

Introduction

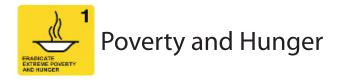
This booklet features practical projects and programmes that governments and their partners have developed in their efforts to achieve the Millennium Development Goals (MDGs). The booklet has been prepared for the High-Level Event on the MDGs which has been convened by the UN Secretary-General and the President of the UN General Assembly and which will enable world leaders to review progress, identify gaps, and commit themselves to the necessary efforts, resources and mechanisms.

Having passed the half-way point towards the MDG target date of 2015, development practitioners are looking for ways to scale up. They want to hear about good practices, and in particular identify the ways in which development partners have worked together – how governments have been taking a lead in implementing the MDGs, supported by the UN, civil society and donors. Beyond capturing experiences on MDG-based national development strategies, this booklet focuses on implementation on the ground.

The publication is based on cases submitted through UN agencies from Africa, Asia and the Pacific, Europe and the CIS countries, Latin America and Caribbean and the Arab States. It highlights a selection of these cases, and summarises many others, extracting ten key messages. We hope it will help governments and other partners cooperate and exchange ideas across the regions.

The UNDG MDG Policy Network would like to thank everyone who has generously shared their experiences to develop both this booklet and that longer version that will be published as a Good Practice Book.





Overall, the achievements under this goal are promising. The World Bank has recently estimated the number of extremely poor people – those living on less than \$1.25 a day based on 2005 prices – concluding that between 1990 and 2005 the number fell from 1.8 billion to 1.4 billion – from 41.7 to 25.7 per cent of the total population. If the world continues at this pace, it will achieve the overarching goal of halving extreme poverty by 2015. However, progress has been uneven across global regions: Asia is in the lead while Sub-Sahara Africa is still lagging some way behind.

Since the early 1990s, the proportion of people suffering from malnutrition and hunger has also fallen, but the number of those with insufficient access to food has increased. This is because most of the poor in developing countries are net food buyers, and, as result of price hikes, 100 million more have been pushed into extreme poverty. About 1 billion are going hungry, while at least another 2 billion are undernourished.

In 2005, the Millennium+5 Summit in New York added new targets to the MDG framework and in January 2008, the UN principals adopted a new monitoring framework recommended by the Inter-agency Expert Group on MDG Indicators. They made several changes to the indicators, and adopted four new targets under MDGs 1, 6, 7 and 8. Under MDG 1 the new target is to 'achieve full and productive employment and decent work for all, including women and young people'.

The collection of good practices has highlighted some important issues for poverty reduction.

Key message 1: Reducing vulnerability in crisis situations: the importance of a cross-cutting approach

This is of particular concern In Iraq. Many rural communities live in areas that have been sown with mines or laden with the explosive remnants of war (ERW). In these areas most people survive through subsistence farming and by rearing livestock. Now they face the collapse of their livelihoods. Fearing mines, they can no longer work their land, nor feed their animals or provide them with water. Deprived of their traditional sources of food and income, these communities can soon slip into poverty and malnutrition. Their choice is stark: starve at home or pack up and head for safer territory.

In countries affected by ERW one of the most important ways of eradicating extreme poverty and hunger is therefore to clear mines. This serves two valuable functions. First, it expands the land available for commercial agriculture and increases the output of subsistence farming. Second, it provides employment. Mine action (Demining, Victim Assistance, Mine Risk Education, Destruction of stockpiled landmines and Advocacy) is labour intensive and offers direct work opportunities for ex-combatants and unemployed youth. But it can also create employment indirectly by allowing people to use infrastructure, agricultural areas, and natural resources that had become inaccessible



Over the past four years, teams have cleared 52 square kilometres. This work has continued apace. Between October 2007 and August 2008, an Iraqi NGO, supported by UNDP and the Danish Demining Group cleared unexploded ordnance from more than 1,000 farms. As a result, more than 5,000 farming families were able to return to work. At the same

Farmers in Iraq collect tomatoes from lands cleared of landminestime, these teams contributed toand unexploded ordnances (UXO)MDG 2, by clearing unexploded ord-

nance from 18 schools, allowing 3,600 pupils to resume their education.

In any crisis it is vital to support the most vulnerable groups – considering both their immediate needs and their longer-term prospects. Mine action is a clear example of how this approach works, showing how careful planning and developing the necessary skills and capacities can make a major contribution to the MDGs.

