SAARC Development Goals (SDGs): An Engagement with Hope

Livelihood S	SDGs
Goal 1	Eradication of Hunger Poverty
Goal 2	Halve proportion of people in Poverty by 2010
Goal 3	Ensure adequate nutrition and dietary improvement for the poor
Goal 4	Ensure a robust pro-poor growth process
Goal 5	Strengthen connectivity of poorer regions and of poor as social groups
Goal 6	Reduce social and institutional vulnerabilities of the poor, women, and children
Goal 7	Ensure access to affordable justice
Goal 8	Ensure effective participation of poor and of women in anti-poverty policies and programmes
Health SDG	<u>s</u>
Goal 9	Maternal health
Goal 10	Child health
Goal 11	Affordable health-care
Goal 12	Improved hygiene and Public health
Education S	<u>DGs</u>
Goal 13	Access to primary/communal school for all children, boys and girls
Goal 14	Completion of primary education cycle
Goal 15	Universal functional literacy
Goal 16	Quality education at primary, secondary and vocational levels
Environmen	at SDGs
Goal 17	Acceptable level of forest cover
Goal 18	Acceptable level of water and soil quality
Goal 19	Acceptable level of air quality
Goal 20	Conservation of bio-diversity
Goal 21	Wetland conservation
Goal 22	Ban on dumping of hazardous waste, including radio-active waste

I Mandate and Challenges for SAARC Development Goals (SDGs)

I.1 Creating a Regional Will on Poverty Reduction

South Asia continues to be home to about 35 percent of the world's poor.

The SDGs are to be prepared in the areas of livelihood (poverty alleviation), education, health and.

The ISACPA Report *Our Future, Our Responsibility* (2003) outlined a road map for a poverty-free South Asia and has set the context for this task of SDG preparation.

I.2 Challenges in the Formulation of SDGs

The formulation of SDGs presents a number of challenges since the proposed goals should not merely be a wish list.

They must constitute a powerful reference frame to mobilize policy constituencies, galvanize popular imagination, guide the formulation of implementable policies, and not the least, facilitate the monitoring of progress. The strength of the SDGs will lie in their very simplicity and universal appeal.

The mandate given to develop SDGs in the four areas of livelihood, health, education, and environment is of particular significance to the fight against poverty. Not only does each of these have a central bearing on poverty, their synergies and their combined impact will largely determine the pace of poverty reduction in the region.

I.3 Assessing Progress on MDGs in Developing SDGs

The *first* MDG is the most fundamental: eradicating extreme poverty and hunger. Within this goal, there are two targets: firstly, to halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day, and secondly, to halve the proportion of people who suffer from hunger over the same period.

Poverty incidence based on national poverty line has declined from 38 to 28 percent over the last 12-year period. By current trends, South Asia as a whole appears to be on track to meet the MDG target of halving income poverty by 2015 though some countries will have to make greater efforts than others. Evidence of progress on the hunger indicator has been more mixed: the proportion of low-weight children fell from 64.1 to 48.4 per cent but nutritional indicator - proportion of population below minimum level of dietary energy consumption – fell more modestly from 26.6 to 22.8 per cent. Significantly greater efforts will clearly be necessary in this area.

The *second* MDG is to achieve universal primary education. Net primary enrolment for the region as a whole has increased from 73 to 82 per cent. While progress for some countries has been appreciable as in Bangladesh, for some others assessment is difficult because of a lack of adequate enrollment data. Moreover, the countries are at widely

varying levels of literacy in 2002. Except for Sri Lanka and Maldives, the situation is quite challenging on related indicators such as primary completion rate and full literacy. Of great concern is the fact that nearly a third of South Asian youth are illiterate.

The *third* MDG is to promote gender equality and empower women. The target is to achieve gender parity in primary and secondary education preferably by 2005 and to all levels of education by 2015. There has been a steady reduction of gender disparities in primary, secondary and tertiary education in all SAARC countries. On the empowerment indicator, despite steady progress in the region, women's participation in non-agricultural employment remains modest, at around 20 percent. Gender equality also continues to fall short in the legislative arena with less than 10 percent of parliamentary seats in the region occupied by women with no clear trend of increase or decrease.

