



# A Rapid Assessment of Impact and Resilience on National Statistical Systems Amid Funding Gaps and Disruptions

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Task Force on  
Sustainable Demographic and Health Statistics  
through Surveys

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## List of Abbreviations

<b>CRVS</b>	Civil Registration and Vital Statistics
<b>DHS</b>	Demographic and Health Survey
<b>GAVI</b>	Global Alliance for Vaccines and Immunization
<b>IAEG-SDGs</b>	Inter-Agency and Expert Group on SDG Indicators
<b>ISWGHS</b>	Inter-Secretariat Working Group on Household Surveys
<b>INEGI</b>	Mexico's National Institute of Statistics and Geography (Acronym in Spanish Instituto Nacional de Estadística y Geografía de Mexico)
<b>LIC</b>	Low-Income Country
<b>LMIC</b>	Low- and Middle-Income Country
<b>NSO</b>	National Statistical Office
<b>ODA</b>	Official Development Assistance
<b>PRESS</b>	Partner Report on Support to Statistics
<b>SDG</b>	Sustainable Development Goals
<b>VAW</b>	Violence Against Women
<b>UNDP</b>	United Nations Development Programme
<b>UNECA</b>	United Nations Economic Commission for Africa
<b>UNECE</b>	United Nations Economic Commission for Europe
<b>UNECLAC</b>	United Nations Economic Commission for Latin America and the Caribbean
<b>UNESCAP</b>	United Nations Economic and Social Commission for Asia and the Pacific
<b>UNESCWA</b>	United Nations Economic and Social Commission for Western Asia
<b>UNFPA</b>	United Nations Population Fund
<b>UNICEF</b>	United Nations Children's Fund
<b>UNSC</b>	United Nations Statistical Commission
<b>UNSD</b>	United Nations Statistics Division
<b>UN Women</b>	United Nations Entity for Gender Equality and the Empowerment of Women
<b>USAID</b>	United States Agency for International Development
<b>WHO</b>	World Health Organization

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## 1. Overview

Household surveys are essential for generating high-quality data to support evidence-based policies, programming, and planning across all aspects of government—including health, economics, labor, agriculture, and the environment—with a strong gender perspective mainstreamed across every domain of data collection and use. According to the assessment of the Inter-Secretariat Working Group on Household Surveys, around one third of the Sustainable Development Goal (SDG) indicators can be derived from household surveys<sup>1</sup>. Data helps create efficiencies by targeting the right groups with the appropriate intervention. As the [2025 SDG Report](#) notes, the demand for timely, inclusive, and integrated data has never been greater. Yet, despite the intensifying global data needs, financing for statistical data systems faces unprecedented uncertainty, leading to persistent gaps in data for monitoring global progress which are at risk of worsening.

According to the most recent [Partner Report on Support to Statistics \(PRESS\) 2025](#) by PARIS21, funding for data and statistics increased by 8% in 2023 to an all-time high total disbursement level of USD 1.145 billion. Official development assistance (ODA) for data and statistics accounted for USD 550 million of this total—48 percent of all disbursements in 2023. However, a recent [OECD](#) brief reported that ODA has experienced cuts from major donors in 2023 and 2024 and is projected to decline by 9 to 17 percent in 2025, with funding levels expected to return to those of 2020 by 2027 – including support for data and statistics. These funding cuts have made closing the global data gap appear increasingly unattainable and have raised serious concerns about whether it will be possible to maintain current levels of data production.

The report aims to present high-level findings on the impact of the funding cuts on national statistical offices (NSOs). The findings are based on a Rapid Assessment conducted between May and September 2025 to NSOs in low- and middle-income countries, following the disruptions to the Demographic and Health Survey (DHS) Program.<sup>2</sup> While overall statistical operations face challenges, the termination of the DHS - a cornerstone source of gender and health data - has disproportionately disrupted the production of data needed to monitor women’s health, reproductive rights, and many SDG gender and health indicators. According to a separate assessment of SDG Custodian agencies in May 2025, 39 SDG indicators rely on data from DHS to various degrees, representing nearly one in six indicators. Goal 3 (Health) and Goal 5 (Gender Equality) are the most affected, with 11 and 6 indicators, respectively, including at least one data point derived from DHS since 2015. The three SDG indicators that rely the most on DHS include (a) contraceptive use (SDG indicator 5.6.1, 70 percent of the data points are from DHS since 2015), (b) the experience of sexual violence (SDG 16.2.3, 70 percent) and (c) female genital mutilation (SDG 5.3.2, over 50 percent).<sup>3,4</sup> While the interruption to the DHS Program served as the trigger, the Rapid Assessment and resulting analysis in this report offer a holistic view of how funding reductions are affecting all areas of statistical operations in these countries, while underscoring the outsized consequences for gender and health statistics.

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<sup>1</sup> United Nations, 2019. Mapping of SDG indicators. Report of the Inter-Secretariat Working Group on Household Surveys, background document. [https://unstats.un.org/UNSDWebsite/statcom/session\\_50/documents/BG-Item4c-Mapping-of-household-surveys-E.xlsx](https://unstats.un.org/UNSDWebsite/statcom/session_50/documents/BG-Item4c-Mapping-of-household-surveys-E.xlsx)

<sup>2</sup> Initially the DHS Program’s contract and funding from the US government was cancelled. Since then, the DHS Program has received funding that will enable it to continue for at least three years. However, it is uncertain how the DHS Program will be funded or managed after that time.

<sup>3</sup> United Nations, 2025. The Sustainable Development Goals Report 2025.. <https://unstats.un.org/sdgs/report/2025/funding-data-and-statistics/>

<sup>4</sup> Assessing the Impact of the Termination of the Demographic and Health Survey Program on the Global Monitoring of the Sustainable Development Goals, December 2025. [https://unstats.un.org/iswghs/documents/funding\\_impact\\_custodian\\_agencies.pdf](https://unstats.un.org/iswghs/documents/funding_impact_custodian_agencies.pdf)

The Rapid Assessment was carried out under the ISWGHS [Task Force on Sustainable Demographic and Health Statistics through Surveys](#), established by the United Nations Statistical Commission in March 2025.<sup>5</sup> The findings of this assessment, along with outcomes from other activities under the task force—including two additional assessments with (a) SDG custodian agencies on the impact of the DHS termination on global SDG monitoring<sup>6</sup> and (b) users of DHS<sup>7</sup>, as well as assessments through country consultations, key informant interviews, and focus group discussions—will contribute to forward-looking recommendations for sustainable demographic and health data production on population and health. These recommendations will be presented to the United Nations Statistical Commission in its 57<sup>th</sup> Session in 2026 and will guide how future programs on demographic and health data production can be structured to better support national ownership, sustainability, and integration into official national data ecosystems.

The report is structured as follows: Section 2 introduces the assessment questionnaire and provides an overview of the responding countries. Section 3 presents the key findings. Section 4 discusses the impact of funding reductions, mitigation strategies, and areas where support is needed. Section 5 focuses on countries that have conducted a Demographic and Health Survey (DHS) since 2015, highlighting their experiences, the survey’s valuable features, and the challenges faced. Section 6 presents the conclusion and outlines key considerations for future action. This report is published with an Annex that has all tables from the figures in this Report<sup>8</sup>.

## 2. Sustaining Survey Data Production, Dissemination and Use: A Rapid Assessment of Impact and Resilience Amid Funding Gaps and Disruptions

The Rapid Assessment was conducted with NSOs (hereafter referred to as the “Rapid Assessment”) in low- and middle-income countries (LMIC). Results presented in this report provide information to:

- Quantify the impact of reductions in funding on national statistical systems, including household surveys;
- Assess data areas that are more vulnerable to disruptions, with a special focus on gender and health statistics due to the disproportionate impact of survey disruptions on these domains;
- Understand the objectives and use, challenges, and perceived value of conducting DHS program surveys;<sup>9</sup>
- Identify adaptive and coping measures NSOs have undertaken or are planning to undertake;
- Understand the areas of support that are a priority for NSOs.\

The Rapid Assessment was distributed to NSOs in 130 low- and middle-income countries at the end of May 2025 and completed in September 2025, with responses from 68 NSOs. Of these, three indicated that the Assessment was not relevant to them. Forty-five reported experiencing reduced funding for statistics since January 2025 and 51 had conducted surveys collecting data on demographic and health statistics since 2015. Among those 51, 31 had implemented a DHS Program survey during that period. Unless otherwise specified, the results presented in this report are based on the number of NSOs that reported funding

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<sup>5</sup> More information about the task force is available in the [Terms of Reference of the Task Force](#).