Key message 2: Scaling up requires policy reform

If successful projects are to deliver their maximum benefits they need to be scaled up. This will require not just more funds but also policy reform. India, for example, is aiming to expand programmes that create jobs for the rural poor. For this purpose in August 2005, the Parliament passed the National Rural Employment Guarantee Act. This establishes the basis for public works schemes, providing the rural poor with semi-skilled or unskilled work, and guaranteeing them 100 days employment per year. However, it has proved more effective in some regions that others – depending on the commitment district of governments and the degree of corruption. Thus far it has provided 30 million families with an average of 43 days work .

Liberia is making policy changes to ensure employment for youth. In its Poverty Reduction Strategy the Liberian Government aims to generate decent work within both public and private sectors. Previous interventions to support youth employment have mostly offered young people direct support but have had limited impact because they have not been embedded in a broader policy and institutional environment. Liberia's regulatory frameworks, for example, are outdated and unenforced, and years of conflict have weakened the institutional capacity of government and non-governmental organizations.

Key message 3: Microfinance is more effective when accompanied with complementary activities

Microfinance has demonstrate its potential for supporting small businesses, But it can work much better if entrepreneurs also develop their skills. In a highly impoverished northern region of Syria, for example, the Rural Community Development Project has offered a comprehensive package of financial and non-financial services, providing financial support to the poor who cannot access normal banks, along with technical advice and marketing services to build their capacities to manage loans

In Bosnia and Herzegovina, the Upper Drina Regional Development Programme also aims to encourage responsible lending and borrowing in the micro-credit sector, while ensuring good fiscal management and financial compliance by businesses. From the outset it consulted extensively to examine the opportunities and constraints in various sectors. This resulted in a value-chain analysis of four sectors with growth potential – forestry, the metal industry, tourism and agriculture. This study formed the basis for designing effective interventions and identifying possible partners. In order to develop a culture of banking in a deprived region, the programme also partners with a local organization that offers revolvingfund microcredit. It has also initiated financial literacy training, which so far has benefited 2,100 people.



Gender Equality and Empowerment of Women

In most developing countries, a major obstacle to meeting the MDGs is gender inequality. If, for example, women are unable to decide whether and when to have children, they also have limited opportunities for education, work and political participation – with repercussions not just for women but for achieving all the MDGs. In addition to fulfilling women's rights, gender equality and the empowerment of women are therefore also essential for



combating poverty, hunger and disease and ensuring sustainable development.

Gender thus cuts across all the MDGs. But it also essential to have a specific gender goal through which governments can generate and monitor gender-disaggregated data. Goal 3 tracks progress in four important areas: girls' enrolment in primary, secondary and tertiary education; women's share in wage employment in the non-agriculture sector; and the

proportion of seats held by women in national parliaments.

Gender is also a significant factor in the HIV epidemic. Each year there are four million new infections – one every 8 seconds – and most of them are in women. In sub-Saharan Africa among 15-24 year olds with HIV, women outnumber men 3 to 1. Women in Africa also suffer from gender based violence: in Ethiopia, 7 out of 10 women have suffered either physical or sexual violence at home.

Key message 4: Build the capacity of key players including parliamentarians and public officials

Pakistan, for example, has a Gender Support Programme for national partners who are involved in gender equality policy commitments and programmes. The support covers four areas: the coordination, planning, implementation, monitoring and evaluation of policies and programmes; research and documentation; capacity building; and advocacy campaigns.

Partnerships with civil society organizations have enabled 36,162 women to enter politics. Just as important, the programme has helped elected women work more effectively: following the 2001 local government elections, it provided training for 27,000 women councillors. There have also been greater effort to collect sex-disaggregated information – as, for example, on civil service employment in Punjab. The programme has also provided baseline data on women's political participation.

Rwanda recently conducted its first free and fair elections for the presidency and the parliament. It also held a referendum on a new constitution which guarantees women a minimum of 30 per cent of parliamentary seats and other leadership positions. Today, Rwanda has the world's highest number of women parliamentarians – nearly 50 per cent in the Chamber of Deputies and around 35 per cent in the Senate. And in the Government, women make up 34 per cent of the Cabinet. In addition, Rwanda has a Women Parliamentary Forum. In February 2007, the Forum, which is supported by UNDP, held an international conference to share experiences and to forge nation-building partnerships with development allies.



UN Photo/WFP

UNDP has also supported women's political involvement in Kuwait. In 2006, for the first time women participated in parliamentary elections. Before and during the poll, UNDP partnered with civil society organizations to help prepare women candidates and disseminate information about voting so that all women who wanted to vote could do so. This included billboards, posters on buses and advertisements on television urging women to make their voices heard. A leading expert on Islamic law came from Morocco to hold a series of seminars on

Islam and women's political participation. No women candidates won seats in the new parliament, but 35 per cent of eligible women voted, a participation rate higher than in some long-established democracies.