The *fourth* MDG is to reduce child mortality. The target is to reduce the under-five mortality rate by two-thirds by 2015. Steep percentage declines have occurred in some countries such as Bangladesh, Bhutan and Nepal from relatively higher 1990 levels while in Sri Lanka the absolute rate has been reduced to 19 deaths per 1,000 live births, *the lowest in the region*. For SAARC countries as a whole, the rate of reduction has been 27 per cent during the last 12 years. Though Bangladesh and Bhutan are on track to meet the MDG target, the region as a whole will have to make greater efforts in this respect.

The *fifth* goal is to improve maternal health. No reliable data exist to assess the critical area of maternal health with precision. Available statistics indicate great divergence from a mortality rate of less than 100 per 100,000 women giving birth in Sri Lanka to a mortality rate of more than 700 in Nepal. A crucial indirect indicator here is the presence of skilled birth attendants. It would appear that more than 60 percent of women giving birth in South Asia still do so without the assistance of skilled attendants. Clearly, this is going to be one of the greatest challenges South Asia has to tackle in the coming decade. Improving data collection on relevant indicators on this goal will also have to be a priority.

The *sixth* MDG is to combat HIV/AIDS, malaria and other diseases. Statistics on the spread of HIV/AIDS in South Asia is insufficient; available estimates show a low HIV infection rate of 0.05 percent but this nevertheless translates into an infected population of nearly 5 million. If unattended, this can grow to be a much bigger problem. Other infectious diseases such as malaria and tuberculosis have a longer presence in the region and continue to pose major health challenges for the population.

The *seventh* goal is to ensure environmental sustainability. Five targets are identified here: forest cover, energy intensity of the economy, sustainable access to safe drinking water, and, sanitation

On the target of access to safe drinking water, access for the region as a whole increased from 72 to 84 per cent in the 1990s. Available data show that Bangladesh and Maldives have achieved near universal access. However, if arsenic contamination is factored in, the picture could change particularly for Bangladesh and India.

The *eighth* goal is to develop a global partnership for development. External debt remains a major impediment to development in some SAARC countries.

In Pakistan, external debt servicing consumes over 20 per cent of export earnings. However, during the 1990s, all SAARC member countries experienced a reduction in their debt servicing ratios. Significant declines were observed for Bangladesh, India, Nepal and Sri Lanka.

The decline in ODA has been another stumbling block, particularly for LDCs. In Bangladesh, ODA as percentage of GDP declined from 7.0 per cent in 1990 to 2.2 per cent in 2001. The figures were 11.7 and 7.0 for Nepal, 16.5 and 11.1 for Bhutan, 1.3 and 0.7 for India, and 9.8 and 4.3 for Maldives for same period. On the other hand, accessibility to affordable drugs in the region has been steadily improving. Telephone and computer usage improved sharply during the 1990s in almost all SAARC countries

Overall, the progress on MDG attainment in South Asia falls into three boxes: SAARC countries are on track on a third of the identified 18 targets; they are off-track on another third; and reliable or relevant data do not exist to assess performance in the final one-third of targets.

MDGs most likely to be achieved by current trends include halving income poverty and child mortality and ensuring environmental sustainability. Less likely are other targets in the education and health sectors. Such outcomes, of course, are not pre-determined. Greater efforts and more strategic engagement can clearly alter the outcome for the better.

I.4 Process of Preparing SDGs

II SAARC Development Goals (SDGs) 2005-2010

As mandated by the Twelfth Summit, SDGs are to be formulated for four priority areas: livelihood, health, education, and, environment.

II.1 Livelihood SDGs

The choice of goals is guided here by three rationales:

- The foremost rationale is to ensure that no one is left behind. On this rationale, the focus has to be on the most extreme expression of poverty, namely, hunger.
- In real life, the move out of poverty is never a one-step change from being poor to non-poor. The change process is more akin to a ladder within which distinct milestones need to be crossed. From a process perspective, the emerging goal is that of nutrition as many may have crossed the barrier of stark hunger but are faced with the challenge of poor diets.
- Goal-setting here has to emphasize the robustness of the growth process, the opportunities for the poor to be participants, and the equity consequences of growth.

