

# The Millennium Development Goals Report



UNITED NATIONS

2009





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NEW YORK, 2009

**END POVERTY 2015** *Make it happen*  
MILLENNIUM DEVELOPMENT GOALS

# Foreword

Nine years ago, world leaders set far-sighted goals to free a major portion of humanity from the shackles of extreme poverty, hunger, illiteracy and disease. They established targets for achieving gender equality and the empowerment of women, environmental sustainability and a global partnership for development. In short, they adopted a blueprint for a better world – and pledged to spare no effort in fulfilling that vision.

We have made important progress in this effort, and have many successes on which to build. But we have been moving too slowly to meet our goals. And today, we face a global economic crisis whose full repercussions have yet to be felt. At the very least, it will throw us off course in a number of key areas, particularly in the developing countries. At worst, it could prevent us from keeping our promises, plunging millions more into poverty and posing a risk of social and political unrest. That is an outcome we must avoid at all costs.

We cannot allow an unfavorable economic climate to undermine the commitments made in 2000. On the contrary, our efforts to restore economic growth should be seen as an opportunity to take some of the hard decisions needed to create a more equitable and sustainable future.

This report shows that the right policies and actions, backed by adequate funding and strong political commitment, can yield results. Fewer people today are dying of AIDS, and many countries are implementing proven strategies to combat malaria and measles, two major killers of children. The world is edging closer to universal primary education, and we are well on our way to meeting the target for safe drinking water.

However, the report also notes that many challenges remain and are likely to become even more difficult in the current economic climate. Early indications are that, not surprisingly, the poor have suffered most from the upheaval of the past year. The numbers of people going hungry and living in extreme poverty are much larger than they would have been had progress continued uninterrupted. Economic hardship has pushed tens of millions of people into vulnerable employment and increased the number of those who, though employed, do not earn enough for themselves and their families to rise above the poverty line of \$1.25 a day.

Rather than retreat, now is the time to accelerate progress towards the MDGs and to strengthen the global partnership for development. If the global community responds constructively to the crisis, the goals can still be achieved. Honouring the commitment to increase aid is critical. Equally important is ensuring that the interests of the developing countries, and especially the poorest ones, remain central in negotiations on trade. We must also 'seal the deal' on a new climate change regime in Copenhagen in December. The timing is ripe for making the structural changes that are needed to move more decisively towards more equitable development and sustainability and to address the climate crisis.

The global community cannot turn its back on the poor and the vulnerable. We must strengthen global cooperation and solidarity, and redouble our efforts to reach the MDGs and advance the broader development agenda. Nothing less than the viability of our planet and the future of humanity are at stake. I urge policymakers and all stakeholders to heed the message of this valuable and timely report.



BAN KI-MOON  
*Secretary-General, United Nations*

# Overview

The Millennium Declaration set 2015 as the target date for achieving most of the Millennium Development Goals (MDGs), which established quantitative benchmarks to halve extreme poverty in all its forms. As the date approaches, less than six years away, the world finds itself mired in an economic crisis that is unprecedented in its severity and global dimensions.

Progress towards the goals is now threatened by sluggish — or even negative — economic growth, diminished resources, fewer trade opportunities for the developing countries, and possible reductions in aid flows from donor nations. At the same time, the effects of climate change are becoming increasingly apparent, with a potentially devastating impact on countries rich and poor. Today, more than ever, the commitment to building the global partnership embodied in the Millennium Declaration must guide our collective actions.

## The grim repercussions of the economic crisis

This report presents an annual assessment of progress towards the MDGs. Although data are not yet available to reveal the full impact of the recent economic downturn, they point to areas where progress towards the eight goals has slowed or reversed.

Major advances in the fight against extreme poverty from 1990 to 2005, for example, are likely to have stalled. During that period, the number of people living on less than \$1.25 a day decreased from 1.8 billion to 1.4 billion. In 2009, an estimated 55 million to 90 million more people will be living in extreme poverty than anticipated before the crisis.

Likewise, the encouraging trend in the eradication of hunger since the early 1990s was reversed in 2008, largely due to higher food prices. The prevalence of hunger in the developing regions is now on the rise, from 16 per cent in 2006 to 17 per cent in 2008. A decrease in international food prices in the second half of 2008 has failed to translate into more affordable food for most people around the world.

Not surprisingly, children bear the brunt of the burden. More than one quarter of children in developing regions are underweight for their age, stunting their prospects for survival, growth and long-term development. Meagre progress on child nutrition from 1990 to 2007 is insufficient to meet the 2015 target, and will likely be eroded by higher food prices and economic turmoil.

These ongoing crises may also hold back progress towards gender equality, by creating new hurdles to women's employment. The International Labour Organization estimates that global

unemployment in 2009 could reach 6.1 to 7.0 per cent for men and 6.5 to 7.4 per cent for women, many of whom remain trapped in insecure — often unpaid — jobs.

Other fallout from the global financial situation may be compromised funding for programmes to improve maternal health, the goal towards which there has been least progress so far. Since the mid-1990s, most developing countries have experienced a major reduction in donor funding for family planning on a per woman basis, despite the undeniable contribution of such programmes to maternal and child health.

The ability of countries to mobilize domestic resources for development is also in jeopardy. Export revenues of developing countries fell in the last quarter of 2008, with the collapse of commodity prices and exports more generally. Debt service to exports ratios of developing countries are likely to deteriorate further, especially for those countries that enjoyed increased export revenues for the last several years.

Economic necessity will doubtless continue to exert pressure on an already fragile global environment, where deforestation and the extinction of species proceed at alarming rates, and a global water crisis looms.

At the Gleneagles summit of the Group of Eight in 2005, and at the UN World Summit later that year, donors committed to increasing their aid. With most OECD economies in recession, even fulfilment of those commitments, which were expressed as a percentage of donors' national income, would imply a diminished amount of aid. For many developing countries, lower levels of aid would not only impede further progress, but could reverse some of the gains already made.

## The successes so far

But the story is not all bleak. The report also portrays the remarkable advances that many countries and regions had made before the economic landscape changed so radically in 2008:

- Those living in extreme poverty in the developing regions accounted for slightly more than a quarter of the developing world's population in 2005, compared to almost half in 1990.
- Major accomplishments were also made in education. In the developing world as a whole, enrolment in primary education reached 88 per cent in 2007, up from 83 per cent in 2000. And most of the progress was in regions lagging the furthest behind. In sub-Saharan Africa and Southern Asia, enrolment increased by 15 percentage points and 11 percentage points, respectively, from 2000 to 2007.
- Deaths of children under five declined steadily worldwide — to around 9 million in 2007, down from 12.6 million in 1990,



despite population growth. Although child mortality rates remain highest in sub-Saharan Africa, recent survey data show remarkable improvements in key interventions that could yield major breakthroughs for children in that region in the years ahead. Among these interventions are the distribution of insecticide-treated bed nets to reduce the toll of malaria — a major killer of children. As a result of “second chance” immunizations, dramatic progress is also being made in the fight against measles.

- At the global level, the world came together to achieve a 97 per cent reduction in the consumption of substances that deplete the Earth’s protective ozone layer, setting a new precedent for international cooperation.

## Where accelerated progress is needed

These accomplishments demonstrate that the goals are within reach at the global level, and even in very poor countries. The MDGs must continue to provide a focus for our efforts, and the vision of a world without poverty must not be lost, even in these difficult times:

- Efforts to provide productive and decent employment for all, including women and young people, must be revitalized. The share of women in paid employment outside the agricultural sector has increased only marginally over the years. And in Southern Asia, Northern Africa and Western Asia, employment opportunities for women remain extremely low.
- The war against hunger must be embraced with renewed vigour, especially in the interests of our youngest citizens. In the countries hardest hit by the recent rise in food prices, we must implement measures to increase the availability of food, and strengthen social policies that address the negative impact on the poor.
- Work must be intensified to get *all* children into school, especially those living in rural communities, and eliminate inequalities in education based on gender and ethnicity, and among linguistic and religious minorities. The target of eliminating gender disparities in primary and secondary education by 2005 has already been missed.
- Greater political will must be mustered to reduce maternal mortality, especially in sub-Saharan Africa and Southern Asia, where negligible progress has been made so far.
- Rapid acceleration of progress is needed to bring improved sanitation to the 1.4 billion people who were doing without in 2006, with all its attendant consequences for the health of communities and the local environment. At the present rate of progress, the 2015 sanitation target will be missed.

- Efforts to improve the living conditions of the urban poor must pick up speed and extend even further. Although every region except one has made progress in this area, slum improvements are barely keeping pace with the rapid growth of developing country cities.
- Last, but by no means least, greater priority must be given to preserving our natural resource base, on which we all depend. We have not acted forcefully enough — or in a unified way — to combat climate change; our fisheries are imperilled; our forests, especially old-growth forests, are receding; and water scarcity has become a reality in a number of arid regions.

## Learning from past experience, and looking ahead

Advances are most evident where targeted interventions have had an immediate effect, and where increased funding has translated into an expansion of programmes to deliver services and tools directly to those in need. This can be seen in the fight against malaria, in the dramatic reduction in measles deaths, and in the coverage of antiretroviral treatment for HIV and AIDS, which increased tenfold over a five-year time span. In contrast, progress has been more modest when it requires structural changes and strong political commitment to guarantee sufficient and sustained funding over a longer period of time. This is likely the reason behind the poor performance of most countries in reducing maternal mortality and increasing access of the rural poor to improved sanitation facilities.

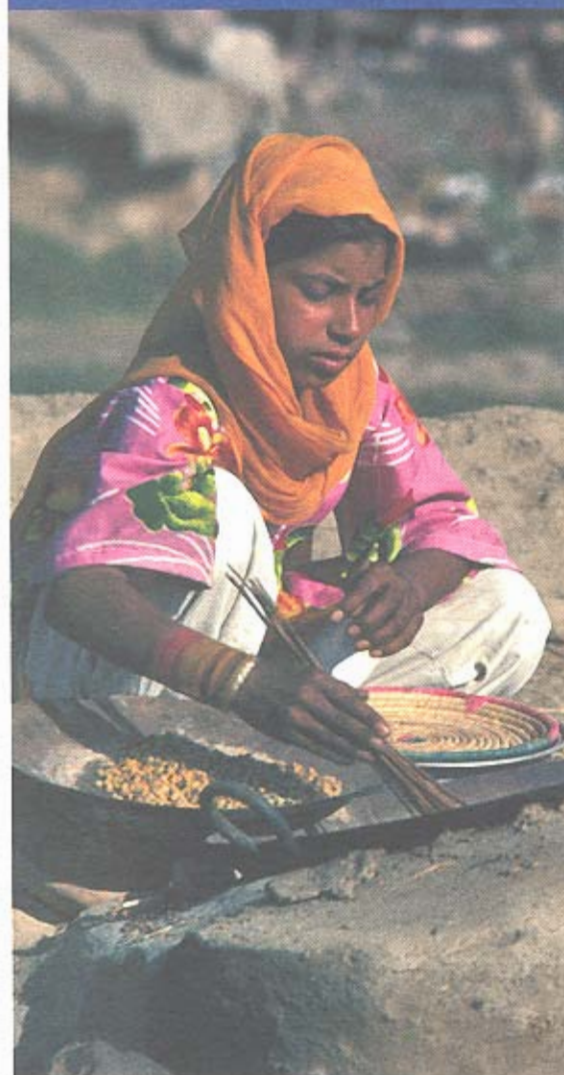
Achieving the MDGs will require that the development agenda be fully integrated into efforts to jumpstart growth and rebuild the global economy. At the top of the agenda is the climate change problem, which will have to be regarded as an opportunity to develop more efficient “green” technologies and make the structural changes needed that will contribute to sustainable growth. Achieving the MDGs will also require targeting areas and population groups that have clearly been left behind — rural communities, the poorest households and ethnic minorities, all of whom will have a hand in shaping our common future.

SHA ZUKANG  
Under-Secretary-General for Economic and Social Affairs



# Goal 1

## Eradicate extreme poverty and hunger

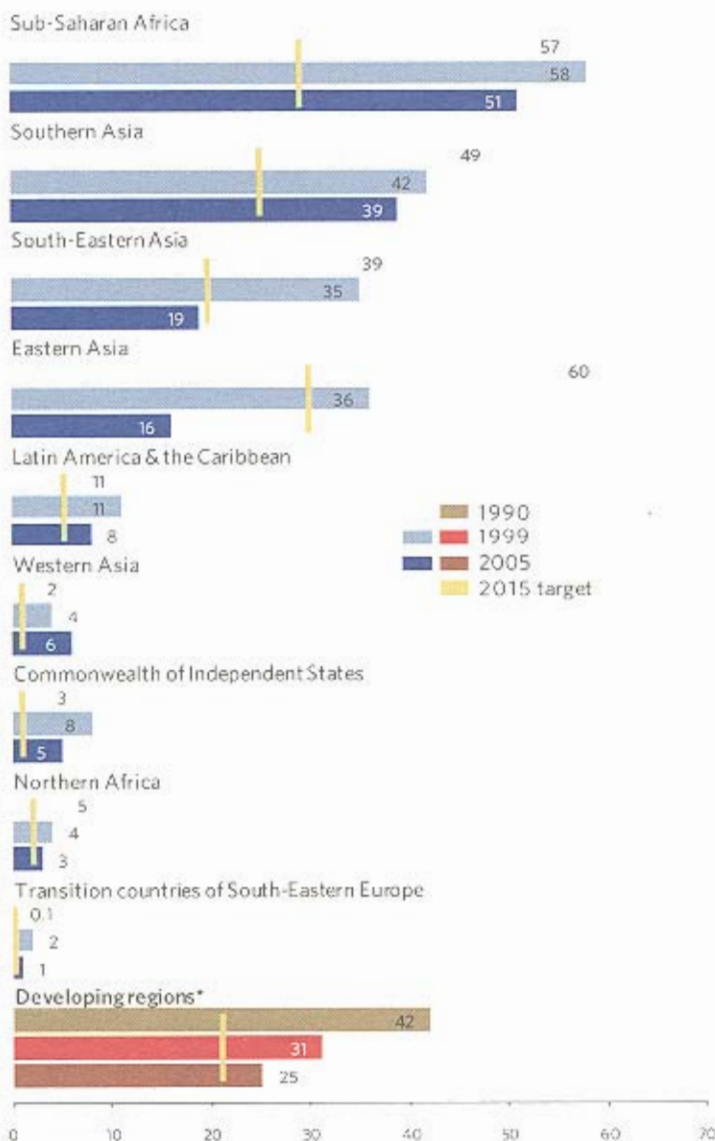


### TARGET

Halve, between 1990 and 2015, the proportion of people whose income is less than \$1 a day

### The global economic crisis derails progress against poverty

Proportion of people living on less than \$1.25 a day, 1990, 1999 and 2005 (Percentage)



\*Includes all developing regions, the Commonwealth of Independent States and transition countries of South-Eastern Europe

Worldwide, the number of people living in extreme poverty in 2009 is expected to be 55 million to 90 million higher than anticipated before the global economic crisis, though the impact will vary across regions and



countries. Current projections suggest that overall poverty rates in the developing world will still fall in 2009, but at a much slower pace than before the downturn. For some countries, this may mean the difference between reaching or not reaching their poverty reduction target. In sub-Saharan Africa and Southern Asia, both the number of poor and the poverty rate are expected to increase further in some of the more vulnerable and low-growth economies.

Prior to the economic crisis and higher food prices, the number of people in developing regions living in extreme poverty — on less than \$1.25 a day in 2005 prices — fell from 1.8 billion in 1990 to 1.4 billion in 2005. As a result, those considered extremely poor accounted for slightly more than a quarter of the developing world's population in 2005, compared to almost half in 1990. There was a dramatic fall in the poverty rate in Eastern Asia — thanks in large part to rapid economic growth in China, which helped lift 475 million people from extreme poverty. Elsewhere, progress has been slower and, in some regions, growing populations have caused the ranks of the destitute to swell. Sub-Saharan Africa counted 100 million more extremely poor people in 2005 than in 1990, and the poverty rate remained above 50 per cent (though it had begun to decline after 1999). Globally, the target of reducing the poverty rate by half by 2015 seems likely to be achieved. However, some regions will fall far short, and as many as 1 billion people are likely to remain in extreme poverty by the target date.

## Prior to the crisis, the depth of poverty had been reduced in almost every region

Poverty gap ratio at \$1.25 a day, 1990, 1999 and 2005 (Percentage)



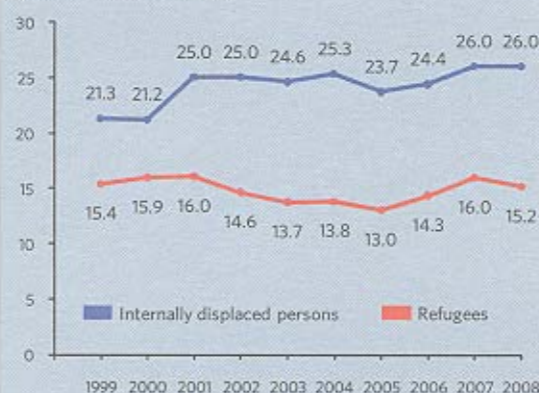
\*Includes all developing regions, the CIS and transition countries of South-Eastern Europe.

The magnitude of the poverty eradication challenge is determined not only by the number of poor people worldwide, but also by how far they fall below the poverty line. The increase in average incomes since 2000 has enabled many people to lift themselves out of poverty and has reduced the depth of poverty of those who remain extremely poor. Against a poverty line of \$1.25 a day, the poverty gap fell between 1990 and 2005 in all regions except Western Asia. In 2005, the depth of poverty was greatest in sub-Saharan Africa, but has fallen since 1999 to reach the level that prevailed in Eastern Asia in 1990. The global economic crisis as well as high food prices are likely to have reversed these favourable trends.



## Conflict breeds poverty for millions

Number of internally displaced persons and refugees, 1999-2008 (Millions)



Conflict and persecution are major reasons why people flee their homes, either within or beyond the borders of their own country. Typically they lack employment and a permanent residence and, without a social safety net, quickly fall into poverty. The number of internally displaced persons worldwide has remained at 26 million for the past two years. However, the number of refugees decreased in 2008, when more than 600,000 people returned voluntarily to their country of origin. At the end of 2008, an estimated 4.7 million refugees were still under the responsibility of the UN Relief and Works Agency for Palestine Refugees in the Near East (UNRWA). Another 10.5 million people were receiving assistance through the UN High Commissioner for Refugees (UNHCR), nearly half of whom were refugees from Afghanistan (2.8 million) and Iraq (1.9 million).

### TARGET

Achieve full and productive employment and decent work for all, including women and young people

## Prospects darken for the working poor

Proportion of employed people living below \$1.25 a day, 1997, 2007 and 2008 projections (Percentage)

Sub-Saharan Africa



Southern Asia



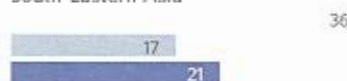
Oceania



CIS, Asia



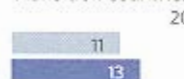
South-Eastern Asia



Eastern Asia



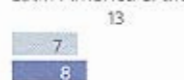
Transition countries of South-Eastern Europe



Western Asia



Latin America & the Caribbean



Northern Africa



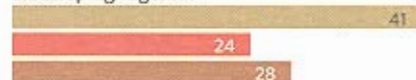
CIS, Europe



Developed regions



Developing regions





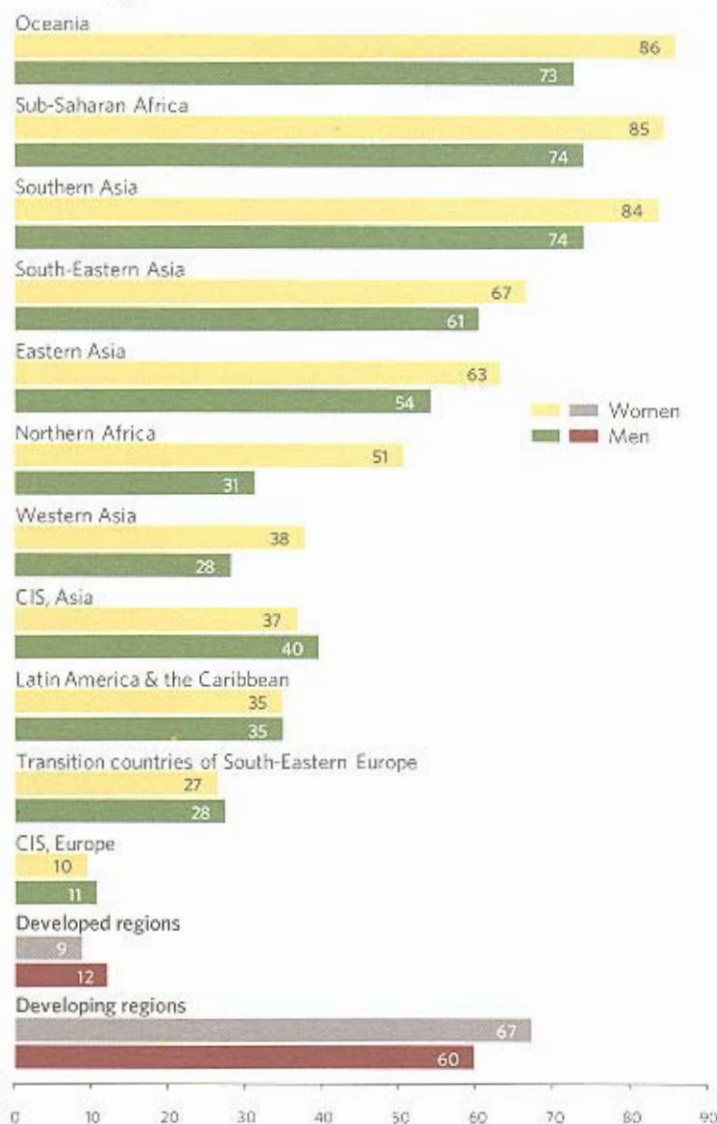
High prices for energy and commodities in early 2008, exacerbated by a severe economic downturn in the second half of the year, are likely to have had a significant negative impact on the proportion of working people living in extreme poverty. These are people who are employed, but who do not earn enough to lift themselves and their families above the \$1.25 a day poverty line. The encouraging trends that were evident until 2007 may have reversed or, at best, stagnated in 2008. The International Labour Organization (ILO) sees three scenarios, with the worst one showing an increase in the percentage of working poor in developing regions — from 24 per cent of the labour force in 2007 to 28 per cent in 2008. Under the intermediate scenario, the percentage of working poor would increase in most regions and rise to 25 per cent for the whole of the developing world. Even under the best-case scenario, no progress at all is foreseen for the working poor in sub-Saharan Africa.

The proportion of the working-age population that is employed is a good indicator of the ability of an economy to generate jobs. In most countries, that proportion is in the range of 55 per cent to 75 per cent. Nevertheless, employment-to-population ratios and poverty indicators can both be high because people must work to survive, regardless of the quality of their job. This is the case in sub-Saharan Africa, which has the second highest adult employment-to-population ratio among all regions (about 74 per cent), but the lowest levels of labour productivity. More than half of those employed in this region were among the extreme working poor, and more than three quarters of workers were engaged in vulnerable employment.

Between 1998 and 2008, the employment-to-population ratio for adult women increased globally from 48 per cent to 49 per cent. Despite the increase, far more women continue to be out of the labour market than men. Northern Africa and Western Asia have exceptionally low female employment-to-population ratios, both of which are 45 percentage points below those of men. In Southern Asia, the ratio is 44 percentage points below that of men.