Primary education

According to the UN MDG Report, many countries are close to achieving universal primary enrolment. Despite an increase in the number of children of primary school age, between 1999 and 2006 the number of children out of school fell from 103 million to 73 million. Sub-Saharan Africa, however, still has some way to go: here the net enrolment ratio has only recently reached 71 per cent, and 38 million children of primary school age are still out of school. Governments in the region will struggle to achieve universal education unless they can link education with other policy interventions.

One of the most effective measures is to abolish primary school user fees. **Malawi**, **Uganda**, **Tanzania** and **Kenya** have taken this important step, enabling more than one million extra children in each country to enrol in primary school.

Health

Developing countries also have the world's most difficult health problems. For women one of the most serious risks is maternal mortality. Each year over 500,000 women die from complications related to pregnancy and childbirth, mainly in low income countries. While in the UK, for example, the lifetime chance of a woman dying from these preventable causes is only 1 in 3,800, in Sierra Leone it is 1 in 6.

Of all the MDGs the goal on maternal mortality has shown the least progress. In sub-Saharan Africa and parts of Asia, maternal mortality rates have barely changed since 1990. Indeed in some countries, including **Malawi** and **Zimbabwe**, maternal deaths are increasing – a consequence of HIV, conflict and deteriorating health systems.

Also at great risk are children. Across the world, some 28,000 children under five die every day – one every 3 seconds – and on current trends, the goal on under-five mortality will not be achieved until 2045. Nevertheless, some countries have had notable successes, including **Benin**, **Botswana**, **Cameroon** and more recently **Malawi**, **Mozambique** and **Tanzania**. Some of the greatest progress has been with measles. In Africa, deaths from measles have fallen by 77 per cent since 2000. **Botswana**, **Malawi**, **Namibia** and **South Africa**, have adopted effective anti-measles strategies and reduced measles deaths to near zero.

Another area of concern is HIV. Over the last two years, the number of people living with HIV has increased in every region of the world. in 2006, 39.5 million people were living with HIV, two-thirds of them in sub-Saharan Africa. Women are especially vulnerable: in sub-Saharan Africa, they make up 59% of all people living with HIV; among those infected, for every 10 adult men there are 14 adult women.

Malaria too takes a terrible toll in sub-Saharan Africa which has 90 per cent of all malaria deaths. Here malaria account for 25 to 35 per cent of all outpatient visits, 20 to 45 per cent of hospital admissions and 15 to 35 per cent of hospital deaths. In addition to the human suffering there are economic costs. In some African countries malaria is thought to be slowing growth by 1.3% per year, and across Africa malaria is believed to cost economies about \$12 billion per year.

Key message 5: Achieving universal primary education will depend on progress in reproductive health, HIV/AIDS, malaria and hunger

While raising education standards will rely on greater investment in schools, it also depends on success in other areas. For example, families that have access to reproductive health services are in a better position to invest in their children's education, especially that of girls who often have lower priority. This is because they have fewer children or are able to space their births over a longer period.

Enrolment can also be boosted by success in tackling HIV/AIDS, since children and mothers with HIV/AIDS struggle to pay fees or supplies for schools, and may rely on their children to contribute economically. It will also increase the quality of education by restoring teacher numbers since many teachers have died from HIV/AIDS.

Reducing both malaria and hunger can also increase school attendance. Malaria affects children's learning capacity and can cause lasting neurological damage. Hungry children are also often kept out of school to find work or food for their families.

Despite its challenging post-conflict situation, Sudan remains committed to Millennium Development Goals 6 (MDG) Combating HIV AIDS, Malaria and other diseases. According to the National Malaria Control Program (NMCP), it is estimated that 80% of the population in Sudan are at risk of malaria and that the disease alone accounted for one-fifth of hospital deaths. In addition, Malaria has been identified as one of the major determinants of poverty in Sudan with an estimated out-of-pocket expenditures amounting to \$19-21 per capita, for fever/ malaria treatment.

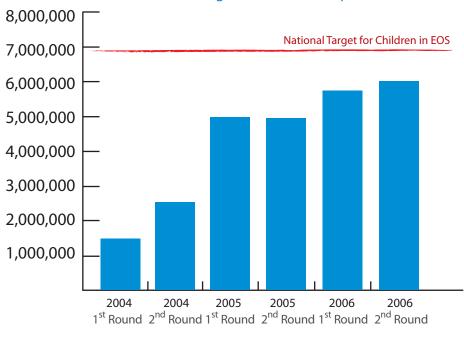
It is therefore not surprising that the Sudan National Malaria Control Program (NMCP) joined hands with the United Nations Development Program (UNDP) in 2005 with the aim of rolling back malaria in Sudan. The NMCP was able to secure funds for 5 years from the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) amounting to US \$ 33,240,453 million to support malaria prevention and control in 11 states in Northern Sudan. Throughout the five years of implementation, UNDP Sudan has assisted the NMCP in programmatic and financial management of this fund.

