata-compilation/Metadata-Goal-5.pdf>.
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Annex A1

GLOSSARY

The purpose of this glossary, which is not intended to be exhaustive, is to make it easier to read the indicators contained in the draft proposal. To this end, it defines certain terms and concepts that may require some explanation or clarification. In cases where a specialized agency has provided an official definition, that has been used. Where there are several possible definitions, the one that provides the most clarity has been chosen.

The compilation of this glossary is a work in progress, so other conceptual definitions, considered relevant for a better understanding of the indicators set out in the draft proposal, will continue to be added. In an effort to make it easier to use, the terms and concepts in this glossary are listed in alphabetical order.

- **Adolescent-friendly health services:** WHO suggests that “Adolescent-friendly” health services meet the needs of this population group sensitively and effectively and are inclusive of all adolescents. Such services deliver on the rights of young people and represent an efficient use of precious health resources. Adolescent-friendly health services need to be accessible, equitable, acceptable, appropriate, comprehensive, effective and efficient (see Peter McIntyre, Glen Williams and Siobhan Peattie, *Adolescent Friendly Health Services — An Agenda for Change* (WHO/FCH/CAH/02.14), World Health Organization (WHO), 2002, p. 27). These services provide adolescents with comprehensive health care, and the bond that is established between the health-care team and the adolescents and the high-quality of the care mean that adolescents and their families are happy with the services. Several countries, including Argentina and Colombia, use the definitions established by the Pan American Health Organization (PAHO) and the United Nations Population Fund (UNPFA). Other countries have come up with their own, more detailed, functional definitions. Chile defined these services in 2012 as pleasant and attractive physical spaces, conveniently located for adolescents, that ensure accessibility with regard to opening hours, waiting times, no-cost, respect for culture and diversity and without discrimination, thus facilitating adolescent participation and empowerment, and that are staffed by professionals trained in care for adolescents. The National Strategy for the Prevention of Adolescent Pregnancy, adopted by Mexico in 2015, states that, in addition to defining the specific characteristics of services based on local and up-to-date evidence, it has been shown that the two main qualities that friendly services must have are: treating patients respectfully and guaranteeing confidentiality.
- **Adolescents:** In line with usual practice, this term refers to young people between 10 and 19 years. There is no official definition.
See [online]: http://www.who.int/topics/adolescent_health/en/.
- **Assisted reproductive technology (ART):** All treatments or procedures that include the in vitro handling of both human oocytes and sperm or of embryos for the purpose of establishing a pregnancy. This includes, but is not limited to, in vitro fertilization and embryo transfer, gamete intrafallopian transfer, zygote intrafallopian transfer, tubal embryo transfer, gamete and embryo cryopreservation, oocyte and embryo donation, and gestational surrogacy. ART does not include assisted insemination (artificial insemination) using sperm from either a woman’s partner or a sperm donor.
See [online]: http://www.who.int/reproductivehealth/publications/infertility/art_terminology2.pdf?ua=1.

- **Basic services:** According to the United Nations Children’s Fund (UNICEF), basic social services include, as a minimum, primary health care, clean water and proper sanitation and basic education. “If basic social services were universal, every individual would have access to preventive and basic curative health services, reproductive health and family planning services, HIV/AIDS education and prevention programmes, drinking water and sanitation, basic education, including pre-primary, primary and junior secondary education and adult literacy programme”.

See S. Mehrotra, J. Vandmoortele and E. Delamonica, *Basic services for all? Public spending and the social dimensions of poverty*, Florence, Italy, United Nations Children’s Fund (UNICEF), 2000 [online] <https://www.unicef-irc.org/publications/pdf/basice.pdf>.