## Economic turmoil pushes tens of millions of people into vulnerable employment

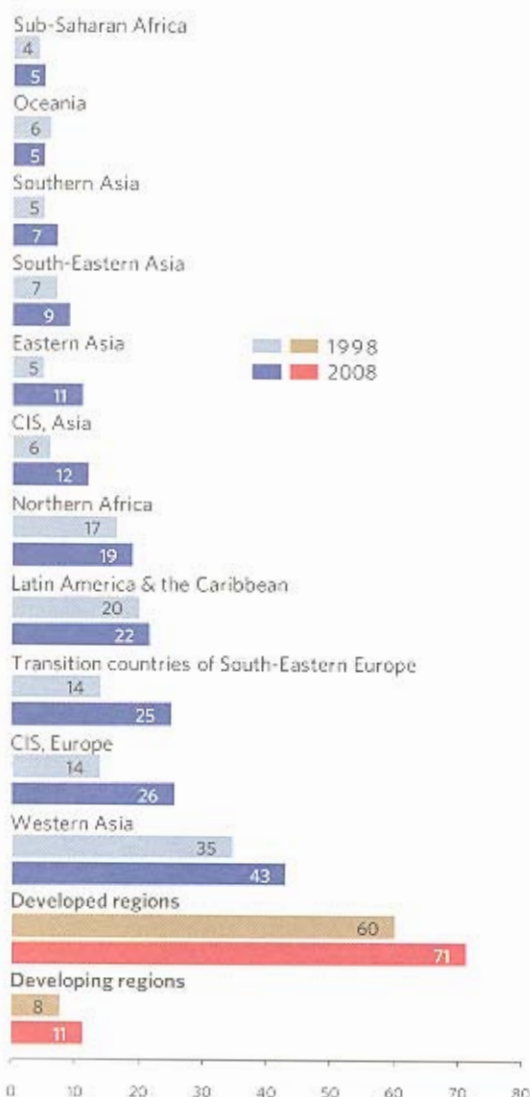
Proportion of own-account and contributing family workers in total employment, 2008 projections under scenario 2, women and men (Percentage)



The number of people in developing regions engaged in vulnerable employment may be 77 million more in 2008 than in 2007, reversing encouraging trends over the previous decade. This is according to the second of two scenarios outlined by ILO, which is considered the most realistic given the severity of the economic crisis. Those engaged in vulnerable employment are either unpaid workers who contribute to a family business or own-account workers, neither of whom are likely to benefit from safety nets that guard against income loss during economic hardship. Under both scenarios, well over 80 per cent of the female labour force in Oceania, sub-Saharan Africa and Southern Asia are expected to have been engaged in vulnerable employment in 2008.

## Labour productivity has remained low in developing regions — a bad sign for future job-creation

Output per person employed, constant 2005 US dollars (purchasing power parity), 1998 and 2008 (Thousands)



Labour productivity is a key measure of economic performance. Moreover, it can be used to gauge the likelihood that a country can create and sustain decent employment opportunities with fair and equitable remuneration. With limited increases in productivity, an economy generally sees little increase in the wages of workers, and there is no additional potential to create new jobs. It is also important that productivity growth be accompanied by improvements in education and training so that the future workforce is better prepared to perform the jobs needed.

Developing regions have seen only minor advances in labour productivity over the last decade, and fall far behind developed regions. Considerable progress has been made in Eastern Asia, the Commonwealth of Independent States (CIS) and transition countries of South-Eastern Europe. But productivity remains extremely low in sub-Saharan Africa and has even declined slightly in Oceania. Higher productivity in Eastern Asia was accompanied by a sharp decrease in the share of those classified as the working poor during the same period. A similar situation occurred in the transition countries of South-Eastern Europe, where the share of the working poor declined by almost nine percentage points since 1997, while productivity levels nearly doubled and the proportion of vulnerable employment dropped.





**TARGET**

Halve, between 1990 and 2015, the proportion of people who suffer from hunger

## Steep food prices set back progress on ending hunger

Proportion of undernourished population, 1990-1992, 2004-2006 and 2008 (Percentage)

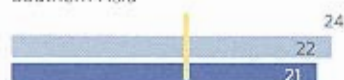
Sub-Saharan Africa



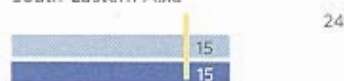
Southern Asia, excluding India



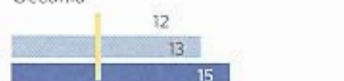
Southern Asia



South-Eastern Asia



Oceania



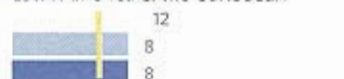
Eastern Asia, excluding China



Eastern Asia



Latin America & the Caribbean



Western Asia



Northern Africa



Developing regions



The declining trend in the rate of undernourishment in developing countries since 1990-1992 was reversed in 2008, largely due to escalating food prices. The proportion of people who are undernourished dropped from about 20 per cent in the early 1990s to about 16 per cent in the middle of the following decade. But provisional estimates indicate that it rose by a percentage point in 2008. Rapidly rising food prices caused the proportion of people going hungry in sub-Saharan Africa and Oceania to increase in 2008. When China is excluded, the prevalence of hunger also rose in Eastern Asia. In most of the other regions, the effect was to arrest the downward trend.

## A decrease in international food prices fails to translate into more affordable food at local markets

International food price index and consumer food price index in selected countries, 2008 (Year 2000=100)



Note: The food price index consists of the average of six commodity group price indices weighted with the average export shares of each of the groups for 2002-2004.

Failure to implement strong actions in the fight against hunger could give way to a long-lasting food crisis. A decrease in international food prices in the second half of 2008 was expected to lower prices in local markets in a relatively short period of time. But this did not materialize, and consumer access to food in many developing countries, such as Brazil, India and Nigeria, and to a lesser extent China, did not improve as expected. In the most seriously affected countries particularly, governments and their development partners should implement measures to increase the availability of food, including raising production, and strengthen social policies that address the negative effects of higher food prices, especially on the poor.

## Scant progress on child nutrition is likely to be eroded by high food prices and the state of the global economy

Proportion of children under age five who are underweight, 1990 and 2007 (Percentage)



Note: Prevalence of underweight children is estimated based on the NCHS/WHO/CDC reference population.

Adequate nutrition is vital for building children's immune systems and for their motor and cognitive development. Yet about one in four children in the developing regions are underweight. The consequences can be fatal: more than one third of child deaths worldwide are attributable to undernutrition. In the developing world, the proportion of children under five years of age who were underweight declined by only five percentage points from 1990 to 2007 — from 31 per cent to 26 per cent. This rate of progress is insufficient to meet the goal of reducing underweight prevalence by half — even without taking into account higher food prices and the economic crisis that developed in the meantime.

Data collected before the increase in food prices show that children in the poorest households in developing countries are more than twice as likely to be underweight as those in the richest households. Similarly, children living in rural areas are more likely to be underweight than those living in cities and towns.

Child nutrition, particularly for vulnerable populations, must be given higher priority in national development. This calls for the initiation of breastfeeding within one hour of birth, exclusive breastfeeding for the first six months, timely and appropriate complementary feeding from six months of age, and continued breastfeeding up to two years of age and beyond. Preventing low birthweight is also important. The nutritional status of mothers before and during pregnancy is a key determinant of the birthweight of her baby. Birthweight, in turn, has a critical bearing on a newborn's chances for survival, growth, long-term health and psychosocial development. Southern Asia has the highest incidence of low birthweight in the world — a quarter of newborns weigh less than 2,500 grams — as well as the highest prevalence of underweight children.

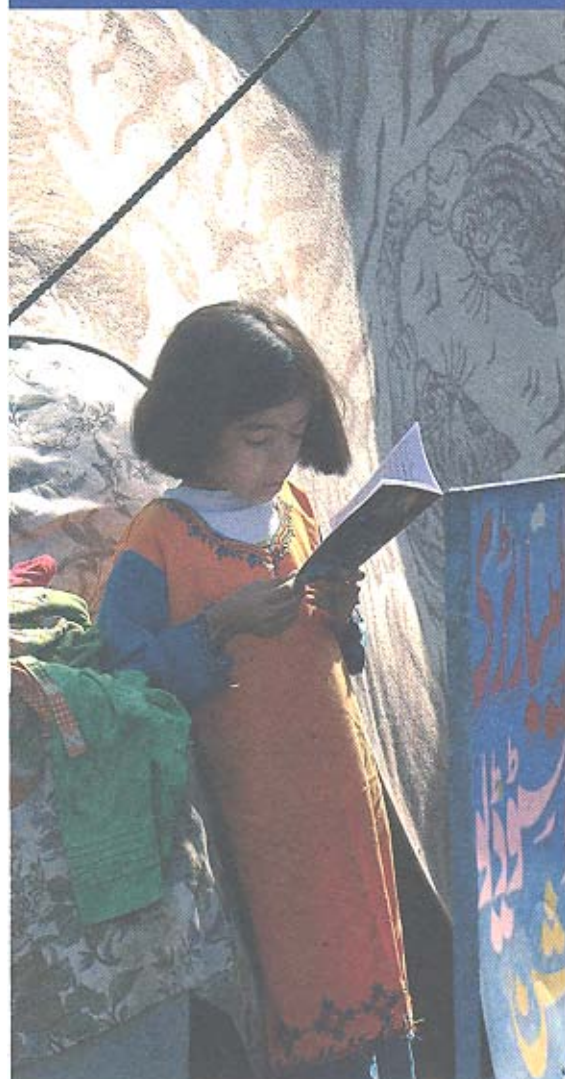






# Goal 2

## Achieve universal primary education

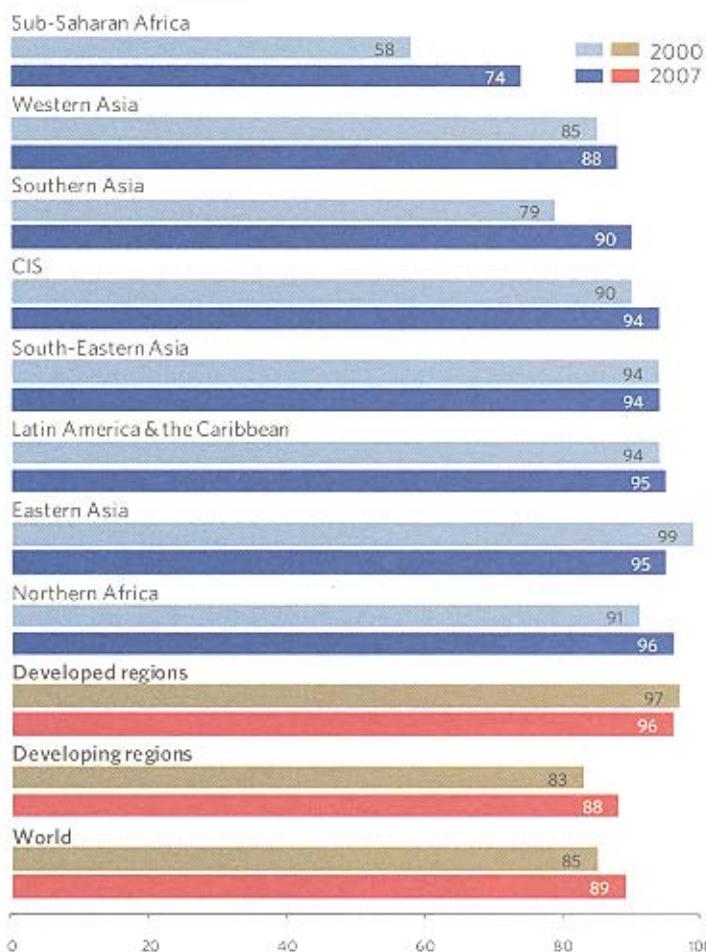


### TARGET

Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling

The world is edging closer to universal primary education, but too slowly to meet the 2015 target

Adjusted net enrolment ratio in primary education,\* 1999/2000 and 2006/2007 (Percentage)



\* Defined as the number of pupils of the theoretical school age for primary education enrolled either in primary or secondary school, expressed as a percentage of the total population in that age group.

Note: Data for Oceania are not available.

Progress is being made towards universal primary education. Still, more than 10 per cent of children of primary-school age are out of school. In the developing world as a whole, enrolment coverage in primary education reached 88 per cent in 2007, up from 83 per cent in 2000. Major breakthroughs have been achieved in sub-Saharan Africa, where

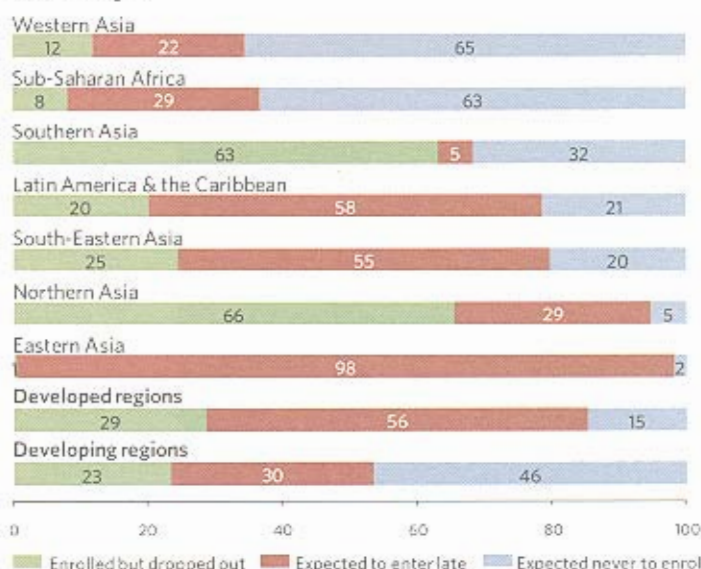


enrolment increased by 15 percentage points from 2000 to 2007, and Southern Asia, which gained 11 percentage points over the same period.

In many countries, improvements in school enrolment have been associated with increases in national spending on education, which could be dealt a serious blow as a result of the global economic crisis. Demographic trends may also affect achievement of the goal, since population growth usually puts increased pressure on the resources allotted to education. The relatively sharp rise in enrolment in sub-Saharan Africa and Southern Asia, despite rapid population growth, is therefore encouraging. However, global numbers of out-of-school children are dropping too slowly and too unevenly for the target to be reached by 2015.

## Half of the 72 million children out of school have never been inside a classroom

Distribution of out-of-school children by school exposure, 2006 (Percentage)



The number of children of primary school age who are out of school has dropped by 33 million since 1999. Still, 72 million children worldwide were denied the right to education in 2007. Almost half of these children live in sub-Saharan Africa, followed by Southern Asia, home to 18 million out-of-school children. According to partial projections by the *Education for All Global Monitoring Report*, produced by the United Nations Educational, Scientific and Cultural Organization (UNESCO) and based on 2006 data, at least 29 million children will still be out of school in 2015.

Nearly half the children currently out of school have never had any contact with formal education. Moreover, they are unlikely to enrol unless new policies and additional incentives are put into place. About 30 per cent of children out of school in the developing world may eventually enrol as late entrants. A further 23 per cent were previously enrolled but dropped out.

The problem is magnified in sub-Saharan Africa. Not only does the region have the largest number of children out of school, but two thirds of them will probably never enrol. The same situation exists in Western Asia, where 64 per cent of the 3 million children out of school are girls. Two thirds of the millions of children out of school in Southern Asia were enrolled at one time, but dropped out.

The large number of out-of-school children is especially worrisome because of the impact it will have on the other MDGs. Evidence shows, for instance, that an increase in the share of mothers with a primary or secondary education is associated with a reduction in the child mortality rate, and that educated parents have better nourished children. Parental literacy also plays a role in whether children attend school. Education has been shown to have a positive effect on the success of HIV prevention and increases the probability of accessing decent employment.

## Inequality undermines education opportunities for millions of children

Parity index for primary school attendance by ethnicity, language or religion, lowest attendance rate/highest attendance rate, selected countries, 2005-2006



Unequal opportunities resulting from biases based on gender, ethnicity, income, language or disabilities are common and represent a major obstacle to universal education. Children from poor communities and girls are the most likely to lose out. In some less developed countries, children in the poorest 20 per cent of the population are three times less likely to be enrolled in primary school than children from the wealthiest 20 per cent. In 2007, girls accounted for 54 per cent of the world's out-of-school population.

Ethnic, linguistic and religious minorities also have fewer opportunities in education than the overall population. An analysis of survey data from 17 countries shows that net attendance rates among the least disadvantaged groups are up to 1.7 times higher than net attendance rates among the most disadvantaged groups at the primary level of education; they are up to six times higher at the secondary level of education.

An educational parity index — which compares the attendance rate of the most disadvantaged group with the attendance rate of the least disadvantaged group within a specific country — reveals values for primary education between 0.59 and 0.99. The value 0.59 means that the school attendance rate of the most disadvantaged group is only 59 per cent that of the group with the highest attendance rate; 0.99 suggests that there is little or no inequality between the two groups. Disparities are more extreme at the secondary level of education, where the index ranges between 0.17 and 0.98.

Public policies designed to reach the poorest and most disadvantaged groups have proven effective in some countries. For example, remarkable progress has been made in increasing enrolment of the poorest children by abolishing school fees, constructing schools in underserved areas and boosting the recruitment of teachers. In general, and especially among minorities, getting girls into school and encouraging them to complete their education must remain a priority.

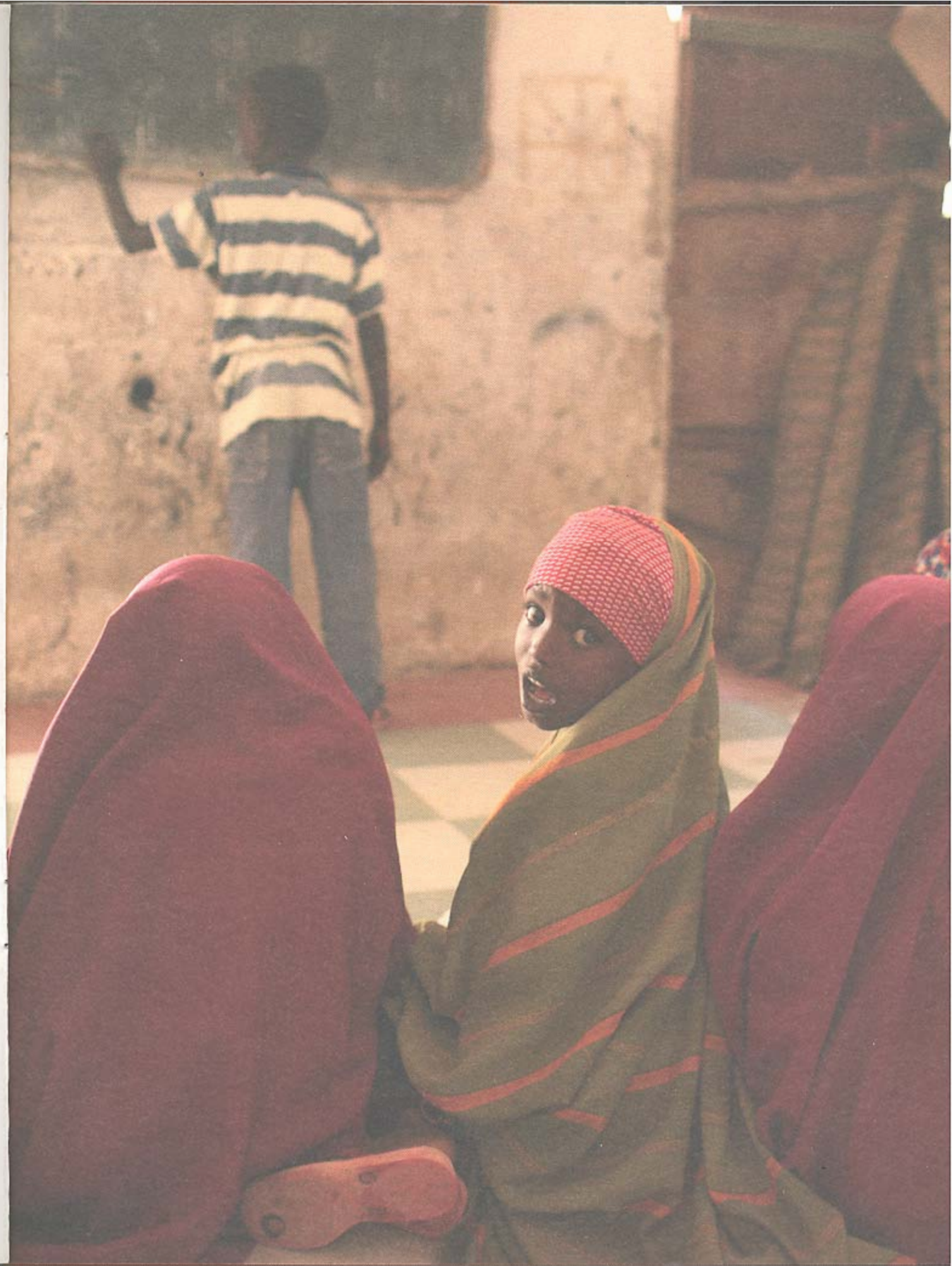
### What will it take to meet the education target?

Achieving universal primary education by 2015 will require that all children at the official entry age for primary school have access to education by 2009. Some progress has been made: in 2007, almost 137 million children stepped into classrooms for the first time — 7 million more than in 1999. The gross intake rate, which measures the capacity of education systems to provide all children with access to schooling, increased by nine percentage points in developing countries over the same period. The biggest increase was recorded in sub-Saharan Africa, with a 25 percentage point rise.

Access to education, however, is only part of the solution. Completion of a full course of primary schooling is necessary to achieve universal primary education. Millions of children start school but eventually drop out. In many developing countries, school systems are chronically underfinanced and underresourced and often fail to deliver a high-quality education. As a result, too many children leave school without having acquired the most basic literacy and numeracy skills.

Addressing these concerns will require wide-ranging reforms and increased investments. Based on 2004 data, UNESCO estimates that, in sub-Saharan Africa alone, 3.8 million teachers will have to be recruited by 2015 if the goal of universal primary education is to be achieved.







