Statement by the United States at the UN Commission on Population and Development Delivered by:

Margaret Pollack, Director for Multilateral Coordination and External Relations and Senior Advisor on Population Issues,
Bureau of Population, Refugees, and Migration
U.S. Department of State
April 12, 2010

Mr. Chairman, I would like to take this opportunity to congratulate you on your election to the chairmanship of this Commission. We are sure that your professionalism and diplomatic skills will lead us to a successful conclusion of our deliberations and an incisive examination of the important issues before us.

The issues being dealt with under this year's theme -- health, morbidity, mortality and development -- are of importance to all people in every area, whether they be young or old, male or female. Finding ways to improve the health of every person is at the heart of one my government's key objectives -- to improve our own domestic legislation in the field of health.

The U.S. Government's commitment to realizing the shared goals and aspirations outlined in the ICPD Program of Action is central to our foreign policy and foreign assistance. Recognizing that the improvement of global health outcomes is a shared responsibility, we commend the many governments, civil society partners, and international organizations that have made significant efforts to bring the world closer to achieving the Cairo goals as well as the health-related Millennium Development Goals, particularly MDG 5 and its two targets.

Cairo brought the world's attention to the centrality of women's empowerment, human rights, and women's health, to achieve development and peace. Today, more than ever, we must work together to fully realize this vision. Though much progress has been made, we have considerable distance still to travel. We must dramatically reduce infant and child mortality and improving women's health is a key way to achieve these goals. We must open the doors of education equally to all citizens, including girls and women. And we must do more to address the unacceptably high rate of maternal mortality and lack of access to reproductive health. Ten years after our collective commitment to MDG5, childbirth remains a leading cause of death and injury for women, with over 530,000 women dying each year, mainly from preventable causes in low income countries. In addition, an estimated 215 million women who do not want to be pregnant lack access to

modern forms of contraception and nearly 20 million unsafe abortions take place every year, putting women at risk of death and long-term illness.

Recent research from UNFPA and the Guttmacher Institute shows that fully addressing the unmet need for family planning and ensuring that pregnant women and their newborns receive the recommended standard of care would enable most countries to achieve MDG 4 and 5 targets.

As we agreed in Cairo, it is also vital to provide the largest youth generation in world history - some 1.5 billion young people who are now of reproductive age - the comprehensive information, education, and services they need and want to deal positively with their sexuality.

The United States is taking concrete steps to address these critical reproductive health needs. We provided \$55 million to UNFPA in 2010; the PEPFAR program is making linkages between reproductive health services and HIV/AIDS programs. We have increased support for efforts to combat violence against women. And we have revitalized our engagement in the multilateral arena, including here at the UN Commission on Population and Development.

Most notably, President Obama has demonstrated commitment to strengthening U.S. leadership in global health – in particular in the areas of maternal and child health and family planning through the Administration's Global Health Initiative. This \$63 billion initiative calls for increased resources to reduce maternal and child mortality and increased access to family planning. It also employs the model agreed to in Cairo – a women and girl-centered approach to fighting disease and promoting health worldwide and aims to provide a package of integrated health services based on a strong health system.

For example, under the Global Health Initiative, PEPFAR is committed to improving the linkages between reproductive health and HIV care and treatment services. Within the context of a comprehensive package of care for women living with AIDS, PEPFAR will work to improve access to family planning and reproductive health, as well as other services such as prevention and care for gender-based violence. We'll also help countries improve their commodity management systems, to ensure regular supplies of medicines and contraceptives. And we'll expand our health care worker training initiatives so that health personnel can provide quality reproductive health, HIV and primary care services all in the same visit.

This Initiative will also ensure that all of our global health programs, including our nutrition, malaria, TB, and HIV/AIDS programs, address the social and economic factors that have a negative impact on women's health, including gender-based violence, lack of education, pervasive gender discrimination and poverty, among others.

To highlight this administration's commitment to MDGs 4 and 5, President Obama has requested \$715.7 million for bilateral and multilateral reproductive health, including family planning, in 2011. If approved later this year by Congress, this amount will represent the single largest U.S. contribution in history for international reproductive health programs. And to scale up and deliver health interventions that reduce maternal and child mortality and improve nutrition, the administration has requested \$1.186 pillion for 2011, a 48% increase over 2010.

The hundreds of thousands of deaths each year among women due to complications of pregnancy and childbirth, and the devastating lifelong consequences among millions more who manage to survive are among our greatest moral, human rights, and development challenges and represent the world's largest health inequity. If we do not ensure the health of women and girls, and help men and boys understand the value of a woman's life, other development programs are almost certain to fail. Without protection of the human rights of women and their equal participation at all levels of society, progress cannot take place. The U.S. stands firm in our commitment to sexual and reproductive health and reproductive rights, especially for women and girls.

Achieving the ICPD goals the world agreed to over 15 years ago in Cairo requires our unyielding attention and steadfast commitment. U.S. engagement in global health continues to increase and we are putting comprehensive sexual and reproductive health services and education as well as protection of human rights at the center. We stand ready to work with other governments, civil society and the international community to achieve a just and healthy life for all, and especially for women and girls.