- **Births attended by specialized health-care personnel:** The proportion of deliveries attended by skilled health-care personnel is an indicator of pregnant women’s access to childbirth care that provides high-quality management of labour and delivery, evaluates obstetric risks, and treats and refers them appropriately. When disaggregated by relevant socioeconomic and geographical stratifiers, the indicator helps to identify areas and groups that are not receiving appropriate childbirth care. However, the indicator only refers to contact with skilled health-care personnel and does not assess the quality of the care provided or whether women receive all the necessary treatments. The WHO/ICM/FIGO Joint Statement *Making pregnancy safer: the critical role of the skilled attendant* defines skilled personnel as “an accredited health professional —such as a midwife, physician or nurse— who has been educated and trained to acquire the skills necessary to handle normal pregnancies (without complications), delivery and immediate postnatal care, as well as in the identification, management and referral of complications in women and newborns.” In national household surveys, such as Demographic and Health Survey (DHS) and Multiple Indicator Cluster Surveys (MICS), women aged 15-49 who report live births in a specific recent period (up to five years before the interview) are asked about the person who attended the delivery of each of the live births they report. The information collected is then used to determine the number of births attended by skilled health-care personnel. Health service records may be used when a large proportion of births occur in health-care facilities and are recorded in the health information system.
- **Children:** According to the Convention on the Rights of the Child, they are human beings below the age of 18 years.¹⁸
- **Comprehensive care protocol on sexual and reproductive health of women living with HIV:** According to the Ministry of Health of Chile, women living with HIV have the right to be treated holistically by a trained and coordinated team that is aware of their needs. This includes providing those women with support when choosing methods to regulate their fertility and scheduling pregnancies, and ensuring that they have ready access to medical tests and are referred to health specialists in a timely manner.

See [online]: <http://web.minsal.cl/sites/default/files/files/PROTOCOLOMUJERESVIH.pdf>.

¹⁸ For an example of a national definition see article 5 of the General Law on the Rights of Children and Adolescents (04/12/2014) of Mexico, which states that persons aged up to 12 years are children and those aged between 12 and 18 years are adolescents. However, it should be noted that in the National Strategy for the Prevention of Adolescent Pregnancy (ENAPEA), launched in 2015 by the National Population Council (CONAPO) of Mexico, adolescents are referred to as those aged between 10 and 19 years.

- Demand for family planning met:** Indicator 3.7.1 of the Sustainable Development Goals is the proportion of women of reproductive age (aged 15-49 years) who are sexually active and who have their need for family planning satisfied with modern methods. The standard approach applied to specialized surveys, which covers only women who are married or in a consensual union, continues to be used to measure this indicator, an approach that has been criticized (including in comments made orally and in writing on the preliminary proposal of indicators), in particular by the International Planned Parenthood Federation (IPPF). It is expected that the measurement procedure will be changed to cover all sexually active women, or that it will be adapted at the regional level.
- Dignified death:** Dignified death is covered by the right to life. Article 6 (Right to life and dignity in old age) of the Inter-American Convention on Protecting the Human Rights of Older Persons provides that: “States Parties shall adopt all measures necessary to ensure older persons’ effective enjoyment of the right of life and the right to live with dignity in old age until the end of their life and on an equal basis with other segments of the population. States Parties shall take steps to ensure that public and private institutions offer older persons access without discrimination to comprehensive care, including palliative care; avoid isolation; appropriately manage problems related to the fear of death of the terminally ill and pain; and prevent unnecessary suffering, and futile and useless procedures, in accordance with the right of older persons to express their informed consent.”

See [online]: http://www.oas.org/en/sla/dil/inter_american_treaties_A-70_human_rights_older_persons.asp.
- Emergency contraception:** Emergency contraception refers to methods of contraception that can be used to prevent pregnancy during the few days immediately after sexual intercourse. It was created for use in situations where no contraceptive was used during intercourse, where other contraceptives failed or were not used correctly (such as the omission of a contraceptive pill or condom breakage or slippage) and for cases of rape or unprotected forced sexual intercourse. In general, the Consensus refers to access to emergency contraception pills (levonorgestrel or ulipristal acetate, according to WHO), although the literature describes other possible methods. For further details, see [online] <http://who.int/mediacentre/factsheets/fs244/en/>.
- Ending the AIDS epidemic:** The Joint United Nations Programme on HIV/AIDS (UNAIDS) set the 90-90-90 treatment target: that by 2020, 90% of all people living with the human immunodeficiency virus (HIV) will know their HIV status (95% in 2030), 90% of all people with diagnosed HIV infection will receive sustained antiretroviral therapy (95% in 2030), and 90% of all people receiving antiretroviral therapy will have viral suppression (95% in 2030), so that their immune systems remain strong and they no longer present with symptoms.