# Goal 3

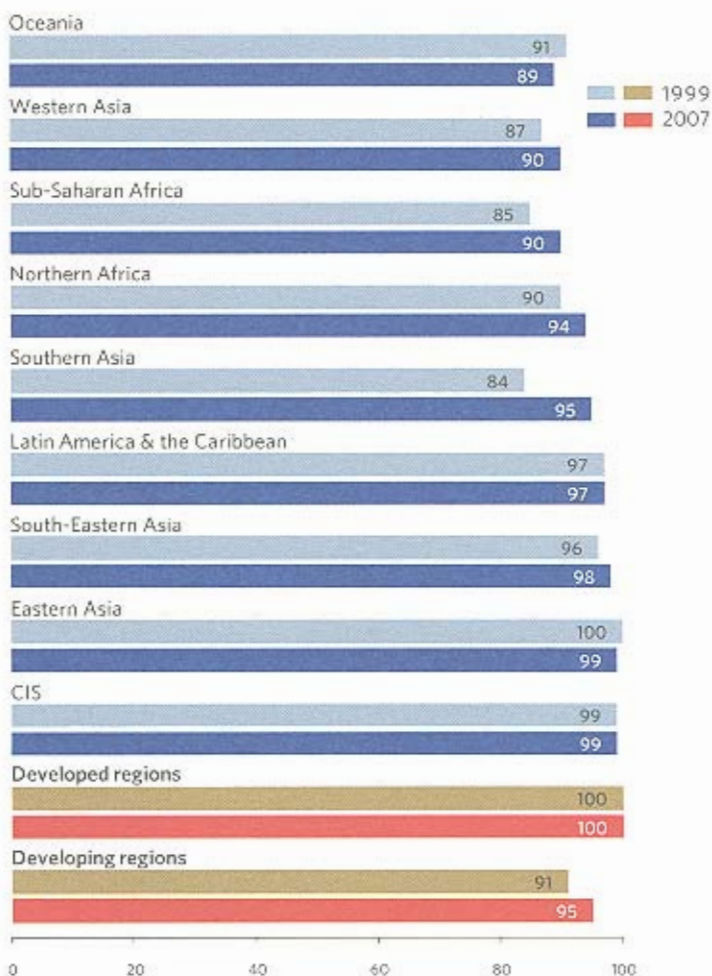
## Promote gender equality and empower women

### TARGET

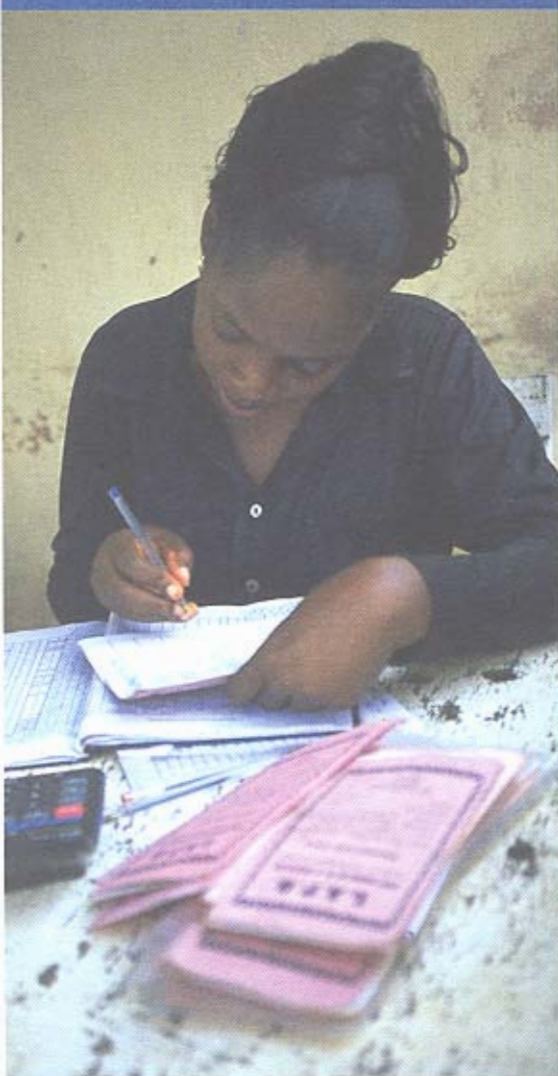
Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015

Four years after the target date, gender parity in education has yet to be achieved

Girls' primary school enrolment in relation to boys', 1998/1999 and 2006/2007 (Girls per 100 boys)



The world continues to progress towards gender parity in education as measured by the ratio of girls' to boys' gross enrolment. In the developing regions as a whole, 95 girls were enrolled in primary school for every 100 boys in 2007, compared to 91 in 1999. However, the target of eliminating gender disparities in primary and secondary education by 2005 was missed. Ensuring that the opportunity is not lost again in 2015 will require renewed urgency and commitment.

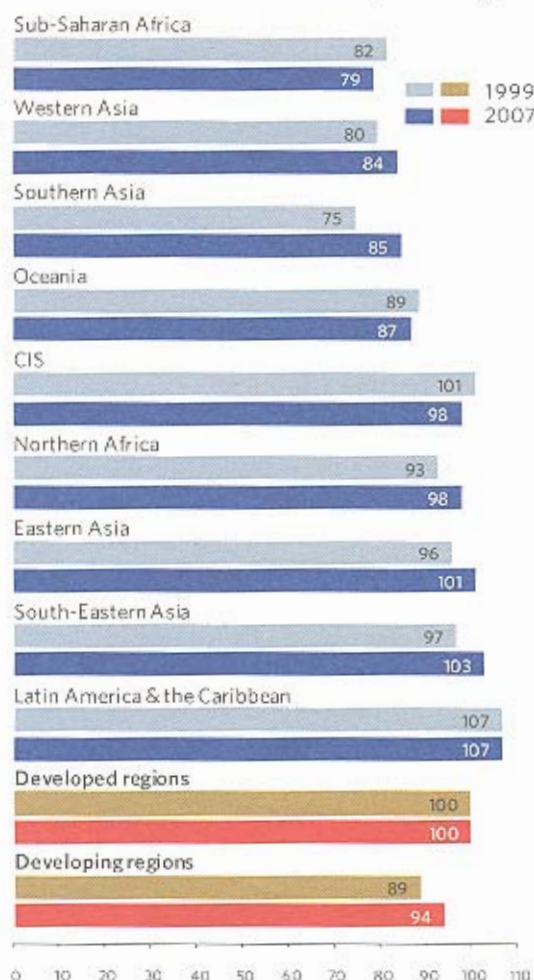




In 2007, only 53 of the 171 countries with available data had achieved gender parity (defined by the UNESCO Institute for Statistics as a girls' to boys' enrolment ratio of between 97 and 103) in both primary and secondary education. That is 14 more countries than in 1999. Still, the fact that over 100 countries have yet to reach the target is a source of concern.

## The gender gap is more evident in secondary school enrolment

Girls' secondary school enrolment in relation to boys', 1998/1999 and 2006/2007 (Girls per 100 boys)

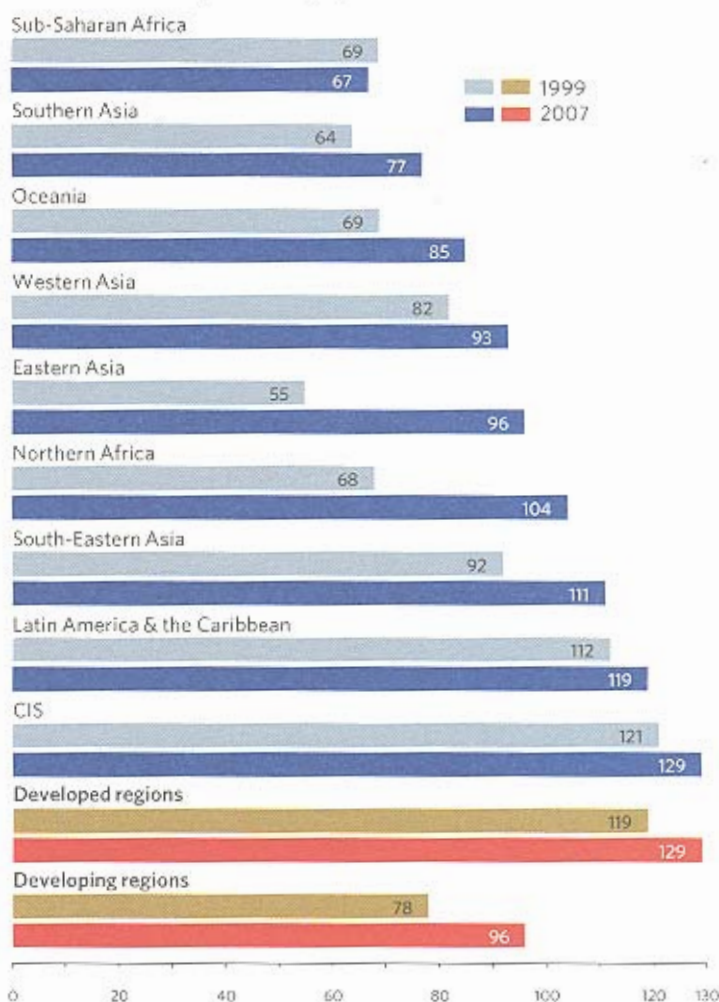


The gender gap in school enrolment is more evident in secondary education, where many more countries are falling behind. The gap is especially wide in countries in which overall enrolment is low, since increases in secondary school enrolment tend to be accompanied by reductions in gender disparities. Many factors have contributed to progress, including increased primary school enrolment and completion for girls and falling poverty rates. In numerous countries, public policy has also played a pivotal role.

The notable exceptions to a generally improving situation are sub-Saharan Africa, where the ratio of girls' to boys' enrolment in secondary education fell from 82 in 1999 to 79 in 2007; Oceania, where the ratio fell from 89 to 87; and the CIS, where it fell from 101 to 98 over the same period.

## Girls outnumber boys in higher education, except in the poorer regions

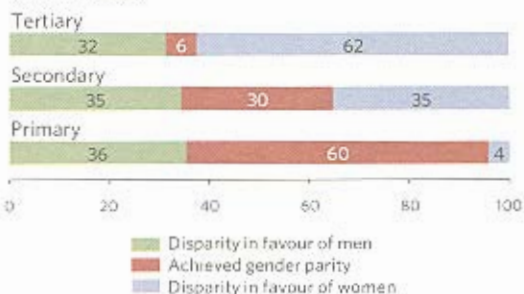
Girls' tertiary school enrolment in relation to boys', 1998/1999 and 2006/2007 (Girls per 100 boys)



A very different situation emerges at higher levels of education. Worldwide, there are more young women than men enrolled in tertiary education. The ratio of girls' to boys' enrolment globally at the tertiary level rose from 96 in 1999 to 108 in 2007. But disparities among regions are dramatic. A large gap in favour of girls exists in the developed regions, CIS countries, Latin America and the Caribbean, and South-Eastern Asia. Far fewer female students than males have advanced to tertiary education in sub-Saharan Africa, Southern Asia and Oceania.

## Progress in development and girls' education go hand in hand

Distribution of countries by gender parity status in primary, secondary and tertiary education, 2007 (Percentage)

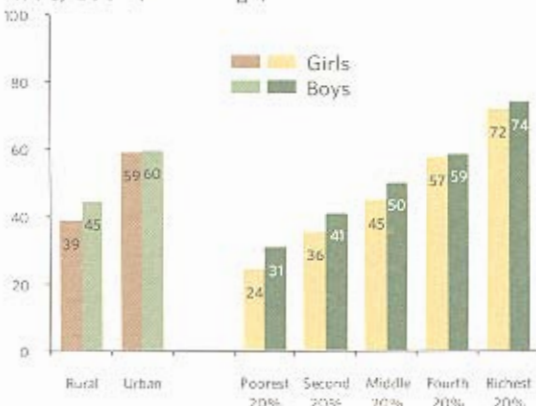


\* Based on available data for 191 countries for primary education, 179 countries for secondary education, and 133 countries for tertiary education. When data for 2007 were not available, the latest available data were used — from 2005 or 2006.

Available data show that 60 per cent of countries have achieved gender parity in primary education, 30 per cent in secondary education and only 6 per cent in tertiary education. Globally, disparities in favour of girls increase significantly at higher level of schooling. However, this reflects mostly the situation in more developed countries, where overall enrolment — and tertiary enrolment — is high. In those settings, boys tend to do less well in school. In poorer countries, and in countries in which overall enrolment is low, the disadvantage for girls persists at higher levels of education and is usually more evident.

## Girls from poor and rural households face higher barriers to education

Secondary school net attendance ratio of boys and girls, by place of residence and household wealth, 1998/2007 (Percentage)

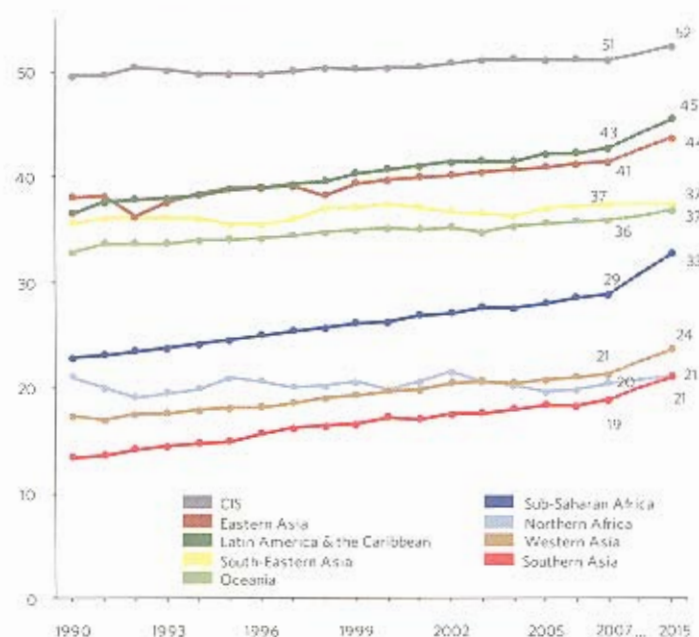


Girls born into impoverished households or living in rural communities are at a distinct disadvantage in terms of education. An analysis of primary school attendance in 108 developing countries by location of residence and household wealth reveals that gender parity has been reached in urban areas and among the richest 40 per cent of households. In contrast, girls are more likely to be excluded from primary education in rural localities and when they reside in the poorest households.

Gender disparities associated with poverty and rural residency are even more pronounced at the level of secondary education. Cultural attitudes and practices that promote early marriage, encourage the seclusion of young girls or attach greater value to educating boys than girls can create formidable barriers to gender parity. Yet targeted public policy and governance initiatives can help overcome gender inequalities. For example, removing school fees and providing incentives for girls to attend school can alleviate financial pressures on households. Building schools close to remote communities and recruiting local teachers can also narrow the gender gap in rural areas.

## Paid employment for women continues to expand slowly and remains meagre in many regions

Employees in non-agricultural wage employment who are women, 1990 and 2007, and projections to 2015 (Percentage)



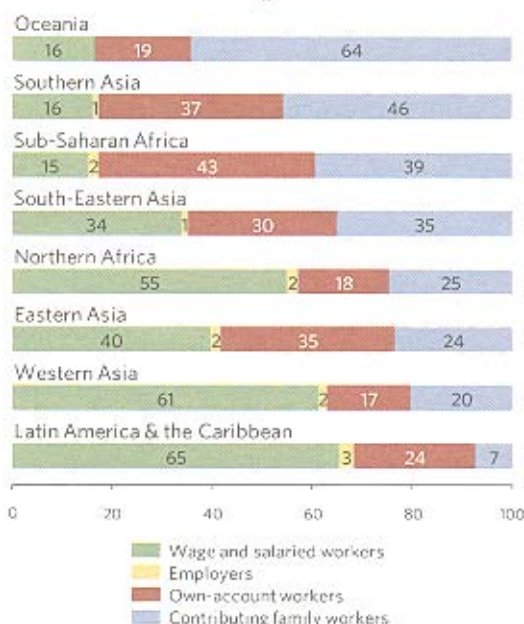
Globally, the share of women in paid employment outside the agricultural sector has continued to increase marginally over the years. But in Southern Asia, Northern Africa and Western Asia, employment opportunities for women remain extremely low. Women are also poorly represented in non-agricultural employment in sub-Saharan Africa. The situation of women in these regions, however, varies widely. In sub-Saharan Africa, 64 per cent of women's employment is in agriculture,



and women's overall representation in the labour force is relatively high: 55 per cent of working-age women in that region are employed, although mostly in vulnerable jobs. In Northern Africa and Western Asia, where industry and services are the most important sectors, only 23 per cent and 21 per cent of working-age women, respectively, are employed.

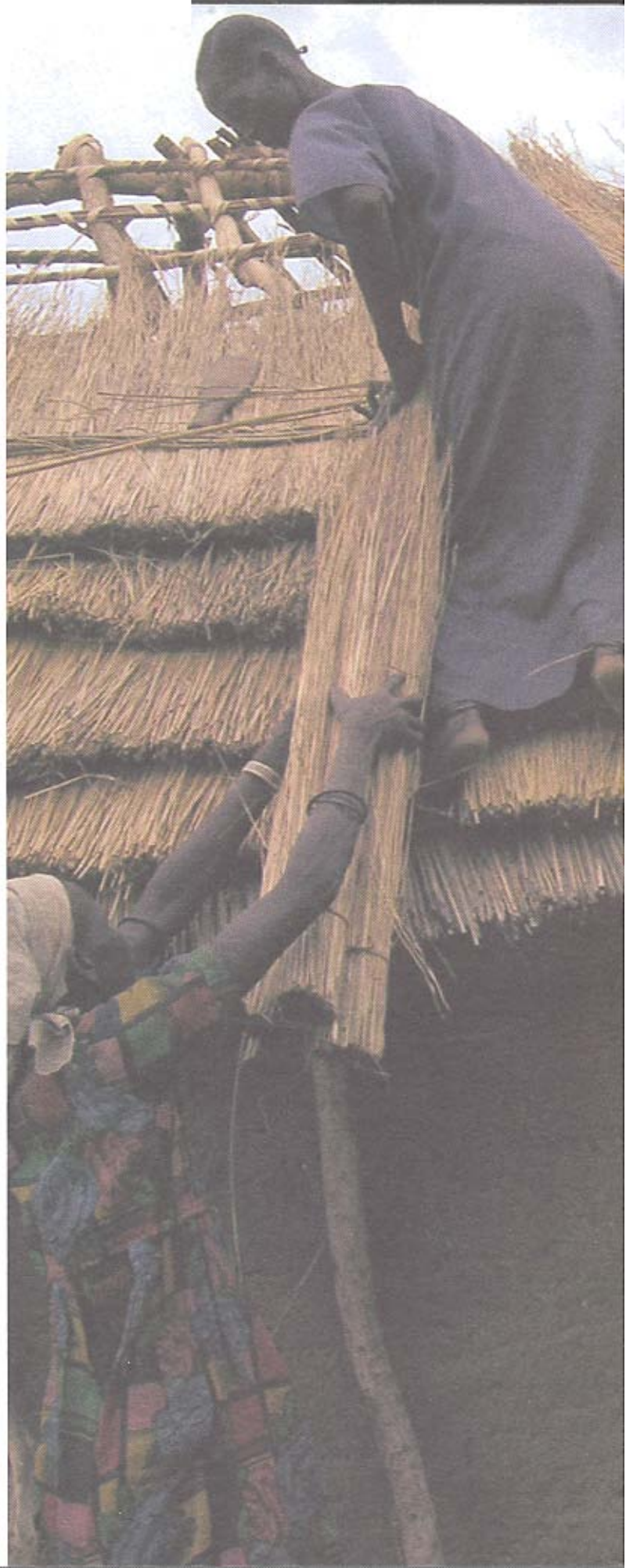
## Women remain more vulnerable on the job front, assuming the largest share of unpaid work

Distribution of total employment by job status, women, 2008 (Percentage)



Although more women have been able to secure paid jobs outside agriculture, they have generally failed to access decent work. Close to two thirds of all employed women have vulnerable jobs, either as contributing family workers or as own-account workers.

The employment situation of women is particularly dismal in Oceania and Southern Asia, where the largest share of women's employment is as contributing family workers — 64 per cent and 46 per cent, respectively. These labourers, also known as unpaid family workers, are family members who freely give their time to family-owned businesses. The large share of unpaid jobs adds to the already heavy burden of unpaid work carried out by women in households in all regions, which is not reflected in official labour force statistics.







## The global financial crisis is creating new hurdles to women's employment

Unemployment rate, world, 1998-2009 (Percentage)

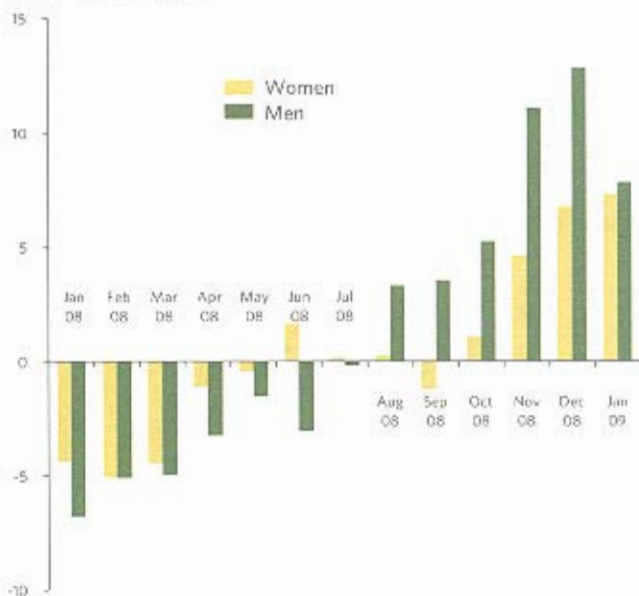


\*ILO projections according to scenario I. Under scenario II, unemployment would be 7.0 and 6.8 for women and men, respectively, and 7.4 and 7.0, respectively, under scenario III.

The 2008 financial crisis and high prices for primary commodities have eroded labour markets around the world. The ILO projects that the global unemployment rate in 2009 could reach between 6.3 per cent and 7.1 per cent, with a corresponding unemployment rate for women ranging from 6.5 to 7.4 per cent (compared to 6.1 to 7.0 per cent for men). This means that an additional 24 million to 52 million people worldwide may be unemployed, of which 10 million to 22 million will be women.

## Although men were hit hardest by the financial shock, women may be more profoundly affected over the long term

Changes in unemployment rates, world, January 2008-January 2009 (Percentage)



The ILO estimates that, in December 2008, there were 12.8 per cent more unemployed men and 6.7 per cent more unemployed women in the world than in December 2007. The number of unemployed men increased at a faster rate than the number of unemployed women, especially during the second half of 2008. However, more recent data show that women's unemployment is likely to continue increasing at a rapid pace, while the rate of increase of men's unemployment is slowing. This suggests that after the initial shock in male-dominated industries, the financial crisis is now hitting female-dominated industries and services and may affect women more profoundly over the long term.



## Women's political representation is slowly growing, with Latin America and the Caribbean leading the way among developing regions

Proportion of seats held by women in single or lower houses of national parliaments, 2000 and 2009 (Percentage)



The proportion of seats held by women in parliament continues to rise slowly, averaging 18 per cent across all chambers of parliament as of January 2009. Women hold 30 per cent or more of single or lower chamber seats in 24 countries and 30 per cent or more of upper chamber seats in 15 countries. These front-runner countries are diverse: in addition to developed countries, they include post-conflict and developing states in Africa, Asia and Latin America and the Caribbean. At the other end of the spectrum, one quarter of all parliamentary chambers still have less than 10 per cent women members. Nine chambers — mainly in Pacific Island and Arab Gulf states — have no women members of parliament at all.

Following parliamentary elections and renewals in 2008, some impressive gains were registered in Latin America and the Caribbean, where women hold 22 per cent of all seats, the highest regional average. Cuba registered the highest proportion of women members (43 per cent) in this region during 2008. Sub-Saharan Africa continues to make strides, with Rwanda out in front: it made history in September 2008 when its lower chamber elected a majority (56 per cent) of women members. In Western Asia, four women were elected to Kuwait's parliament for the first time in May 2009, after gaining the right to stand for election only four years previously — a major step forward for women in that country.

Women still hold less than 10 per cent of parliamentary seats in Oceania, Northern Africa and Western Asia. In Qatar, no women were appointed to the 35-member Qatari Advisory Council in 2008 and, along with the Federated States of Micronesia and Saudi Arabia, has never had a woman member of parliament. Similarly, in 2008 parliamentary elections in Nauru, Palau (lower chamber) and Tonga, no women won seats. In the Caribbean, no women were elected to the Belize lower chamber in 2008.

Proportional representation electoral systems enable a greater number of women to be elected than majority electoral systems. The use of temporary special measures or quotas has also proven effective in getting more women into politics. During 2008, women held an average of 24 per cent of parliamentary seats in countries that used such measures, versus 18 per cent in countries that did not. In addition to quotas, other mechanisms that support women running for election include leadership training and campaign funding.

