

Public Lecture

Millennium Development Goals: Past, Present and Future



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Outline

- **The Past:** Historical Perspective prior to MDGs
 - Development, Health & Development: Parallel Agenda
- **The Present:** MDGs
 - Monitoring Progress
 - Challenges – personal experience
 - Progress in India
- **The Future:** Post 2015 Agenda

The Past: UN Development Agenda

1960s

- 1st UN Development Decade - called for accelerated measures to **eliminate illiteracy, hunger and disease**

1970s

- 2nd UN Development Decade - adopted International Development Strategy to achieve Decade's goals & called for a **minimum of 0.7% of GDP by devd countries by 1975**

1980s

- New Development Strategy for the 3rd UN Development Decade
- GDP growth rates (devg countries) 7.5%, for exports 8%; **reduction and elimination of poverty; a reduction of mortality rates etc.**

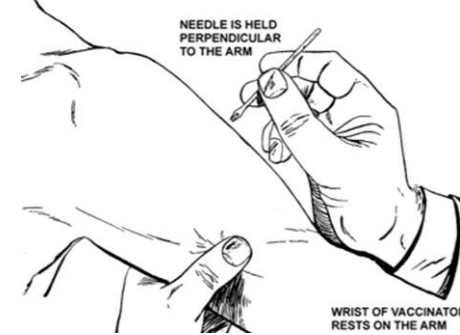
The Past: UN Development Agenda

1990s

4th UN Development Decade adopted International Development Strategy

- 2nd UN Conference on the LDCs (3 - 4 Sept 90) adopted the Paris Declaration and a Programme of Action
- Global Conference on the **Sustainable Development of Small Island Developing States** (Apr/May 94)
- World Summit for Social Development (6 - 12 Mar 95) adopted the Copenhagen Declaration on **Social Development**
- 1996: **International Year against Poverty & UN Decade for the Eradication of Poverty** (1997-2006)

The Past: Health Agenda



21 World Summits and conferences starting with Alma Ata Primary Health Care to achieve HFA by 2000 (1978) provided foundation for MDGs

- Malaria Eradication (WHA 1955)
- Small Pox eradication (WHA 1958 & 1966),
- Guinea worm eradication (WHA 1981),
- EPI (1974) & UCI by 1990 (1985),
- Polio eradication (WHA 1988),
- Leprosy eradication (WHA 1991)
- UNICEF's GOBI FFF initiative, "First Child Survival Revolution" in 1980s, Decade goals in 1990s

U N Millennium Declaration



- Set development agenda for 21st Century
- 189 (149 Heads of) States at UN HQs (6-8 Sept 2000)
- **Road map** towards the implementation of UN Millennium Declaration in Sept 2001 known as MDGs
- **Seven shared values:** peace, security & disarmament; development & poverty eradication; environment protection; human rights; democracy & good governance; protection of vulnerable people; meeting special needs of Africa; and strengthening the UN.

What was new in MDGs?

- Development (Education, Poverty, Equity), Health and Environment* in one agenda
- Global political consensus
- Focus: limited no. of simple goals and indicators, improved targeting of aid and monitoring of development
- Global health profile raised to higher level – even led the development process

* *Environment factors account for 24% of global burden of diseases and 25% of all deaths in developing countries*

Values and principles

1. **Freedom** to live and raise children in dignity, free from hunger & fear of violence, oppression or injustice
2. **Equality** in opportunity to benefit from development
3. **Solidarity** in managing global challenges fairly with equity and social justice
4. **Tolerance** in diversity of belief, culture and language
5. **Respect for nature** in the management of living species & natural resources for sustainable development
6. **Shared responsibility** for managing worldwide economic and social development, threats to peace and security

A Quick look at the MDGs



UN Millennium Development Goals

Millennium Development Goals



Goal 1



Target 1.A: Halve, between 1990 and 2015, the people with income is < \$ 1.25/day	1.1 Proportion of population below \$1.25 (PPP) per day 1.2 Poverty gap ratio 1.3 Share of poorest quintile in national consumption
Target 1.B: Achieve full and productive employment and decent work for all, including women and young people	1.4 Growth rate of GDP per person employed 1.5 Employment-to-population ratio 1.6 Proportion of employed people living below \$1 (PPP) per day 1.7 Proportion of own-account and contributing family workers in total employment
Target 1.C: Halve, between 1990 and 2015, the proportion of people with hunger	1.8 Prevalence of underweight children under-five years of age 1.9 Proportion of population below minimum level of dietary energy

Goal 2



2

ACHIEVE UNIVERSAL
PRIMARY EDUCATION

Target 2.A: Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete full primary schooling