<sup>6</sup> Assessing the Impact of the Termination of the Demographic and Health Survey Program on the Global Monitoring of the Sustainable Development Goals, December 2025. [https://unstats.un.org/iswghs/documents/funding\\_impact\\_custodian\\_agencies.pdf](https://unstats.un.org/iswghs/documents/funding_impact_custodian_agencies.pdf)

<sup>7</sup> Assessing the Impact of the Termination of the Demographic and Health Survey Program from the User Perspective, December 2025. [https://unstats.un.org/iswghs/documents/funding\\_impact\\_users.pdf](https://unstats.un.org/iswghs/documents/funding_impact_users.pdf)

<sup>8</sup> Available at [https://unstats.un.org/iswghs/documents/funding\\_impact\\_NSO\\_report\\_annex.xlsx](https://unstats.un.org/iswghs/documents/funding_impact_NSO_report_annex.xlsx)

<sup>9</sup> The DHS program primarily ran [three surveys](#): demographic and health surveys, malaria indicator surveys, and service provision assessments.

reductions since January 2025 or, for DHS-specific questions, countries that had conducted a DHS Program survey since 2015.<sup>10</sup>

While reviewing the results in this report, it is important to keep in mind some of the limitations of the Rapid Assessment. The first is that the Assessment’s response rate (52 percent) and smaller number of NSOs reporting effects make it challenging to disaggregate the responses because there are relatively few NSOs in each category, especially by region. A lower response rate may lead to biased estimates. An additional limitation of the Assessment is that responses were collected over four months, and it is possible that the results provided may not be strictly comparable across. Due to the fast-moving pace of responses to funding reductions and resulting changes, NSOs who responded in May might not have had access to the same information as NSOs who responded in September 2025. Lastly, the assessment covers an array of information that would be difficult for a single focal person or institution to answer, which might have impacted on the accuracy of some responses and may have lowered the response rate. The data is not representative and should be interpreted as indicative of broader trends rather than statistically generalizable findings.

*Table 1 Number of NSOs who responded and response rate by region and income level*

Classification	Number of Respondents <sup>1</sup>	Total Number of LMICs	Response Rate <sup>2</sup>
<b>Region<sup>3</sup></b>			
Central and Southern Asia	6	14	43%
Eastern and South-Eastern Asia and Oceania	10	22	45%
Europe	7	8	88%
Latin America and the Caribbean	11	22	50%
Northern Africa and Western Asia	12	16	75%
Sub-Saharan Africa	22	47	47%
<b>Income<sup>3</sup></b>			
Low-income	11	25	44%
Lower-middle-income	23	50	46%
Upper-middle-income	33	54	61%

<sup>10</sup> As such, the percentages presented are based on those that said ‘yes’ or not. Not includes both those that said no and for whom the question was not applicable. This was done to keep standard denominators throughout the report. The denominator for general questions on the impact of reductions in funding for statistics and surveys was 45 and for DHS specific questions it was 31.

<b>Total</b>	<b>68</b>	<b>130</b>	<b>52%</b>
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<sup>1</sup>Three countries that responded said that the NSO assessment questions were not applicable to them. For two of the countries, this was because domestic instability meant they could not respond to the assessment. They were included in the denominator based on the understanding that their answers to questions would have been ‘no’ or ‘not applicable.’

<sup>2</sup>Response rates are calculated by dividing the number of respondents by the total number of countries in the region, at that income level, or total.

<sup>3</sup>One country is not classified by region; another is not classified by income. Both are excluded from the table.

### 3. Key Findings

- **More than two-thirds of the responding NSOs have been impacted by the funding reductions since January 2025** – underscoring a widespread need for additional and more predictable financing, particularly from domestic sources. The vast majority of NSOs experienced reductions in funding from international organizations and their own governments; and about two-fifths from bilateral donors and private foundations.
- **Funding reductions have had a broad impact on the entire national statistical system.** It affected household surveys and other data sources, hampered SDG monitoring, and limited the production of statistics across various thematic areas such as gender, health, poverty, labor, and the environment. It also constrained essential statistical operations, with more severe effects on staff training and the exploration of innovative methods.
- **A consistently high percentage of NSOs cited financial challenges and the need for additional financial support, in every area that it was asked about.**<sup>11, 12</sup> NSOs from low-income countries (LICs) and Sub-Saharan Africa were more impacted and reported both a greater need for support and adoption of coping strategies than middle-income countries.
- **Budget reductions have negatively impacted the production and analysis of gender data** across NSOs, affecting most thematic areas, with the highest negative impacts in violence against women, sexual and reproductive health, and unpaid care. This confirms the urgent need for gender-focused support, particularly financial aid, technical assistance, and capacity building, to sustain and improve gender data systems.
- **The DHS surveys are a critical source of high-quality gender and health data**, but funding cuts threaten their continuity, risking the loss of essential gender modules. To address these challenges, NSOs are prioritizing strategies like integrating gender indicators into existing surveys and institutionalizing gender data collection, with a focus on durable financing and partnerships to ensure robust gender data ecosystems.
- **In response to funding reductions, NSOs are implementing key short-term actions** including strengthening partnerships with other national institutions, mobilizing financial support from the national government, and enhancing cost-efficiency through innovation. **Over the longer term (5–**

<sup>11</sup> Most NSOs also responded that financial challenges were one of the major challenges they faced with implementing demographic and health surveys.

<sup>12</sup> Several questions asked about the need for new and additional funding including the questions on the type of support most urgently needed, type of gender-focused support most urgently needed, and support for survey implementation. Higher percentages of NSOs selected financial support when answering these questions.

**10 years**), NSOs are considering integrating surveys into national budget planning processes and expanding the use of alternative data sources.

- **NSOs experiencing funding reductions have also called for increased technical support.** In terms of technical assistance, support was requested for survey design, implementation, dissemination and data integration.
- Almost all countries that have conducted a DHS since 2015 reported using the survey data for evidence-based policymaking, SDG monitoring and reporting, analyzing demographic trends, and monitoring health outcomes. The DHS surveys are valued for their standardized methodology, international comparability of questions and indicators, and inclusion of gender-specific indicators. **The most common challenges among countries who had implemented a DHS Program survey since 2015 included financing, delays in survey implementation and data release, and insufficient capacity for data analysis and use.**

#### 4. Impact of funding reductions, mitigation strategies and areas for support

##### *A. NSO Experience with International and Domestic Reductions*

Reductions in funding since January 2025 have significantly impacted NSO budgets. Specifically, 45 countries, which amounts to 69 percent of the responding NSOs reported reduced funding since January 2025 (**¡Error! No se encuentra el origen de la referencia.**). Some regions and income levels were impacted more. Every NSO from a low-income country who responded had seen a reduction in their budget for data and statistics, as had almost all NSOs from countries in Sub-Saharan Africa (Table 2).

*Figure 1 Percentage of NSOs reporting reduced funding for statistics since January 2025*

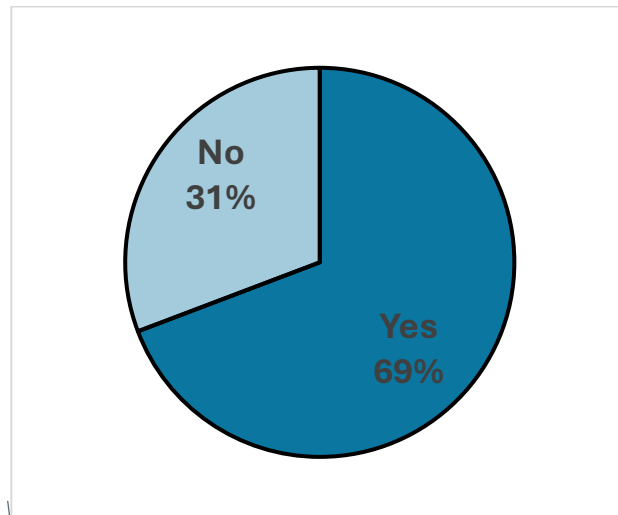


Table 2 Number of NSOs from LMICs experiencing reduced funding since 2025 by region and income level

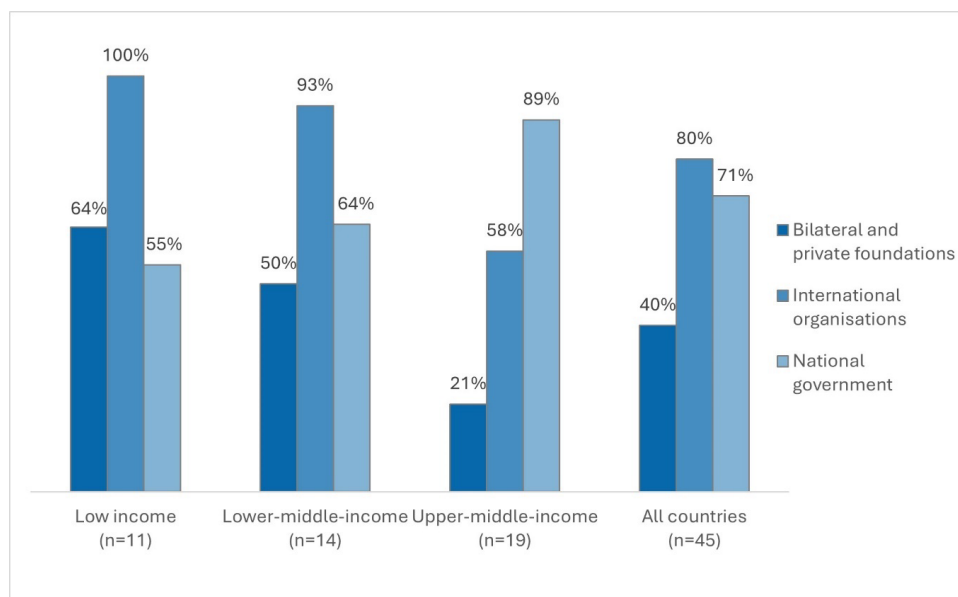
Classification	Number of LMICs Experiencing Reduced Funding	Total Number of Responding LMICs <sup>1</sup>	Percentage LMICs Experiencing Reduced Funding
<b>Region</b>			
Central and Southern Asia	4	6	67%
Eastern and South-Eastern Asia and Oceania	8	10	80%
Europe	3	6	50%
Latin America and the Caribbean	7	10	70%
Northern Africa and Western Asia	4	11	36%
Sub-Saharan Africa	19	22	86%
<b>Income<sup>2</sup></b>			
Low-income country	11	11	100%
Lower-middle-income	14	22	64%
Upper-middle-income	19	31	61%
<b>Total</b>	<b>45</b>	<b>65</b>	<b>69%</b>

<sup>1</sup> The total number of responses used excludes 3 countries that indicated that the assessment was not relevant to them.