Worldwide, women are entering a greater variety of political leadership positions. As of January 2009, women reached the highest parliamentary position — presiding officer — in 31 parliamentary chambers. This figure has remained more or less constant for the past decade. During 2008, a woman took up the post of speaker for the first time in Pakistan, Romania, Rwanda, Serbia and Uzbekistan. There were 15 women serving as heads of state or government in March 2009, compared to nine in 2000 and 12 in 1995.

# Goal 4

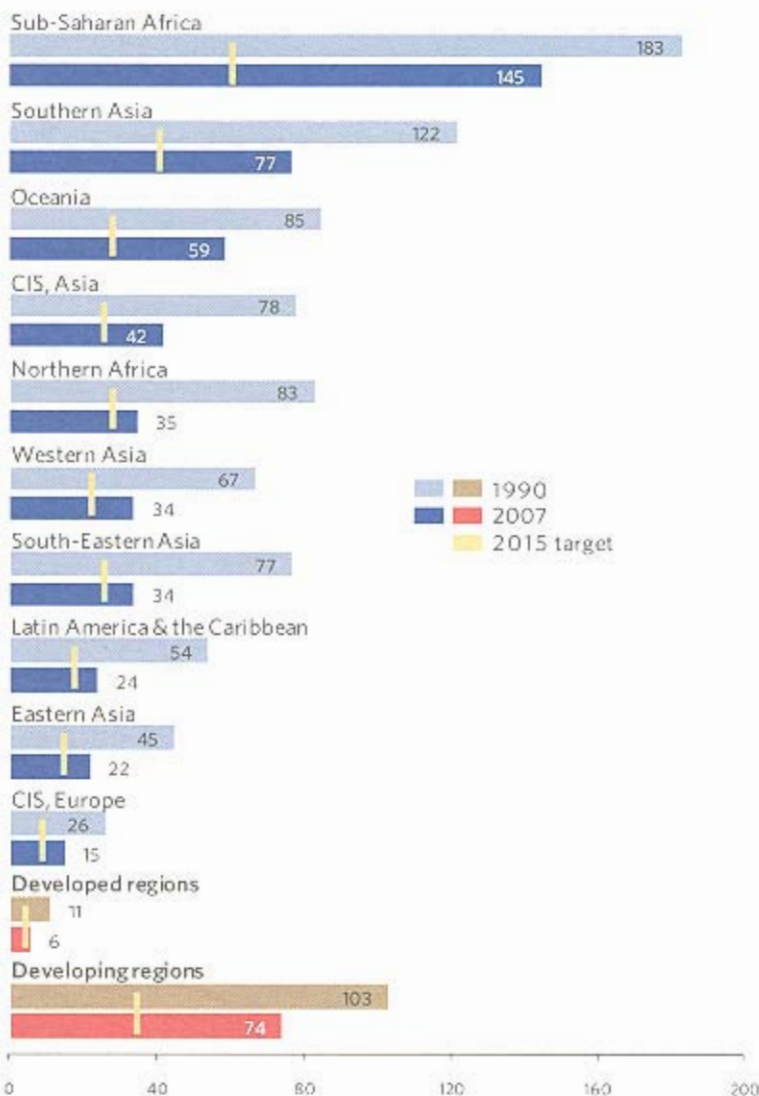
## Reduce child mortality

### TARGET

Reduce by two thirds, between 1990 and 2015, the under-five mortality rate

Child survival efforts are intensifying in sub-Saharan Africa and Southern Asia

Under-five mortality rate per 1,000 live births, 1990 and 2007



Deaths in children under five have declined steadily worldwide. In 2007, the global under-five mortality rate was 67 deaths per 1,000 live births, down from 93 in 1990. That year, more than 12.6 million young children died from largely preventable or treatable causes; the figure has declined to around 9 million today, despite population growth.

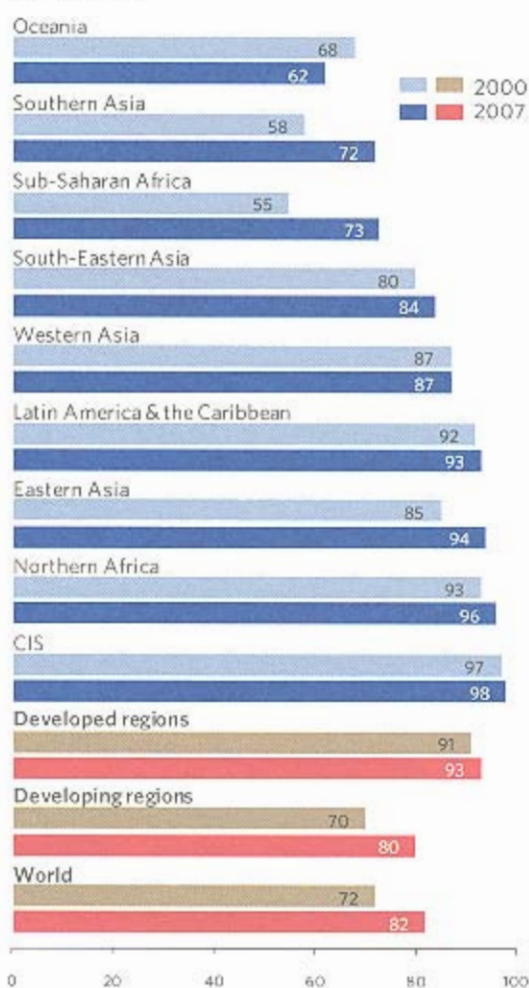


For the developing regions as a whole, the under-five mortality rate dropped from 103 in 1990 to 74 in 2007. Still, many countries, particularly in sub-Saharan Africa and Southern Asia, have made little or no progress at all. The levels are highest in sub-Saharan Africa, where, in 2007, close to one in seven children died before his or her fifth birthday. Together with high levels of fertility, this has resulted in an increase in the absolute number of under-five deaths — from 4.2 million in 1990 to 4.6 million in 2007. Sub-Saharan Africa now accounts for half of all deaths among children under five.

Sub-Saharan Africa and Southern Asia remain overriding priorities, and intensified efforts hold promise. Across sub-Saharan Africa, recent survey data show remarkable improvements in several key child-survival interventions that are expected to yield further declines in under-five mortality over the next few years. These include vitamin A supplementation, the use of insecticide-treated bed nets (to prevent malaria), exclusive breastfeeding and immunization. In addition, there has been wider coverage of critical HIV interventions in most sub-Saharan countries where HIV prevalence is high. This includes antiretroviral treatment for pregnant mothers who are HIV-positive, to prevent transmission of the virus to their babies.

## Major inroads are being made in the fight against measles

Proportion of children 12–23 months old who received at least one dose of measles vaccine, 2000 and 2007 (Percentage)



Routine immunization for measles continues to expand worldwide. Coverage has increased steadily since 2000, reaching 82 per cent of the world's children in 2007, largely due to immunization campaigns and more concentrated efforts in countries with hard-to-reach areas. During this period, measles deaths dropped by an astonishing 74 per cent, with the largest reduction in sub-Saharan Africa. Globally, there were an estimated 197,000 measles-related deaths in 2007, down from 750,000 in 2000.

Progress has been attributed to a combination of improved routine immunization coverage and the provision of a second opportunity for immunization. Such opportunities are critical for children who get left out in the initial round of measles vaccinations. They are also important in ensuring universal protection in communities. 'Second chance' immunizations have reached a total of 576 million children since 2000 and have been carried out in 46 of the 47 countries deemed at highest risk for the disease.

Efforts need to be sustained and, where necessary, strengthened, if progress is to continue. Measles vaccine, at less than \$1 per child, is one of the most cost-effective health initiatives currently available. Measles immunization campaigns have the added benefit of being able to deliver other health services at the same time, including the distribution of insecticide-treated bed nets and de-worming medicines.

# Goal 5

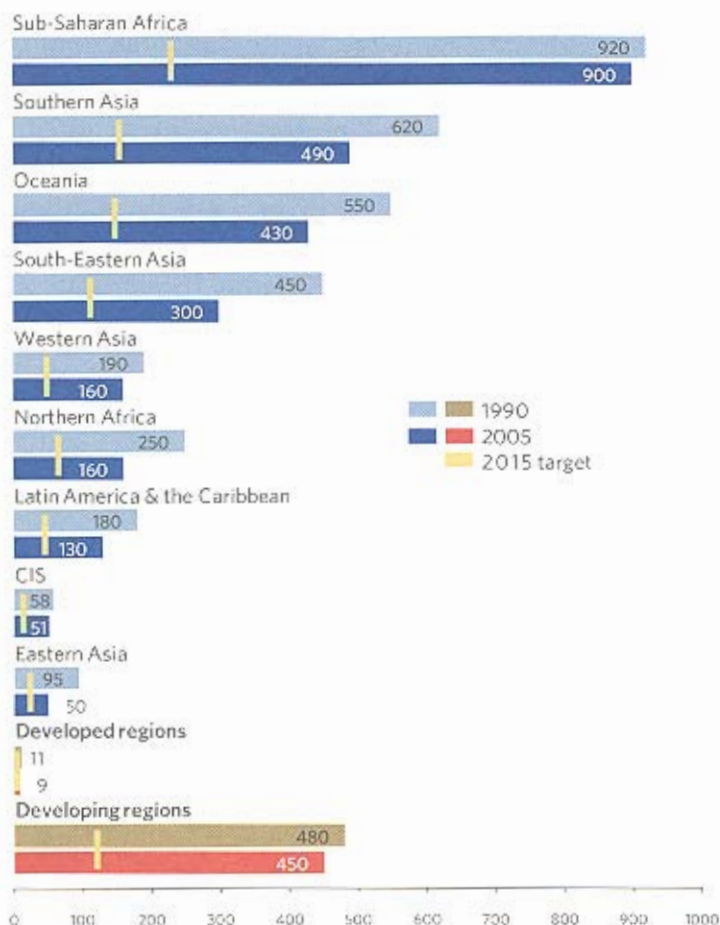
## Improve maternal health

### TARGET

Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio

Giving birth safely is largely a privilege of the rich

Maternal deaths per 100,000 live births, 1990 and 2005



Every year, 536,000 women and girls die as a result of complications during pregnancy, childbirth or the six weeks following delivery. Almost all of these deaths (99 per cent) occur in developing countries. Maternal mortality is among the health indicators that show the greatest gap between the rich and the poor — both between countries and within them. Developed regions report nine maternal deaths per 100,000 live births compared to 450 maternal deaths in developing regions, where 14 countries have maternal mortality ratios of at least 1,000 per 100,000 live births. Half of all maternal deaths (265,000) occur in sub-Saharan Africa and another third (187,000) in Southern Asia. Together, these two regions account for 85 per cent of all maternal deaths.





Measuring maternal mortality is challenging at best. Systematic underreporting and misreporting of maternal deaths are common, and the estimates lie within large uncertainty intervals. Reliability of currently available data sources vary, and accurate monitoring of progress will depend, in the medium to long term, on better systems of surveillance and registration. The available trend data indicate that there has been little progress in the developing world as a whole — 480 maternal deaths per 100,000 births in 1990 compared to 450 deaths in 2005 — and that the small decline reflects progress only in some regions. Eastern Asia, Northern Africa, and South-Eastern Asia showed declines of 30 per cent or more between 1990 and 2005. Southern Asia reports a decline of more than 20 per cent over the same period, yet the number of deaths in that region remains unacceptably high. Very little progress has been made in sub-Saharan Africa, where women face the greatest lifetime risk of dying as a result of pregnancy and childbirth.

Obstetric complications — including post-partum haemorrhage, infections, eclampsia, and prolonged or obstructed labour — and complications of unsafe abortion account for the majority of maternal deaths. Anaemia, exacerbated by malaria, HIV and other conditions, heightens the risk of maternal death from haemorrhage. In sub-Saharan Africa, haemorrhage alone causes 34 per cent of maternal deaths. Yet most of these conditions could be prevented or treated with good quality reproductive health services, antenatal care, skilled health workers assisting at birth, and access to emergency obstetric care.

Since 1995, every region of the developing world has made some progress in improving the availability of skilled health personnel (doctors, nurses or midwives) to assist in deliveries. Overall, the proportion of births attended by skilled health workers in developing regions has increased from 53 per cent in 1990 to 61 per cent in 2007. However, in Southern Asia and sub-Saharan Africa, more than half of all births still take place without the assistance of trained personnel.

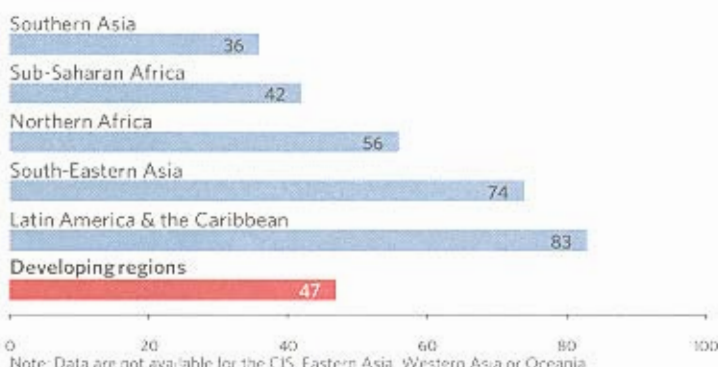
Ready access to emergency obstetric care is crucial to ensure that a higher level of care can be provided in a timely manner when life-threatening complications arise. Global data on availability and accessibility of emergency obstetric care are not available, but the percentage of Caesarean sections can be used as a proxy indicator for access to such care. In sub-Saharan Africa, only 3 per cent of all deliveries are through Caesarean sections.

#### TARGET

Achieve, by 2015, universal access to reproductive health

### Fewer than half of pregnant women in developing countries have the benefit of adequate prenatal care

Proportion of women (15-49 years old) attended four or more times during pregnancy by skilled health personnel, 2003/2008 (Percentage)

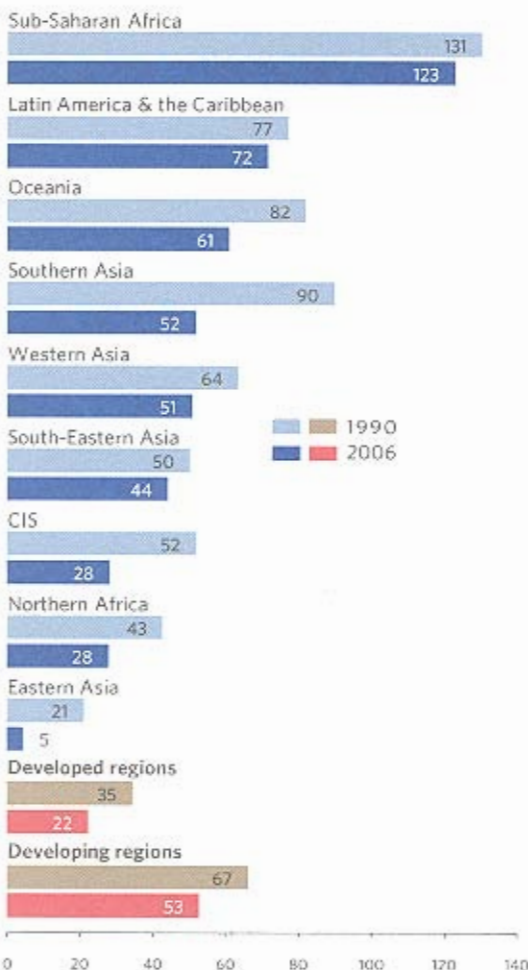


Many health problems among pregnant women are preventable, detectable or treatable through visits with trained health workers before birth. The UN Children's Fund (UNICEF) and the World Health Organization (WHO) recommend a minimum of four antenatal visits. These enable women to receive important services, such as tetanus vaccinations and screening and treatment for infections, as well as potentially life-saving information on warning signs during pregnancy.

Since the 1990s, the proportion of pregnant women in the developing world who had at least one antenatal care visit increased from around 64 per cent to 79 per cent. However, a substantially lower proportion of pregnant women receive the standard set of four visits recommended by WHO and UNICEF. The proportion of women who receive four or more antenatal visits is still less than 50 per cent in sub-Saharan Africa and Southern Asia, where the majority of maternal deaths occur. These figures have changed little over the last decade, indicating that maternal health and the provision of reproductive health services in those regions have scarcely advanced.

## The risks are high for both mother and child when pregnancy occurs at too young an age

Number of births per 1,000 women aged 15-19 years, 1990 and 2006



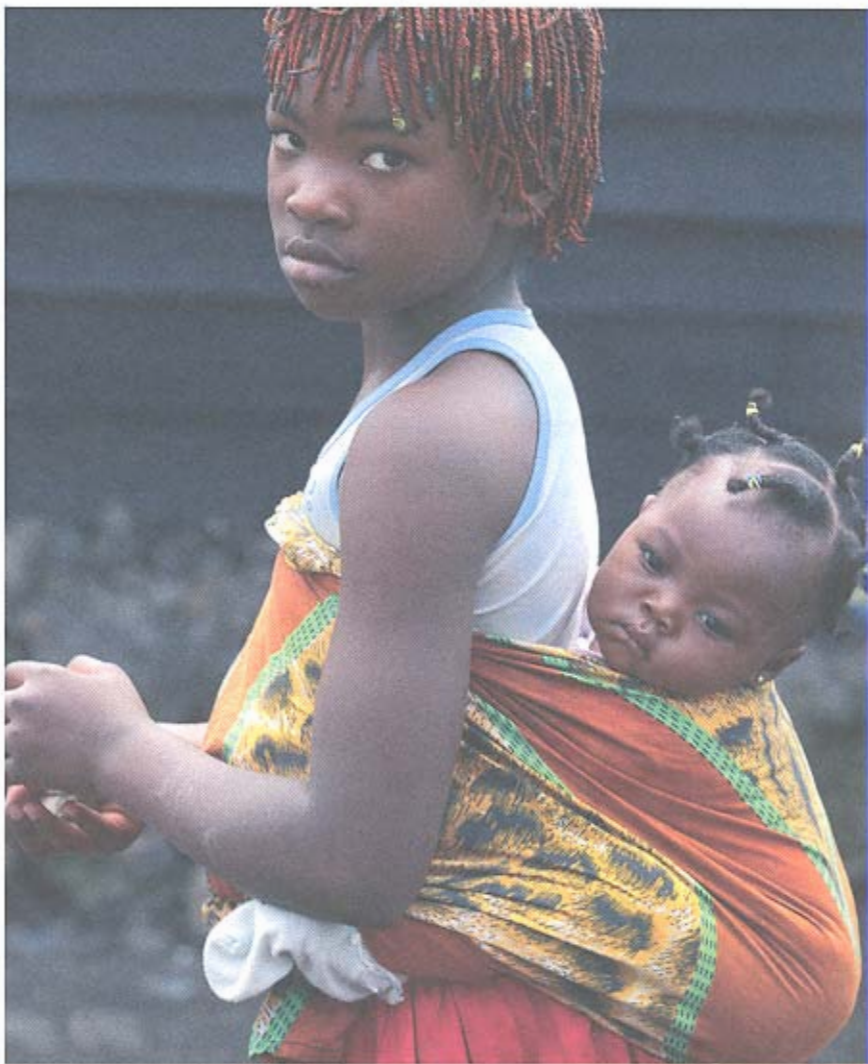
Young adolescents are more likely to die or experience complications in pregnancy and childbirth than adult women. Moreover, the children of these young mothers have a higher risk of morbidity and mortality. Girls who give birth before the age of 15 are five times more likely to die in childbirth than women in their twenties. Pregnancy early in life contributes to the estimated 70,000 maternal deaths among girls aged 15 to 19 every year. An infant's risk of dying in his or her first year of life is 60 per cent higher when the mother is under age 18 than when the mother is 18 or older.

The adolescent birth rate is the number of births per 1,000 women aged 15 to 19. This age range includes not only young adolescents but also women aged 18

and over who experience lower morbidity and mortality risks during pregnancy and childbirth than their younger counterparts. Nevertheless, high birth rates for adolescents overall typically include large numbers of early teen pregnancies, sometimes outside of marriage. These pregnancies often occur under circumstances that are not only detrimental to a mother's health but also to her educational prospects and opportunities for social and economic advancement.

The adolescent birth rate is highest in sub-Saharan Africa and has declined only marginally since 1990. Fertility in that region is high at all ages and early pregnancies are common, mostly because marriage occurs at very young ages in many countries. Adolescent birth rates also remain high in Latin America and the Caribbean, where they often involve pregnancy outside of marriage.

Early marriage, often involving the union of a young woman to a much older man, contributes to the large number of teenage pregnancies. The latest estimates, based on survey data for the period 1998-2007, indicate that in Southern Asia, 49 per cent of women 20 to 24 years old were married before age 18. In countries of Western and Central Africa, 44 per cent of women in the same age group were married before age 18. In Bangladesh, the Central African Republic, Chad, Guinea, Mali, Mozambique and Niger, more than half of all women are married by age 18 and more than a third are mothers by that age.





## Access to contraception expands, but unmet need remains high, especially in countries with the highest fertility

Proportion of women, married or in union, aged 15-49 years, using any method of contraception, 1990 and 2005 (Percentage)



\* Data are not available for 1990.

Contraceptive use has increased in all developing regions, generally accompanied by reductions in fertility. In almost all regions, well over half of women who are married or in union were using some form of contraception in 2005. The major exception is sub-Saharan Africa, where contraceptive prevalence, though nearly doubling between 1990 and 2005, was still only 22 per cent in 2005.

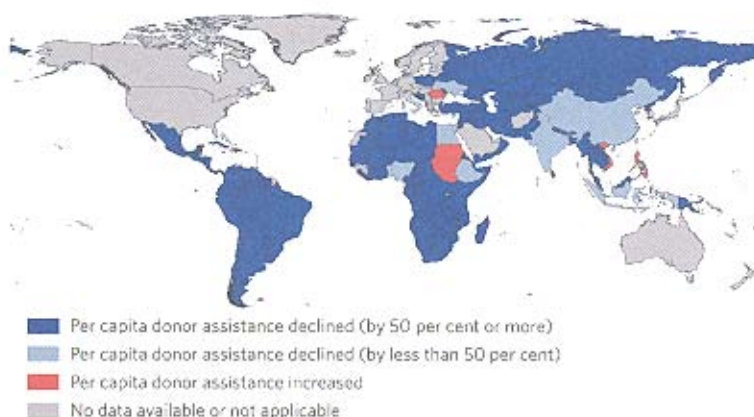
Despite increases in contraceptive use in all regions, the unmet need for family planning — that is, the gap between women's desire to delay or avoid having children and their actual use of contraception — remains moderate to high in most of them. The case of

sub-Saharan Africa stands out: in that region, one in every four women who is married or in union has an unmet need for family planning, a figure that has remained almost unchanged since 1995. With the exception of Eastern Asia, levels of unmet need were also moderately high for most other developing regions, although the majority of them had reached high levels of contraceptive prevalence by 2005.

Unmet need is particularly high in the least developed countries, where lack of access to modern methods of contraception is a major cause of persistent high fertility. Whereas unmet need in the developing regions as a whole is 11 per cent, it is as high as 25 per cent in the least developed countries. Among the 17 least developed countries with the lowest levels of modern contraceptive use, all except one are in sub-Saharan Africa.