Joint efforts of the NMCP, UNDP and other partners on the ground, reaped a notable decrease in Malaria incidence rates by 30% in 11 Northern states resulting thus in 55% decrease in morbidity rates, and 52% decrease in mortality rates.

Key message 6: Raising standards of health will mean building on existing health systems and improving service delivery

Across West and Central Africa, 11 countries (**Benin**, **Burkina Faso**, **Cameroun**, **Chad**, **Gambia**, **Ghana**, **Guinea**, **Guinea Bissau**, **Mali**, **Niger**, and **Senegal**) are scaling up high-impact health and nutrition interventions. These efforts are being spearheaded by governments and UNICEF in collaboration with many others, including the World Bank, the World Health Organization, the US Agency for International Development, the Canadian International Development Agency, the UK Department for International Development – all in partnership with local organizations.

This initiative aims to extend services to underserved areas through community outreach while also educating families in home-based child health care practices. In addition it tries to strengthen the integrated management of childhood illnesses – for example, by promoting exclusive breastfeeding, treating diarrhoea using oral rehydration therapy, and offering pregnant women and under-five children protection from malaria with long-lasting insecticide-treated bednets, along with case management of fever, diarrhoea and pneumonia, at both community and health facility levels.



Number of children (6-59 months) that have been benefiting from ESO in Ethopia

Contributed by UNICEF, Kenya

Key message 7: Combating HIV/AIDS requires community-based strategies

Cambodia has demonstrated the value of community-based action on HIV/AIDS. Although the country has one of the highest prevalence rates in Asia and the Pacific, it has, along with Thailand, now reversed the spread of the infection. Since September 2003, Cambodia has been using a UNDP-developed package of participatory techniques known as Community Capacity Enhancement (CCE) which has proved very successful at generating commu-



nity responses. Villages where CCE has been implemented have experienced something of a breakthrough: people living with HIV and AIDS are now talking openly about their HIV status – and are publicly discussing taboos around sexuality and other socio-economic issues, such as gender inequality, domestic violence and poverty. As villagers understand the complex nature of the HIV/AIDS epidemic, they have overcome enduring stigma and discriminatory attitudes and are now providing

UN Photo/Evan Schneider tory attitudes and are now p care to those infected with HIV and are supporting the families affected by AIDS.

Ensuring that CCE remains cost-effective and sustainable, and scaling it up to new villages and communities, will required broader partnerships with key stakeholders. These include civil society organizations, NGOs, pagodas, commune councils and community-based organizations. It is also vital to strengthen links between the CCE process and local authorities – ensuring that demands raised by the communities, including vulnerable groups, people living with HIV and AIDS, and those affected by the HIV/AIDS, are integrated into local-level planning.



Environmental Sustainability

Millions of poor people rely for their livelihoods on natural resources and regard the natural environment as their ultimate source of welfare and security. Given the symbiotic relationship between ecosystem services and human well-being, stronger environmental protection is therefore vital not only for MDG 7, but for all the MDGs.

MDG7 now has an additional target – on biodiversity. This was agreed in 2002 by the World Summit for Sustainable Development, and then in 2005 by the Millennium+5 Summit. Countries now have to 'achieve by 2010 a significant reduction of the current rate of biodiversity loss at the global, regional and national level as a contribution to poverty alleviation and to the benefit of all life on Earth.'

Among the previous targets there remain major concerns about water supplies and sanitation. Currently, around one billion people lack access to safe drinking water. Although current trends suggest that the world may meet the target for drinking water there are huge disparities among and within regions. For example, in North Africa 92 per cent of people are using improved sources of drinking water, while in sub-Saharan Africa the proportion is only 58 per cent. Likewise, there are huge urban-rural disparities: in 2006, of people without access to improved drinking water sources more than 8 out 10 lived in rural areas.

The situation for sanitation is worse. Some 2.5 billion people lack access to basic sanitation services and many countries will miss their 2015 target. This has grave implications especially for women, and for girls who are denied their right to education because schools lack private and decent sanitation facilities. In 2006, seven out of ten people without improved sanitation lived in rural areas.

MDG 7 also addresses the situation of people living in slums – of whom 94 per cent live in developing regions. By 2020 their number is expected to increase to 1.4 billion. Slum dwellers represent more than one-third of the growing urban population in developing countries and in some regions a much higher proportion – in Africa 72 per cent.