See [online]: http://www.unaids.org/sites/default/files/media_asset/2016-political-declaration-HIV-AIDS_en.pdf.
- Femicide/feminicide:** According to the Latin American Model Protocol for the investigation of gender-related killings of women, “There is no agreed-upon definition of the concepts of “femicide” and “feminicide”. Their scope, content, and implications are still the subject of ample debate in the social sciences as well as in politics and national legislative processes. Their accepted meanings vary according to the point of view from which they are examined and the discipline that is addressing it. [...] Despite these conceptual differences, the normative frameworks in the region use the terms ‘femicide’ and ‘feminicide’ indiscriminately to refer to the gender-related killing of women, distinguishing them from the gender-neutral concept of homicide”. According to the Declaration on Femicide of the Follow-up Mechanism to the Belém do Pará Convention, “[...] femicide is the violent death of women based on gender, whether it occurs within the family, a

domestic partnership, or any other interpersonal relationship; in the community, by any person, or when it is perpetrated or tolerated by the State or its agents, by action or omission.”

See [online]: <http://www.un.org/en/women/endviolence/pdf/LatinAmericanProtocolForInvestigationOfFemicide.pdf> and <http://www.oas.org/en/mesecvi/docs/DeclaracionFemicidio-EN.pdf>.

- **Gender approach:** This approach promotes mainstreaming processes, empowering action, accountability and leadership in the mechanisms for the advancement of women, as well as actively involving all sectors and levels of government to agree and share goals, and to allocate resources in the different mechanisms to achieve the objectives. The approach pays attention to gender issues from the initial stages of the decision-making process through to the implementation phase, with the aim of influencing the goals, strategies and distribution of resources, in the search for substantive change in the way policies and programmes are implemented. In turn, in this type of strategy, policies cease to be the responsibility of machineries for the advancement of women and become the responsibility of each State actor, as well as the State as a whole. If the gender approach has been adopted, at least one of the following attributes must be satisfied: (a) the strategy improves the living conditions of women and guarantees their human rights; (b) it solves specific problems for women; and (c) it targets equality and the full exercise of human rights.
- **Government agencies:** All State bodies, services and entities, as well as specific spaces established by the government for specific purposes (commissions, assemblies and forums, among others).
- **Healthy life expectancy:** The World Health Organization (WHO) defines this as the average number of years that a person can expect to live in “full health” by taking into account years lived in less than full health due to disease and/or injury.
See [online]: <http://www.who.int/healthinfo/statistics/whostat2005en2.pdf>.
- **Human rights approach in public policies:** As in development strategies, this approach treats international human rights law as an internationally accepted conceptual framework that offers a coherent system of principles and rules in the field of development. This approach also considers international human rights law as a guide to conducting the cooperation and assistance process; social participation in that process; the obligations of donor and recipient governments; the method of evaluating aid; and the accountability mechanisms that need to be established at the local and international levels. Processes that have mainstream the human rights approach should meet at least the following conditions: (a) recognize people as rights-holders; (b) public policy formulation treats individuals as subjects of law with the right to demand certain services and actions from the State and from governments, and to take part in defining them.¹⁹
- **Informal employment:** Some of the characteristic features of this type of employment are lack of protection in the event of non-payment of wages, compulsory overtime or extra shifts, lay-offs without notice or compensation, unsafe working conditions and the absence of social benefits, such as pensions, sick pay and health insurance. Women, migrants and other vulnerable groups of workers who are excluded from other opportunities have little choice but to take informal low-quality jobs.
See [online]: <http://www.ilo.org/global/topics/employment-promotion/informal-economy/lang-en/index.htm>.

¹⁹ Abramovich, V. “The rights-based approach in development policies and strategies”, *CEPAL Review*, No. 88 (LC/G.2289-P), Santiago, Economic Commission for Latin America and the Caribbean (ECLAC), 2006.

- Informed decision:** Once informed of all the possible alternatives, individuals must receive as much information as necessary in order to select the option that seems most reasonable. When making a sensible choice, the “reasonable person” standard is more widely used than the “professional practice” standard. The prevailing opinion is that health-care providers should routinely involve individuals in making clinical decisions. One notable approach to making informed decisions is the “informed consent doctrine”, which was born and shaped in the United States courts and underpins patient protection.

