

**Statement by the United States at the  
49<sup>th</sup> UN Commission on Population and Development  
Delivered by:**

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Thank you, Madam Chairwoman.

As a founding member of the Global Partnership for Sustainable Development Data, the United States is committed to working in partnership with governments, the private sector, civil society, academics, philanthropists and communities to improve data collection, analysis, and use. To achieve the 2030 Agenda, it is critical that we harness the technology, skills, and opportunities to connect official statistics, big data, citizen-generated data, and geospatial data for the public good. We strongly support open, new, and usable data to better inform decision-making to end extreme poverty and ensure healthy lives for all. We hope the UN Statistical Commission's Interagency Expert Group will establish reporting flows that include data from non-traditional sources in a transparent and accessible manner that is country-led and publicly accountable. Timely, appropriately disaggregated, and dynamic data will be required to adopt common measures of progress, and will enable mutual accountability and, ultimately, more effective policy and program implementation, so that no one is left behind.

The Secretary General's Reports prepared for this Commission highlight the importance of the Demographic and Health Surveys as the most reliable source of data for monitoring sexual and reproductive health outcomes and behaviors in many low income countries and will remain a critical source for reliable monitoring of many SDG indicators. The United States started the Demographic and Health Surveys Program in 1984. Since then, our commitment has remained steadfast, and our financial support unparalleled. To date, the Program has provided technical assistance for more than 300 surveys in nearly 90 countries.

The Secretary General's reports also note the significant progress that has been made in achieving the health, education, and gender goals outlined in the ICPD Program of Action that we believe provides a strong foundation for realizing the 2030 Agenda. We must take into account evolving global demographic realities if we are to achieve the goals set out in Cairo and the 2030 Agenda. To ensure no

one is left behind, we must continue to focus our efforts where they will have the greatest impact – tackling issues like women’s and girls’ empowerment, investing in girls’ education, advancing sexual and reproductive health and rights, and providing resources for survivors of gender-based violence across the life course.

We are pleased that targets under SDGs 3 and 5 address the unfinished business of the Millennium Development Goals (MDGs), particularly MDG 5 – to reduce maternal mortality and provide universal access to reproductive health – the goal where the least progress has been made, particularly among the world’s poorest and most marginalized women. By 2050, the number of women with an unmet need for family planning will increase by 40 percent as a record number of young people enter their reproductive years. Along with opportunities for education and employment, adolescents need access to information and health care, including access to comprehensive sexuality education and youth-friendly health services, so they can make informed and responsible decisions about their health that meet their unique needs.

Too many women continue to face barriers in accessing the services necessary for reducing maternal death and injury or addressing sexual and gender-based violence – for which there is little age-disaggregated data for women beyond age 49, or reproductive age. We also know there are major data gaps for some of the health and gender equity targets. We therefore hope the SDG indicator framework will include access to sexual reproductive health services. Further, we must continue to work in partnership with countries to develop innovative population data systems that extend beyond urban centers. And, we must further strengthen local and national capacity to use data to plan effective policies, measure the impact of programs, and respond to public health needs.

In closing, we must continue our efforts to fulfill the ICPD Program of Action and take steps toward achieving the SDGs, by ensuring that population and sexual and reproductive health issues remain central to inclusive, equitable, and sustainable development. To that end, we must commit to working in partnership to strengthen the demographic evidence base by seeking solutions to data gaps that could impede our efforts to measure and achieve our globally agreed goals. We look forward to making progress on these issues at this year’s Commission.

Thank you.