Added to existing environmental problems, there is the growing threat of natural disasters, in particular, from climate change. The Human Development Report has warned that the world is drifting towards five climate-change induced 'tipping points' that could lock the world's poorest people into a downward spiral of reduced agricultural productivity, heightened water insecurity, increased exposure to extreme weather, the collapse of ecosystems, and amplified health risks. Failure to address climate change will thus further diminish the opportunities for the poorest 40 per cent of the world's population – 2.6 billion people.

Tackling climate change will mean looking closely at the relationship between economic growth and sustainable development to ensure that we can minimize climate change while meeting demands for food and energy. These links have been highlighted by the recent

surge in international oil prices which has forced many poor households to cut back on the their consumption of modern energy services or to revert to more time-intensive and health-damaging traditional biomass fuels.

Key message 8: Protecting the environment will require greater awareness and more effective public education

Schools have an important part to play in environmental education. For example, following the devastating Indian Ocean tsunami in 2004, UNESCO has been collaborating with UNICEF and the United Nations International Strategy for Disaster Reduction in a 'Disaster Risk Reduction Starts at School' campaign. This covers **China**, **India**, **Indonesia**, **Japan**, **Philippines**, **Sri Lanka**, **Thailand** and **Vanuatu**. In each country, national institutes have been analyzing policies, programmes, curricula and school-based activities and materials, and considering how disaster risk reduction can be integrated into teacher training and classroom activities.

Environmental protection can also be promoted through public-private partnerships. In Burkina Faso, for example, a public-private partnership from 2004 to 2006 helped improve basic services for poor communities in Bobo Dioulasso. This included better management of solid household refuse and waste water, along with improved drainage and better supplies of drinking water. The project was later expanded to four other urban communities.



UN Photo/Tim McKulka

Ghana too has improved access to safe drinking water and proper sanitation. As a result of an initiative supported by the government and UN-HABITAT, between 2003 and 2006 the proportion of urban households with safe drinking water increased from 86 to 91 per cent. Over the same period, the proportion with proper sanitation coverage increased from 62 to 82 per cent.

Senegal has also made substantial progress through its Millennium Programme for Safe Drinking Water and Sanitation. Social programmes have subsidised 140,000 new drinking water access points in poor urban neighbourhoods. As a result of these and other activities, between 1996 and 2006 access to safe water increased from around 80 to over 98 per cent, and water loss, principally from leakages, was reduced from 32 to 20 per cent. Moreover 830,000 people now have access to common and individual sewage and sanitation facilities. In 2008, the African Water Association identified Senegal as one of the 10 countries most likely to reach MDG 7.

Key message 9: Community and national actions can combine to ensure proper stakeholder consultation and funding for ecosystem enterprises



UN Photo/Martine Perret

UNDP has supported MDG-based energy needs assessments in a number of countries. Since 1996, the Rural Energy Development Programme in Nepal has installed over 100 micro-hydro schemes in 30 districts, supplying electricity to over 20,000 households, with a development benefit estimated at \$1.1 million each year. And in Tunisia UNDP has undertaken wind mapping to identify likely sites for turbines, while in parallel working with the national government and electricity grid operator to ensure that

private electricity producers can supply electricity to the grid.

UNDP has also been working with UNEP to help countries build poverty-environment linkages into national development planning processes, such as PRSPs and MDG Achievement Strategies, including budget processes and sector implementation programmes. The joint Poverty-Environment Initiative offers the necessary financial and technical support to ten countries: **Burkina Faso, Bhutan, Kenya, Mali, Mauritania, Mozambique, Rwanda, Tanzania, Uganda and Viet Nam**. Based on this experience, UNDP and UNEP are now working closely with key donors and other partners to expand the initiative to other countries and regions.



Global Partnership for Development

Governments have to finance MDG-related programmes primarily from their own resources. But, as MDG 8 emphasises, they should also be able to rely on support from international donors through a 'global partnership for development'. Some of this can arrive as aid for specific projects, but donors should also be prepared to give more general support to national budgets or for activities across whole sectors.

Contributing to the budget ensures that flows of overseas development assistance (ODA) follow national priorities. They will also be more transparent since national budgets are often debated by elected parliaments, and governments have to account to citizens for public expenditures. The proportion of ODA given as budgetary or sector support has been growing: between 2000 and 2005, it increased from 8 per cent to 20 per cent

International foundations, NGOs and other civil society groups cannot be expected to finance national budgets. Nevertheless they too should ensure they are responding to genuine national demand and are transparently recording their activities

Another option is the 'programme-based approach' (PBA). In this case a group of donors coordinate their support for locally planned development programmes. At present the Development Assistance Committee (DAC) of the OECD reports that around 46 per cent of aid supports PBAs. This proportion is set to increase. DAC members have set a target of 66 per cent by 2010. But even this would be insufficient to accelerate progress towards the MDGs. Instead donors should commit themselves to achieving 80 per cent through PBAs by 2012.