2.1 Net enrolment ratio in primary education

2.2 Proportion of pupils starting grade 1 who reach last grade of primary

2.3 Literacy rate of 15-24 year-olds, women and men

Goal 3



PROMOTE GENDER
EQUALITY AND
EMPOWER WOMEN

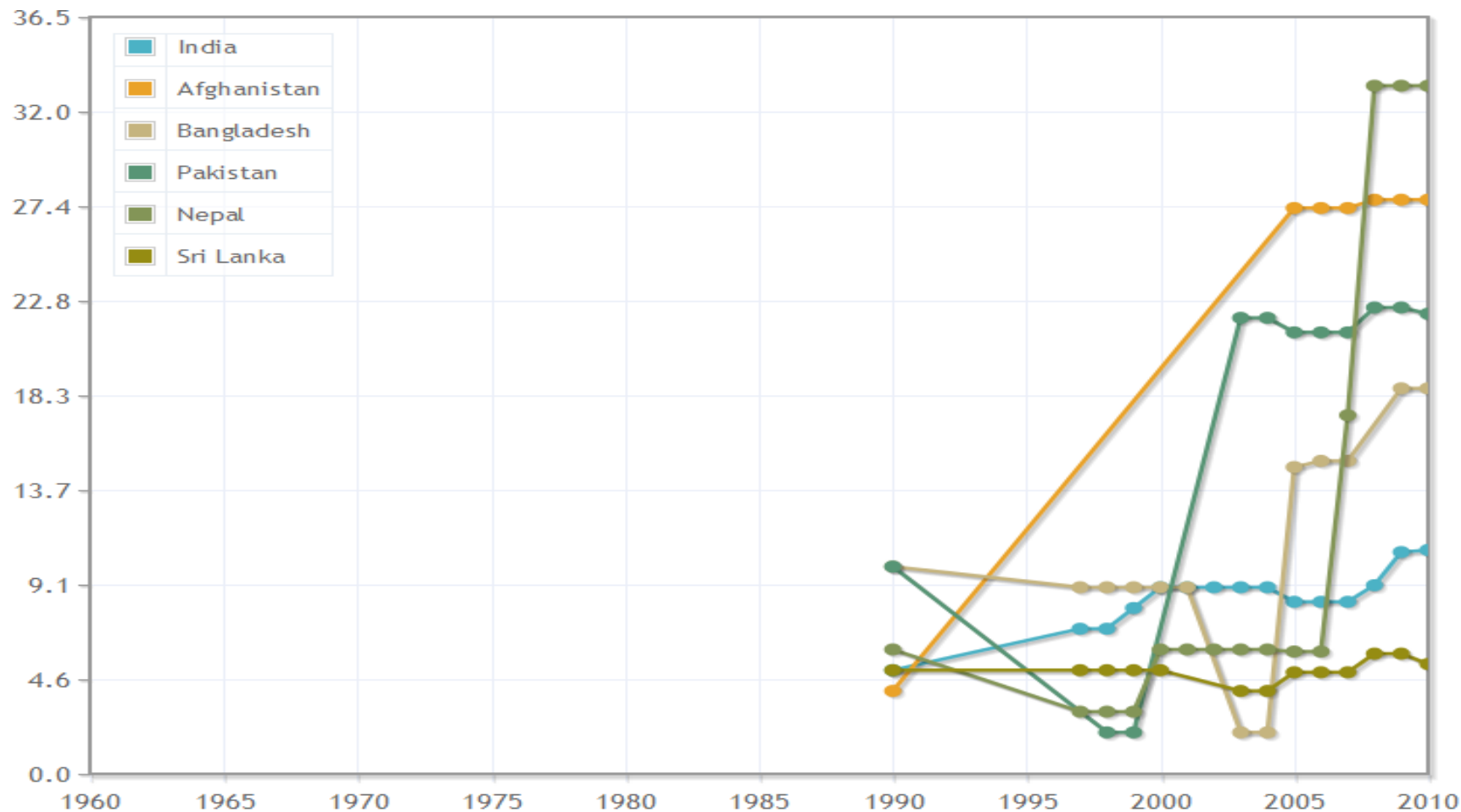
Target 3.A: Eliminate gender disparity in primary & secondary education, preferably by 2005, and in all levels of education no later than 2015

3.1 Ratios of girls to boys in primary, secondary and tertiary education

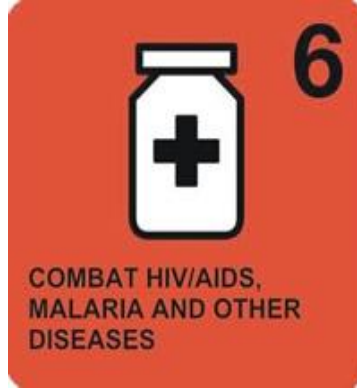
3.2 Share of women in wage employment in the non-agricultural sector

3.3 Proportion of seats held by women in national parliament

Proportion of women in parliament



Goal 6



Target 6.C: Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases

- 6.6 Incidence and death rates associated with malaria**
- 6.7 Proportion of children under 5 sleeping under insecticide-treated bednets**
- 6.8 Proportion of children under 5 with fever who are treated with appropriate anti-malarial drugs**
- 6.9 Incidence, prevalence and death rates associated with tuberculosis**
- 6.10 Proportion of tuberculosis cases detected and cured under DOTS course**

Goal 8



Target 8.A: Develop an open, rule-based, predictable, non discriminatory trading and financial system Includes a commitment to good governance, development and poverty reduction – both nationally and internationally

Target 8.B: Address special needs of LDCs Includes: tariff and quota free access for the least developed countries’ exports; enhanced programme of debt relief for HIPC and cancellation of official bilateral debt; and more generous ODA for countries committed to poverty reduction

Target 8.C: Address special needs of landlocked developing countries and small island developing States