A critical policy goal here will be explicit commitment to rural and informal sectororiented budgetary allocation since the bulk of the poor still reside in the rural areas and participate in the informal sectors of the economy. The budgetary allocation goal is more realistic than an outcome goal such as setting a cap on the Gini co-efficient of income distribution.

The third rationale stems from the need to address the vulnerability aspects of poverty. First is the *economic* vulnerability due to natural disasters, seasonal deprivations and other crisis situations. The adequacy of safety net measures is the critical factor. The *second* is the *social* vulnerability which stem from a variety of social ills such as dowry, child marriage, trafficking etc which has disproportionate consequences on the well-being of women and children. Combating such vulnerability will require awareness campaigns and legal and institutional safeguards. The third is the *institutional* vulnerability that stems from the lack of affordable justice for the poor. The insidious consequences of such vulnerability are not limited to economic losses for the poor but also extend to unpredictability in the social environment within which the poor pursue their livelihoods.

Goal 1 Eradication of hunger poverty

Adequate safety nets have to be put in place so that hunger whether as a routine or seasonal or crisis phenomenon can be effectively countered. An emphasis on developing early warning systems including food insecurity mapping will be a priority.

Goal 2 Halve within 2010 the proportion of people in poverty (as per national poverty lines) and ensure an absolute reduction in the number of the poor within the same period

The simplicity of the dollar-a-day definition of poverty has been useful for mobilizing the international policy constituency behind MDGs. However, there are limitations on the operational value of such a definition when one comes to setting targets for economies which may be semi-monetized and where the poor do not necessarily get all, or a significant part of, their sustenance through the market-place. Use of national poverty lines for target setting may be more meaningful in such circumstances. It is also important that poverty reduction targets be framed not just in terms of proportions but also in terms of the absolute number of the poor. Without the latter, the moral urgency of the poverty reduction goal is significantly diluted.

Goal 3 Ensure adequate nutrition and dietary improvement for the poor

Poverty goals of South Asia can no longer revolve simply around staving off hunger. This is so not only because significant progress has been made in overcoming hunger, but also because the poor have embraced the more forward-looking goal of a healthy life. While ensuring that no one is left

behind in hunger (Goal 1), goal setting must move up the ladder in addressing the goals of nutrition and dietary improvement. Targets will specifically include nutritional awareness, nutritional provision for vulnerable groups such as school children, adolescent girls, pregnant mothers, nutritional supplements (such as vitamin A), targeted development of nutritionally relevant sectors such as homestead horticulture, poultry, dairy and fisheries.

Goal 4 Ensuring a robust pro-poor growth process

The importance of growth for rapid poverty reduction is now well accepted. Today's policy challenge is really about ensuring an adequate stake of the poor in the growth process, both as participants and as beneficiaries. Targets should include, *inter alia*, a 5+ percent growth rate for the target period, a significant, nationally-determined rate of budgetary allocation made mandatory and explicitly targeted to rural and informal economy sectors, and, an explicit focus on productive employment in general and youth employment in particular. An additional target will be to ensure access of the poor to credit, training and technology that is of vital importance to their livelihoods.

Goal 5 Strengthening connectivity of poorer regions and of poor as social groups

Remoteness from the mainstream of economic and social life is an important aspect of the poverty experience. Redressing such remoteness and strengthening connectivity through roads, railways, waterways, telephone, radio, T.V., internet, etc., will be a priority.

Goal 6 Reducing social and institutional vulnerabilities of the poor, women and children

The poor, and women and children in particular, face a number of social and institutional barriers and insecurities in the pursuit of their livelihoods and social life. Removing such barriers and insecurities should be a priority. Targets will include eradication of social ills such as dowry, female foeticide, trafficking of women and children, bonded labour, child marriage, hazardous child labour, disadvantages suffered by marginalized and socially excluded people, etc. This is not an exhaustive list. Individual countries may identify more such country-specific social ills.