National budgets have come under greater strain as a result of rapid rises in prices of food and fuel and in future will have to cope with the impact of climate change. This makes it even more important to ensure that development finance not only increases substantially but is used as effectively as possible. Aid has a dual role. First, it can respond to humanitarian crises whether related to natural disasters or commodity price shocks. Second, it can contribute to long term international efforts, which should also seek opportunities to bring in private finance.

Governments and donors will increasingly find themselves investing in two broad areas: the long-standing development agenda and the new responses to climate change. Each reinforces the other. Financing development alone, without considering the requirements for mitigation and adaptation to climate change will turn out to be more costly; whilst focusing on climate change alone may threaten short-term growth and development.

In a world faced with multiple disaster-related catastrophes and global crises it will also be important to consider schemes for regional and global risk insurance. At present the world relies primarily on ad hoc responses – as seen in 2008 with the onset of rapidly rising food prices. These responses are often inefficient and slow and rely on the goodwill of the international community. Instead aid could also be used for providing incentives for, or partfinancing of, crisis-related insurance.

Key message 10: The international community should explore more flexible and innovative ways of financing development, using optimal mixes of public and private finance

One positive development is that ODA is coming from a more diverse range of countries, including those that in recent years have joined the European Union. **Poland**, for example, in 2004 launched a new campaign: 'Millennium Development Goals: time to help others!' and between 2003 and 2006 increased ODA from \$27 million to \$230 million. The Ministry of Foreign Affairs now also has regular annual funds for development education and awareness raising – which has help boost public support for Polish development cooperation.

During 2007-2008, the Polish campaign was complemented by a broader campaign in all 12 new member states of the European Union. **Latvia**, for example, increased its ODA funds for NGOs; the **Czech Republic** committed to increasing ODA; **Malta** announced its first national ODA strategy and established a special ODA unit. ODA has also become the subject of election campaigns in **Poland** and **Cyprus**, and the focus of major policy debates in **Bulgaria**, **Estonia**, **Malta**, and **Romania**.

One valuable use of aid is to aid to speed up the adoption of technologies that reduce common problems. This is one of the intentions of the **MDG Africa Steering Group**, an initiative launched by the UN Secretary-General Ban-ki Moon in partnership with the World Bank, the IMF, the African Union, the European Commission, the African Development Bank, the Islamic Development Bank, and the Organisation for Economic Co-operation and Development. The Group aims to strengthen implementation in five areas: health, education, agriculture and food security, infrastructure and statistical systems. It also aims to improve aid predictability and enhance country-level coordination. The Group has produced a list of recommendations, which, combined with policies to promote private-sector development and increase participation in trade, can reduce barriers to progress, take countries closer to achieving the MDGs and lay the foundation for robust economic growth.

There have also been other efforts to demonstrate the effectiveness of more appropriate ODA. UNDP, for example, in collaboration with the IMF and World Bank, has been developing scenarios that demonstrate the effectiveness and feasibility of using scaled-up ODA to reach the MDGs in 10 African countries: **Benin, Central African Republic, Ghana, Liberia, Niger, Rwanda, Sierra Leone, Tanzania, Togo** and **Zambia**.

Practices
ADG Good
nmary table: N
Summar

<u>ب</u>	Snapshots: Poverty & Hunger Impact Strong r 67,000 persons benefited from micro- Strong r credits, packaged with agricultural Strong r extension and business advisory services Bublic-p 250 new jobs created Public-p 26,000,000 square metres of agricultural Procus of land cleared from mines and unexploded 1and cleared from mines and unexploded Procus of land cleared from suth their families back to work. 18 schools cleared of ordance for 3,600 pupils Pack to school Yielded 400,000 kgs of high-value crops Partners Vielded at \$616,000 and created 300 jobs Partners Introduction of fish farming for poor Partners families Partners Introduction of fish farming for poor <	8	Hunger Key element(s) of success and "replicability" Strong network with 110 community-based organizations (CBOs) for service delivery CBOs played a key role in capacity development in procurement and planning Public-private partnership: the private sector provided financial support as well as technical/operational support. Creation of a replicable rural micro-finance module. Focus on building technical and management capacity of Iraqis. Clearance based on socioeconomic needs. Strong buy-in from the local community and government. Identification of pockets of poverty Technical training to local farmers Partnerships with leading entrepreneurs, including supermarkets, to enhance marketing of products.
Ir Georgia/Capacity Building: Ir Food for Work d d d i in the food for Work be	Increased local food production and beneficiaries' access to land plots through rehabilitation of irrigation channels, drainage channels, and arable land and installation and rehabilitation of water pipelines		Community members were involved in the management process Provision of phased support – communities are eligible to WFP support only after demonstrating commitment to good management