- ODA**
- 8.1 Net ODA, as percentage of OECD/DAC donors’ gross national income**
 - 8.2 Proportion of total bilateral, sector-allocable ODA of OECD/DAC donors to basic social services (basic education, prim health care, nutrition, water and sanitation)**
 - 8.3 Proportion of bilateral official development assistance of OECD/DAC donors that is untied**
 - 8.4 ODA received in landlocked developing countries as a proportion of their gross national incomes**
 - 8.5 ODA received in small island developing States as a proportion of their gross national incomes**

Goal 8



GLOBAL
PARTNERSHIP FOR
DEVELOPMENT

Target 8.D: Deal comprehensively with debt problems of developing countries through national & international measures to make debt sustainable in the long term

Market access

8.6 Proportion of total developed country imports from developing countries and least developed countries, admitted free of duty

8.7 Average tariffs imposed by developed countries on agricultural products and textiles and clothing from developing countries

8.8 Agricultural support estimate for OECD countries as a percentage of their gross domestic product

8.9 Proportion of ODA provided to help build trade capacity

Debt sustainability

8.10 Total no. of countries that have reached their HIPC decision points and number that have reached their HIPC completion points

8.11 Debt relief committed under HIPC and MDRI Initiatives

8.12 Debt service as a percentage of exports of goods and services

Goal 8



Target 8.E: In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries	8.13 Proportion of population with access to affordable essential drugs on a sustainable basis
Target 8.F: In cooperation with the private sector, make available the benefits of new technologies, especially information and communications	8.14 Fixed telephone lines per 100 inhabitants 8.15 Mobile cellular subscriptions per 100 inhabitants 8.16 Internet users per 100 inhabitants

Monitoring Progress of MDGs

- Inter-Agency Expert Group led by Dept of Economic and Social Affairs, UN Secretariat reports to the GA
- Progress towards the eight MDGs is measured through 21 targets and 60 official indicators (*increased from 18 & 48 in 2008*)
- All indicators should be disaggregated by sex and urban/rural as far as possible
- Frequency of country report flexible, decided at country level – 3 to 5 years
- SG presents report to UNGA annually

Data for Monitoring Progress of MDGs

- Data are provided by governments.
- To fill data gaps estimates use surveys i.e. MICS and DHS.
- Data often differ from those available within countries:
 - some countries may have more recent data
 - The responsible international agencies estimate the missing values
 - Even when available, adjustments are often needed to ensure comparability
- The UN Statistics Div maintains the official website of the IAEG and its database (<http://mdgs.un.org>).

Consequences of Not Achieving MDGs

“Between now and 2015, we must make sure that promises made become promises kept. The consequences of doing otherwise are profound: death, illnesses and despair, needless suffering, lost opportunities for millions upon millions of people.”

UN SG Ban Ki Moon

The Millennium Development Goals Report 2011

It is again the innocent poor and the most deprived who suffer – will it become another National Shame?

Goal 4



REDUCE
CHILD MORTALITY

Target 4.A: Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate

4.1 Under-five mortality rate

4.2 Infant mortality rate

4.3 Proportion of 1 year-old children immunised against measles

Goal 5



Target 5.A: Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio

5.1 Maternal mortality ratio
5.2 Proportion of births attended by skilled health personnel

Target 5.B: Achieve, by 2015, universal access to reproductive health

5.3 Contraceptive prevalence rate
5.4 Adolescent birth rate
5.5 Antenatal care coverage (at least 1 visit and 4 visits)
5.6 Unmet need for family planning

Goal 6



6

COMBAT HIV/AIDS,
MALARIA AND OTHER
DISEASES

Target 6.A: Have halted by 2015 and begun to reverse the spread of HIV/AIDS	6.1 HIV prevalence among population aged 15-24 yrs 6.2 Condom use at last high-risk sex 6.3 Proportion of population aged 15-24 yrs with comprehensive correct knowledge of HIV/AIDS 6.4 Ratio of school attendance of orphans to that of non-orphans aged 10-14 years
Target 6.B: Achieve, by 2010, universal access to treatment for HIV/AIDS for those who need it	6.5 Proportion of population with advanced HIV infection with access to ARV drugs

Goal 7



ENSURE
ENVIRONMENTAL
SUSTAINABILITY

Target 7.A: Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources

Target 7.B: Reduce biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss

7.1 Proportion of land area covered by forest

7.2 CO2 emissions, total, per capita and per \$1 GDP (PPP)

7.3 Consumption of ozone-depleting substances

7.4 Proportion of fish stocks within safe biological limits

7.5 Proportion of total water resources used

7.6 Proportion of terrestrial and marine areas protected

7.7 Proportion of species threatened with extinction

Goal 7



ENSURE
ENVIRONMENTAL
SUSTAINABILITY

Target 7.C: Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation

7.8 Proportion of population using an improved drinking water source

7.9 Proportion of population using an improved sanitation facility

Target 7.D: By 2020, to achieve a significant improvement in the lives of > 100 m slum dwellers

7.10 Proportion of urban population living in slums

Good News on MDG 2012 Report

The targets of

- The proportion of people living on < \$1.25 a day fell (47% in 1990 to 24% in 2008. (from over 2 billion to less than 1.4 b)
- Halving proportion of people who lack dependable access to improved sources of drinking water
- Conditions for more than 200 m people living in slums ameliorated—double the 2020 target
- Primary school enrolment of girls equalled that of boys
- accelerating progress in reducing child and maternal mortality
- Number of child deaths down from 12 to 7 million (1990 to 2010) population increased from about 5.3 to 7 billion.