## Donor funding for family planning declines, even as progress in maternal health stalls

Percentage change in donor assistance for family planning programmes per woman aged 15 to 49, 1996 to 2006



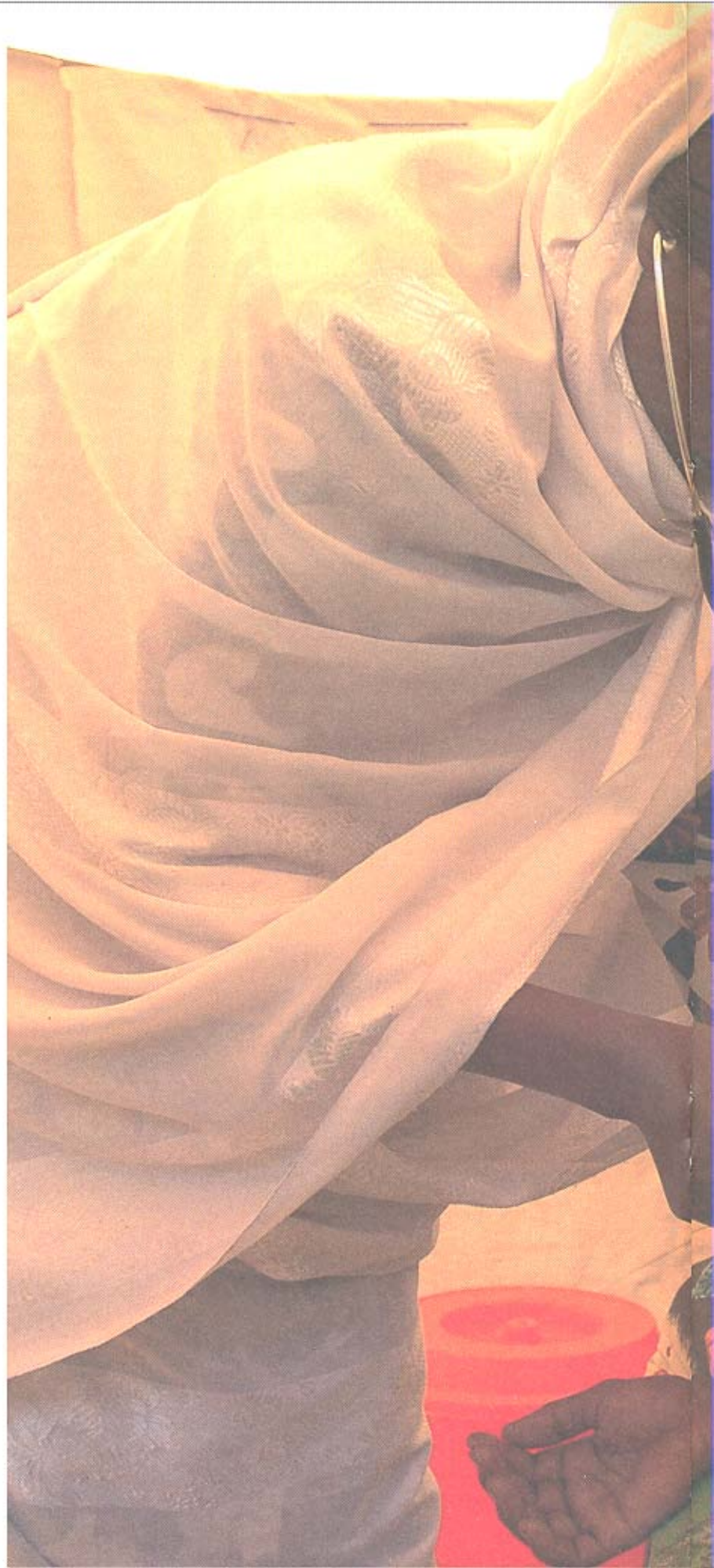
Funding gaps are conspicuous for programmes needed to meet MDG 5, the goal towards which least progress has been made thus far. To take just one example: the strengthening and expansion of family planning programmes can make a major contribution to improvements in maternal and child health, but require adequate funding and access to supplies. Yet, since the mid-1990s, most developing countries have experienced a major reduction of donor funding for family planning on a per woman basis.



## Prospects for safe delivery improve in most refugee camps studied, but remain grim in others

According to UNHCR, refugees and others affected by emergencies face multiple difficulties in accessing reproductive health services. The breakdown of family support networks often means that young refugee men and women lose their traditional sources of information, assistance and protection. Loss of income reduces their ability to make choices freely. And women may not have decision-making power over when and where to seek reproductive health services, or whether to spend family income on health at all. Moreover, refugee women may become solely responsible for the welfare of their families, which can represent an emotional and physical burden that is not adequately compensated by appropriate services.

Data from camps in 16 countries show that, between 2007 and 2008, there were improvements in skilled attendance at delivery in 60 of the 91 refugee camps studied. However, rates of attendance by skilled medical workers at delivery remain below 20 per cent in some camps, such as those in Bangladesh, Chad and Zambia. Redoubled efforts are required in these locations if our promises to women and their children are to be kept.









# Goal 6

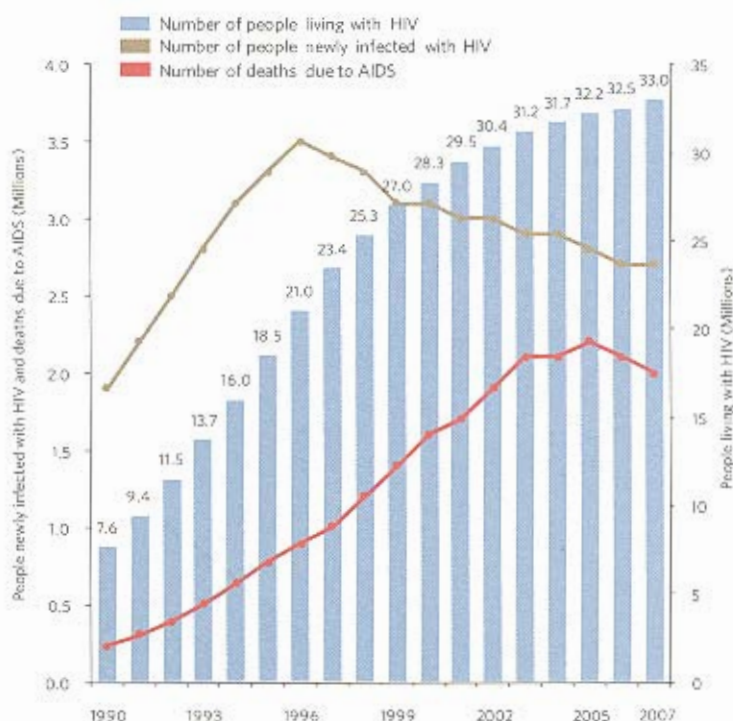
## Combat HIV/ AIDS, malaria & other diseases

### TARGET

Have halted by 2015 and begun to reverse the spread of HIV/AIDS

New HIV infections and AIDS deaths have peaked, but 33 million people are still living with HIV

Number of people living with HIV, number of people newly infected with HIV and number of AIDS deaths in the world (Millions), 1990-2007



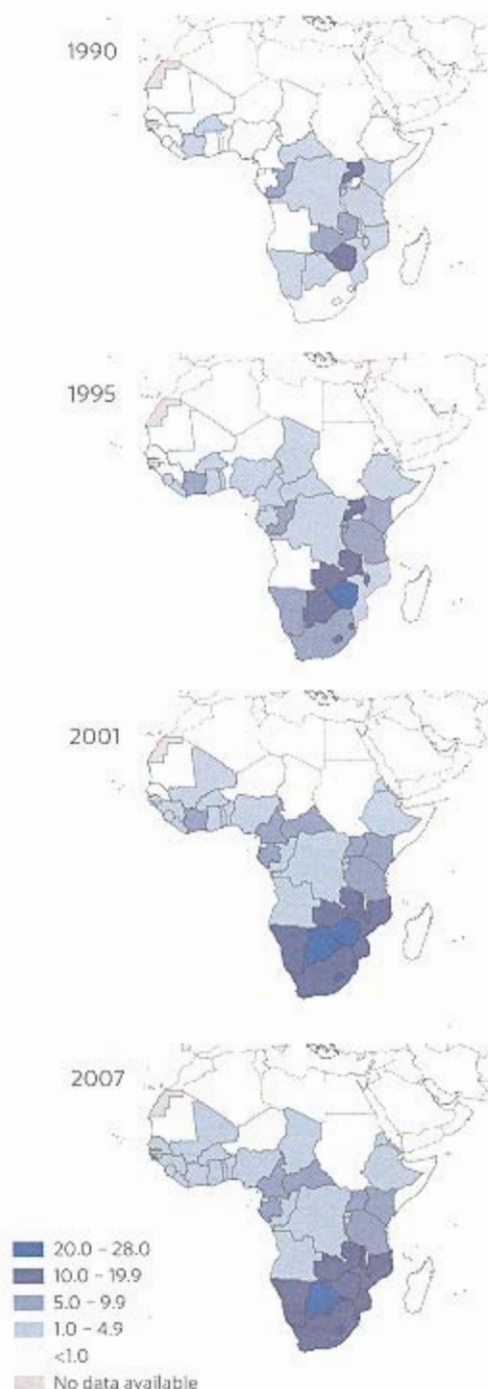
Worldwide, the number of people newly infected with HIV peaked in 1996 and has since declined, to 2.7 million in 2007. These positive trends are mostly due to a fall in the annual number of new infections in some countries in Asia, Latin America and sub-Saharan Africa. Meanwhile, infection rates continue to rise in other parts of the world, especially Eastern Europe and Central Asia. In those regions, HIV prevalence has almost doubled since 2001 — when the United Nations Declaration of Commitment on HIV/AIDS was signed — and the number of people living with HIV has increased from 630,000 to 1.6 million.

The estimated number of AIDS deaths also appears to have peaked in 2005, at 2.2 million, and has since declined to 2 million in 2007. This is partly due to increased access to antiretroviral drugs in poorer countries. Despite an overall decrease in the number of new infections, the number of people living with HIV worldwide continues to grow, largely because people infected with the virus are surviving longer. In 2007, an estimated 33 million people were living with HIV.



## Two thirds of those living with HIV are in sub-Saharan Africa, most of whom are women

Proportion of population living with HIV, 1990, 1995, 2001 and 2007 (Percentage)



Over one third of new HIV infections and 38 per cent of AIDS deaths in 2007 occurred in Southern Africa. Altogether, sub-Saharan Africa is home to 67 per cent of those living with HIV.

Women account for half the people living with HIV worldwide and nearly 60 per cent of those infected in sub-Saharan Africa. Worldwide, gender inequities continue to affect women's decision-making and risk-taking behaviour, and vulnerability to HIV infection is often beyond a woman's individual control.

## Accurate knowledge of HIV is still unacceptably low

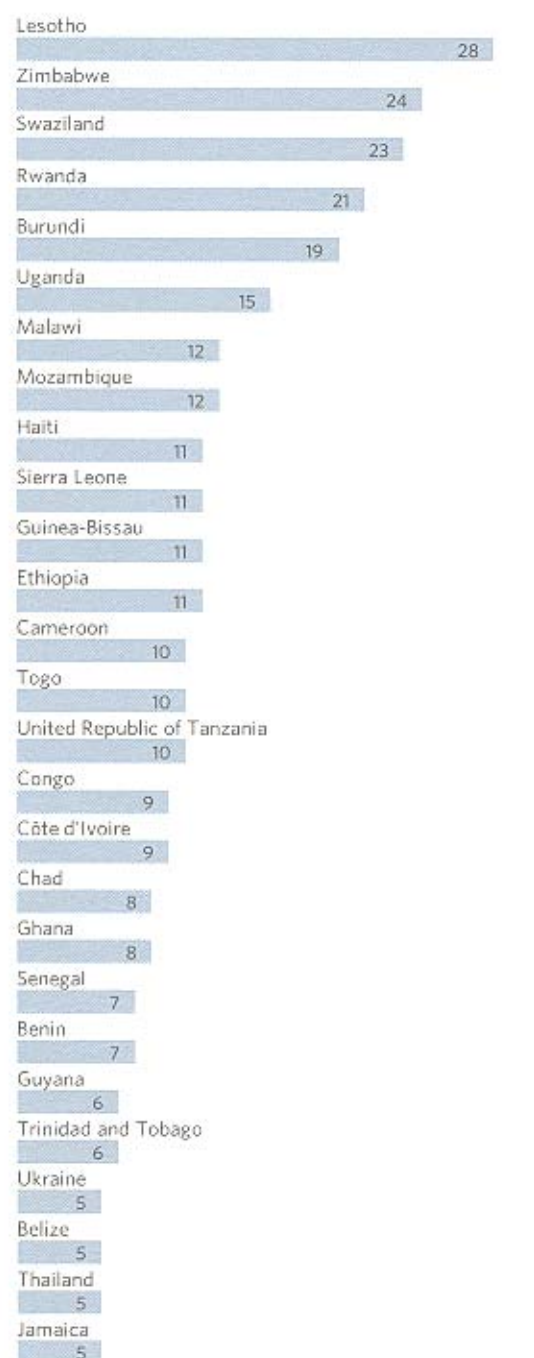
Knowledge of HIV and how to prevent it is slowly improving among young people. But it is still too low in most countries and well below the goal set at the UN General Assembly Special Session on HIV/AIDS of comprehensive HIV knowledge of 95 per cent by 2010. On average, only about 31 per cent of young men and 19 per cent of young women (aged 15-24) in developing countries have a thorough and accurate understanding of HIV.

The education sector is a crucial avenue for HIV prevention. Providing both primary and secondary school-aged children and adolescents with specific, gender-sensitive and age-appropriate information on preventing HIV is essential, as is equipping them with the problem-solving, negotiation and decision-making skills to put that knowledge into practice. There is strong evidence that comprehensive sexuality education, delivered through schools, can be effective in changing the attitudes and practices that lead to risky behaviour.

Some of the behaviours that put young women at greater risk for HIV infection are early sexual debut, unprotected sex (in particular with multiple concurrent partners), sex with a much older partner who is likely to have been exposed to HIV, transactional sex and violence against women and girls. Young women are also more vulnerable when they lack the knowledge and skills to protect themselves and have limited access to quality sexual and reproductive health services, including HIV prevention. Social and cultural norms, practices, beliefs and laws can also reinforce the relative powerlessness of young women, and their susceptibility to HIV infection.

## The plight of children affected by AIDS is inspiring new approaches directed to children, their families and their communities

Children under 18 years who have lost one or both parents, in countries with HIV prevalence greater than 1 per cent, 2003/2007 (Percentage)



In 2007, an estimated 15 million children worldwide had lost one or both parents to AIDS; nearly 12 million of them live in sub-Saharan Africa. Many millions more have been orphaned due to other causes. In Burundi and Rwanda, for example, orphanhood is more likely to result from armed conflict than from the HIV epidemic. As of 2007, an estimated 47.5 million children in sub-Saharan Africa had lost one or both parents to AIDS or other causes.

Responses to the plight of such children at the national level have been growing since the 1990s. By the end of 2007, national plans of action specifically for children orphaned by AIDS and other vulnerable children had been developed in 32 countries, including 29 in sub-Saharan Africa. Ten more countries — nine in sub-Saharan Africa — were in the process of drawing up such plans. Many countries are integrating policies for children affected by AIDS into national development plans, action plans for children, and policies of ministries such as education and health.

Data from national surveys in 36 countries has led to new evidence that while AIDS and orphanhood pose tremendous challenges to children and families, other factors also have a strong impact on children's well-being. Such factors include the relative wealth of a child's household, the relationship of a child to his or her caregiver, and the education level of adults in the household, particularly the female caretaker. In areas of widespread poverty and high HIV prevalence, sources of vulnerability tend to converge. Many AIDS-affected children cluster in poor households with low levels of education. Therefore, helping all vulnerable children is a wise and cost-effective strategy for reaching children affected by HIV and AIDS. Singling out children who have lost a mother or father to AIDS is not only stigmatizing, but virtually impossible. The current approach is to promote and advocate for 'AIDS-sensitive', rather than 'AIDS-exclusive' programming. In doing so, resources and programmes for children affected by HIV and AIDS should strive to reach communities and families and build and strengthen systems for supporting child well-being overall.





In communities that are highly affected by HIV, cash-transfer programmes have been shown to work. They keep children fed, sheltered and in school. In addition, cash transfers reduce the economic stress on households affected by AIDS, in which children, often girls, or grandmothers have to care for ill parents. The pressure exerted by the global economic crisis, however, could shatter this simple but effective form of protection. In order to realize the full reach and impact of cash transfers — including for children affected by AIDS — the current economic threat must be simultaneously addressed by social welfare structures at the local, national and global levels.

#### TARGET

Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it

### Wider access to treatment contributes to the first decline in AIDS deaths since the epidemic began

In only five years, coverage of antiretroviral treatment in poorer countries increased tenfold, resulting in the first decline in the number of AIDS deaths since the epidemic was recognized in the early 1980s. By December 2007, 3 million people in the developing regions had access to antiretroviral drugs; this represents a 47 per cent increase since December 2006. An estimated 200,000 children were receiving treatment in 2007, compared to 75,000 in 2005. However, for every person who started antiretroviral treatment in 2007, three new people were infected with HIV. And 69 per cent of people who needed treatment did not have access to the required drugs.

Globally, women have equal or greater access to antiretroviral drugs than men. In 2007, about 33 per cent of pregnant women who tested positive for HIV received antiretroviral treatment to prevent transmission of the virus to their babies. This translates into 491,000 of the estimated 1.5 million pregnant women who needed the drugs that year, a noteworthy increase from the 10 per cent of HIV-positive pregnant women who received treatment in 2004. The most significant gain in coverage has been in sub-Saharan

Africa. Still, only 12 per cent of pregnant women in that region who were identified as HIV-positive during antenatal care were assessed to determine their eligibility to receive antiretroviral drugs.

#### TARGET

Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases

### Nearly a million people still die each year from malaria, mostly young children in sub-Saharan Africa

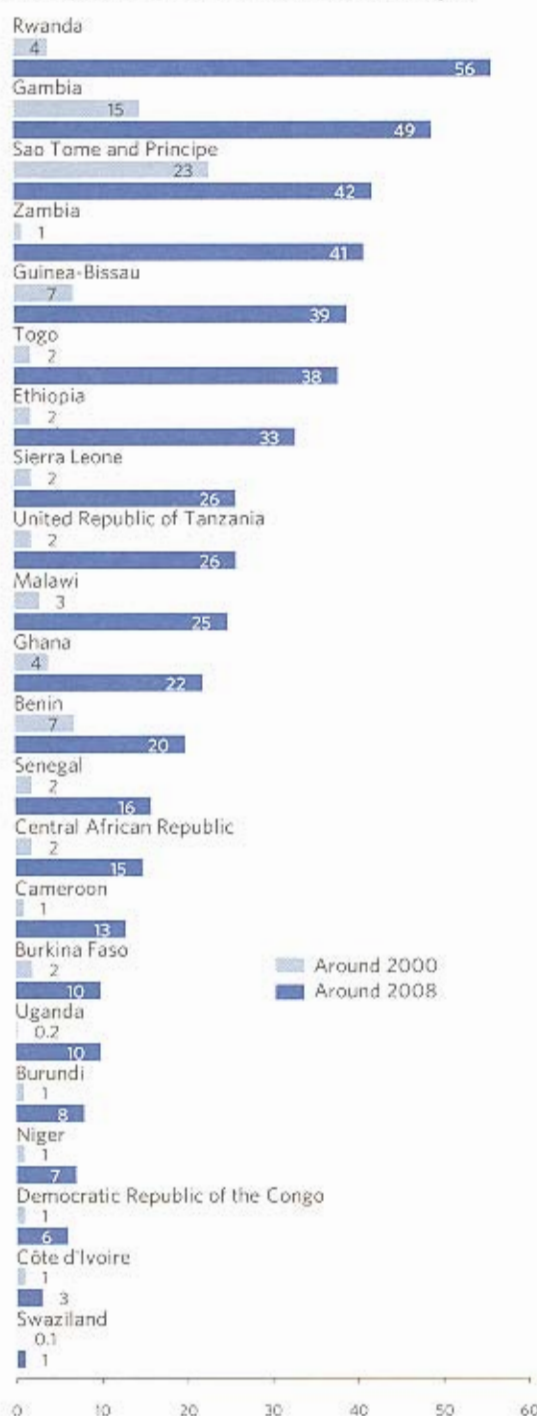
According to WHO, nearly a million people died of malaria in 2006. Ninety-five per cent of them lived in sub-Saharan Africa, and the vast majority were children under five. Between 190 million and 330 million episodes of malaria occurred that year, with 88 per cent in sub-Saharan Africa, 6 per cent in Southern Asia and 3 per cent in South-Eastern Asia.

The risk of dying from malaria is considerably higher in sub-Saharan Africa than other parts of the world for several reasons: transmission of the disease is more intense, the more lethal form of the malaria parasite — *Plasmodium falciparum* — is more abundant, and the region tends to have weak health systems. Malaria is a disease of poverty, with cases and deaths disproportionately concentrated in the least developed countries.

Nevertheless, major progress has been made in the fight against malaria in recent years, due in large part to increased funding and focus on malaria control. New and ambitious goals, laid out in the 2008 Roll Back Malaria Global Action Plan, are challenging countries to implement bold plans to achieve universal coverage with key interventions by 2010. At the same time, global funding for control efforts has also risen significantly. Roll Back Malaria estimates that international funding for malaria control has grown from \$250 million in 2004 to \$700 million in 2007, and is expected to have reached \$1.1 billion in 2008. In September 2008, at the High-level Event on the MDGs, world leaders again committed billions of dollars more towards malaria-control efforts.

## Sub-Saharan Africa shows a dramatic rise in the use of bed nets to protect children from malaria

Proportion of children under five sleeping under insecticide-treated bed nets, selected countries, around 2000 and around 2008 (Percentage)

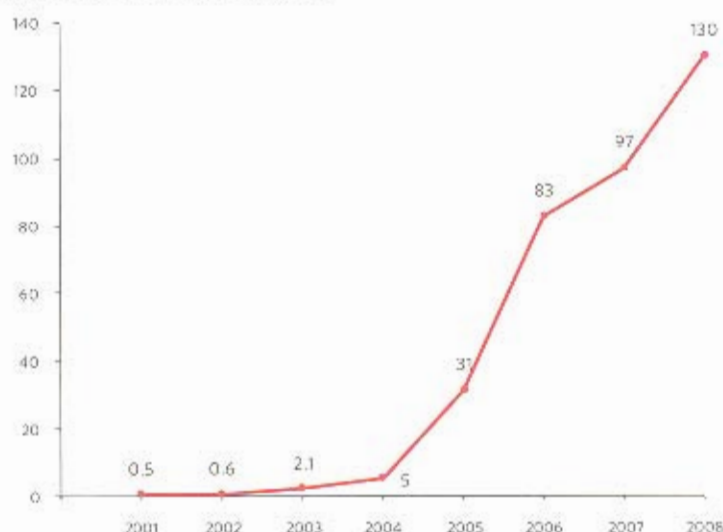


The international malaria community has accelerated efforts to deliver critical interventions, notably insecticide-treated bed nets, while also working to reduce bottlenecks in their production, procurement and distribution. Countries have been quick to adopt more effective strategies that would have been out of reach had funding not been available. Such strategies include changing national drug policies to more effective — but more expensive — treatment courses, and expanding the use of diagnostics to better target treatment.

Across sub-Saharan Africa, the use of insecticide-treated bed nets among children jumped from 2 per cent in 2000 to 20 per cent in 2006. In fact, 19 of 22 sub-Saharan African countries with trend data showed at least a threefold increase during this time period; 17 of them saw at least a fivefold increase.