Goal 7 Ensuring access to affordable justice

Absence of affordable and reliable justice, both criminal and civil, is a major disadvantage faced by the poor of South Asia. Meaningful reforms of the judicial system at the local level, including promotion of appropriate dispute adjudication processes will be the key targets.

Goal 8 Ensuring effective participation of the poor and of women in anti-poverty policies and programmes

Ensuring 'Voice of the Poor' at all stages of anti-poverty policies and programmes - implementation, monitoring, planning and policy formulation — will be critical to building the ownership of the poor over the poverty reduction process. One of the ways to ensure this is through giving adequate representation to the organizations of the poor at all levels of the poverty reduction programme. It is also important to emphasize the importance of the active involvement of women in decision-making processes within households and outside.

II.2 Health SDGs

The health goals are grouped into three: reproductive health and health-care, hygiene and nutrition. The nutrition goal has already been covered under livelihood SDGs as this has implications for both areas. Many of the goals here are universal in nature. The distinction of the SDGs would again be to put the spotlight on some of the critical process dimensions. Experience has shown that improvement in sanitation is not a one-step affair but is more of a graduated transition whereby there is a sequence starting from open space, closed space but non-sanitary, semi-sanitary and finally sanitary (Bangladesh PRSP, 2004). The process of change will not be understood if this graduated transition is not taken into account.

Goal 9 *Maternal health*

The focus is not just on maternal mortality but also on improved nutritional status of adolescent girls and pregnant women. Key targets will include increased presence of skilled birth attendants, pre and antenatal care, and a rapid decline in TFR (total fertility rate) to reach the replacement level (2.1) within a definite period to be specified by the country.

Goal 10 Child health

Key targets include universal immunization of children, universal practice of breast-feeding, and provision of nutritious mid-day school meals at the primary level.

Goal 11 Affordable health-care

Key targets include access to primary health-care services in every village/island run by paramedics, access to affordable medicine including essential and alternative medicine (i.e., Ayurvedic, Unani and

Homeopathy), training of rural medical practitioners, including those practicing alternative medicine (revival of LMF/rural doctors), and awareness raising programmes to combat major diseases.

Goal 12 Improved hygiene and public health

Key targets include access to safe drinking water and sanitation, raising awareness of important aspects of public and social hygiene e.g., washing of hands after visiting latrines, avoiding spitting and defectation in the open etc., effective enforcement of laws on banned substances, and, ban on, and effective enforcement of smoking in public places.

II.3 Education SDGs

The common goal is universal access to basic education. This needs to be reiterated as South Asia is as yet far from full achievement on this goal. However, there is a need to move to more forward-looking supplementary goals, i.e., completion rate, quality education, gender parity, computer literacy. Some innovative goals are also necessary, i.e. universal coverage of nutritious mid-day school meal at primary levels, incentive programmes for girl students and disadvantaged groups.

Goal 13 Access to primary/community school for all children, boys and girls alike

Key targets are a) to ensure availability of school within walking distance in every village/island/urban center, and b) achieve gender parity at both primary and secondary levels.

Goal 14 *Completion of primary education cycle*

It is not enough simply to get children into school but also to ensure that they remain there and complete the cycle. Key targets include universal retention rate at the primary level, acceptable level of teacher-student ratio, provision of mid-day meal, acceptable coverage of girl students and students from disadvantaged groups at primary, secondary and vocational levels through stipend program. One important requirement is the provision of separate toilets for girl students in all schools.

Goal 15 *Universal functional literacy*

One in three South Asian adults are illiterate. Over and above the goal of universal basic education through the formal school system, additional efforts at informal and community levels are necessary to ensure that all members of the population, in particular illiterate young adults, attain functional literacy.

Goal 16 *Quality education at primary, secondary and vocational levels*

Beyond the access and retention goals, South Asia has to embrace the goal of quality education in order to better engage with the challenges of the 21st century. Key targets here will include (a) training of teachers at primary, secondary and vocational levels, (b) an acceptable level of computer and English literacy, including in the rural areas, and connectivity opportunities to make this possible, and (c) an improvement in the courses and curricula in order to meet the requirement of productive employment.