Not so good news

UN SG writes in 2012 report

- In 2015 > 600 million people will still be using unimproved water sources
 - almost one billion will be living on an income of less than \$1.25 per day
- A large number of mothers and children continue to die needlessly
- Hunger remains a global challenge
- ensuring that all children complete primary education remains unfulfilled
- Lack of safe sanitation is hampering progress in health and nutrition
- biodiversity loss and greenhouse gas emissions continue to pose a major threat to people and ecosystem

Achieving the MDGs by 2015 is challenging but possible. Much depends on the fulfilment of MDG-8—the global partnership for development

Progress by region at a glance

Goals and Targets	Africa		Asia				Oceania	Latin America & Caribbean	Caucasus & Central Asia
	Northern	Sub-Saharan	Eastern	South-Eastern	Southern	Western			

GOAL 1 | Eradicate extreme poverty and hunger

Reduce extreme poverty by half	low poverty	very high poverty	moderate poverty	high poverty	very high poverty	low poverty	very high poverty	moderate poverty	low poverty
Productive and decent employment	large deficit in decent work	very large deficit in decent work	large deficit in decent work	large deficit in decent work	very large deficit in decent work	large deficit in decent work	very large deficit in decent work	moderate deficit in decent work	moderate deficit in decent work
Reduce hunger by half	low hunger	very high hunger	moderate hunger	moderate hunger	high hunger	moderate hunger	moderate hunger	moderate hunger	moderate hunger

GOAL 2 | Achieve universal primary education

Universal primary schooling	high enrolment	moderate enrolment	high enrolment	high enrolment	high enrolment	high enrolment	–	high enrolment	high enrolment
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GOAL 3 | Promote gender equality and empower women

Equal girls' enrolment in primary school	close to parity	close to parity	parity	parity	parity	close to parity	close to parity	parity	parity
Women's share of paid employment	low share	medium share	high share	medium share	low share	low share	medium share	high share	high share
Women's equal representation in national parliaments	low representation	moderate representation	moderate representation	low representation	low representation	low representation	very low representation	moderate representation	low representation

GOAL 4 | Reduce child mortality

Reduce mortality of under-five-year-olds by two thirds	low mortality	high mortality	low mortality	low mortality	moderate mortality	low mortality	moderate mortality	low mortality	moderate mortality
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GOAL 5 | Improve maternal health

Reduce maternal mortality by three quarters	low mortality	very high mortality	low mortality	moderate mortality	high mortality	low mortality	high mortality	low mortality	low mortality
Access to reproductive health	moderate access	low access	high access	moderate access	moderate access	moderate access	low access	high access	moderate access

GOAL 6 | Combat HIV/AIDS, malaria and other diseases

Halt and begin to reverse the spread of HIV/AIDS	low incidence	high incidence	low incidence	low incidence	low incidence	low incidence	low incidence	low incidence	low incidence
Halt and reverse the spread of tuberculosis	low mortality	high mortality	low mortality	moderate mortality	moderate mortality	low mortality	high mortality	low mortality	moderate mortality

GOAL 7 | Ensure environmental sustainability

Halve proportion of population without improved drinking water	high coverage	low coverage	high coverage	moderate coverage	high coverage	moderate coverage	low coverage	high coverage	moderate coverage
Halve proportion of population without sanitation	high coverage	very low coverage	low coverage	low coverage	very low coverage	moderate coverage	low coverage	moderate coverage	high coverage
Improve the lives of slum-dwellers	moderate proportion of slum-dwellers	very high proportion of slum-dwellers	moderate proportion of slum-dwellers	high proportion of slum-dwellers	high proportion of slum-dwellers	moderate proportion of slum-dwellers	moderate proportion of slum-dwellers	moderate proportion of slum-dwellers	–