## Scaling up interventions to curb the toll of malaria has begun to yield results

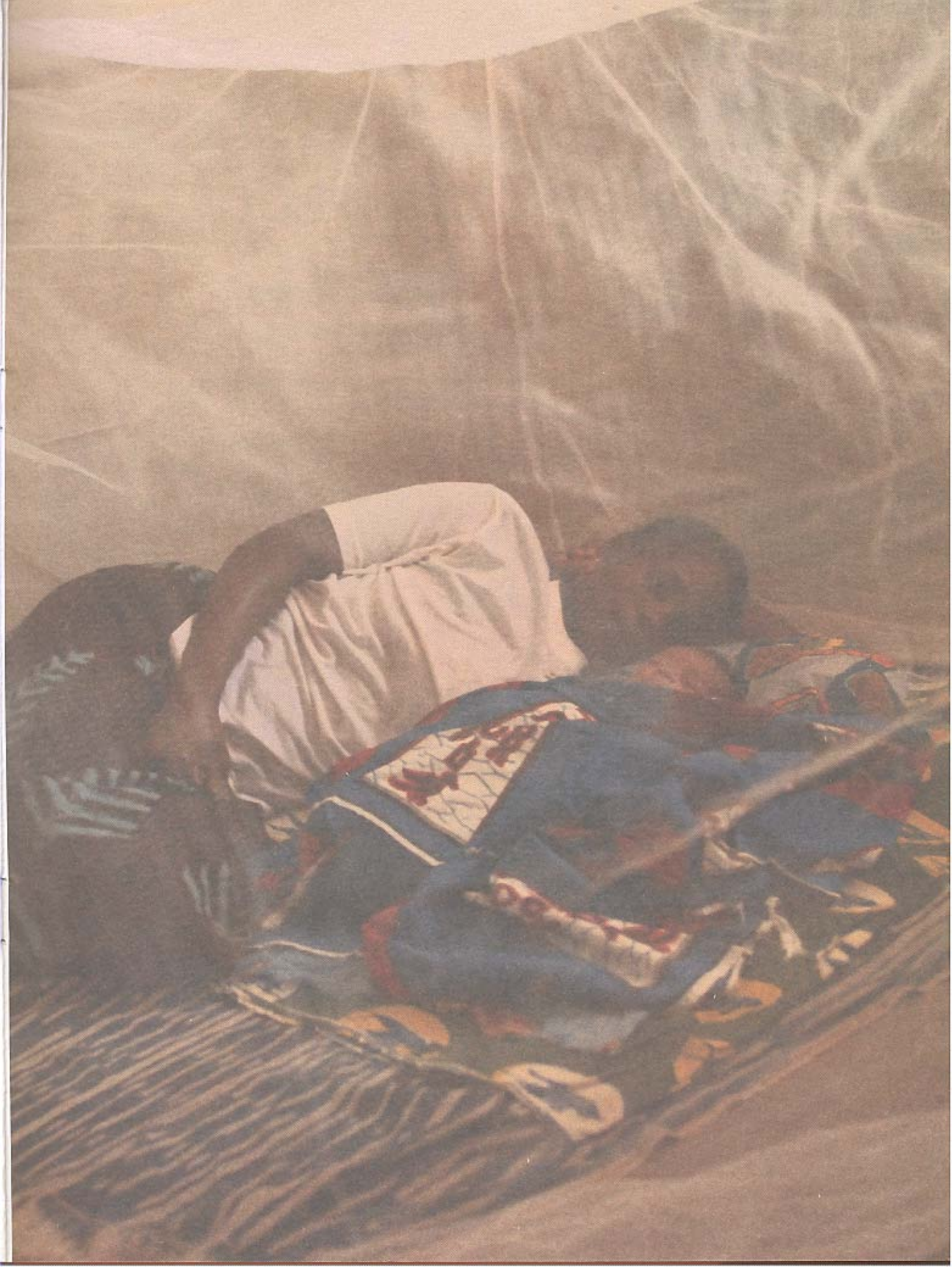
Number of doses of artemisinin-based combination therapies procured worldwide, 2001-2008 (Millions)



Despite major increases in the procurement of artemisinin-based combination therapies since 2004, many African children are still using less effective medicines. Most countries have also shown little or no progress in expanding coverage of such therapies since 2000. This mirrors trends in the treatment of other major childhood illnesses, such as diarrhoeal diseases and pneumonia. It also underscores the urgent need to strengthen integrated, community-based case management of major childhood illnesses.

Recent efforts to scale up programmes, however, are beginning to show results. Countries that have reached high coverage with two or more malaria interventions (Eritrea, Rwanda, Sao Tome and Principe, Zanzibar) have seen declines of more than 50 per cent in severe malaria cases and deaths in health facilities. Even greater progress is expected in the coming years.

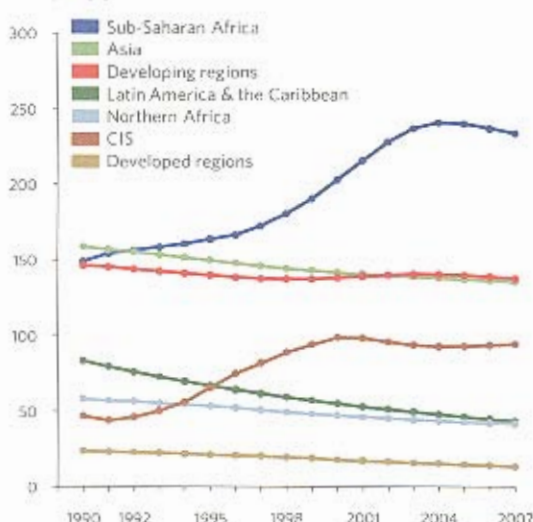






## The incidence of tuberculosis is levelling off, but the number of new cases continues to rise

Number of new tuberculosis cases per 100,000 population (excluding people that are HIV-positive), 1990-2007

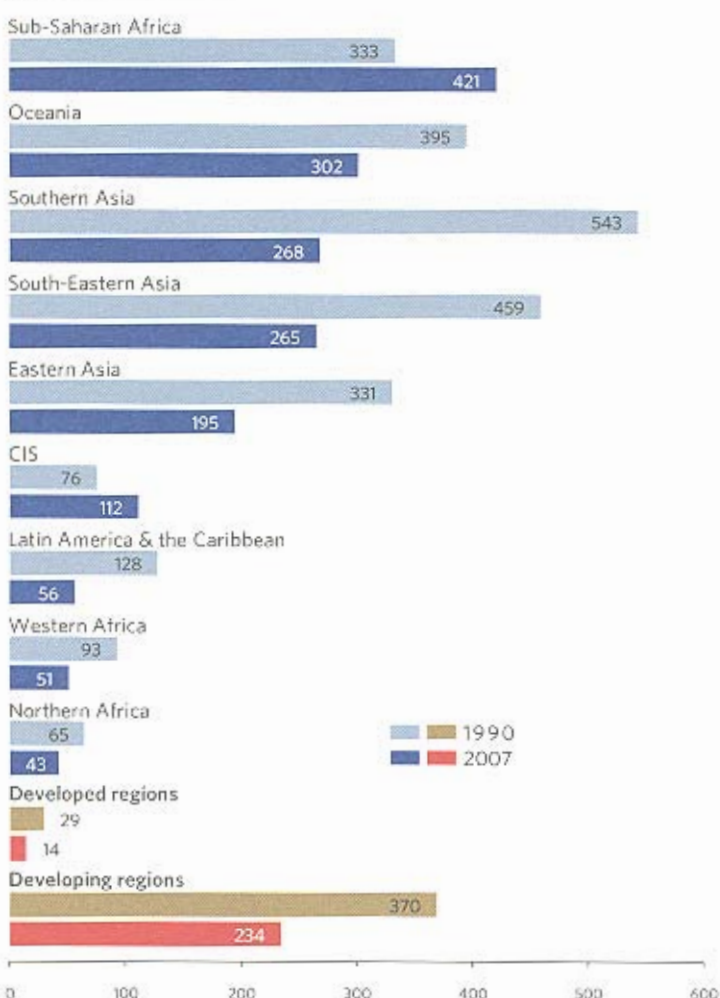


The global incidence of tuberculosis (TB) — that is, the number of new cases per 100,000 people — appears to have peaked in 2004 and is now levelling off. Though incidence rates are dropping in all regions, progress has not been fast enough to keep pace with population growth. As a result, the absolute number of new infections is still rising.

Globally, there were an estimated 9.3 million new cases of tuberculosis in 2007, up from 9.2 million cases in 2006 and 8.3 million in 2000. Most of the cases in 2007 occurred in Asia (55 per cent) and Africa (31 per cent). Of the 9.3 million new TB cases in 2007, an estimated 1.4 million (15 per cent) were among people who were HIV-positive, most of whom (79 per cent) live in Africa. The male/female ratio of new smear-positive cases reported to WHO in 2007 was 1.8, indicating that nearly two men were infected for every woman. The reasons behind this are poorly understood. One possible explanation is that biological differences between men and women in certain age groups affect the risk of becoming infected and progressing to active stages of the disease. Another could be that differences in social roles between men and women influence their risk of exposure to TB and access to care.

## Tuberculosis prevalence and mortality rates are falling, but not fast enough to meet global targets

Number of tuberculosis cases per 100,000 population (excluding people who are HIV-positive), 1990 and 2007



Tuberculosis prevalence, which is the number of TB cases per 100,000 people, has also fallen globally. However, the targets of halving the 1990 prevalence and death rates by 2015, established by the Stop TB partnership, are unlikely to be met. This is mainly because prevalence is still rising in sub-Saharan Africa and because of a sharp rise in prevalence rates in the CIS during the 1990s. In that region, prevalence has yet to return to its 1990 level and is unlikely to reach half that level by 2015.

In 2007, there were 13.7 million cases of tuberculosis globally. This is only a slight decrease from 2006, when 13.9 million cases were reported, resulting in 1.3 million deaths. An additional 456,000 people died from tuberculosis who were HIV-positive.



Success in implementing the Stop TB strategy and achieving its goals will rely on action on several fronts. The most important and widely carried out element of the strategy is a detection and treatment modality known as 'DOTS'. The global detection rate under DOTS was 63 per cent in 2007 and its success rate for

treatment was 85 per cent in 2006. However, improvements in laboratory testing of culture and drug susceptibility are urgently needed, along with assistance to the many countries that continue to report stock-outs of first-line drugs. The diagnosis and treatment of multi-drug-resistant TB and the implementation of joint TB-HIV initiatives are also major components of the Stop TB strategy.



# Goal 7

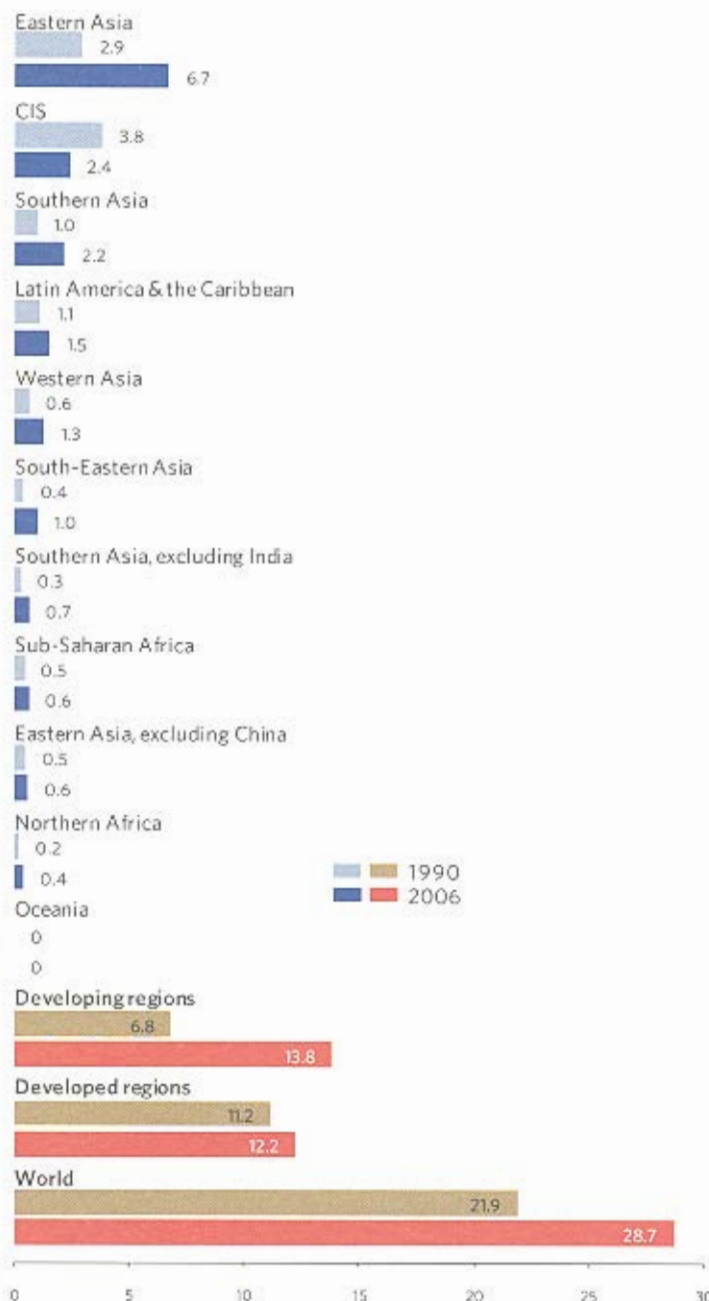
## Ensure environmental sustainability

### TARGET

Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources

A continued rise in greenhouse gas emissions is another reminder of the urgency of the climate change problem

Emissions of carbon dioxide (CO<sub>2</sub>), 1990 and 2006 (Billions of metric tons)





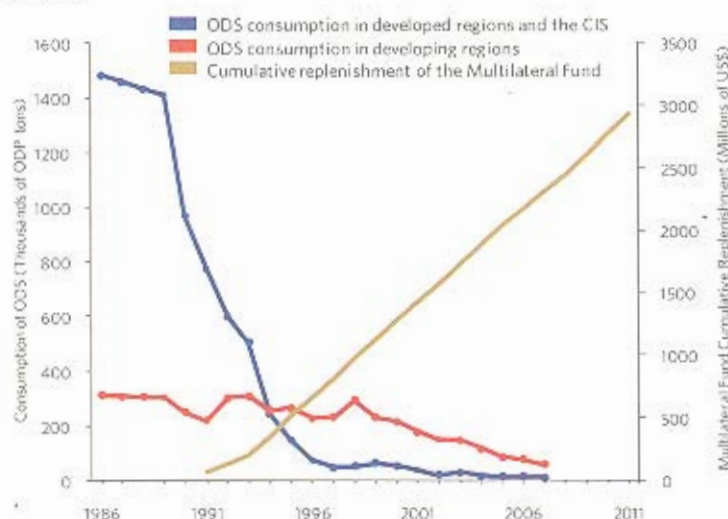
Carbon dioxide emissions contribute to the greenhouse gas effect — a rise in global temperatures that is already having an impact on the planet's people, plants and animals. In 2006, global carbon dioxide emissions continued their upward trend, reaching 29 billion metric tons, an increase of 2.5 per cent from the previous year. Emissions in 2006 were 31 per cent above the 1990 level.

Per capita emissions remain highest in the developed regions — about 12 metric tons of CO<sub>2</sub> per person per year, compared with about 3 metric tons in the developing regions and 0.8 metric tons in sub-Saharan Africa, the lowest regional value. Emissions per unit of economic output fell by more than 24 per cent in the developed regions and by about 8 per cent in the developing regions.

The continued growth of global emissions confirms that combating climate change must remain a priority for the world community. Achieving a substantive breakthrough in the next round of UN Framework Convention on Climate Change negotiations, slated for December 2009 in Copenhagen, is extremely important in that regard. It will also be important to demonstrate that the world can handle the climate change problem even in the midst of a global economic downturn, and seize new opportunities for 'green' growth. Managing the economic crisis can and should be turned into an opportunity to address climate change in a more comprehensive and efficient manner.

## Strong partnerships and sound national policies lead to extraordinary progress in protecting the ozone layer

Consumption of all ozone-depleting substances (ODS), 1986-2007  
(Thousands of metric tons of ozone-depleting potential) and replenishment of the Montreal Protocol Multilateral Fund (Millions of US dollars)



From 1986 to 2007, the 195 countries that are currently party to the Montreal Protocol have achieved a 97 per cent reduction in the consumption of substances that deplete the Earth's ozone layer. This extraordinary accomplishment is a prime example of both the integration of sustainable development principles into national policy frameworks (MDG 7) and a global partnership for development (MDG 8).

To date, 177 parties to the Montreal Protocol have put in place national regulations or legislation to promote effective protection of the ozone layer and sustainable compliance with the Protocol. In addition to funding these critical activities, the Montreal Protocol Multilateral Fund has, for the past 19 years, supported national capacity-building and networking of policy makers, customs officials and others. The Fund has also helped transfer essential technologies that have enabled developing countries to 'leapfrog' to new, energy-efficient technologies and export their wares to the global market.

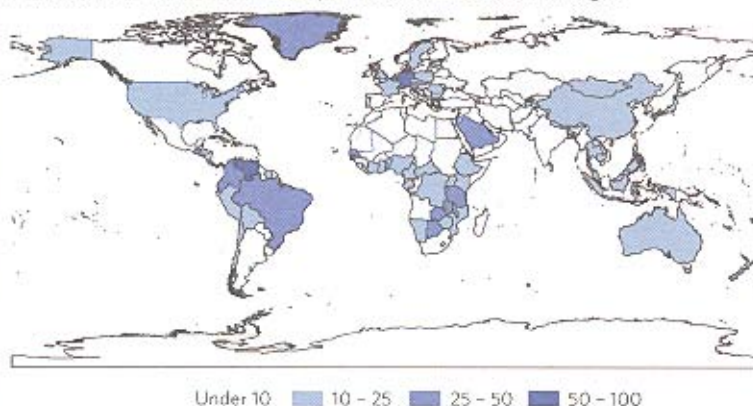
Still, challenges remain. Foremost among them is the phasing out of hydrochlorofluorocarbons while avoiding the use of alternatives with a high potential for global warming. Other serious issues include the management of existing stocks of ozone-depleting substances (including their destruction) and ensuring that illegal trade does not emerge after key substances are phased out. Finally, technologically and economically viable alternatives must still be found for the few critical and essential uses that are currently receiving exemptions by States parties to the Protocol.

#### TARGET

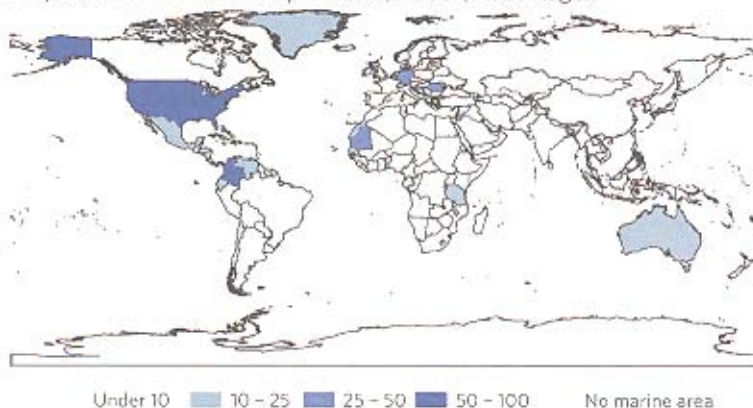
Reduce biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss

### Far more effort is needed to protect species and ecosystems under threat

Proportion of terrestrial areas protected, 2008 (Percentage)



Proportion of marine areas protected, 2008 (Percentage)



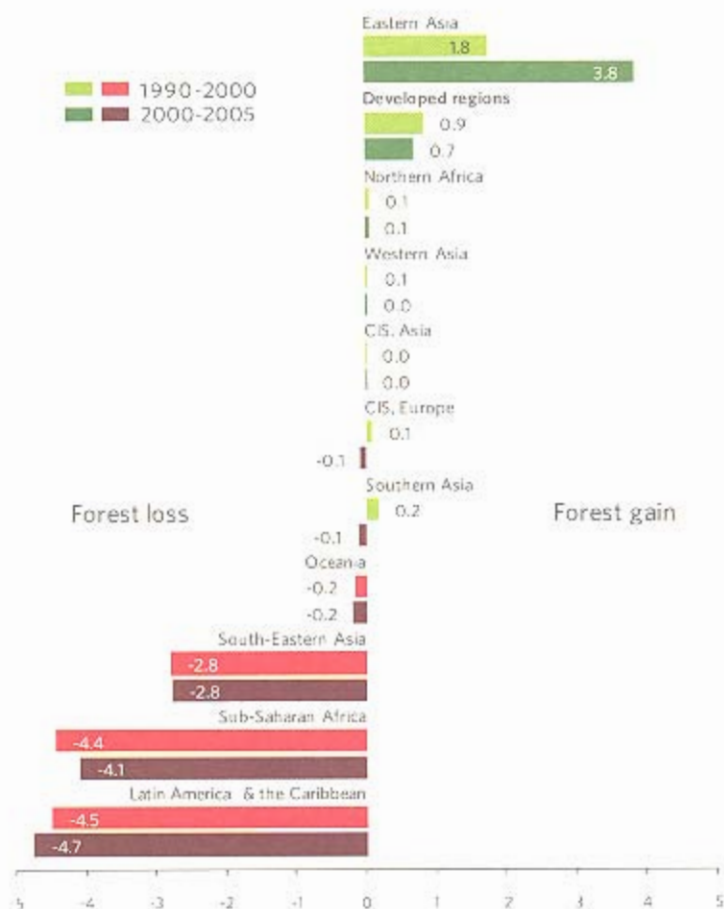
Protected areas are the cornerstone of efforts to conserve the world's species and ecosystems as well as a key component in climate change mitigation. However, only 12 per cent of the planet was under some form of protection by 2008. That amounts to about 18 million square kilometres of protected land and over 3 million square kilometres of protected territorial waters (that is, marine areas under national jurisdiction). Since territorial waters represent only a small fraction of the entire ocean area, this means that less than 1 per cent of the world's ocean body is protected. Moreover, even where they exist, protected areas can be poorly managed and face continued assault from pollution and climate change, irresponsible tourism, infrastructure development and increasing demands for land and water resources.



Despite economic and other pressures, many developing countries have managed to protect vast stretches of both land and water. In 2007, for example, the Democratic Republic of the Congo established one of the largest protected tropical rainforests in the world. In Indonesia, seven new marine protected areas, covering a total of 9,000 square kilometres and containing 45 per cent of the region's shallow water ecosystems, were recently established. Yet, in 2008, the number of species threatened with extinction worldwide continued to grow. According to the Red List Index of the International Union for Conservation of Nature, mammals are more threatened than birds. But both groups are more endangered in developing than in developed countries. Mammals are particularly at risk in South-Eastern Asia due to deforestation and hunting, while birds are most threatened on the islands of Oceania, primarily by invasive species. Other classes of organisms are also likely to show declining trends. Sustained investments are needed to effectively conserve biodiversity, both inside and outside of protected areas.