II.4 Environment SDGs

The rationale for identification of the environment sector goals is to conserve natural resources necessary for life-support and livelihoods of the poor, and to ensure that their health is not impaired. The latter, in turn, have profound implications for the well-being and livelihoods of the poor. The main nexus of environmental degradation with poverty is the lack of secure rights of the poor over natural resources, in particular, land, water, forests and bio-diversity. Accordingly, the overall approach should be to secure the entitlements and access of the poor to natural resources, so that they are enabled to gain better livelihoods from the fact of conservation of resource, rather than from its conversion or degradation. In addition, the inadequate enforcement of pollution norms differentially impacts the poor, and effective enforcement of environmental norms to reduce or eliminate exposure of the poor to pollution caused by others need to be ensured.

Goal 17 Acceptable level of forest cover

Key targets include reversing the process of deforestation, engaging traditional communities in forest conservation, promotion of social forestry including roadside and homestead forestry.

Goal 18 *Acceptable level of water and soil quality*

Key targets include appropriate water management, ban on 'dirty dozen' of pesticides/insecticides, control of waste and industrial discharges, use of organic fertilizers, etc..

Goal 19 *Acceptable level of air quality*

Key targets include a) reduction of indoor air pollution caused by inefficient biomass cooking devices to acceptable levels, b) discouragement of leaded petrol, and c) improved solid and hazardous waste management.

Goal 20 *Conservation of bio-diversity*

South Asia is home to one of the richest bio-diversity bases of the world. Conserving this is a key priority preferably done in situ in accordance with

the Convention on Bio-Diversity. Legislation and its enforcement to ensure flow of benefits to local communities from access to genetic resources and associated traditional knowledge is another important aspect.

Goal 21 Wetland conservation in the region in accordance with Ramsar Convention.

Wetlands in South Asia are numerous but now face degradation and extinction. They represent unique eco-systems and bio-diversity. They also form the common property resources (CPR) still somewhat accessible to the poor for food, medicine and livelihoods. Their conservation is important for both environmental sustainability and poverty reduction.

Goal 22 Ban on dumping of hazardous waste, including radioactive waste, in the region

In recent years, unscrupulous companies have been dumping hazardous wastes in the seas and oceans of South Asia. One cannot rule out the possibility of dumping radioactive waste by such companies in the future. As such, a pro-active approach is required in advance.

II.5 From SDGs to National Targets and Indicators

While the SDGs and the ISACPA Report: *Our Future Our Responsibility* express the regional will for a comprehensive and strategic response to the problem of poverty and social development, the formulation of specific targets and indicators will have to be carried out at the national level. The appropriate format for this latter task is the national-level poverty reduction strategy papers (PRSP) or an equivalent process such as the national development plans. Effective interfacing of SDGs and PRSPs will provide the added benefit of harmonizing regional and national strategies.

III Key Challenges

There are several challenges that have to be faced in implementing the SDGs (see ISACPA, 2003: 28-35 for a detailed look at the implementation challenges). The more important among these include the following:

- Incorporation of SDGs into the National Development Plans/PRSPs (i.e. make the two compatible)
- Prioritization of the SDGs in the light of national concerns
- Development of targets and indicators for each of the SDGs
- Resource allocation, management of public expenditure, resource mobilization, exploring external resources and building multi-stakeholder partnerships
- Developing an effective implementation plan
- Bringing in a sense of urgency in all matters relating to SDGs, given their limited (five years) time frame

- Ensuring regional cooperation wherever feasible and necessary
- Establishment of credible data base at both national and regional levels
- Tracking progress and putting in place a proper monitoring mechanism.

IV Follow-up Issues

IV.1 Implementation Issues

Implementation is a national responsibility. However, in formulating the implementation strategy in any South Asian country, the following general principles need to be considered: sustained and innovative motivation campaign; providing positive incentives to relevant stakeholders; ensuring stricter laws and punishments as deterrence to persistent violators of rules and regulations; setting up inter-ministerial task force; time bound action plan/matrix, specifying responsibilities of different implementers; reprioritization of resources; collaboration and coordination among relevant GOs, NGOs, LGOs and for-profit private sector, media, academia and development partners; learning lessons from the region and the world at large; and putting in place an appropriate monitoring mechanism.