GOAL 8 | Develop a global partnership for development

Internet users	high usage	moderate usage	high usage	moderate usage	low usage	high usage	low usage	high usage	high usage
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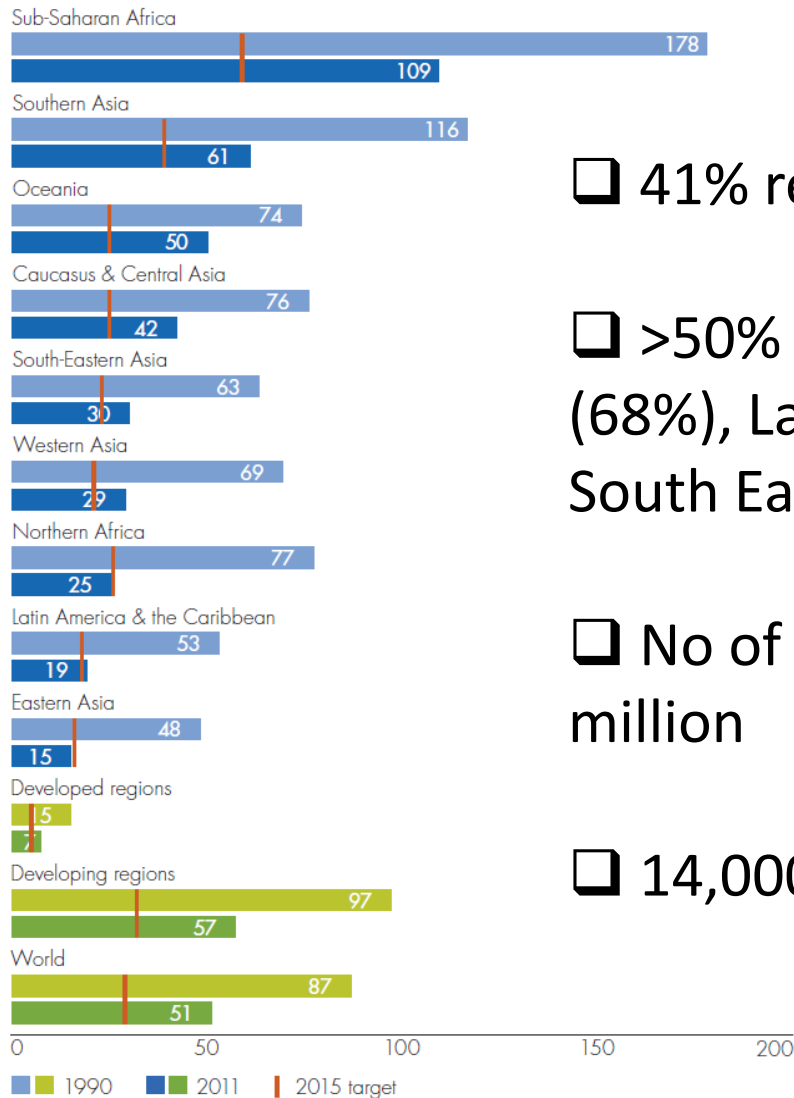
- Target already met or expected to be met by 2015.
- Progress insufficient to reach the target if prevailing trends persist.
- No progress or deterioration.
- Missing or insufficient data.

Progress



REDUCE
CHILD MORTALITY

Under-five mortality rate, 1990 and 2011 (Deaths per 1,000 live births)



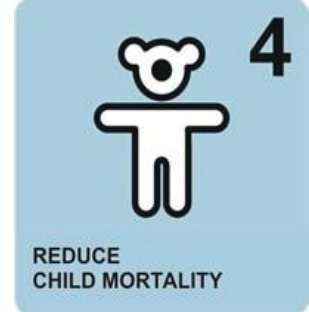
❑ 41% reduction in U5MR from 87 to 51

❑ >50% in Eastern Asia (70%), North Africa (68%), Latin America & Caribbean's (64%), South Eastern Asia, Western Asia,

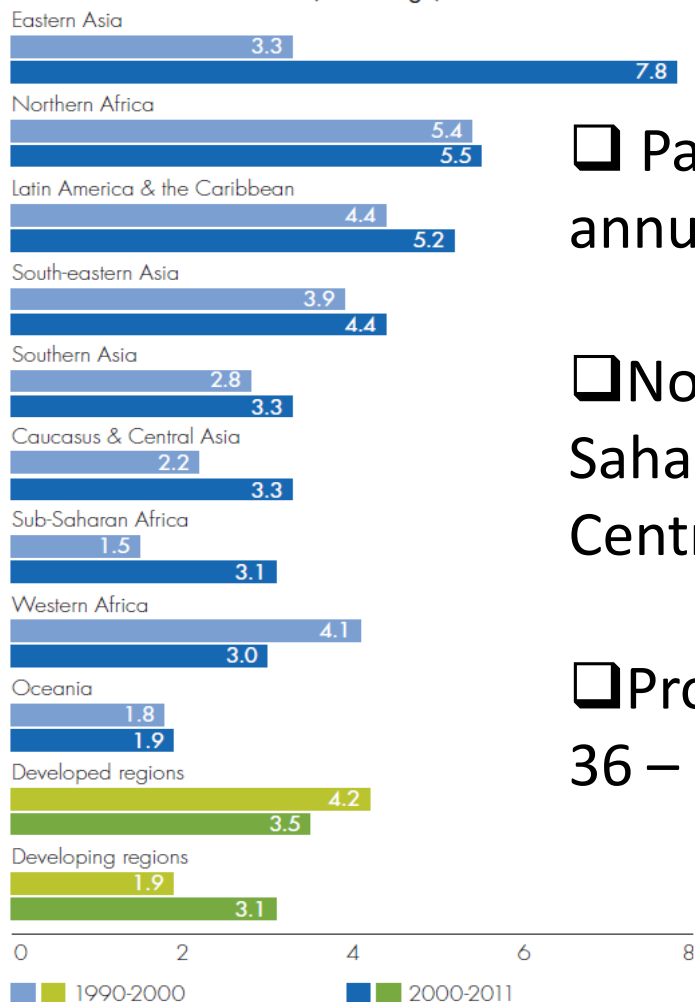
❑ No of child deaths down from 12 to 6.9 million

❑ 14,000 child lives saved everyday!

Progress



Annual rates of reduction in under-five mortality, by region, 1990-2000 and 2000-2011 (Percentage)



❑ Pace of decline accelerating: 1.8 to 3.2% annual decline

❑ Not sufficient to achieve MDG in Sub Saharan Africa, South Asia, Oceania, Central Asia & Caucasus

❑ Proportion of neonatal deaths increasing 36 – 43%

India: Programs which contribute to MDGs

- Integrated Child Development Services (ICDS)
- National Rural Health Mission (NRHM), JSY, JSSK
- Mid-Day Meal Scheme
- Rajiv Gandhi Scheme for Empowerment of Adolescent Girls, SABLA
- Indira Gandhi Matritva Sahyog Yojana
- Targeted Public Distribution System
- National Horticulture Mission
- National Food Security Mission
- Mahatma Gandhi National Rural Employment Guarantee Scheme
- Nirmal Bharat Abhiyan,
- National Rural Drinking Water Programme
- etc.

