

## NGO Statement by GFDD/Funglode

## 49th Session of the Commission on Population and Development

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Women and girls comprise approximately half the population of the world, but they are more vulnerable to health problems, through child birth, due to both biological and social reasons. For this reason, Funglode and GFDD have continued to argue the need to implement policies that assure long term gender equality and women's empowerment through enhanced access to general education services, sexual and reproductive health and family planning, and timely access to quality health services. Through the foundations' recent publication "Status of Women: Studies and Reflections in the Dominican Republic and Latin America", Funglode and GFDD have highlighted obstacles for women and girls in achieving the best standard of health. The attainment of these targets and the Sustainable Development Goals (SDGs) under the Commission's priority theme, as they relate to gender equality

(SDG5), public health (SDG3) and educational (SDG4) considerations, are crucial to the effective implementation of this new agenda. Indeed, mortality, along with migration and fertility are often quoted as one of the key demographic components. Changes in these demographics have a significant impact on achieving the SDGs signed up to in the 2030 Agenda for Sustainable Development. If we are to truly eradicate poverty and social inequality, then it is essential that these public health rights are integrated within this agenda.

Maternal mortality is a global public health issue. In the study entitled Trends in Maternal Mortality: 1990 to 2015, it was estimated by the World Health Organization that 543,000 maternal deaths occurred in 1990, whereas 303,000 were reported in 2015. These data indicate a 44% reduction over that period. However, despite this level of reduction, the occurrence of maternal deaths in the world continues to be significant. In Latin America and the Caribbean, a decline was recorded in comparison with 1990, going from 14,000 to 7,900 deaths in 2015. The Millennium Development Goals for the Dominican Republic posed a 75% reduction target in the maternal mortality rate between 1990 and 2015, according to the United Nations Development Programme in the Dominican Republic in November 2012. By 1990, the maternal mortality rate was estimated at 229 cases per 100,000 live births, whereas the target set for 2015 was to decrease to 57 cases per 100,000 live births (Ministry of Health, 2011). The World Bank confirms that the figure achieved by the country in 2015 was 92 cases per 100,000 live births. It is no coincidence that the regions with the lowest levels of development recorded 99% of the maternal deaths occurring in 1990 and 2015. There is clearly a close link between underdevelopment and this kind of mortality, and therefore an urgent need to overcome this issue.

The Economic Commission of Latin American and the Caribbean reports that although 97.5% of pregnant women receive prenatal care from medical personnel, and 98% of deliveries are attended by skilled health personnel, progress in reducing maternal mortality ratios in the Dominican Republic has been slow and irregular. This contradiction between the high level of care available at institutional

facilities and poor maternal mortality results suggests deficiencies in the functioning and quality of health services. This situation reflects major weaknesses in prenatal, delivery, post-partum, and perinatal care.

Going forward, the country's 2013-2016 Public Sector Multi-Year Plan provides for an increased flow of public resources to finance health care for the poorest groups of the population, boosting pertinent and sustainable health care services. Training and raising awareness among health workers to provide quality and compassionate care to women before, during, and after the pregnancy process must be an essential component of public policies to improve maternal health. As the issue of overpopulation continues to affect our planet (with global population set to rise from 7.2 billion to 11 billion people by 2100), targeted education measures regarding sexual and reproductive health as well as family planning programs focused on the most marginalized communities in society can help alleviate this problem.

Strengthening the demographic evidence base of the Post-2015 Agenda therefore means that we need to protect the rights of all women and girls to achieve public health rights, so that all individuals are part of development policies to play a key role in the successful implementation of the 2030 Agenda for Sustainable Development.

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Thank you.