<sup>2</sup> One country without income classification is excluded from the table.

The remainder of the section will focus on the countries who reported they had reductions in their budgets since January 2025. In Figure 1, four-fifths of impacted NSOs experienced reductions in funding from or channeled through international organizations (80 percent), followed by about three-quarters (71 percent) from their own national government, and two-fifths (40 percent) from bilateral donors or private foundations. A higher share of low- and lower-middle-income countries experienced funding reductions from international organizations than from other sources. Among upper-middle-income countries, a higher share experienced reductions from national governments.

Figure 1 Percentage of funding reductions by source among NSOs that reported having reduced budgets since January 2025



### B. Impact of Funding Reductions on National Statistical Systems

Among the countries that reported cuts since January 2025, 58 percent of NSOs reported a reduction in their total statistical budget, with 11 percent facing cuts of more than half. Around 40 percent of the countries that experienced reductions since January 2025 reported negative effects on agricultural censuses and administrative data (Figure 2). In total, at least 29 percent of NSOs reported some negative impacts on at least one of their statistical programs. While more details on the impact of funding cuts on household surveys will be provided in the next subsection, 98 percent of the NSOs reported that at least one survey was negatively impacted.

In terms of the magnitude of budget cuts, as shown in Figure 3, NSOs reported an average 60 percent reduction in budget for survey programs. Thirty-eight percent experienced budget reductions in administrative data (non-CRVS) and around 30 percent reported cuts in other statistical programs, including population censuses, economic censuses, civil registration and vital statistics, agricultural censuses, and citizen data. Around 30 percent of NSOs experienced reductions of more than 25 percent in household survey budgets, 20 percent for economic and population censuses, and 18 percent for agricultural censuses.

Figure 2 Percentage of NSOs reported a statistical program area was negatively impacted (n=45)

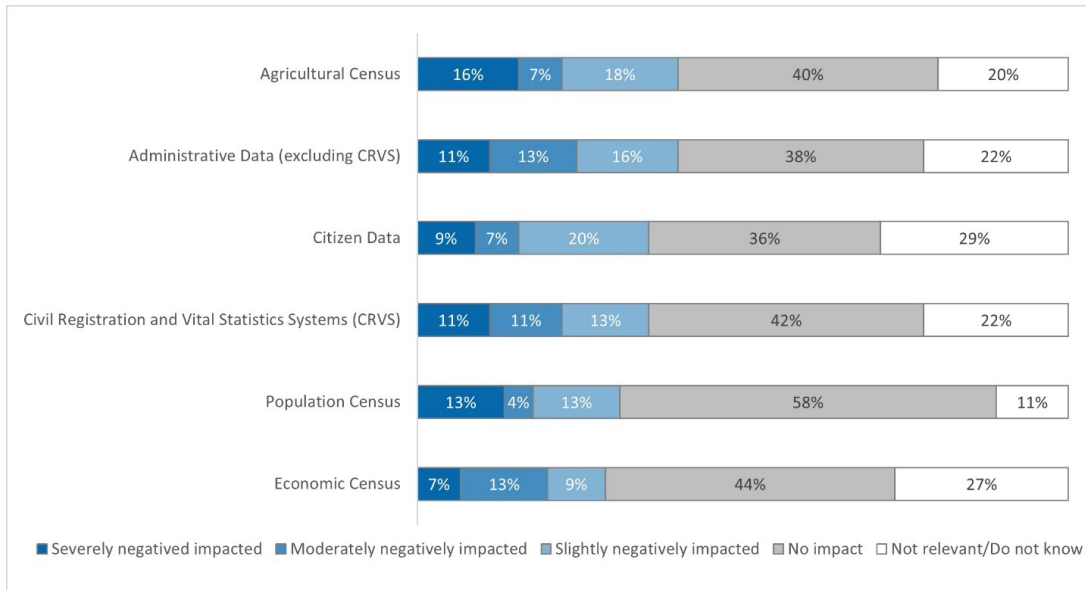
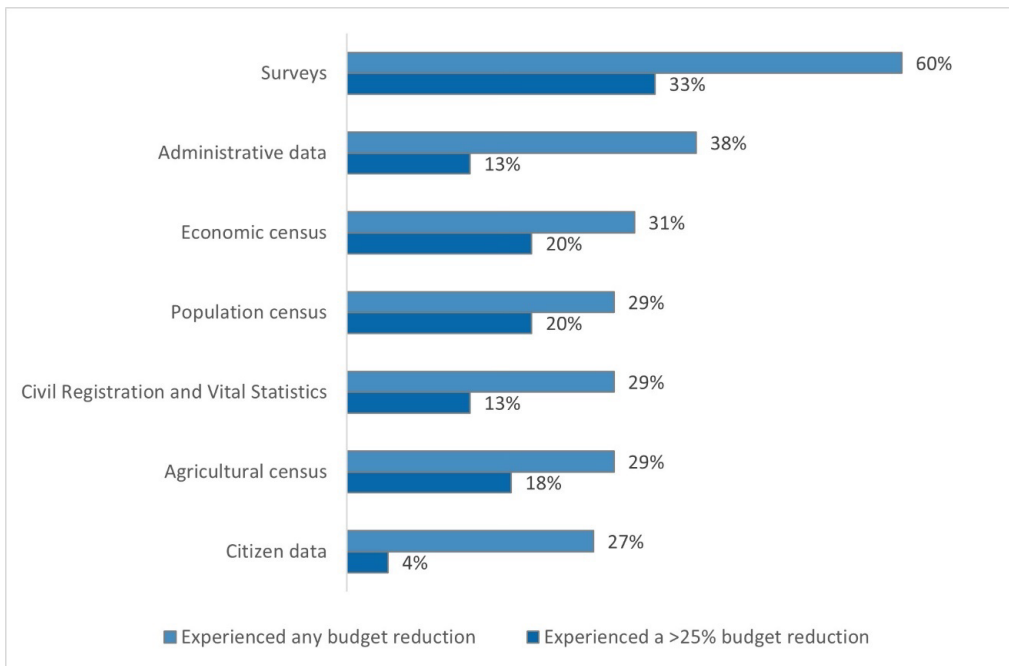


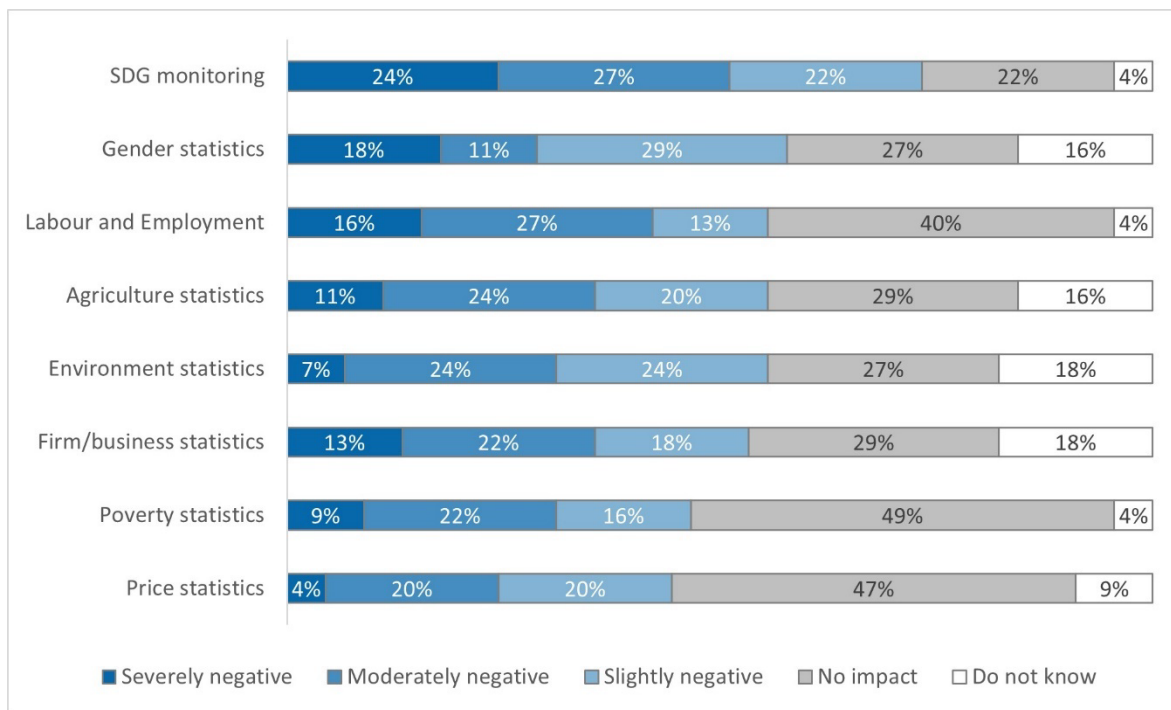
Figure 3 Percentage of NSOs reporting larger budget reductions by statistical program (n=45)



The size of the reductions in funding is not uniform across statistical areas, likely due to the cost and technical knowledge needed to collect certain pieces of data like micro-nutrient intake or yield.