The Progress in India

India's healthcare spending increased by Rs 194,000 crore between 2007-2012

*** Child sex ratio declined 13 points during the five-year period as against the target to increase it by 8 points**

*** There was a shortage of 88% specialist doctors between 2007-12**

The progress in India

- Gender parity was achieved in primary education in 2007-08. and the disparity in secondary education is set to disappear by 2015. The country is well set to achieve 100% primary education for children ahead of 2015
- Poverty ratio is likely to be 26.7% against target of 23.9% by 2015. (In 1990, it was 47.8%)
- U5MR estimates it would be around 52 against target of 42/1,000 by 2015.
- MMR would come down to 139/100000 against the goal of 109 by 2015 (437 in 1990)
- Proportion of under weight children is expected to come down to 33% vis-a-vis the target of 26% (52% in 1990)

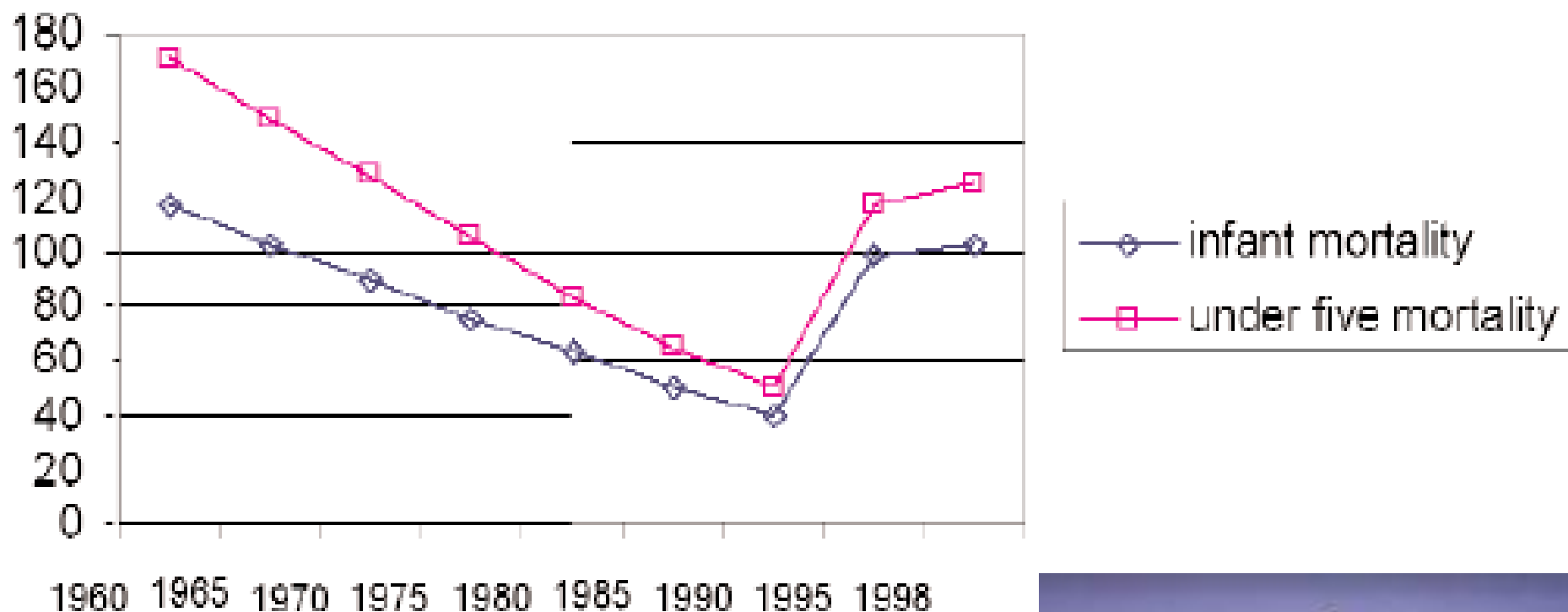
Reflections on challenges while working on MDGs



Challenges: Personal experience

- Lack of real time data on
 - Infant & child mortality
 - Causes of mortality
 - Coverage levels of interventions
- The trend curve used to estimate mortality till next survey data is available
- Lack of clear accountability