IV.2 Costing for Results

Costing is an exercise that is not only a practical matter but it also signals the seriousness of purpose. Without it progress would be difficult, if not impossible. It will depend on the specific targets and indicators decided by the individual countries for the next five years. The costing exercise also demands that it spells out who (central/provincial/state/local government/for-profit private sector/NGOs) will bear how much of the expenditure and in what manner (grants, additional taxes, user charges, cross subsidies, etc.) and in what time frame. It should, therefore, be left to the individual countries to work out.

IV.3 Areas for Regional Co-operation

The formulation of the SDGs allows for identifying areas which merit, and will benefit from, regional co-operation. These may include:

- Strengthening ongoing regional initiatives, such as on trade liberalization/facilitation, investment promotion, infrastructure development and implementation of social charter, in order to ensure social development and pro-poor growth
- Provision of regional financial resources for poverty alleviation and achievement of SDGs
- SAARC Disease Surveillance Network: activities may include developing early warning systems, promotion of regional indigenous medicine systems, regional cooperation in intellectual property rights in the health sector
- Essential medicine

- Prevention of human organ trade
- Prevention of trafficking in women and children
- Prevention of dumping of hazardous, including radio-active, waste
- Wetland conservation in the region
- Harmonizing indicators and promoting low-cost monitoring methodologies. SAARC Secretariat can extend their current exercise in constructing regional poverty profile to include SDG monitoring.

IV.4 Benchmarks and Monitoring

Formulation of SDGs becomes meaningful if the entire process is imbued with a results orientation. To keep the focus on results, establishing benchmarks using all available data as well as evolving an effective monitoring strategy will be crucial. Benchmarking and primary monitoring will have to be a national task but standardizing indicators and innovating on low-cost monitoring methodologies can be a very fruitful area for regional co-operation. In order to develop specific regional targets to take forward the SDGs, relevant and credible data will have to be generated by SAARC member countries at the earliest.

V An Engagement with Hope

South Asia is already embarked on a journey of transformation. Translating this into a journey of hope for a poverty-free South Asia is the key contemporary challenge. It is a challenge which demands active, intelligent and innovative engagement from all: governments, development agencies, private sector, NGOs, community organizations, media, academia, and above all, from the people of South Asia themselves. The purpose of the SDGs in this context is to sharpen the focus and the message wherein engagement is a priority. The engagement is not just for policy planning. It is as importantly an engagement for results, for inclusion, for imaginative solutions, and ultimately an engagement with hope.

Annex 1

MDGs and Targets

MDG	Targets
Eradicate extreme poverty and hunger	 Halve between 1990 and 2015 people whose income is less than a dollar a day Halve between 1990 and 2015 the proportion of people who suffer from hunger
Achieve universal primary education	 Ensure that by 2015 children everywhere, boys and girls alike, will be able to complete a full course of primary education
Promote gender equality and empower women	 Eliminate gender disparity in primary and secondary education preferably by 2005 and at all levels of education by 2015
Reduce child mortality	• Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate
Improve maternal health	 Reduce by three-quarters, between 1990 and 2015, the maternal mortality ratio
Combat HIV/AIDS, malaria and other major diseases	 Halve by 2015 the incidence of HIV/AIDS and begun to reverse its spread Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases
Ensure environmental sustainability	 Reverse loss of environmental resources Halve by 2015 proportion of people without sustainable access to safe drinking water and basic sanitation Significantly improve by 2020 the lives of at least 100 million slum dwellers
Develop global partnership on develop ment	 Develop further an open, rule-based, predictable and non-discriminatory trading and financial system Address the special needs of least developed countries Address the special needs of landlocked and small island developing countries Promote long-term debt sustainability for developing countries Promote decent and productive work for youth Ensure access to affordable essential drugs Make available benefits of new technologies, specially information and communications