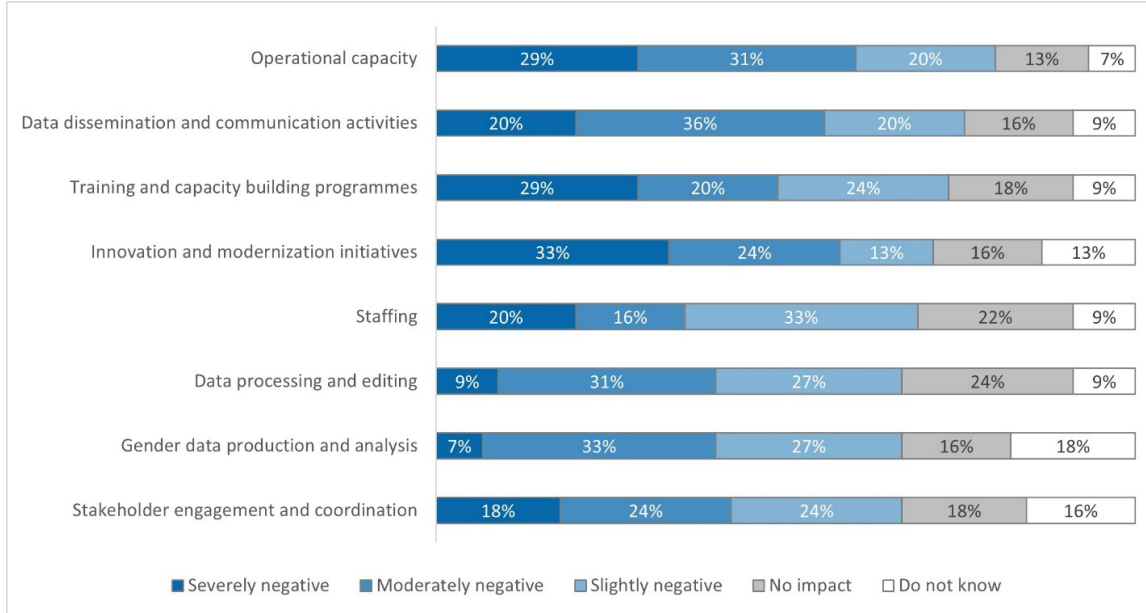
SDG monitoring emerged as the most affected area: nearly three-quarters of NSOs (73 percent) reported negative effects, and 33 percent experienced at least 25 percent of budget reductions. Gender statistics were also heavily impacted: 58 percent of NSOs reported some effect on the production and analysis of gender data (Figure 4), with particular risk to health and demographic indicators that rely on externally financed household surveys. Similar proportions were reported for labor and employment and environment statistics. Poverty statistics seemed to be more resilient, yet three in ten NSOs reported a severe or moderate negative impact.

Figure 4 Percentage of NSOs reported that a statistical area was negatively impacted (n=45)



The knock-on effects on organizational capacity are acute. Innovation and modernization initiatives registered the single largest share of severe negative impact (33 percent). Around half of NSOs reported severe and moderate impacts to operational capacity (fieldwork and logistics), data dissemination and communication, capacity-building, and innovation activities, indicating immediate threats to data collection, processing, public reporting, and organizational modernization (Figure 5).

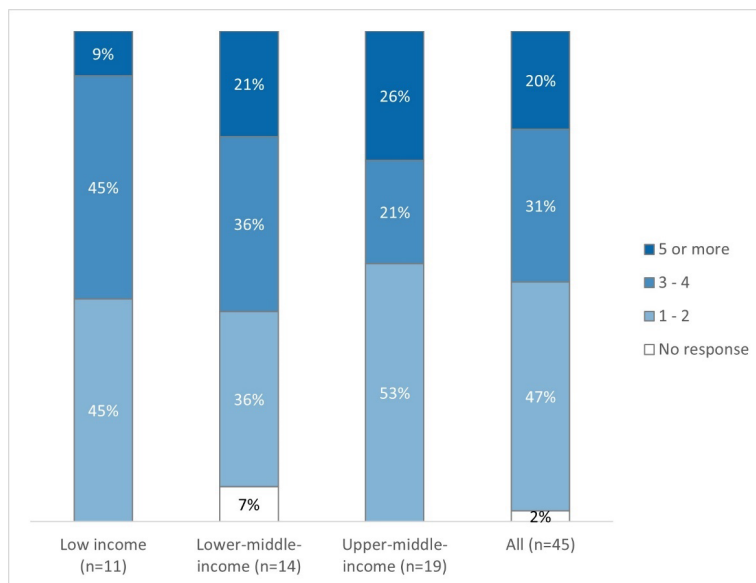
Figure 5 Funding reduction impacts on operational areas (n=45)



### C. Impact of Funding Reductions on Household Surveys

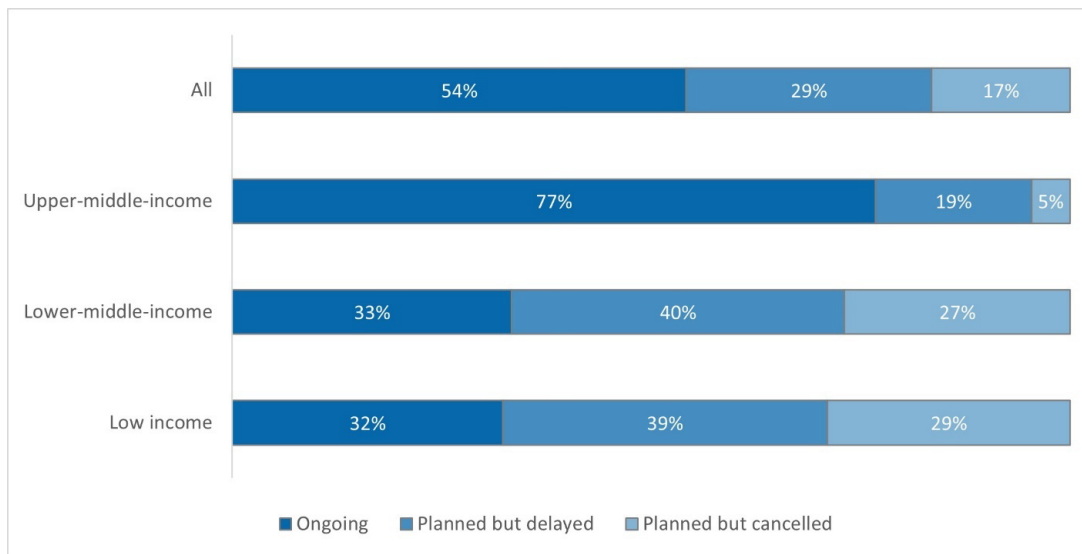
The disruptions to funding and reductions in NSO budgets have interrupted planned or ongoing surveys. Among all NSOs that have experienced funding reductions since January 2025, 98 percent have experienced negative impact on at least one planned or ongoing survey. For NSOs in low-income countries, it appeared to be less common for five or more surveys to be impacted, though this may be because they had fewer surveys to begin with. Low-income and lower middle-income countries appear to be more likely to have three to four surveys that were impacted (Figure 6).

Figure 6 Percentage of NSOs reporting on the number of surveys impacted by income level



Overall, an average of 4 surveys per NSO (181 surveys in total) were impacted by the reductions in funding. Of those surveys, about one in six were cancelled and about three in ten were delayed (Figure 7). The negatively impacted surveys in upper-middle-income countries are less likely to affect their status, as more than 75 percent of the impacted surveys are still ongoing, while only around a third of the impacted surveys in lower-middle- and low-income countries are ongoing. Surveys being impacted cover a wide variety, ranging from regular ones such as labor force surveys, living condition surveys and general-purpose surveys to tourism surveys, agriculture-related surveys, and transportation surveys.