Infant & U5 Mortality Rates in Iraq

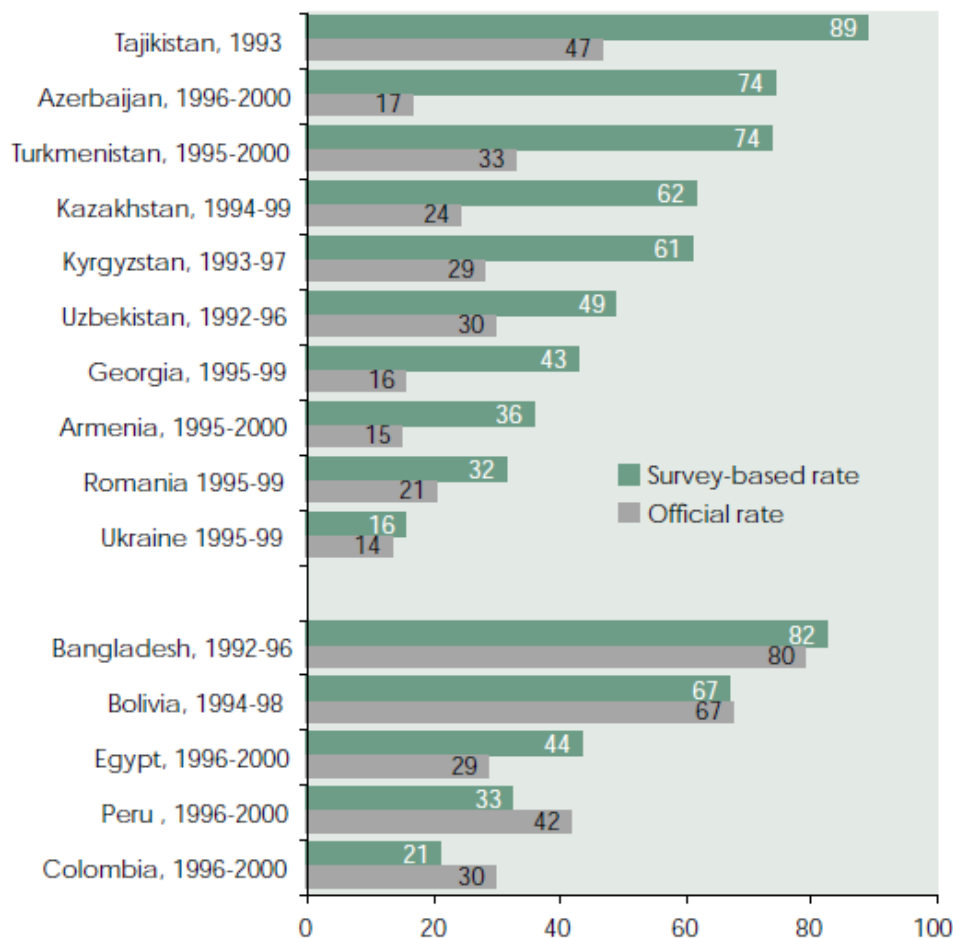


Challenges: Caucasus and Central Asia

- IAEG Estimates based on surveys much higher than government data
- Government officials refused to accept IAEG UN estimates

Wide gaps in official and survey data

Official and survey-based estimates of infant mortality
(infant deaths per 1,000 live births)



Official infant mortality rates (infant deaths per 1,000 live births)



Source: <http://www.unicef-irc.org/publications/pdf/monitor03/monitor2003.pdf>

Soviet definition of live birth

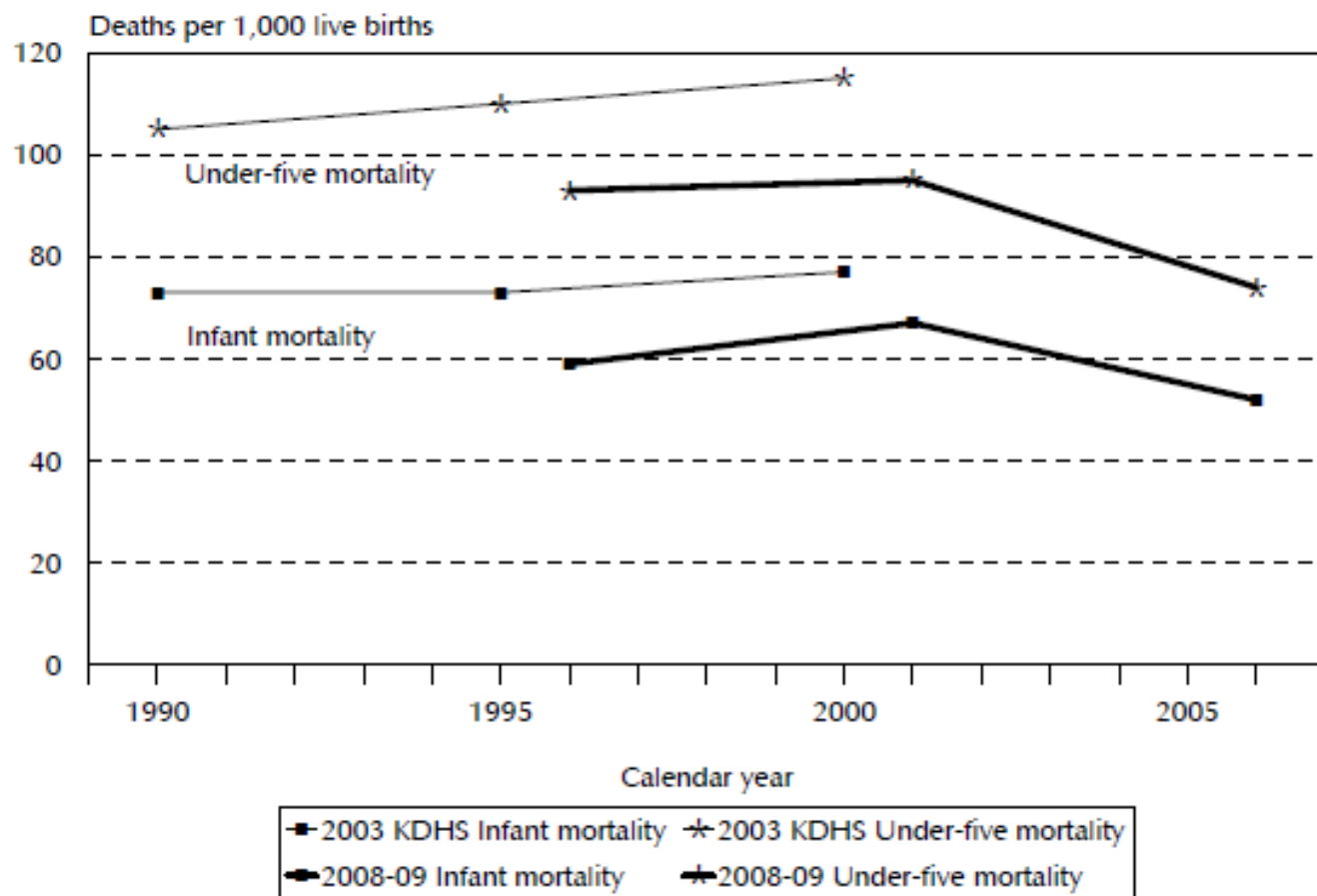
Soviet and WHO definitions of 'live birth'