Iraq /Reconstruction and Employment Programme	More than 131,900 people were employed in 17 out of 18 governorates, in water, sanitation, agriculture, environment, electricity, education and enhancement of municipal services	Partnership with private companies to oversee activities to cope with the limited presence on the ground due to the security situation
Syria/Rural Community Development	Disbursement of 12,000 loans – 43 per cent to women. More than 1,000 jobs were created, improving the income of beneficiaries by an average of 20 per cent .	 Integrated approach to micro-finance Local ownership Engagement of women in all stages of decision making: in local village development committees, marketing committees, and illiteracy elimination classes Establishing kindergartens to support working women Islamic lending procedures: the project was the first to introduce such lending in the country and could be replicated in other areas.
Namibia/Transitioning Orphans and Vulnerable Children (OVC) from Food Assistance to National Safety Net Programmes	The Government has significantly increased coverage of child welfare grants in the six programme regions. Between 2006 and 2008 they increased from 28,000 68,482.	 Strong partnerships between the Government, WFP and NGO implementing partners Capacity development in social protection and designing an exit strategy
Cameroon, Cape Verde, Ghana, Guinea, Malawi, Mauritania, Mozambique, Tanzania/smallholder productivity improvement	Has benefited around 19,000 farmers and a total of 95,000 people. Overall 158,000 people benefited in eight African countries assisted by the African Development Bank over an average period of 5 years.	 Most of the technologies adopted by farmers were low cost Availability of good practices has prompted African countries to formulate food security action plan at national level along four dimension of food security: increased production at household level; improved access for the most vulnerable groups; better nutrition education; and long term stability of food security.

Niger, Burkina Faso and Mali/Small Scale Irrigation Schemes	In each country, 10,000 to 15,000 small farmers have benefited directly, while 20,000 to 35,000 people have benefited indirectly. Participating farmers have crop yields and revenues with quarterly net benefits of \$2,000 to \$3,000. In Burkina Faso the government developed a national small-scale irrigation programm. In Mali and Niger the schemes and emphasized small-scale irrigation.	• •	Government commitment and participatory approach Appropriate technology at low cost and locally manageable by small farmers.
Nigeria/ Village-by-Village Food Security Programme	785,000 food- insecure households were reached		Sustained high-level commitment at all levels – federal, state and local Participatory approach at all phases of the cycle Decentralized implementation strategy making efficient use of staff Extending a technical package that include appropriate and adapted technologies Extensive use of several hundred Chinese technicians; Involving the private sector, including dealers and private banks

Snapshots: Gender	Impact Key element(s) of success and "replicability"	The Tianjin Women Federation established in The Microfinance and Business Incubation model disseminated partnerships with municipal line bureaus for employment network and tax exemption, and with the City Commercial Bank for extenind micro-loans to laid-off women workers. The Microfinance and Business Incubation model disseminated through high- level national conferences and a series of media advocacy activities. 	UNICEF has been working with the Government of India, health partners and donors to reduce maternal mortality. The Women's Right for Life and Health Project aims to ensure that women and their children, especially among the poorest communities receive adequate health care. Over the last four years in Rajasthan, for example, the per centage of deliveries assisted by skilled personnel has increased.	 27,000 elected women councilors were trained Strong government ownership and partnerships with civil society in tools and techniques to perform effectively as Development of a widely-used six-part curriculum that addresses politicians. Development of a widely-used six-part curriculum that addresses a series of issues: gender sensitivity; agenda setting; constituency servicing; advocacy; budgeting, and executive-legislative relations. Gender-disaggregated data on civil service employment Gender sensitization modules within the curriculum for the promotion of civil servants
		The Tianjin Women Federat partnerships with municipa employment network and t the City Commercial Bank fi to laid-off women workers.	UNICEF has beel of India, health p maternal mortal and Health Proje and their childre communities re the last four yea centage of deliv has increased.	27,000 elected v in tools and tech politicians.
	Country/title	China/Re- employment for Laid-off Women Workers	India/Women's Right for Life and Health Project	Pakistan/ Gender Support Programme