Source: UNDP, 2000, Human Development Report

Annex 2

Millennium Development Goals in South Asia: Trends

Cools/Towarts	Indicators		ladesh	Bhutan		India		Maldives		Nepal		Pak	istan	Sri Lanka		Sout	h Asia
Goals/Targets		1990	2002	1990	2002	1990	2002	1990	2002	1990	2002	1990	2002	1990	2002	1990	2001
Goal 1. Eradicate extreme poverty and hunger																	
proportion of people whose income is less than one dollar a day	Proportion of population below \$1 per day	35.9	32.8ª	ı	-	52.5	34.7ª			37.7	27.3°	47.8	12ª	4.0	2ª	41.3	3 31.1ª
	Proportion of population below National Poverty Line	49.7	39.8 ^b		31.7	38.9	26.1 ^b			40.0	38.0*	26.1	32.9°	26.1	22.7#	38.3	3 28.1
Halve, between 1990 and 2015, the proportion of people who suffer from hunger	Prevalence of underweight children (under five years of age)	65.8	47.7ª	37.9	18.7ª	63.9	46.7ª		30ª	72.0	48.3ª	40.2	38ª	38.0	29ª	64.1	48.4ª
	Proportion of population below minimum level of dietary energy consumption	35.0	32ª	ı		25.0	21ª			18.0	17ª	26.0	19ª	29.0	25ª	26.6	5 22.8ª
Goal 2. Achieve universal pr	rimary education									•							
Ensure that, by 2015, children	Net enrolment ratio in primary education	64.0	86.6ª	55.0	72 ^b		83.3ª	1	96.2ª	64.0	70.5ª		66.9a		97ª	73.0) 81.8 ^a
everywhere, boys and girls alike, will be able to complete a full course of primary schooling	Proportion of pupils starting grade 1 who reach grade 5		65.5ª	73.0	91ª		59ª			52.0	62.1ª			94.4			59.9ª
1 ,	Literacy rate of 15-24-year-olds	42.0	52.1 ^b	,	57.8ª	64.3	74.1ª	98.1	99.2	46.6	62.7	47.4	58.7	95.1	97.1	62.3	69.5°
Goal 3. Promote gender equ	ality and empower women																
	Ratio of girls to boys in primary, secondary and tertiary education (%)	76.1	105ª	56.8	82.0	70.0	78.6ª	98.4	100.8ª	56.6	83.4ª	49.1		103.0)	68.2	2 81.3ª
primary and secondary education, preferably by 2005, and to all levels of education no later than 2015	Ratio of literate females to males of 15-to-24-year-olds (%)	65.5	71.1		71.6ª	73.9	81.3ª	100.0	100.0	40.7	58.9	49.0	61.0	98.3	99.7	73.1	79.6ª
	Share of women in wage employment in the non-agricultural sector	17.6	22.9ª	11.9	ı	12.7	17.1ª	21.2	36.7ª	11.7		6.6	7.9°	39.1	46.6ª	13.3	3 16.7 ^a
	Proportion of seats held by women in Parliament (%)	10.0	2ª+	2.0	9ª	5.0	9ª	6.0	6ª	6.0	6ª	10.0	22ª	5.0	4 ^a		