Figure 7 The impact of funding reduction on planned/ongoing surveys, by income (n = 45)



#### D. Deep Dive - Gender Data Systems

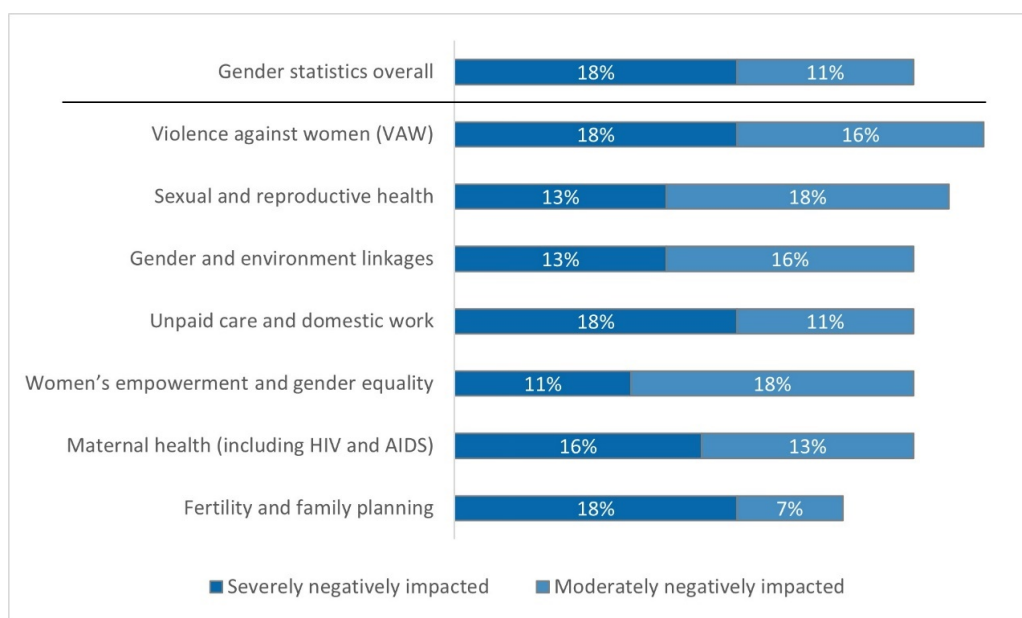
“Gender data” broadly refers to data that reveal differences, inequalities, or dynamics in experiences across people of different genders (or sexes) in social, economic, political, health, and cultural domains. The concept has emerged in global development and gender research agendas to emphasize that to achieve gender equality, one must go beyond visibility (i.e. counting) to understand structural and relational differences; with gender data being key to monitor progress in the SDG 5, and overall, the SDG indicators that can have gender disaggregation. Surveys represent one of the most common tools for collecting gender data by incorporating not only the possibility of the disaggregation of data but also including gender-sensitive approaches in the methodological design and the collection, analysis, and use of data. In the context of funding reductions for statistical activities, gender data are particularly vulnerable due to the reduced availability of resources to implement the required gender-specific approaches across the different phases of statistical production. Reductions in budget are widespread, and they hit gender data systems especially hard. Already underfunded even in stable times, these systems face deeper strains, widening existing data gaps and further weakening the evidence needed for gender-responsive policymaking. The [2025 PARIS21 report](#) confirms that funding for gender data financing continues to decline, with disbursements decreasing for a second consecutive year in 2023 to USD 154 million, representing 13% of total funding for statistics.

In the Rapid Assessment, budget reductions for gender statistics have impacted more than half of the NSOs reporting overall reductions since 2025. Over a fifth of NSOs experienced reductions exceeding a quarter of their gender-specific budget, a proportion slightly lower than the 29 percent reporting total budget reductions of similar magnitude. Operationally, about 40 percent of NSOs reported that gender data

production and analysis were moderately or severely impacted, with an additional 27 percent reporting a slightly negative impact to gender data production and analysis (Figure 6).

The NSOs participating in the assessment reported that gender statistics were negatively impacted: 58 percent of NSOs reported some negative effect, with 18 percent being severely impacted (Figure 4). The strain on gender data is consistent across thematic areas: 25 – 33 percent of NSOs reported each area was moderately or severely impacted, with at least 44 percent NSOs experiencing overall negative effects per area (Figure 8). This could be an indication that reductions are not isolated to niche topics but cut across the gender data ecosystem. Specifically, NSOs reported that violence against women (VAW) (34 percent), sexual and reproductive health (31 percent) were moderately or severely impacted in over three of ten NSOs. The uniformity of impact across thematic areas suggests systemic vulnerability. Gender data are foundational to multiple domains- including health, labor, and social protection – rather than siloed topics. Unpaid care, VAW, and fertility have the highest percentage of NSOs who reported severe negative impacts (18 percent each). Severe impacts on VAW and unpaid care data threaten progress on SDG 5 and undermine accountability mechanisms for gender equality.

*Figure 8 Percentage of NSOs severely or moderately negatively impacted in the production and use of gender data by thematic areas (n=45)*

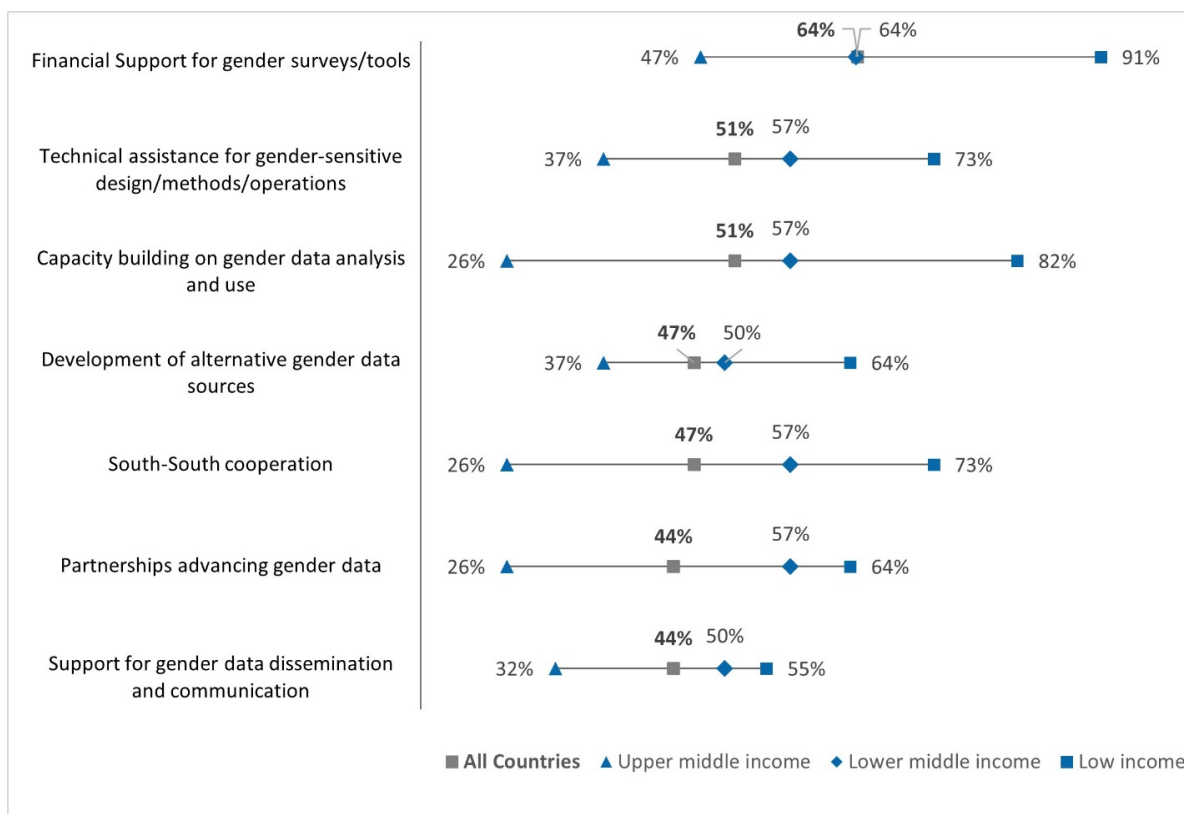


Additionally, NSOs—particularly those from LICs—cited the need for urgent, gender-focused support in the next two years. The higher share of NSOs answered urgent need in financial assistance for gender surveys/modules (64 percent), while about half of NSOs reported the urgent need for both technical assistance in gender-sensitive design and capacity building for gender data use and analysis (Figure 9). When looking at the levels of priority support in different areas, almost half of NSOs indicated a need for support in gender-related survey modules and South-South cooperation (knowledge/experience sharing), with 20 percent identifying these as high priority. For the remaining areas of financial support included in the assessment - gender-sensitive survey design, gender data analysis, dissemination, use of innovative approaches, and development of partnerships - at least one third of NSOs reported high or moderate levels of need. This combined demand for financial and technical support underscores a dual challenge: insufficient resources and limited institutional capacity. Addressing both dimensions is essential to build

sustainable gender data systems, particularly as LICs face the greatest risk of gender data erosion — a trend that could widen global gender data inequalities and undermine international comparability.

Adaptation strategies that NSOs are implementing or planning to implement include integrating gender indicators into existing activities in the short term (42 percent), especially in LIC, and institutionalizing gender data within survey systems in the long-term (33 percent), mostly in low- and lower-middle countries. While short-term integration offers a pragmatic response, long-term institutionalization is essential for building resilience; without embedding gender data into core systems, any gains achieved are likely to remain fragile.

Figure 9 Percentage of NSOs reporting new gender-focused support urgently needed by income status contribution (n=45)



For countries with DHS and DHS-related surveys in the last ten years, 71 percent reported that one of the main objectives of these surveys was conducting analysis on gender equality and planning. These surveys are an important source of information on gender, as 63 percent of countries reported that DHS data influenced gender and empowerment programs in their country. Furthermore, about half of NSOs (49 percent) find the sex-disaggregated data and gender indicators DHS provided to be extremely valuable; and 67 percent, mostly from lower- and upper middle-income countries, benefit from gender modules. Together, these findings confirm that DHS surveys are a cornerstone of gender data infrastructure, and their influence on policy and programming underscores the importance of safeguarding their continuity.

Despite their value, DHS and DHS-related surveys face implementation challenges that impact gender data collection. Approximately, a fifth of NSOs noted limited coverage of gender-related indicators, and about 22 percent of countries anticipate losing gender modules because of the financing cuts since early 2025.

This is concerning because the loss of gender modules in DHS would risk reversing progress on gender-sensitive data collection and undermine SDG monitoring.