See [online]: http://scielo.sld.cu/scielo.php?script=sci_arttext&pid=S0034-75072006000100008 [Spanish only].
- Interculturalism approach:** This approach aims to improve the quality of exchanges and enhance symmetry in contacts (Tubino, 2005),²⁰ considering that the relationships between people from different cultures unfold in societies with defined hierarchies, and structures of power and **privileges**. The focus is thus placed on an especially problematic point, since relations between people of different cultures do not occur in an abstract space, but within societies in which there are inevitably certain hierarchies and structures of power and privileges. If the intercultural approach has been adopted, the following attributes at least must be satisfied: (a) respect for human rights by all social groups; (b) defence of the values and basic practices of formal democracy; (c) respect for the law and the rule of law and its operating mechanisms; (d) defence of the social cohesion of the city or territories, over and above the interests of specific groups; (e) promotion of cooperative and participatory management among the different social groups; (f) respect for difference; (g) integration and coexistence of the different cultural contributions while maintaining the key features of the receiving society’s culture; (h) fostering of interaction and building a sense of identity and belonging to a city or territory for all (male and female alike).
- In vitro fertilization (IVF):** An Assisted Reproductive Technology procedure that involves extracorporeal fertilization.

See [online]: http://www.who.int/reproductivehealth/publications/infertility/art_terminology2.pdf?ua=1.
- Medically assisted reproduction (MAR):** According to WHO, this is reproduction brought about through **ovulation** induction, controlled ovarian stimulation, ovulation triggering, ART procedures, and intrauterine, intracervical, and intravaginal insemination with semen of the husband/partner or a donor.

See [online]: http://www.who.int/reproductivehealth/publications/infertility/art_terminology2.pdf?ua=1.
- Modern family planning methods:** According to WHO, modern family planning methods are: oral contraceptives that combine oestrogen and progestogen (the “pill”); progestogen-only pills (the “minipill”); **subcutaneous** implants of progestogen; progestogen-only injections; monthly injections of oestrogen and progestogen; combined contraceptive patches and combined contraceptive vaginal ring; copper intrauterine devices (IUD); levonorgestrel intrauterine devices (IUD); male condoms; female condoms; male sterilization (vasectomy); female sterilization (tubal ligation (salpingectomy)); the lactational amenorrhea method; emergency contraception (1.5 mg of levonorgestrel); the standard days method; the basal body temperature method; the two-day method; and the symptothermal method.

²⁰ F. Tubino, “La praxis de la interculturalidad en los Estados Nacionales Latinoamericanos”, *Cuadernos Interculturales*, vol. 3, No. 5, julio-diciembre de 2005, Viña del Mar, Universidad de Playa Ancha.

- **Palliative care:** According to the Inter-American Convention on Protecting the Human Rights of Older Persons (2015), this means active, comprehensive, and interdisciplinary care and treatment of patients whose illness is not responding to curative treatment or who are suffering avoidable pain, in order to improve their quality of life until the last day of their lives. Central to palliative care is control of pain, of other symptoms, and of the social, psychological, and spiritual problems of the older person. It includes the patient, his or her environment, and his or her family. It affirms life and considers death a normal process, neither hastening nor delaying it.

See [online]: http://www.oas.org/en/sla/dil/inter_american_treaties_A-70_human_rights_older_persons.asp.
- **Participation mechanisms:** Any regular and formally established procedure used to gather peoples' opinions and to consider them in the decision-making process.
- **Political harassment:** According to the Declaration on Political Harassment and Violence against Women of the Follow-up Mechanism to the Convention of Belém do Pará, "[...]both political harassment and violence against women may include any action, conduct, or omission among others, based on their gender, individually or collectively, that has the purpose or result of undermining, annulling, impeding, or restricting their political rights, violating the rights of women to a life free of violence and to participate in political and public affairs on an equal footing with men".