Goal 4. Reduce child mortal	lity																
Reduce by two thirds, between 1990 and 2015, the under-five mortality rate	Under-five mortality rate (per 1000 live births)	144.0	73.0	166.0	94.0	123.0	90.0	115.0	77.0	143.0	83.0	138.0	101.0	26.0	19.0	129.8	95.1
	Infant mortality rate (per 1000 live births)	96.0	48.0	107.0	74.0	84.0	65.0	80.0	58.0	99.0	62.0	96.0	76.0	22.0	16.0	88.4	67.9
	Proportion of 1-year-old children immunized against measles	65.0	77ª	93.0	78.0	56.0	67.0	96.0	99.0	57.0	71.0	50.0	57.0	80.0	99.0	55.9	66.4
Goal 5. Improve maternal h	ealth																
Reduce by three quarters, between 1990 and 2015, the maternal	Maternal mortality ratio (per 100000 live births)		380.0	560.0	255 ^b		540ª		110 ^a		740ª		500 ^a		92ª		565.9ª
mortality ratio	Proportion of births attended by skilled health personnel		11.6	10.9	56.1ª		42.5ª		70.3ª	7.4	10.9ª	18.8	20ª		96.6a		37.7ª
Goal 6. Combat HIV/AIDS,	malaria and other diseases																
Have halted by 2015 and begun to reverse the spread of HIV/AIDS	Contraceptive prevalence rate	39.9	53.8ª		30.7ª	44.9	51.8ª			24.1	39.3ª	14.0	27.6ª		44a		
Have halted by 2015 and begun to	Incidence of tuberculosis(per 100,000 peoples)		221.0		118.0		167.8		46.8	92.3	189.8		181.3		54.4		176.5ª
reverse the incidence of malaria and other major diseases	Proportion of tuberculosis cases detected and cured under DOTS course (%)		32.0		31.0		31.1		92.3		63.6		12.5		78.8		
Goal 7. Ensure environment	tal sustainability																
	Proportion of land area covered by forest	9.0	10.2ª	73.0	73.0	21.4	21.6ª	3.3	3.3ª	32.7	27.3ª	3.6	3.2ª	35.4	30 ^a	16.5	16.3ª
Integrate the principles of sustainable development into country policies and programmes	Land area protected to maintain biological diversity		0.8	26.0	26.0		5.2				8.9		4.9		13.5		4.8
and reverse the loss of environmental resources	GDP per unit of energy use (as proxy for energy efficiency – PPP \$ per kg oil)	8.1	10.8ª			3.2	5ª			2.6	3.9ª	3.4	4.3ª	5.7	8.1ª	3.4	5.1ª
	Carbon dioxide emissions (metric tons per capita)	0.1	0.2ª	0.2	0.5 ^a	0.8	1.1ª	0.7	1.8ª	0.0	0.1ª	0.6	0.8ª	0.2	0.6ª	0.7	0.9ª
Halve by 2015 the proportion of people without sustainable access to safe drinking water	Proportion of population with sustainable access to an improved water source	94.0	97ª	45.0	77.8ª	68.0	84ª		100ª	67.0	88ª	83.0	90ª	68.0	77ª	72.0	84.4ª

By 2020 to have achieved a significant improvement in the lives of at least 100 million slum dwellers	41.0	48.0	92.6ª	16.0	28ª	56ª	20.0	28ª	36.0	62ª	85.0	94ª	21.5	34ª	
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Goal 8. Develop a global partnership for development

Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term	Debt service as a percentage of exports of goods and services	37.5	9.0	5.3	3.3ª	29.2	12.6	4.0	4.3	14.7	6.2ª	25.1	21.3	14.8	9.2ª	17.9	11ª
In cooperation with the private sector, make available the benefits of new technologies, especially information and communications	Telephone lines per 1,000 people	2.0	13.2 ^b	3.7	28.4	6.0	51.9	29.3	168.0	3.2	15.1	7.5	33.5	7.4	95.8	5.7	42.1
	Personal computers per 1,000 people		3.4 ^b		14.5	0.3	7.2	12.3	21.9	0.5	3.7	1.3	4.2ª	0.2	13.2	0.4	6.8

Source: UNDP- Human Development Report 2003; UNESCAP and UNDP - Promoting Millennium Development Goals in Asia and the Pacific 2003
World Bank - World Development Indicators Database, April 2004; Pasha & Palanivel 2004: Pro-Poor Growth and Policies: The Asian Experience
Bhutan MDGs Progress Report 2002; Nepal MDGs Progress Report 2002; Royal Government of Bhutan, Poverty Analysis Report, August 2004;
* However, preliminary estimate of recent NLSS indicates that poverty incidence declined to 30.0 % in 2002 (see Kantipur Online, 10-11-2004), #
Govt. of Sri Lanka, Census of Statistics

Note: Alphabets a, b & c indicate the data of 2001, 2000 & 1999 respectively. + Percentage reserved for women in parliament is not included