In terms of support priorities, a third of NSOs with DHS and DHS-related surveys identified strengthening gender data production and analysis as a key need, reinforcing the demand for gender data in surveys; with this percentage being higher in countries that have been included in the DHS program (45 percent). This reflects a clear policy signal: NSOs value gender data and want to expand it but lack the means. Therefore, strategic investment now could yield long-term dividends in gender-equality monitoring and help ensure the continuity of the DHS Program's unique contribution to global gender data.

#### *E. Deep Dive - Health Data Systems*

Health data systems gather data from multiple sources including surveys, civil registration and vital statistics, health information management systems, and population censuses to understand and monitor trends, and implement targeted interventions. Due to the number and complexity of data sources that feed into a health data system, health data systems were particularly impacted by interruptions to programs supported by USAID (including the DHS program), [UNICEF](#), [GAVI](#), [the WHO](#), and [others](#). As such the health data ecosystem has been [more severely impacted](#) by the reductions in funding.

The assessment showed that about one in four NSOs reported that the production and use of gender data on sexual and reproductive health (31 percent), maternal health (29 percent), and fertility and family planning (25 percent) were moderately or severely negatively impacted by reductions in funding (Figure 8). Without sufficient health data, countries and the global community risk inadequate responses or no responses to a wide range of current and future health challenges.

The interruption to the DHS Program was particularly poignant for health data systems as the surveys are used by participating countries to calculate as many as a third of the health SDGs<sup>13</sup> and for national tracking, prevention, and responses to health issues. Specifically, the DHS Program collected information on mortality and cause of death; water, sanitation, and hygiene; women's health; children's health; nutritional status; HIV prevalence; malaria prevalence; and reproductive health. For countries that have had a DHS Program survey since 2015, the top three policy and program areas informed by DHS surveys are all health related, including: family planning and reproductive health (90 percent), health (90 percent), and child health and nutrition (87 percent).

#### *F. NSO Adaptation and Mitigation Measures*

In the face of challenges and reductions to their budgets, NSOs have already begun to innovate and forge new systems to produce much needed data and statistics. Seven in ten NSOs have either begun implementing or are planning to implement adaptive strategies in response. All reporting NSOs from low-income countries and almost all NSOs from Sub-Saharan Africa said they had taken or are planning to take adaptive measures while only half of NSOs from upper middle-income countries reported taking adaptive measures.

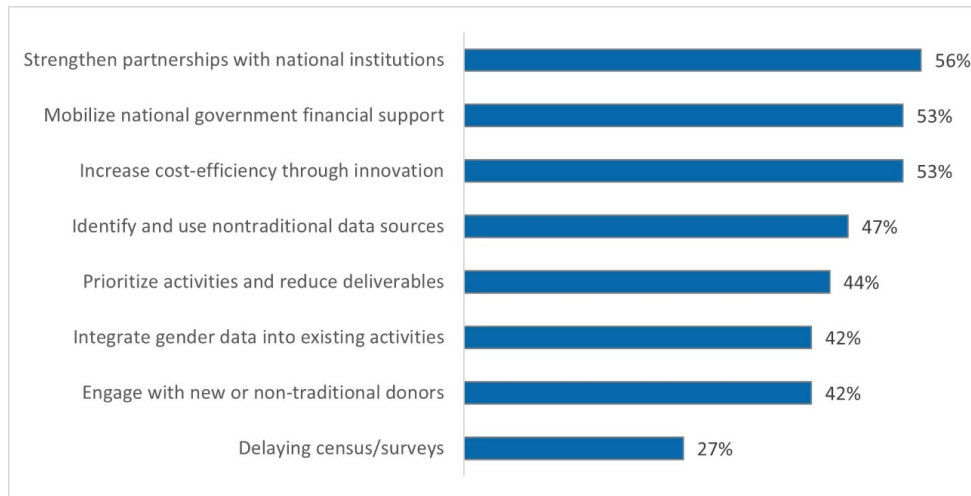
As shown in Figure 10, NSOs were least likely to have delayed censuses or surveys as an adaptive strategy (27 percent). NSOs were most likely to strengthen partnerships with other national institutions (56 percent),

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<sup>13</sup> According to the 2025 [SDG Report](#), data from the DHS surveys can be used to calculate 11 of the health SDG indicators. The [UN Global Indicator Framework](#) lists 28 health SDG indicators.

mobilize financial support from national governments (53 percent), or increase cost-efficiency through innovation (53 percent).

*Figure 10 Percentage of NSOs reporting using an adaptive measure (n=45)*



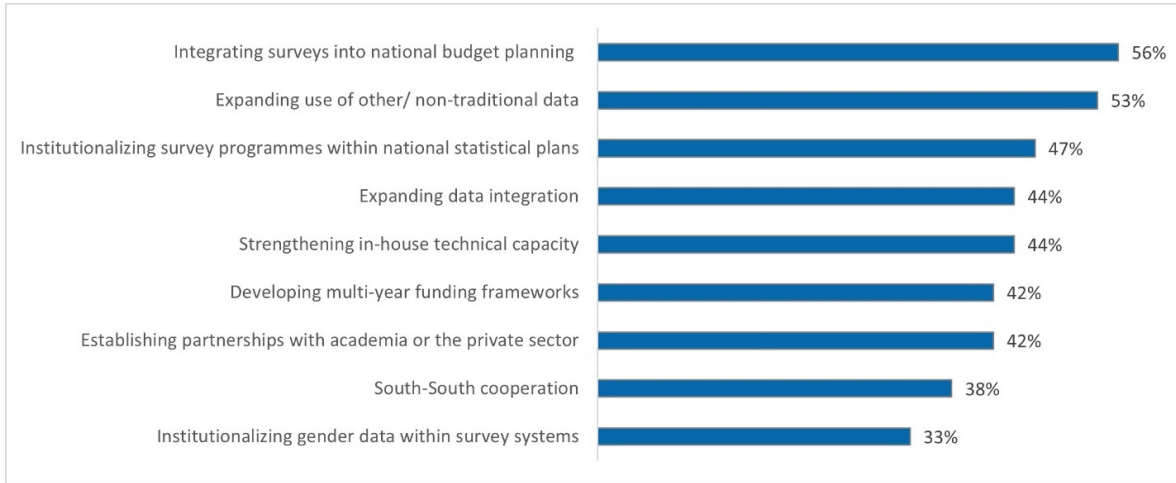
Low-income countries seemed to be more likely to mobilize financial resources, either from the national governments or from new or non-traditional donors. Upper-middle-income countries tended to prioritize strengthening partnerships with national institutions and increasing cost-efficiency through innovative approaches. The focus on cost-efficiency through innovation is further supported by qualitative responses supplied at the end of the assessment which re-emphasized the need to leverage technological advancements (such as AI) and enhancing the use of administrative, citizen, and non-traditional data sources.

Generally, if an NSO identified an adaptive measure they were taking, they also cited it as a high priority. For example, about two thirds of NSOs that reported increasing cost-efficiency through innovation also reported it was a high priority; the remaining third said it was a medium priority. The one exception was when it came to prioritizing activities and reducing the number of deliverables; most NSOs responded that it was a medium priority.

Although slightly less prevalent than immediate adaptive strategies, six in ten NSOs also reported planning longer-term coping mechanisms spanning 5 to 10 years. — Close to four out of five NSOs from Sub-Saharan Africa have begun implementing or plan to implement coping measures to ensure the sustainability of surveys.

Figure 11 shows that the most planned for or implemented coping strategies included integrating surveys into national budget planning processes (56 percent), followed by expanding the use of administrative, citizen, or other non-traditional data (53 percent). NSOs from low-income countries also tended to prioritize institutionalizing gender data within survey systems, whereas NSOs from upper-middle-income countries placed greater emphasis on expanding their use of other data sources and data integration.

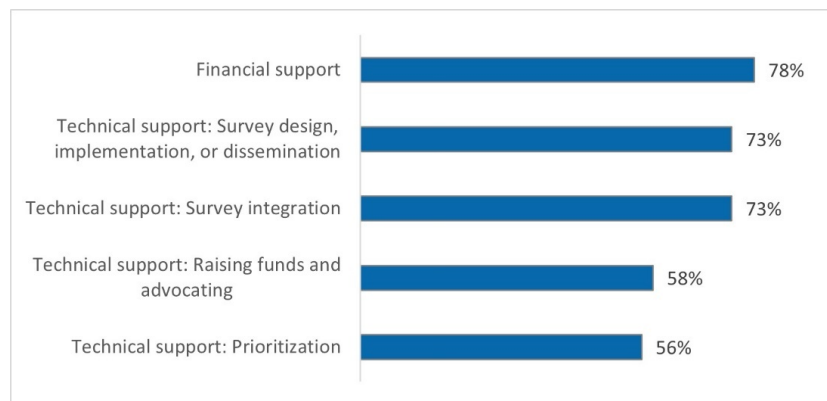
Figure 11 Percentage of NSOs reporting using a long-term (5-10 years) coping measure (n=45)



G. Priority Areas of Support for NSOs to Ensure Planned Surveys Are Conducted

The abrupt reductions in funding have left close to 90 percent of NSOs (87 percent) citing the need for new support to be able to implement all planned surveys for the next two years. As shown in Figure 12, outside of financial support (78 percent), NSOs indicated support for integrating the survey with other data sources (73 percent) and technical survey support including the design, implementation, and dissemination of data (73 percent) would be needed. Most NSOs from low-income countries were also likely to highlight the need for support with raising funds and advocating for survey programs.