<i>Infant born after the end of the 28th week of pregnancy</i>			
No signs of life	No breath, but other signs of life	Dies during the first seven days	Survives the first seven days
USSR: Stillbirth		Live birth	
WHO: Stillbirth		Live birth	
<i>Infant born before the end of the 28th week of pregnancy, or weighing under 1,000 grams, or under 35 centimetres in length</i>			
No signs of life	No breath, but other signs of life	Dies during the first seven days	Survives the first seven days
USSR: Miscarriage			Live birth
WHO: Stillbirth		Live birth	

Source: Anderson, B. and B. Silver (1986), "Infant Mortality in the Soviet Union: Regional Differences and Measurement Issues", *Population and Development Review*, Vol. 12, No. 4 (December), pages 705-36.

Note: According to the WHO definition, all infants born with no signs of life and who weigh less than 500 grams or whose gestational age is less than 22 weeks are considered miscarriages.

Infant & Child Mortality Rates in Kenya



Source: Kenya Demographic Health Survey 2008/09

Post 2015: The Future



The Future

“Future global health goals should be built on a shared vision of development, not on building together of independent development targets. We suggest five principles: holism, equity, sustainability, ownership, and global obligation – delivering health objectives across the life course.”

Wage J et al, The Millennium Development Goals: a cross-sectoral analysis and principles for goal setting after 2015. Lancet and London International Development Centre Commission. The Lancet 2010, Sept 13, 2010.

Process: Post 2015 Agenda

High-level group of General Assembly in 2010 requested the Secretary-General to make recommendations to advance the UN development agenda beyond 2015

UN System task team report 2012 (Realizing the future we want):

- Member states–led consultation process
- lessons learned, what drives the problems & follow up of MDGs
- decisions taken at Rio+20 (June 2012)
- High Level Panel: chaired by Presidents of Nigeria & Indonesia
- Consultations:
 - global thematic consultations (including inequalities, health, education, growth & employment, population dynamics, governance, conflict & fragility, environmental sustainability, food security and nutrition)
 - national consultations being organized through UN Development Group
- High Level Dialogue (4-6 Mar 2013, Gaborone, Botswana: Culmination of six months consultations on Health (2200 registered & 150,000 visited online, 100 papers, 106 CSOs responded, Pvt sector, academicians, 13 face-to-face consultations....)

Current Health Scenario

- Unfinished business of MDGs
 - Many countries have not achieved health MDGs
 - Preoccupation with aggregate achievement
 - social justice, equity & human rights
 - Emphasis on 'what' and not on 'how'
- New outbreaks (SARS, H1N1): economic impact (e.g. East Asia lost \$50B due to SARS)
- NCDs, Mental Health, Injuries, Violence
- Ageing population, changing lifestyle
- Economic development is increasing inequity

Challenges New Agenda

- Inclusiveness – wider participation
- Country context
- Universality
- Linkages
- Overarching health goal: life expectancy or healthy life expectancy (all morbidity/mortality all causes)

Framework for 2015 Agenda



Source: Realizing the future we want. UN Task Team Report 2012

Post 2015 agenda

- preserve the catalytic power of clear & simple MDG framework to build political momentum
- Strengthen accountability, transparency
- avoid an overload, while still ensuring an open and inclusive process of consultations
- Maximize health at all stages of life, youth & healthy lifestyle, sexual & reproductive rights

Health Thematic Consultations ?

<http://www.worldwewant2015.org/health>



Conclusion

- Emphasis on human development shifted policy attention beyond economic growth that dominated previous agendas
- Major strength of MDGs is its focus on a limited set of concrete, common human development goals and targets
- Mainstreams health into development agenda: Health is a precondition for & an indicator of sustainable development
- Brought together governments, development partners, UN agencies, NGOs to achieve the goals
- Need to accelerate efforts to achieve goals in remaining time – sense of urgency
- Post 2015 agenda builds on the experience of MDGs and using an open and consultative process

Thank You



Framework of Behavior Change in Maternal & Child Survival