See [online]: [http://www.cepal.org/sites/default/files/news/files/declarationpolitical violenceeng.pdf](http://www.cepal.org/sites/default/files/news/files/declarationpolitical%20violenceeng.pdf).
- **Provision of sexual and reproductive health services:** A health-care facility is deemed to provide **comprehensive** sexual and reproductive health services if at least three of these services can be obtained either in the same place or by referral (potentially adaptable to the country's laws and regulations): (a) guidance, education and communication on family planning; (b) antenatal care, safe delivery, postnatal care; (c) mother and newborn health care; (d) infertility treatment, treatment of abortion and its consequences; (e) treatment of sexually transmitted diseases; (f) information, education and communication on sexuality and reproductive health; and (g) sexual health services and provision.
- **Recreational activities:** Different activities undertaken in one's free time, for example, at a sports facility, or simply using the resources offered by nature, providing individuals with the opportunity to satisfy their need to move.
- **Reproductive health:** According to the Programme of Action of the International Conference on Population and Development, reproductive health implies that people are able to have a satisfying and safe sex life and that they have the capability to reproduce and freedom to decide if, when, and how often to do so. Implicit in this last condition are the right of men and women to be informed and to have access to safe, effective, affordable and acceptable methods of family planning of their choice, as well as other methods of their choice for regulation of fertility which are not against the law, and the right of access to appropriate health care services that will enable women to go safely through pregnancy and childbirth and provide couples with the best chance of having a healthy infant.

See [online]: <http://www.un.org/popin/icpd/conference/offeng/poa.html>.
- **Safe abortion:** When performed by trained health-care providers with proper equipment, correct **technique** and sanitary standards, abortion is one of the safest medical procedures. Properly provided services for early abortion save women's lives and avoid the often substantial costs of treating preventable complications of unsafe abortion.

See [online]: <http://apps.who.int/iris/bitstream/10665/42586/1/9241590343.pdf>.

- **Septic abortion:** A spontaneous or induced abortion that becomes complicated by infection. Usually associated with illegal and unsafe abortion, aggressive medical treatment is often required to save the life of the woman.

See [online]: <https://www.plannedparenthood.org/learn/glossary>.
- **Sexual and reproductive health:** The United Nations Population Fund (UNFPA) defines sexual and reproductive health as a state of general physical, mental and social well-being. It is the capacity to have a satisfying and safe sex life, without the risk of pregnancy, and the freedom to decide whether or not to reproduce. It also includes a set of methods, techniques and services that contribute to reproductive health and well-being by preventing and resolving reproductive health problems, and contribute to prevention and self-care in sexual and reproductive health. Information on prevention and self-care practices is premised on recognition of the basic right of all couples and individuals, throughout the life cycle, to decide freely and responsibly the number, spacing and timing of their children and to have the information and means to do so. It also includes their right to make decisions concerning reproduction free of discrimination, coercion and violence as expressed in human rights documents.

See [online]: <http://www.unfpa.org.mx/salud%20sexual%20y%20reproductiva.php> and [online]: http://www.who.int/reproductivehealth/topics/countries/strategic_approach/en/.
- **Skilled health personnel:** Indicator 3.1.2 of the Sustainable Development Goals is the proportion of births attended by skilled health personnel. WHO defines skilled personnel in this context as all health professionals (doctors, nurses or midwives) trained in providing life-saving obstetric care, including giving the necessary supervision, care and advice to women during pregnancy, childbirth and the post-partum period, to conduct deliveries on their own, and to care for newborns.

See [online]: <http://unstats.un.org/sdgs/files/metadata-compilation/Metadata-Goal-3.pdf>.
- **Smuggling of migrants:** According to the United Nations Convention against Transnational Organized Crime and the Protocols thereto, “smuggling of migrants” means the procurement, in order to obtain, directly or indirectly, a financial or other material benefit, of the illegal entry of a person into a State Party of which the person is not a national or a permanent resident.

Source: United Nations Convention against Transnational Organized Crime and the Protocols thereto, New York, 2004. Annex III: Protocol against the Smuggling of Migrants by Land, Sea and Air, supplementing the United Nations Convention against Transnational Organized Crime (p. 53).

See [online]: <https://www.unodc.org/documents/treaties/UNTOC/Publications/TOC%20Convention/TOCebook-e.pdf>.
- **Total health expenditure:** WHO defines this as the sum of public and private health expenditure. It covers the provision of health services (preventive and curative), family planning activities, nutrition activities and emergency aid designated for health but does not include provision of water and sanitation.