Figure 12 Percentage of NSOs who selected a particular type of necessary support to implement all schedule surveys in the next two years (n=45)



If an NSO selected a priority area, such as integrating the survey with other data sources or technical survey support, they also predominantly selected the area as a high priority with two exceptions. More NSOs said prioritization and making the domestic case to funders was a medium or low priority rather than high priority for support. Also, an equal number of NSOs said support for survey design was a low or medium priority rather than a high priority for support.

## 5. NSO's Experience with DHS surveys

Out of the 65 countries that responded to the assessment, 51 indicated that they have conducted a survey since 2015 collecting demographic and health data; this is around three-quarters of the responding NSOs (78 percent). A comparison of the 51 countries against the list of DHS program countries showed that 31 out of the 51 have conducted a DHS Program survey since 2015. This shows that 56 percent of the countries that have conducted a DHS Program survey since 2015 are covered by the assessment (Table 3). Analysis in this section focuses on the 31 countries that have conducted a DHS Program survey since 2015. Findings comparing the countries that conducted a DHS Program survey (31) with those that had a survey collecting demographic and health statistics outside of the DHS Program (20) are in Box 1.

*Table 3 Number and percentage of NSOs who reported have a DHS or related survey or who had a DHS Program survey since 2015, by region and income status*

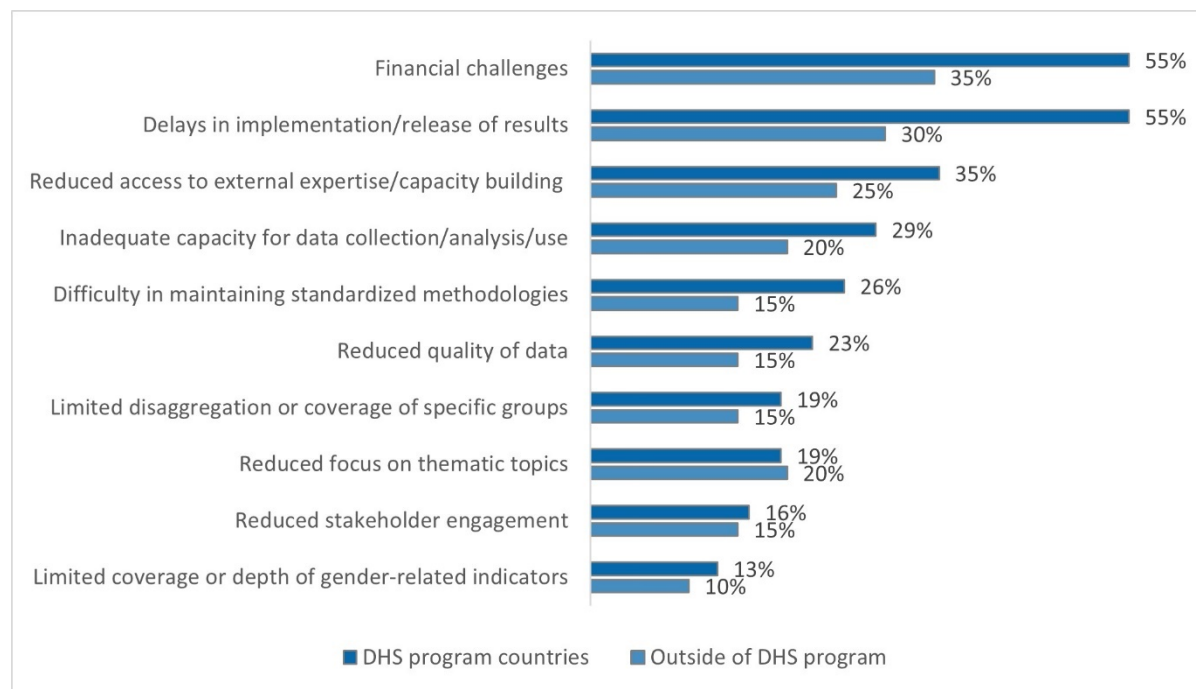
Classification	Response Rate Among LMICs Reporting Having a DHS			Response Rate Among DHS Countries		
	NSOs Who Reported Having a DHS (n)	LMICs (n)	LMICs Who Reported Having Had a DHS (%)	Responding LMICs who had a DHS	LMICs with a DHS since 2015 (n)	Responding NSOs who had a DHS survey
<b>Region</b>						
Central and Southern Asia	6	6	100%	4	8	50%
Eastern and South-Eastern Asia and Oceania	6	10	60%	3	7	43
Europe	4	6	67%	1	1	100%
Latin America and the Caribbean	9	10	90%	33	3	100%
Northern Africa and Western Asia	6	11	55%	2	4	50%
Sub-Saharan Africa	20	22	91%	18	32	56%
<b>Income Status<sup>1</sup></b>						
Low-income country	9	11	82%	8	15	53%
Lower-middle-income country	21	22	95%	15	31	48%
Upper-middle-income country	20	31	65%	77	9	78%
<b>Total</b>	<b>51</b>	<b>65</b>	<b>78%</b>	<b>31</b>	<b>55</b>	<b>56%</b>

<sup>1</sup> One country that is not classified by income is excluded from the table.

*Box 1: Surveys Collecting Demographic and Health Statistics: Within and Outside the DHS Program*

Out of the 51 NSOs that responded that a demographic and health-related survey has been conducted since 2015, 31 implemented the survey under the DHS Program and 20 outside of the program. Countries with surveys within the DHS Program were much more likely to have encountered, or to anticipate encountering, several types of challenges than the ones outside of the DHS program (Figure 13). For example, more than half of the countries with DHS-Program surveys cited financial challenges and delays in survey implementation, compared to 30-35 percent of NSOs with surveys outside of the DHS Program.

*Figure 13 Percentage of NSOs that are or anticipate facing challenges due to reduced international or domestic funding for statistics, by DHS status (n = 51)*



A much higher percentage of NSOs from countries that have had DHS Program surveys said they needed support to collect demographic and health data (58 percent of DHS Program countries, 35 percent of countries that had conducted a DHS related survey) and across all areas of support.

*A. Objectives of the DHS Program surveys*

Almost 100 percent of the 31 NSOs that conducted a DHS Program survey selected the same four objectives, shown in Figure 14. The least common objective for conducting a DHS Program survey was academic research, selected by only about 58 percent of responding NSOs. Nine in ten NSOs reported that not only was their objective in conducting a DHS Program survey to inform policies, but they had also successfully used data from DHS Program surveys to influence policy design, targeting, evaluation, and reporting.

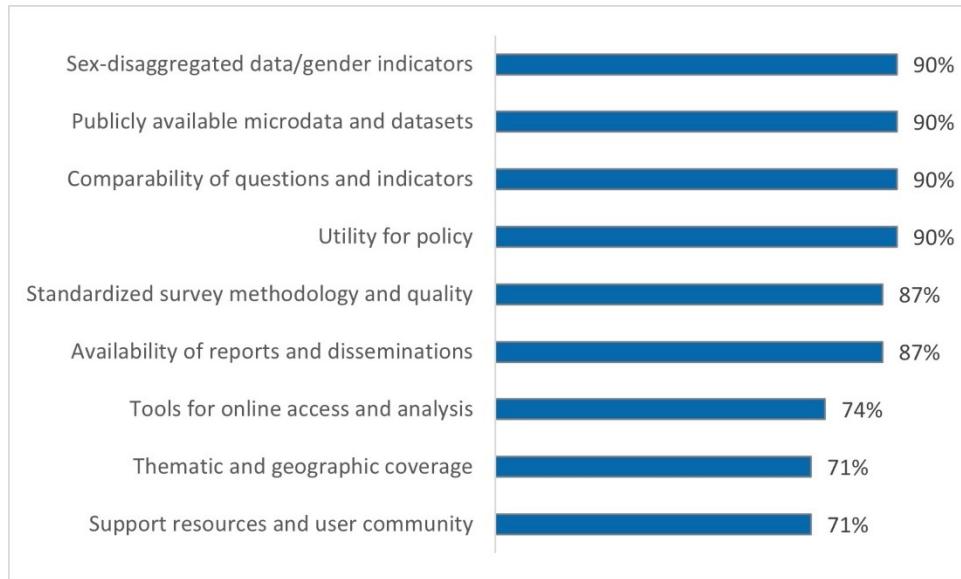
Figure 14 Percentage of NSOs who selected a particular objective for conducting a DHS survey (n=31)



### *B. Valuable DHS features*

Almost all NSOs (90 percent) found four features of the DHS survey data to be of particular value: utility to policy, sex-disaggregated data and gender indicators, publicly available microdata and datasets, and comparable questions and indicators (Figure 15). NSOs from upper middle-income countries showed a slightly different focus; they all highlighted the utility for policy and publicly available microdata but also the value of support resources and the user community, and the sex-disaggregated data and gender-specific indicators.