## Reducing deforestation could play a key role in lowering greenhouse gas emissions

Annual net change in forest area, 1990-2000 and 2000-2005 (Millions of hectares per year)

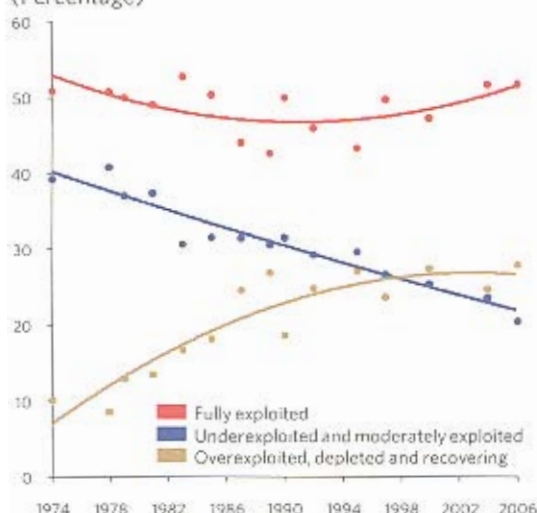


Deforestation continues at an alarming rate of about 13 million hectares per year (roughly equivalent to the land area of Bangladesh). This is partially counterbalanced by forest planting, landscape restoration and the natural expansion of forests, which have significantly reduced the net loss of forest area. This net global loss over the period 2000-2005 is estimated at 7.3 million hectares per year, down from 8.9 million hectares per year in 1990-2000. The regions of sub-Saharan Africa and Latin America and the Caribbean continue to account for the largest net losses of forests.

Reducing deforestation and forest degradation helps mitigate climate change. Trees and plants absorb and store carbon, thus contributing to lower levels of carbon dioxide in the atmosphere. But when trees are cut down or burned, carbon dioxide is released into the air. Forestry accounted for 17.4 per cent of total anthropogenic greenhouse gas emissions in 2004 (in terms of CO<sub>2</sub> equivalents), primarily due to high levels of deforestation and forest degradation in developing countries.

## Global warming poses further threats to the health of the world's fisheries

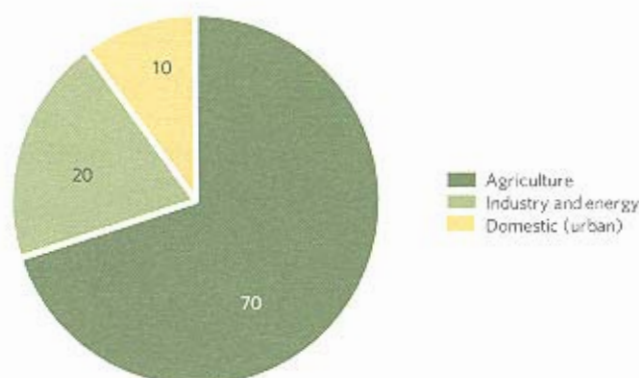
Status of exploited fish stocks, 1974-2006  
(Percentage)



Action is being taken to limit the impact of fishing and other human activities on exploited fish populations. Nevertheless, the percentage of depleted, fully exploited or overexploited and recovering fish species has increased from 70 per cent in 1995 to 80 per cent in 2006. To make matters worse, climate change is gradually altering marine and fresh water ecosystems. Such changes are affecting the seasonality of certain biological processes, thus disrupting marine and freshwater food webs. This, in turn, has unpredictable consequences for fish stocks. The communities that are dependent on fisheries are also vulnerable to climate change, the extent to which depends on their adaptive capacity and on the type of changes that occur at the local level. Given the uncertainty of the impact of climate change on resources and ecosystems, a higher level of precaution is required in managing fishery resources.

## Growing food needs require more efficient use of water for agriculture

Water usage, 2000 (Percentage)



About 70 per cent of water withdrawn worldwide is for agriculture; in some regions, it is more than 80 per cent. When more than 75 per cent of river flows are diverted for agricultural, industrial and municipal purposes, there is simply not enough water to meet both human demands and environmental flow needs. Physical water scarcity — characterized by severe environmental degradation, declining groundwater, and water allocations that favour some groups over others — is approaching when this figure reaches 60 per cent, indicating that the world is facing an impending water crisis.

From 1990 to 2000, the volume of water withdrawn for irrigation and other agricultural purposes increased by 8 per cent. Reversing this trend will require more efficient water use, primarily through improved crop varieties and better agronomic practices that lead to higher economic returns and yield more crops with the same volume of water.

In some regions, the stress on water resources is severe. Water withdrawals are highest in arid and semi-arid lands, where they are needed mostly for irrigation, and lowest in tropical countries. In Northern Africa, an average of 78 per cent of renewable water resources are being withdrawn annually; in Western Asia, almost half. In contrast, Latin America only uses 2 per cent of its renewable water resources each year.

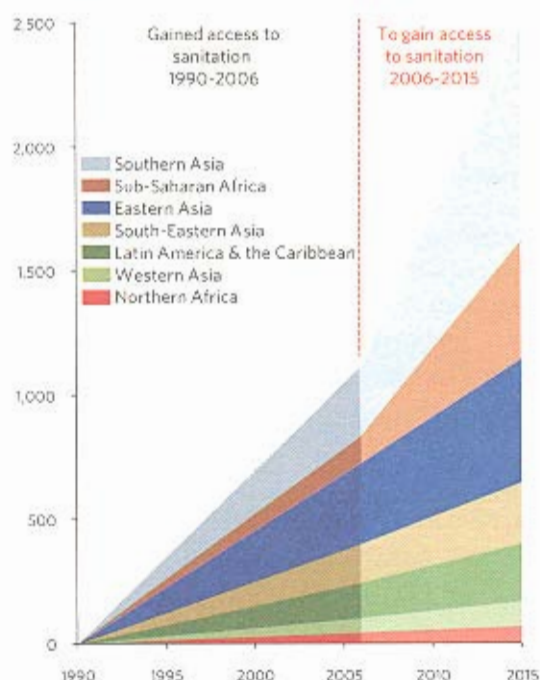


**TARGET**

Halve, by 2015, the proportion of the population without sustainable access to safe drinking water and basic sanitation

## Steep challenges remain in meeting the sanitation target

Population that gained access to an improved sanitation facility 1990-2006 (Millions) and population that needs to gain access to an improved sanitation facility to meet the MDG target, 2006-2015 (Millions)



From 1990 to 2006, 1.1 billion people in the developing world gained access to toilets, latrines and other forms of improved sanitation. An additional 1.4 billion people will require such facilities if the 2015 target is to be met.

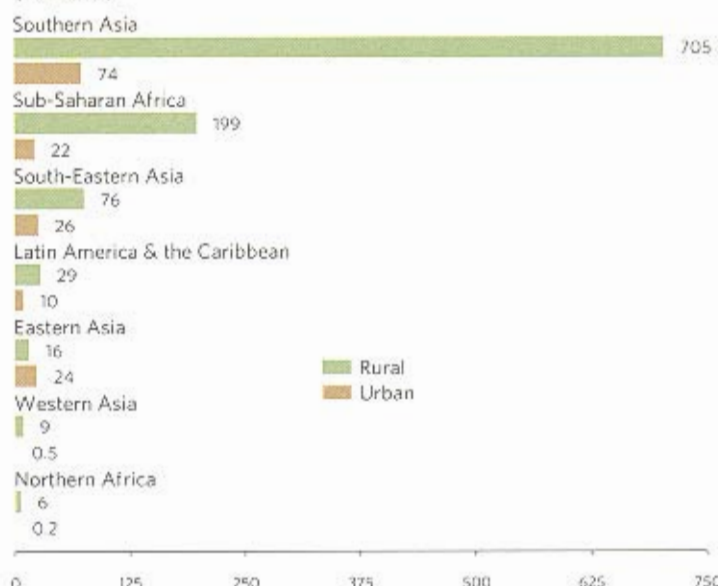
In 2006, 2.5 billion people worldwide were still unserved. The greatest challenge is in Southern Asia, where 580 million people are without improved sanitation. From 2006 to 2015, the region will have to more than double the number of people currently using an improved facility. Sub-Saharan Africa also faces

steep challenges. The target is to provide improved sanitation to 63 per cent of the region's population. That is about 370 million more than the estimated 242 million people that were using such facilities in 2006.

Despite having the lowest sanitation coverage in 1990, Southern Asia and sub-Saharan Africa have made notable progress. In Southern Asia, the population that uses an improved sanitation facility more than doubled since 1990; in sub-Saharan Africa, it increased by over 80 per cent.

## Despite health risks to their families and communities, 1.2 billion people practise open defecation

Population practising open defecation in urban and rural areas, 2008 (Millions)

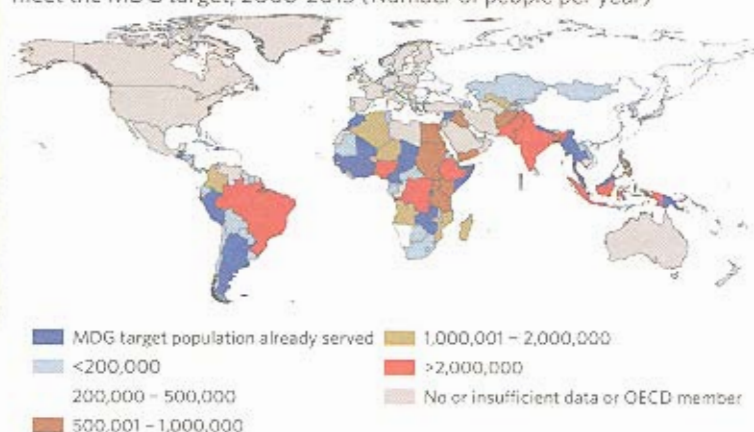


Defecating in open, often publicly accessible spaces is the last recourse for people without any form of sanitation. The practice not only jeopardizes one's own health and that of his or her family, but those who live nearby — even if they themselves use improved facilities. In addition, seeking private areas in which to defecate can put the safety of girls and women at risk.

Eighteen per cent of the world's population — 1.2 billion people — practise open defecation. The vast majority of them (87 per cent) live in rural areas. In developing regions, more than one in three rural dwellers defecates in the open. The one exception is Eastern Asia, where the practice is less common in rural than in urban areas.

## The world is well on its way to meeting the drinking water target, though some countries still face enormous challenges

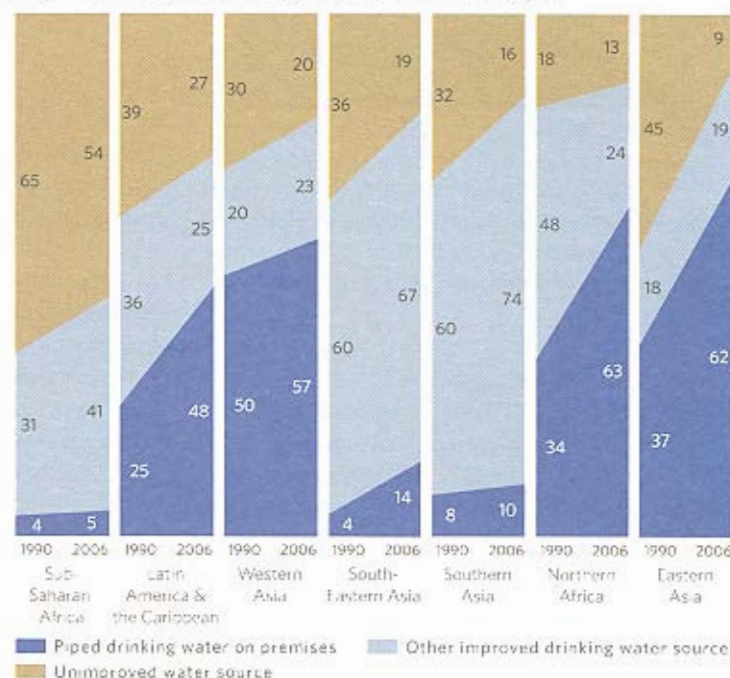
Population that require access to an improved drinking water source to meet the MDG target, 2006-2015 (Number of people per year)



The world is ahead of schedule in meeting the 2015 drinking water target. Yet a number of countries face an uphill battle: 884 million people worldwide still rely on unimproved water sources for their drinking, cooking, bathing and other domestic activities. Of these, 84 per cent (746 million people) live in rural areas.

## Access to improved drinking water sources is predominantly a rural problem

Proportion of rural households using piped water, other improved sources and unimproved sources, 1990 and 2006 (Percentage)





Worldwide, only 27 per cent of the rural population enjoyed the convenience and substantial health benefits of having water piped into their homes or onto their premises in 2006. Fifty per cent of rural dwellers relied on other improved drinking water sources, such as public taps, hand pumps, improved dug wells or springs (a small proportion of this population relied on rainwater). And nearly one quarter (24 per cent) of the rural population obtained their drinking water from 'unimproved' sources: surface water such as lakes, rivers, dams or from unprotected dug wells or springs. But even using an improved water source is no guarantee that the water is safe: when tested, the drinking water obtained from many improved sources has not met the microbiological standards set by WHO.

A person living in an urban area of the developing world is more than twice as likely to have a piped drinking water supply on premises than a person living in a rural area. Disparities are especially evident in Latin America and the Caribbean, the region with the second lowest coverage of improved drinking water in rural areas. Only 73 per cent of rural populations in that region use an improved water source, compared to 97 per cent of urban dwellers.

#### TARGET

By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers

## Almost every region is moving forward to improve the lives of the urban poor

Proportion of urban population living with shelter deprivations, 1990 and 2005 (Percentage)



In 1990, almost half the urban population in developing regions were living in slums. By 2005, that proportion had been reduced to 36 per cent. Slum conditions are defined as lacking at least one of four basic amenities: clean water, improved sanitation, durable housing and adequate living space.

The lives of slum dwellers have improved in almost all regions. In Eastern Asia, the sharp reduction in the proportion of slum dwellers is largely due to increased use of improved water supplies and sanitation in China. Similarly, expanded access to water and sanitation in India has lifted progress in the Southern Asia region as a whole.

Despite some advances, sub-Saharan Africa remains the region with the highest prevalence of slums. Both slums and urban areas in the region appear to be growing at an equally rapid pace, and the living conditions among impoverished populations are severe, often involving multiple deprivations. Improvements in the lives of slum dwellers in most sub-Saharan African countries will therefore require large multisectoral investments. In all other regions, where the majority of slum dwellers suffer from only one shelter deprivation, simple, low-cost interventions could significantly improve living conditions.

Western Asia is the only region where the proportion of slums among urban populations has increased slightly, largely due to deteriorating living conditions in Iraq and Lebanon after nearly a decade of conflict and political instability.

Though general improvements have been made in slums worldwide, the current housing and energy crisis may slow progress in the developing regions and, in some cases, reverse positive trends.

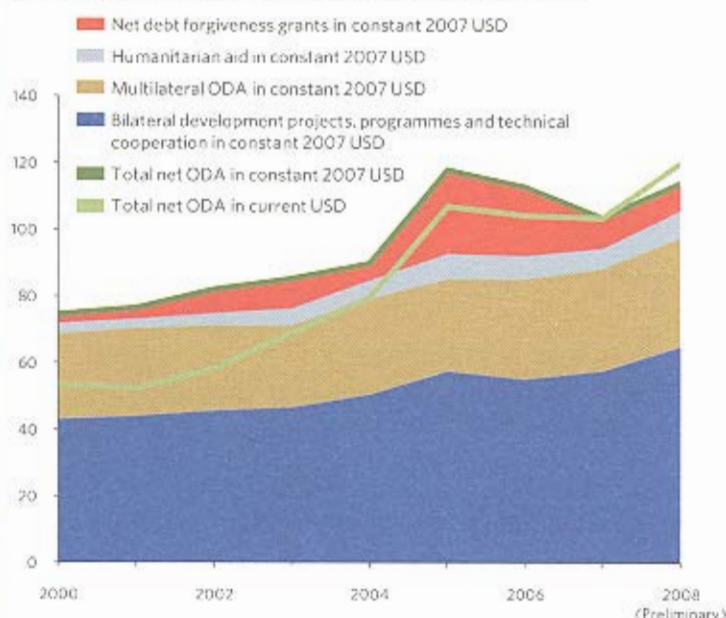
# Goal 8

## Develop a global partnership for development



### Honouring commitments to increase aid is critical at a time of economic crisis

Official development assistance (ODA) from developed countries, 2000-2008 (Constant 2007 US dollars and current US dollars)



Net disbursements of official development assistance (ODA) in 2008 increased 10.2 per cent to \$119.8 billion, the highest dollar figure ever recorded. That is equivalent to 0.30 per cent of developed countries' combined national income. Expenditures on bilateral aid programmes and projects have been on the rise in recent years and increased 12.5 per cent in real terms between 2007 and 2008 — an indication that donors are scaling up their core aid programmes.

That said, total aid remains well below the United Nations target of 0.7 per cent of gross national income. In 2008, the only countries to reach or exceed the UN target were Denmark, Luxembourg, the Netherlands, Norway and Sweden.

The United States was the largest donor by amount in 2008, followed by Germany, the United Kingdom, France and Japan. For the 15 European Union (EU) member countries of the OECD's Development Assistance Committee (DAC), combined net ODA rose by 8.6 per cent in real terms from 2007 to 2008, reaching \$70.2 billion. This represents 59 per cent of all DAC ODA. As a share of gross national income, net ODA from DAC-EU members rose to 0.42 per cent.

At the Gleneagles summit meeting of the Group of Eight in 2005 and at the UN World Summit later that year, donors committed to increasing their aid. The pledges they made, combined with other commitments, implied that aid would increase from \$80 billion in 2004 to \$130 billion in 2010 (at constant 2004 prices). While a few countries have reduced their targets slightly since 2005, the majority of these commitments remain in



force. However, some of them were expressed as a percentage of national income. This means that if the global economy contracts in 2009, as anticipated, the absolute amount of such commitments would diminish. Taking this into account, existing commitments — expressed as a percentage of donors' gross national income — would translate into an ODA level of \$121 billion in 2010 (at constant 2004 prices).

Some further increase in aid is anticipated. For instance, the latest available OECD survey of donors' forward spending plans indicates an expected 11 per cent rise in programmed aid between 2008 and 2010, including some larger disbursements by certain multilateral agencies. However, if aid in 2010 is to reach the dollar value expected when the commitments were made (that is, before the economy contracted), donors would need to add at least \$10 billion to \$15 billion to their current spending plans.

Many donors are expected to meet or nearly meet their ODA/gross national income targets. However, there will be considerable shortfalls in a number of countries. For example, ODA in 2008 from Austria, Greece and Italy, excluding debt relief, is well under half their ODA/gross national income target for 2010.

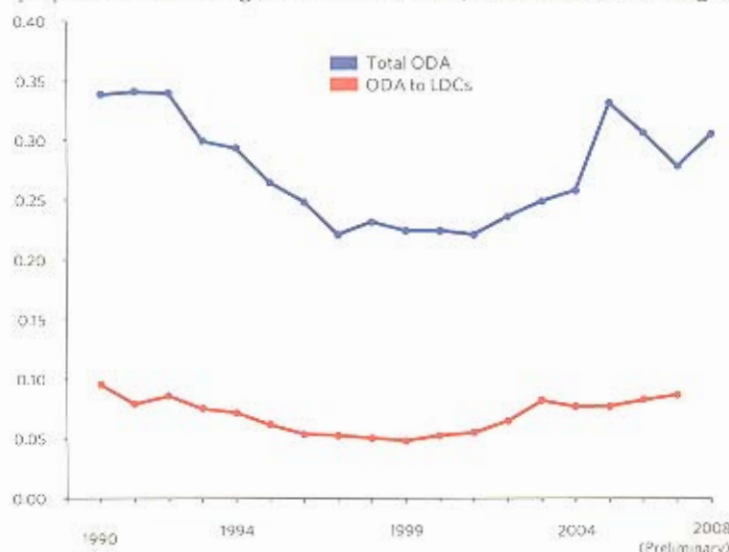
At their meeting in April 2009, the leaders of the Group of 20 agreed to provide \$50 billion to support social protection, boost trade and safeguard development in low-income countries. They also agreed to provide \$6 billion in additional concessional and flexible financing to the poorest countries over the following two to three years. Later that month, the World Bank/International Monetary Fund Development Committee urged all donors not only to accelerate delivery of their commitments, but to consider going beyond them. Failure to fulfil these promises will not only impede further progress towards the Millennium Development Goals, but could jeopardize gains already made.

#### TARGET

Address the special needs of the least developed countries, landlocked countries and small island developing states

## Aid to the poorest countries falls far short of the 2010 target

Net official development assistance from OECD-DAC countries as a proportion of donors' gross national income, 1990-2008 (Percentage)



In general, aid is targeted to the poorest countries (that is, those countries classified as 'least developed' or as low- or lower-middle income). The 49 least developed countries (LDCs) receive about a third of all aid flows.

At the Gleneagles summit in 2005, G-8 members projected that their commitments, combined with those of other donors, would double ODA to Africa by 2010. Preliminary data for 2008 show that, excluding debt relief, bilateral ODA to the continent as a whole rose by 10.6 per cent in real terms from the previous year; the corresponding increase for sub-Saharan Africa was 10 per cent. Despite this progress, donors will need to rapidly increase their aid to Africa if they are to fulfil their 2005 pledges.

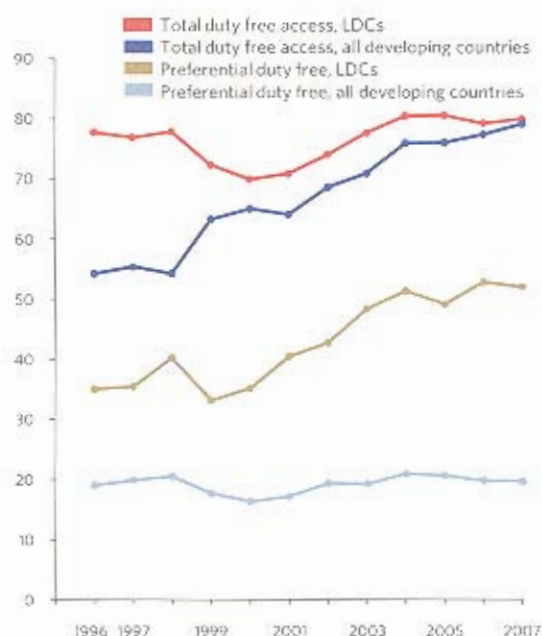
In 2006-2007, out of a total of \$59 billion in ODA that is allocable by sector, \$10.2 billion per year focused on the achievement of MDG 3 — the promotion of gender equality and women's empowerment.

**TARGET**

Develop further an open, rule-based, predictable, non-discriminatory trading and financial system

## True preferential trade status is reserved mainly for least developed countries

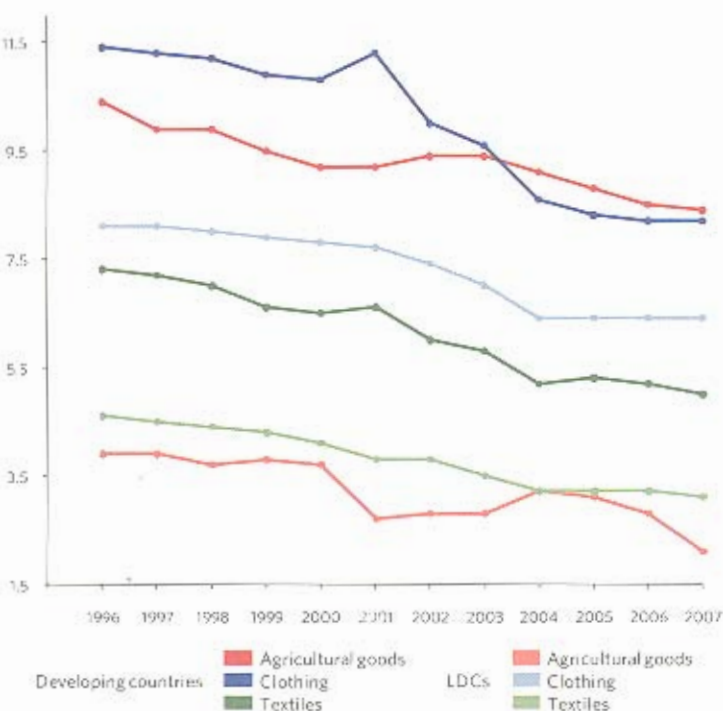
Proportion of developed country imports from developing countries and from the least developed countries (LDCs) admitted free of duty, and admitted free of duty while their competitors' products were subject to a tariff under MFN (preferential duty free access), 1996-2007 (Percentage)



The proportion of total developed country imports from developing countries admitted duty free by the developed countries improved significantly in 2007. Most of this improvement was due to the elimination of tariffs under most-favoured-nation (MFN) treatment, rather than an extension of true preferential treatment (importing free of duty while competitors' products are subject to a tariff under MFN). The proportion of all developing countries' exports receiving true preferential duty free treatment has been fluctuating at around 20 per cent for the past 10 years. In contrast, the proportion of least developed countries' exports receiving such treatment increased from 35 per cent in the late 1990s to more than 50 per cent in 2007.