See [online]: <http://data.worldbank.org/indicator/SH.XPD.TOTL.ZS>.
- **Traditional (contraceptive) methods:** According to the International Planned Parenthood Federation (IPPF) these are non-supply methods, including periodic abstinence, post-partum abstinence, total abstinence and withdrawal (*coitus interruptus*). According to WHO, traditional methods of contraception are the calendar method (or rhythm method) and withdrawal (*coitus interruptus*).

See [online]: <http://who.int/mediacentre/factsheets/fs351/en/> and <http://si.easp.es/semanasalud/mujeres/wp-content/uploads/2015/05/glosario-ssyr.pdf> [Spanish only].

- Trafficking in persons:** According to the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, supplementing the United Nations Convention against Transnational Organized Crime, “trafficking in persons” means the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs.

Source: Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, supplementing the United Nations Convention against Transnational Organized Crime (Palermo Protocol, 2000).

See [online]: <https://www.unodc.org/documents/treaties/UNTOC/Publications/TOC%20Convention/TOCebook-e.pdf>.
- Unmet need for family planning:** Women with unmet need are those who are fecund and sexually active but are not using any method of contraception, and report not wanting any more children or wanting to delay the next child. The concept of unmet need points to the gap between women’s reproductive intentions and their contraceptive behaviour. For monitoring the Millennium Development Goals, unmet need is expressed as a percentage based on women who are married or in a consensual union.

See [online]: http://interwp.cepal.org/sisgen/SisGen_MuestraFicha_puntual.asp?id_aplicacion=1&id_estudio=4&indicador=2183&idioma=i.
- Unsafe abortion:** Performed either by persons who lack the necessary skills or in an environment lacking minimal medical standards, or both (both legal and illegal abortions can be safe or unsafe). The World Health Organization defines it as “a procedure for terminating an unwanted pregnancy either by persons lacking the necessary skills or in an environment lacking minimal medical standards, or both” (WHO, 1992).

See [online]: http://apps.who.int/iris/bitstream/10665/59705/1/WHO_MSM_92.5.pdf and <http://www.who.int/bulletin/volumes/92/3/14-136333/en/>.
- Violence against women:** Any act or conduct, based on gender, which causes death or physical, sexual or psychological harm or suffering to women, whether in the public or the private sphere. Violence against women shall be understood to include physical, sexual and psychological violence: (i) that occurs within the family or domestic unit or within any other interpersonal relationship, whether or not the perpetrator shares or has shared the same residence with the woman, including, among others, rape, battery and sexual abuse; (ii) that occurs in the community and is perpetrated by any person, including, among others, rape, sexual abuse, torture, trafficking in persons, forced prostitution, kidnapping and sexual harassment in the workplace, as well as in educational institutions, health facilities or any other place; and (iii) that is perpetrated or condoned by the state or its agents regardless of where it occurs.

Source: Inter-American Convention on the Prevention, Punishment, and Eradication of Violence against Women (Convention of Belém do Pará).

See [online]: <http://www.oas.org/juridico/english/treaties/a-61.html>.

- **Work time:** Total work time is the sum of paid work time and unpaid work time. Paid work refers to work done for the production of goods or services for the market and is calculated as the sum of time devoted to employment, job search and commuting. Unpaid work refers to work done without payment and develops mainly in the private sphere. It is measured by quantifying the time a person spent on self-consumption work, unpaid domestic work and unpaid care for their own home or to support other household work.

Source: Gender Equality Observatory for Latin America and the Caribbean.

See [online]: <http://oig.cepal.org/en>.

- **Young people:** For the Ibero-American Convention on the Rights of Youth, the General Assembly of the United Nations and the International Year of Youth celebrated in 1985, the term “young people” refers to people aged between 15 and 24 years. In turn, the Montevideo Consensus on Population and Development states the following: “Considering that the 15-29 age group in the region now numbers some 160 million persons—in other words, young people account for one quarter of the population— [...]” (p. 10).²¹

²¹ For an example of academic definitions see Patton and others, “Our future: a Lancet commission on adolescent health and wellbeing”, 2016 [online] www.thelancet.com: “Adolescence is defined by WHO as between 10 and 19 years, while youth refers to 15-24 years. “Young people” refers to the 10-24-year-old age group, as does the composite term “adolescents and young adults”. Early adolescence refers to 10-14 years, late adolescence to 15-19 years”.