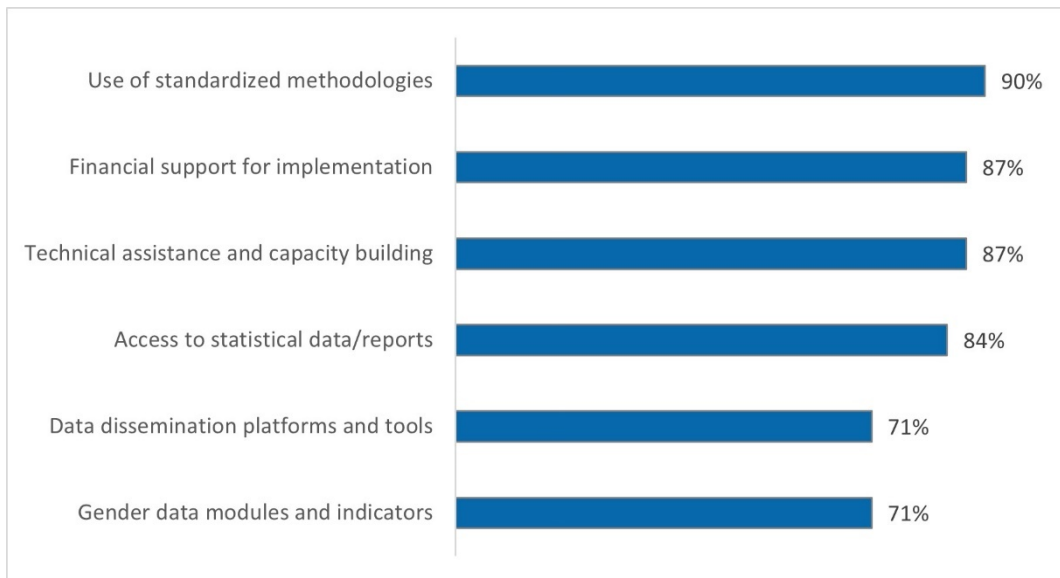
Figure 15 Percentage of NSOs who perceived the DHS feature as extremely or very valuable (n=31)



C. Benefit of the DHS Program

Some of the aspects that NSOs felt that they had benefited the most from were the DHS Program’s use of standardized methodology (90 percent), financial support for implementation, and technical assistance (87 percent) (Figure 16). Access to statistical data and reports (84 percent) also benefited most of the reporting countries, while around seven in ten countries benefited from the program’s data dissemination platforms and gender data modules and indicators.

Figure 16 Percentage of NSOs who said they benefited from an aspect of the DHS (n=31)



#### D. Challenges in implementing DHS

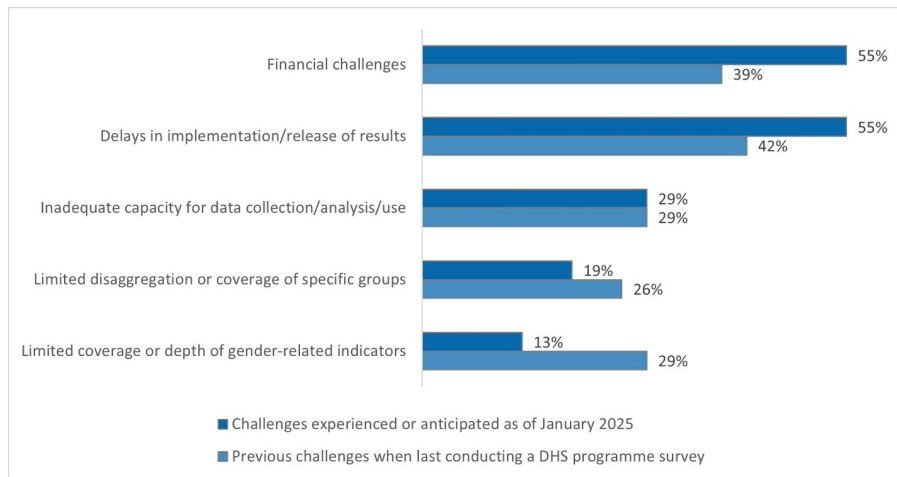
Implementing DHS Program surveys has been challenging in the past and even more so since the program was interrupted in January 2025. Around two-thirds of national statistical offices that implemented a DHS Program survey since 2015 reported facing challenges in implementing or using the survey results during their most recent DHS Program survey. The same share of NSOs indicated that recent reductions in funding for statistics have negatively affected—or are expected to affect—the implementation of DHS Program surveys.

Low-income countries and those in Sub-Saharan Africa appeared more likely to experience or anticipate such negative impacts. About three-quarters of NSOs from these regions reported both past challenges in conducting DHS Program surveys and current or expected challenges related to the 2025 funding cuts.

Many of the specific challenges NSOs faced in implementing DHS Program surveys are likely to become persistent. As shown in Figure 17, prior to the program’s interruption, about two-fifths of NSOs (39 percent) reported financial challenges. This figure rises to just over half (55 percent) among those currently experiencing or anticipating financial difficulties in 2025.

Similarly, delays in implementation were reported by over forty percent of NSOs (42 percent) before the recent funding changes. Since January 2025, however, over half (55 percent) have encountered or expect to encounter delays in conducting DHS Program surveys.

*Figure 17 Percentage of NSOs who selected a previous challenge conducting DHS surveys or experiences or anticipated a challenge in January 2025 (n=31)*

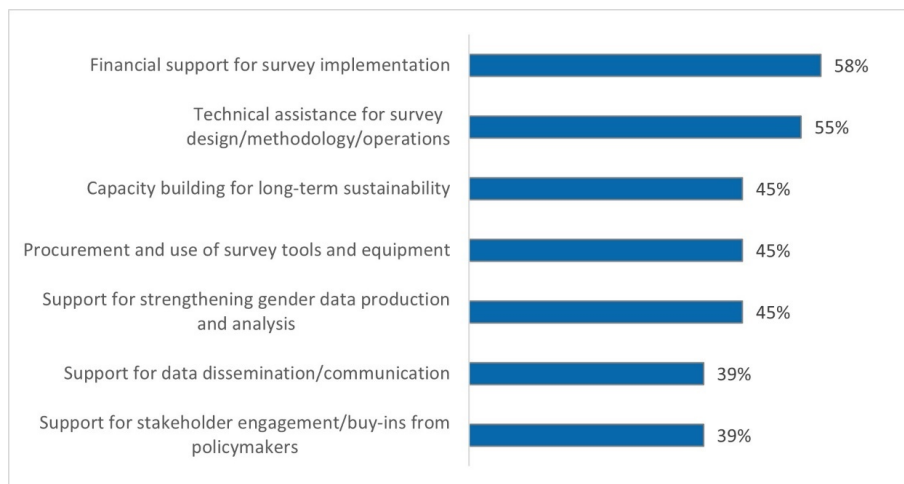


NSOs are also experiencing — or anticipating — new challenges resulting from disruptions to the DHS Program, including reduced access to external experts and capacity-building mechanisms (35 percent). With the [DHS Online Learning Platform](#) no longer actively supported or updated under the new iteration of the program, further reductions in capacity-building opportunities appear imminent.

Given the uncertainty and challenges with the demographic and health data collection system, many NSOs (58 percent) responded that there is also the need to provide support to sustain the production and use of high-quality demographic and health data. Moving forward, in addition to financial support (58 percent), just over half of NSOs highlighted the need for additional technical assistance for survey design, methodology, and operations (55 percent; Figure 18). Most NSOs in low-income countries also highlighted

the need for support for data dissemination and communication and over half of NSOs from lower middle-income countries highlighted the need support for the procurement of tools and for capacity building.

*Figure 18 Percentage of NSOs who selected a form of support needed to sustain the production and use of demographic and health data (n=31)*



## 6. Conclusions and Considerations Moving Forward

The assessment has helped quantify and elucidate high-level findings on recent changes to funding for and work in global data and statistics. These results will help guide the ISWGHS and the task force in their follow-up efforts by guiding country consultations, key informant interviews, and focus group discussions. Both this assessment and qualitative discussion will feed into the task force’s recommendations and advocacy for sustained and systematic investment in health and demographic statistics.

Since January 2025, more than two-thirds of responding National Statistical Offices (NSOs) have experienced funding reductions, with impacts felt across the entire statistical system. Reductions from international organizations, national governments, bilateral donors, and private foundations have led to disruptions in household surveys, hindered SDG monitoring, and constrained production of statistics in key areas such as gender, health, poverty, labor, and the environment. Gender statistics, already chronically underfunded, were among the most severely affected—over half of NSOs reported budget reductions for gender data, with notable impacts on violence against women, sexual and reproductive health, and unpaid care indicators. These reductions have also hindered statistical operations like staff training and innovation. Low- and lower-middle-income countries, particularly those in Sub-Saharan Africa, reported more severe impacts, including reduced capacity and greater reliance on adaptive strategies.

DHS surveys are highly valued by NSOs for their standardized methodology, international comparability, open data access, and gender-specific indicators. It remains a cornerstone for gender and health statistics for many countries. However, despite their recognized value, countries faced several challenges in implementing DHS surveys, including limited financing, delays, and insufficient data analysis capacity.

To respond to the funding reductions, NSOs are pursuing both short-term measures—such as strengthening national partnerships and improving cost-efficiency—and long-term strategies like integrating surveys into national budgets, expanding data sources, and enhancing internal capacity.

There is a strong call, especially from low-income countries, for increased financial and technical support to ensure continued data availability for planning, policies, and gender and health-related programs. Given that the entire national statistical system is being affected by funding reductions, it is essential to take a systematic and coordinated approach to support countries in building resilient and sustainable data systems.