

# Are the Goals Set by the Millennium Declaration and the Programme of Action of the International Conference on Population and Development within Reach by 2015?

*The risk now is that the benefits of development are increasingly favouring the well-to-do, leading to deepening inequality. As the Millennium Declaration makes very clear, development is for everyone.*

*The challenge now is to ensure that no one is excluded.*

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It is now mid-2008, just seven years away from 2015, the target year for the realization of the International Conference on Population and Development (ICPD) Programme of Action and the eight Millennium Development Goals.

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The eight Goals that world leaders pledged to meet in order to solve global challenges, range from halving extreme poverty to facing the problem of maternal mortality and reversing the spread of HIV/AIDS by 2015. Owing to persistent efforts of non-governmental organizations and other development partners, the goal of universal access to reproductive health by 2015, agreed upon during ICPD and reaffirmed at the Fifth Asian and Pacific Population Conference in December 2002, now forms a crucial part of the fifth Goal of improving maternal health.

While the Asian and Pacific region has been moving towards achieving the Goals, progress has been uneven according to the most recent assessment contained in the third Millennium Development Goals report for the region, entitled *A Future Within Reach 2008: Regional Partnerships for the Millennium Development Goals in Asia and the Pacific* (United Nations, 2008). The report disclosed that, between 1990 and 2004, the number of people living in extreme income poverty fell from 1 billion to 641 million in South-East Asia and China. Concerning health, more children are now surviving beyond the age of 5. With regard to education, millions more children are now going to school and a great number of countries have attained nearly 100 per cent primary school enrolment rates. The Asian and Pacific countries have also devised measures to achieve greater equality both in schools and in the workplace.

The following paragraphs will zero in on the eradication of poverty and hunger (Goal 1), the reduction of child mortality (Goal 4) and the improvement of maternal health (Goal 5), citing examples from the Philippines and selected Asian countries.

### **Goal 1: Eradicate extreme poverty and hunger**

In just two years, between 2002 and 2004, the number of people living in extreme poverty in the region fell by 82 million. Between 1990 and 2004, China reduced its incidence of extreme poverty by 23 per cent, from 33 to 10 per cent, thus surpassing the target set for the year 2015. Poverty rates have also diminished sharply in Azerbaijan, Indonesia and Thailand.

However, the 2008 report revealed that, this year, one out of every two people in the world subsisting on less than US \$1 a day resides in the Asian and Pacific region. Other areas of concern include distressing levels of infant and maternal mortality, the increasing spread of HIV/AIDS and the low coverage of water and sanitation.

In addition, women throughout the region continue to encounter discrimination in their homes and communities, and many endure deplorable

working conditions. Another disquieting aspect of the region's progress towards meeting the Millennium Development Goals and the ICPD goals is the divergence that persists within and between countries. Within countries, poor and vulnerable groups, particularly those in rural and remote areas, are falling further behind. Such countries as Bangladesh, the Lao People's Democratic Republic, Nepal and Sri Lanka slipped backward between the early 1990s and the early 2000s. The share of the poorest quintile in national income or consumption, a measure of inequality, remains less than 10 per cent (except in Japan) and appears to have declined in several countries.

Today, with the price of fuel soaring past record levels, with inflation reaching double-digit figures and headlines screaming of rice shortages, can we expect the poor to be released from their bondage? Consider these facts: between January and the first week of July 2008, the world price of Dubai Crude oil jumped 50 per cent; between January and mid-July 2008, petrol prices in the Philippines surged 18 times; in July 2008 in Viet Nam, the oil price increased 30 per cent, while in Malaysia it increased by more than 40 per cent; the general inflation rate in the Philippines registered a 11.4 per cent rise in June, with the inflation rate for food items recorded at 17.4 per cent for the same month; and, in 2006, one in three Filipinos was poor, with some 11 million people estimated to be subsisting on less than US \$1 day. With such a scenario, even middle-class workers have had to tighten their belts and learn to cope with less.

While there is no clear, universally accepted definition of hunger, the Food and Agriculture Organization of the United Nations posits an average daily energy requirement of 2,200 calories for adults undertaking light activity. Based on this standard, about 545 million people in Asia and the Pacific are undernourished (FAO, 2004), comprising almost two thirds of the world's undernourished population. Of this number, South Asia accounts for 300 million persons suffering from hunger, including 233 million in India. Another 160 million live in East Asia, with 119 million located in China. South-East Asia accounts for approximately 65 million undernourished people.

Although the Asian and Pacific region has witnessed an overall decrease in the number and prevalence of undernourished persons, the average rate of reduction has fallen short of what would be required to meet the first Goal of halving the proportion of people who suffer from hunger by 2015. The highest proportions of undernourished populations have been recorded in Tajikistan (61 per cent), the Democratic People's Republic of Korea (35 per cent), Cambodia (33 per cent) and Bangladesh (30 per cent).

The percentage of children under age 5 who are underweight is another vital indicator of hunger. While the region has been making progress as far as this indicator is concerned, it is considerably behind its target for 2015, with two out of every seven children below age 5 being underweight. The region still accounts for about two thirds of the world's underweight children. In some countries, the proportion is almost as high as one half.

Malnourished and underweight girls grow up to be undernourished mothers. Receiving poor health care during pregnancy means such mothers are, in turn, at risk of having underweight children. These forms of malnutrition may not necessarily be the consequence of absolute shortages of food, but may be owing to inadequate feeding, especially when children are weaned.