## For the least developed countries, agricultural exports receive the greatest trade preferences

Developed countries' average tariffs on imports on key products from developing and least developed countries (LDCs), 1996-2007 (Percentage)



In relation to other developing countries, the least developed countries benefit from preferential trade access for most of their key labour-intensive exports (agricultural goods, clothing and textiles). Due to a reduction in the average tariffs imposed on the agricultural products of LDCs between 2000 and 2007, the margin of preference is especially significant in that sector (more than 6 percentage points).

The situation remains mixed for textiles and clothing. Since 2000, African LDCs and small island developing states have gained substantial preferences for their clothing exports: they now benefit from duty free treatment in all developed markets. However, average tariffs have remained higher for Asian LDCs, the largest exporters of these goods. For these countries, clothing — the most labour-intensive manufactured product — remains subject to the highest tariffs and its preference margin vis-à-vis other developing countries is the lowest.

These measures of preferential access assume that exporters are able to fully utilize them. However, utilization tends to be no higher than 80-90 per cent, due to barriers such as non-tariff measures, rules of origin and administrative procedures.

South-South trade has become the fastest growing component of world trade. Preferential market access granted by other developing countries as



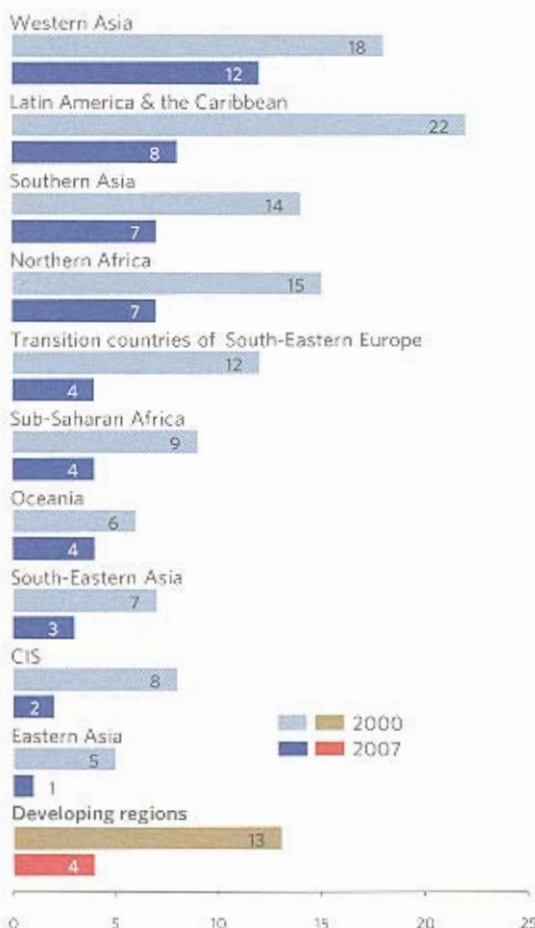
part of the Global System of Trade Preferences or on the basis of bilateral and regional arrangements is still in the early stages and is not reflected in the MDG indicators, but is becoming increasingly relevant for LDCs.

#### TARGET

Deal comprehensively with developing countries' debt

### Debt service ratios have declined, but the economic crisis portends harder times ahead

External debt service payments as proportion of export revenues, 2000-2007 (Percentage)



By the end of March 2009, 35 of 41 eligible countries had qualified for debt relief under the Heavily Indebted Poor Countries (HIPC) Initiative. Of these, 24 had reached their 'completion point', meaning that all the

conditions for debt relief had been fulfilled and relief had become irrevocable. Together, these countries had received committed debt relief of \$54.3 billion in end-2007 present-value terms. Post-completion-point countries also received additional assistance of \$22.8 billion under the Multilateral Debt Relief Initiative (MDRI), further reducing their debt service.

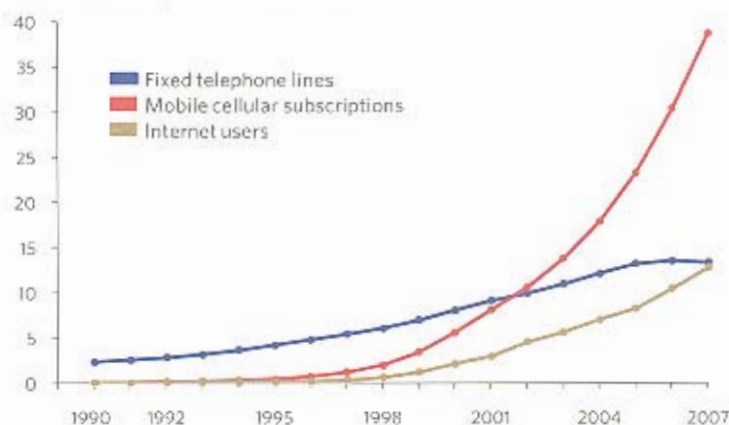
Export revenues of developing economies have nearly doubled since 2003, giving countries more resources with which to service their external debt. For the average developing country, the burden of servicing external debt fell from almost 13 per cent of export earnings in 2000 to 4 per cent in 2007. However, in the last quarter of 2008, export revenues of developing countries declined because of the financial crisis in high-income economies. While the data needed to make a comprehensive assessment are not yet available, debt service to exports ratios of developing countries are likely to deteriorate, especially for those countries that benefited from increased export revenues over the last few years.

#### TARGET

In cooperation with the private sector, make available the benefits of new technologies, especially information and communications

### Mobile phones and advances in communication technology are bringing new opportunities for development

Number of mobile cellular subscriptions, fixed telephone lines and Internet users per 100 population, developing regions, 1990-2007



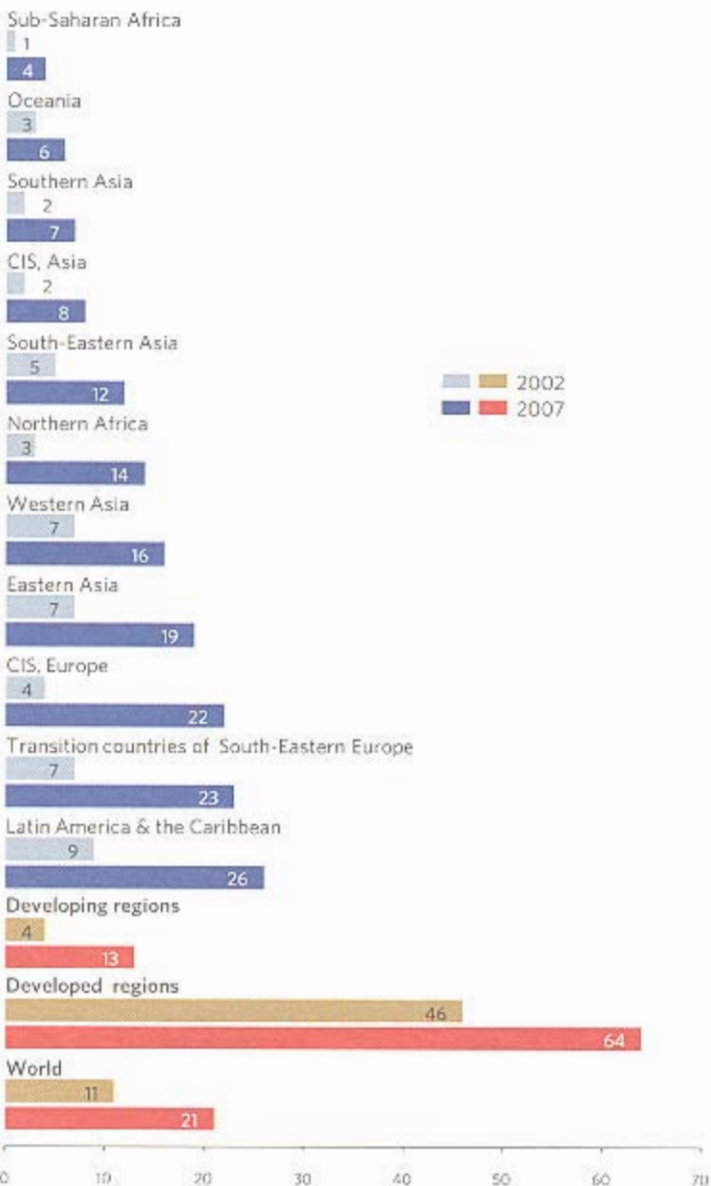
Telecommunications and developments in information and communication infrastructure continue to be characterized by uninterrupted growth, particularly in the mobile sector. By the end of 2007, there were more than 2 billion mobile cellular subscriptions in developing countries, translating into a penetration rate of 39 per cent.

This contrasts with 0.7 billion fixed telephone lines and a penetration rate of 13 per cent.

Mobile telephony is offering new and critical communication channels to regions that have long gone without them. During 2007, sub-Saharan Africa added almost 50 million new mobile subscriptions, and mobile penetration rose from less than one in 50 people in 2000 to close to a quarter of the population. Mobile phones have not only increased access to basic voice communications, but are also increasingly being used for non-voice applications, including Short Message Service, m-banking and m-commerce, and disaster management. Since third-generation mobile technology can provide broadband access, mobile communications are expected to play an increasing role in making high-speed Internet available in developing countries.

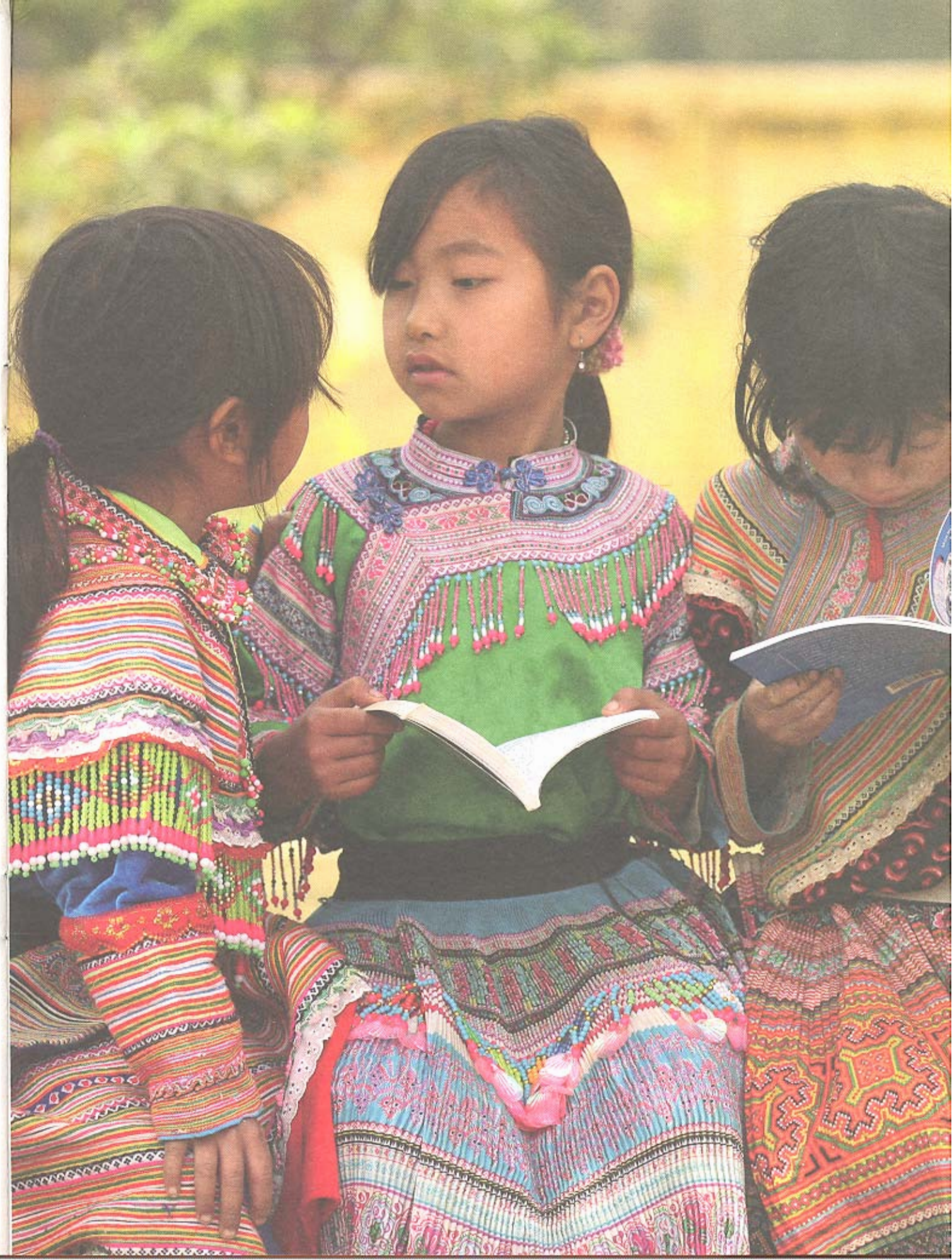
## More than one fifth of the world's population are now online, but the majority are in developed countries

Number of Internet users per 100 population, 2002 and 2007



Use of the Internet is increasing steadily, with almost 1.4 billion people — about one fifth of the world's inhabitants — online by the end of 2007. In the developing regions, access to the Internet can help achieve the Millennium Development Goals, particularly in the areas of health, education and poverty reduction. However, regional differences stand out. In 2007, 64 per cent of the population of developed regions were using the Internet, compared to 13 per cent in developing regions and only 1.5 per cent in the LDCs. Fixed broadband uptake is slow in many developing regions. While almost all countries now have commercially deployed fixed broadband, the service remains relatively expensive in many developing countries and thus inaccessible to many potential users.







# A note to the reader

## Measuring progress towards the MDGs

In the UN Millennium Declaration of September 2000, leaders from 189 nations embraced a vision for the world in which developed and developing countries would work in partnership for the betterment of all. To provide a framework by which progress could be measured, the Declaration was broken down into eight Millennium Development Goals, 18 targets and 48 indicators. In 2007, this monitoring framework was revised to include four new targets, agreed to by member states at the 2005 World Summit.<sup>1</sup> Additional indicators to track progress towards the new targets were also identified.<sup>2</sup>

This report provides an assessment of progress, based on data available as of June 2009,<sup>3</sup> on official MDG indicators. The aggregate figures presented here provide an overall assessment of regional progress under the eight goals and are a convenient way to track advances over time. However, the situation of individual countries within a given region may vary significantly from regional averages. The baseline for the assessment is 1990, but data for 2000 are also presented, in some cases, to show progress since the Declaration was signed. A compilation of indicators for all regions and subregions for two or more benchmark years, along with a list of countries included in the regions, is available at <http://mdgs.un.org>.

## The basis for this analysis

This analysis is based on regional and subregional figures compiled by the United Nations Inter-Agency and Expert Group on MDG Indicators (IAEG). In general, the figures are weighted averages of country data, using the population of reference as a weight. For each indicator, individual agencies were designated to be the official providers of data and to take the lead in developing methodologies for data collection and analysis (see inside front cover for a list of contributing organizations).

Data are typically drawn from official statistics provided by governments to the international agencies responsible for the indicator. This is accomplished through periodic data collection from ministries and national statistical offices around the globe. To fill gaps in data, which occur frequently, many of the indicators are supplemented by or derived exclusively from data collected through surveys sponsored and carried out by international agencies. These include many of the health indicators, which are compiled, for the most part, from Multiple Indicator Cluster Surveys and Demographic and Health Surveys.

In some cases, countries may have more recent data that have not yet become available to the relevant specialized agency. In other cases, countries do not produce the data required to compile the indicator, and the responsible international agencies estimate the missing values. Even when countries do produce the necessary data, adjustments are often needed to ensure international comparability. Data in international sources, therefore, often differ from those available within countries.

The United Nations Statistics Division maintains the official website of the IAEG and its database (<http://mdgs.un.org>). In an effort to improve transparency, the country data series in the database are given colour codes to indicate whether the figures are estimated or provided by national agencies: they are also accompanied by metadata with a detailed description of how the indicators are produced and of the methodologies used for regional aggregations.

## Reconciling national and international data

Reliable, timely and internationally comparable data on the MDG indicators are crucial to holding the international community accountable. They are also important in encouraging public support and funding for development, allocating aid effectively, and comparing progress among regions and across countries. However, discrepancies across national and international sources and gaps in national data have raised concerns in the statistical community and troubled country data producers who find themselves dealing with disparate figures for the same indicator.

Numerous interventions have recently been launched to reconcile national and international monitoring and to resolve differences in methods and definitions used by various agencies within countries and in international agencies. For example, work was conducted and is still under way in countries and regions to improve the availability of data, the coordination of national statistical systems and the mechanisms for reporting to international statistical agencies.

These efforts are beginning to yield results. The IAEG, comprising representatives of international agencies responsible for global monitoring and of national statistical systems, has promoted a dialogue between the two groups to improve the coherence of national and international data and to ensure the quality and transparency of methodologies and data produced. The IAEG has also provided training to national statistics experts on the production of indicators. Increasingly, country data producers are now able to apply international standards and methods, and international agencies have a better understanding of the data available at the country level.

## Building stronger statistical systems

Efforts to report on progress towards the MDGs have highlighted the need to improve the capacity of developing countries to produce, analyse and disseminate data. Since periodic assessment of the MDGs began over five years ago, a number of important initiatives have been launched. The 2004 Marrakech Action Plan for Statistics, adopted by aid recipients and donor stakeholders at the Second International Roundtable on Managing for Development Results, was a major step in this direction. Together with international agencies, donors and representatives from national statistical offices, the IAEG is also identifying national priorities and making recommendations for improving the delivery and coordination of statistical assistance to countries. Most recently, the UN Economic and Social Council endorsed a resolution adopted by the UN Statistical Commission, highlighting the urgent need to build statistical capacity in countries where resources are limited.

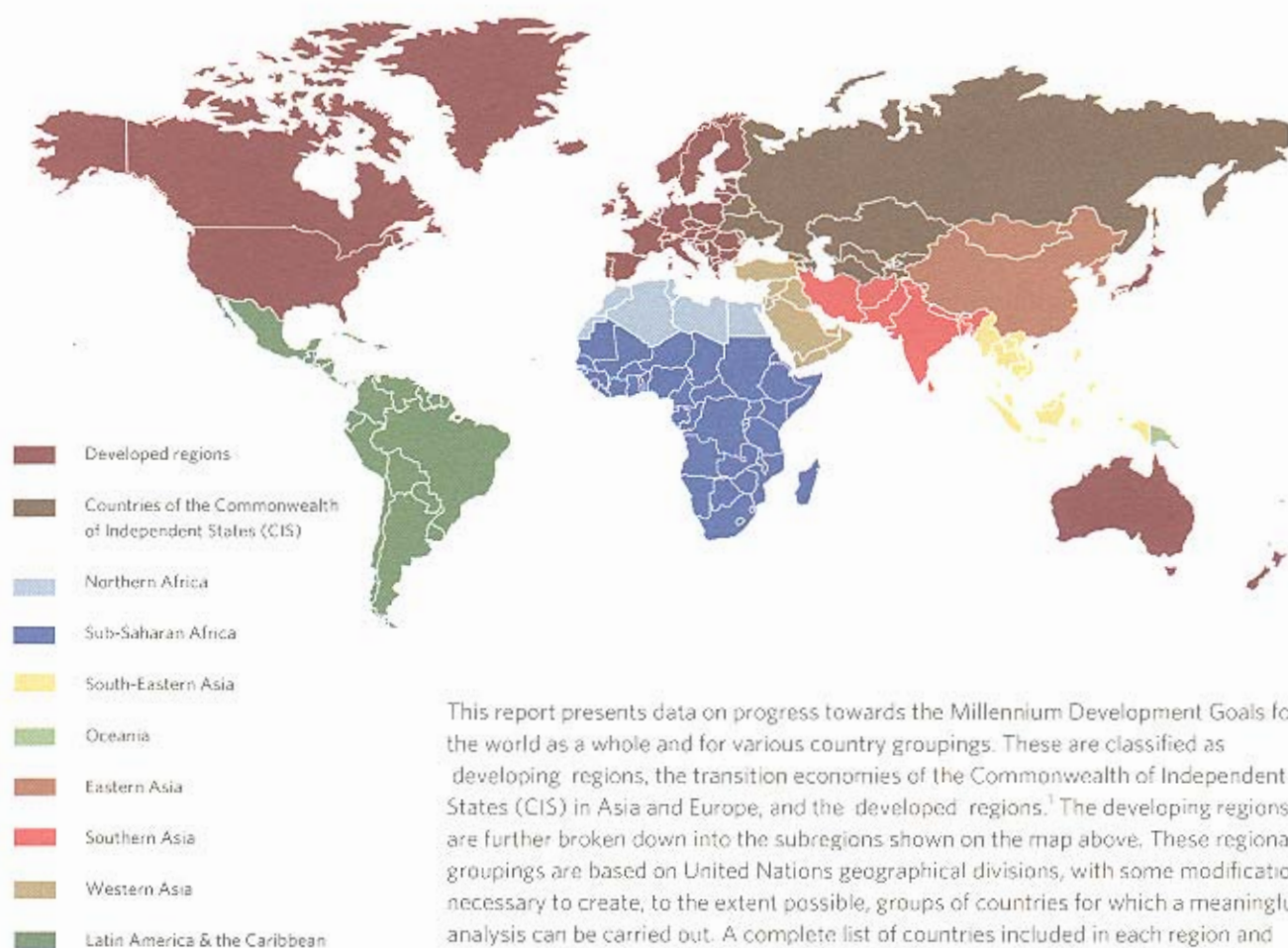
<sup>1</sup> General Assembly Resolution 60/1, 2005 World Summit Outcome.

<sup>2</sup> The new MDG monitoring framework is available at <http://mdgs.un.org>.

<sup>3</sup> Given the time lag between collecting data and analysing them, few indicators can be compiled for the current year. Most of them are based on data from earlier years — generally up to 2007 or 2008.



# Regional Groupings



This report presents data on progress towards the Millennium Development Goals for the world as a whole and for various country groupings. These are classified as developing regions, the transition economies of the Commonwealth of Independent States (CIS) in Asia and Europe, and the developed regions.<sup>1</sup> The developing regions are further broken down into the subregions shown on the map above. These regional groupings are based on United Nations geographical divisions, with some modifications necessary to create, to the extent possible, groups of countries for which a meaningful analysis can be carried out. A complete list of countries included in each region and subregion is available at [mdgs.un.org](http://mdgs.un.org).

<sup>1</sup> Since there is no established convention for the designation of developed and developing countries or areas in the United Nations system, this distinction is made for the purposes of statistical analysis only.

**For more information:**

Visit the UN Statistics Division Millennium Development Goals website at <http://mdgs.un.org>

Visit the UN Millennium Development Goals website at [www.un.org/millenniumgoals](http://www.un.org/millenniumgoals)

Visit the UN Millennium Campaign Office website at [www.endpoverty2015.org](http://www.endpoverty2015.org)

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