It is clear, however, that hunger and malnutrition are not primarily due to problems of food production. Nor are they simply the outcome of poverty. In fact, the region has been more successful at producing food and reducing poverty than it has been at diminishing hunger and child malnutrition. Some of the problems lie with the way food is being used. One of the most important steps in the fight against extreme poverty and hunger will be to increase the status of women. Such an improvement not only fulfils women's basic rights but also brings hope to other members of the household, since women who have higher levels of education and who have greater access to productive assets and resources will be in a better position to ensure that their children are well fed. Countries will also need to improve essential social infrastructure to relieve women of the burden of caregiving.

#### **Goal 4: Reduce child mortality**

Although child mortality has fallen to a record low throughout the world, it is still a matter of great concern in the Asian and Pacific region, where some 4 million children die every year before reaching the age of 5. The following countries reported very high rates of under-5 mortality per 1,000 live births: Afghanistan (257); Cambodia (143); Myanmar (105) and Turkmenistan (104). Infant mortality followed a similar pattern.

Child mortality is closely associated with gender inequality. Discriminatory practices prevailing in several countries have resulted in baby boys being preferred over baby girls, neglecting the latter's health and nutritional standards. Improving levels of basic health and nutrition of women and increasing pregnant women's access to good health facilities will also lower the number of infant deaths.

And where are the infants? The most violated human right is that of a child to reach his first birthday. The Asian Development Bank declared: "The Philippines,

overall, is doing well on this and is on track to meet the (related) MDG goal by 2015". Meanwhile, a worrisome gap between city and rural areas is emerging.

### **Goal 5: Improve maternal health**

Regarding maternal health, the performance of countries in Asia and the Pacific has been deeply disappointing. Some 250,000 women in the region die each year during childbirth or from pregnancy-related complications. The target is to reduce the maternal mortality ratio by three quarters by the year 2015. In 1990, Asia's overall maternal mortality ratio was 395 deaths per 100,000 live births. A decade later, the ratio had only fallen to 300.

In the Philippines, 10 mothers die each day while giving birth. By contrast, the figure is only 3 in Malaysia. The related Goal for the Philippines is to trim the maternal mortality ratio to 52 for every 100,000 births by 2015, down from 209 in the 1990s. The country has slashed this ratio down to the current figure of 170. Unfortunately, progress is far too slow. Skilled health personnel attend only 6 out of every 10 births in the Philippines, while the number is close to 10 in Thailand. At this rate, the maternal mortality ratio for Filipino mothers will dip only to 140 by 2015.

Although the situation varies from one country to the next, there are a number of common problems, such as gender discrimination in accessing health services, poor quality of services, a lack of emergency obstetric care, and a paucity of skilled health personnel and community-level field workers.

Maternal mortality could fall by 75 per cent if all births were attended by skilled health personnel with access to emergency obstetric care (Rightsbase, 2007). Another difficult issue is that many pregnant women are in poor health and are malnourished, a frequent consequence of their low economic and social status. This situation is especially dire for such vulnerable women as refugees, migrant workers, minorities and women in conflict areas.

Certain countries have created obstacles in the progress towards ensuring universal access to reproductive health, placing ideology above evidence and bias above science. Well meaning but far less effective abstinence efforts are supplanting comprehensive family planning and reproductive health strategies.

Moreover, the lack of accurate statistics has been hampering progress in reducing maternal mortality. Only a few of the poorest countries have effective systems for vital registration. Most data on maternal deaths come from household and other surveys that have their own limitations. Hence, more efficient and effective systems of data collection need to be implemented to correct this situation.

In developed countries, the sex ratio at birth ranges from 103 to 107 males per 100 females. China's sex ratio at birth is 120, while that of India is 108. In some parts of the region, the birth of a boy is viewed as a gift from the gods while that of a girl is often seen as a "curse". Hence, some parents resort to selective abortion or in some cases, infanticide. With the development of amniocentesis and ultrasound imaging technologies, parents have been better able to choose the sex of their child. A study conducted in four countries in the region dubbed the sex-ratio imbalance "*gendercide*" (UNFPA, 2007). Subsequent gender-based violence or neglect that costs the lives of millions of women and girls also distorts the sex ratio at birth.

The ICPD Programme of Action and other international agreements, as well as international organizations such as the United Nations Population Fund, the International Planned Parenthood Federation and the United Nations Children's Fund that provide support for the implementation of such agreements, have been the target of smear campaigns that spew misinformation and continue to use the abortion issue as a wedge to undermine the real target: organized family planning, reproductive health programmes and equality for women.

The Philippines has emerged as one of the countries posing obstacles in the progression towards ensuring universal access to reproductive health care. The current administration has placed ideology above evidence and bias above science. Well meaning but far less effective abstinence efforts supplant comprehensive family planning and reproductive health strategies. It is regrettable that so many of the people talking about the sanctity of life are, by their actions, ignorant and prejudiced, effectively condemning women to die.

A sense of impotence among the needy can pose grave challenges for social stability and economic well-being, compounded by weakness in governance, problems in service delivery and persistent gender discrimination. During the launch of the 2008 report in April, David Lockwood, Acting Head of the United Nations Development Programme Regional Bureau for Asia and the Pacific, emphasized that "raising standards of governance will assist countries in their efforts to achieve 'pro-poor' growth".

The 2008 report highlights the need for international organizations in the region to coordinate in a better fashion their assistance to countries attempting to make the Millennium Development Goals a reality. At the launch of that same report, Noeleen Heyzer, Executive Secretary of ESCAP, said: "It is essential that development partners contribute according to their unique characteristics and strengths, yet uphold the spirit, principle and practice of uniting to 'deliver as one'".

In most countries in Asia and the Pacific, the next generation is likely to be less poor and better educated. However, the risk now is that the benefits of development are increasingly favouring the well-to-do, leading to deepening inequality. As the Millennium Declaration makes very clear, development is for everyone.

The challenge now is to ensure that no one is excluded.

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