d Health	Key element(s) of success and "replicability"	Good coordination with the Governors' offices which provided accurate and timely information to WFP. The Food-For-Work programme was linked with Food-For- Education and helped many schools build the infrastructure required for the Food-For-Education programme.	Policy development support – gender audit, girls' education strategy Strong advocacy support – mobilizing a range of media at national, district and community levels Encouraged the development of Education Watch Groups at district level for civil society oversight of system	Build on existing health system Focus on high impact evidence based intervention packages Focus on community-based and outreach approches Leverage national health policies (particularly on free or affordable LLIN distribution, community-based management of fever and pneumonia, Intermittent presumptive treatment against malaria)
Snapshots: Education and Health	Impact	Increased pre-school education and ration delivery	In 2005, an additional 473,000 children were enroled of whom 270,000 were girls. The increase in grade one enrollment was approximately 21 per cent.	Under-five mortality ropped by an estimated 25, 21, 17 and 16 per cent in districts in Senegal, Mali, Ghana and Benin. It dropped by 10 to 14 per cent in selected districts in Guinea, Guinea Bissau , Burkina Faso and Chad; and between 5 and 10 per cent in districts in Cameroon, Niger, Gambia, Benin and Ghana where the initiative was partially implemented
	Country/title	Food-For-Education in Armenia: Sustainability and Community Participation, Pre- School Education, and Ration Delivery	Nepal/Welcome to School (WTS) Initiative	11 Countries in West and Central Africa (Ghana, Guinea, Guinea Bissau, Burkina Faso, Chad, Cameroon, Niger, Gambia, Benin, Senegal and Mali)/accelerated Child Survival and Development

Enhanced Outreach Strategy (EOS) and Targeted Supplementary Feeding (TSF) for Child Survival in Ethiopia	In 2006, around 6 million children received two doses of vitamin A supplementation and 5.2 million children were de-wormed. Community-focused preventive health and nutrition services provided every six months in nearly 50 per cent of the country reaching close to 7 million children under-five and 1.6 million pregnant women and lactating women	 Improved health support though the provision of Vitamin A supplementation, de-worming, measles vaccination, Long-lasting insecticidal Net (LLIN) distribution for malaria prevention, and treatment of severe acute malnutrition. Health, nutrition and hygiene education is fully integrated
Thailand/Global Fund Strengthening National Prevention and Care of HIV/AIDS	1,320,690 youths received sexual health and HIV/AIDS education, and more than 80,000 AIDS patients received antiretroviral therapy. 26,283,488 condoms have been distributed via free distribution and social marketing. 4,416 orphans and vulnerable children received support from faith- based organizations	 Strong involvement of people living with HIV/AIDS and the development of a community based care system. Policy advocacy and resource mobilization in local level leads to the successful integration with the existing system
Rwanda/Community Health Insurance Scheme	Enrollment in the Community Health Insurance scheme has grown from 7 per cent in 2003, 27 per cent in 2004, 41 per cent in 2005 to 74 per cent in 2007. Infant mortality fell from 107/1,000 in 2000 to 86/1,000 in 2005. Under-five mortality fell from 196/1,000 in 2000 to 152/1,000 in 2005. Maternal mortality decreased from 1071/100,000 in 2000 to 750/100,000 in 2003 to 42 per cent on 2006	 Celar policy and institutional framework. Community based insurance has been put in a place and a legal framework making membership mandatory has been instituted A national-level institutional mechanism has created the coordination and management capacity at needed to ensure a harmonized, nation-wide system of mutual health insurance.
Bangladesh/Safe Blood Transfusion Project	All hospitals from district level upwards were equipped for screening blood for HIV/AIDS, syphilis, malaria, and hepatitis. An essential service was available at local level for the general public at no cost	 Service providers need to be given refresher training at regular intervals. The services can be integrated into the regular government budget.

It is crucial to recruit facilitators from the communities who are respected by the villagers and who represent diverse backgrounds. A monitoring report system must be set up with logbooks, consisting of a one-page, user-friendly reporting format which can be filled by communities. This should be maintained by a key community leader such as a village chief, teacher, or a facilitator. Broader partnerships with community-based organizations, are important to ensure sustainability and cost effectiveness of CCE, as well as to scale-up to new villages and communities.	inability	Key element(s) of success and "replicability"	Ensure political commitment for the concepts of ENDP to be integrated into school curricula and to provide relevant information to various stakeholders as well as to facilitate the information's accessibility and utilization.
Increased awareness of the complex nature of HIV/AIDS • and better understanding to reduce social stigma • • • •	Snapshots: Environmental Sustainability	Impact	Build resilience of communities to ensure that development achieved in various social sectors is not undermined by disaster vulnerability. Countries' selection was done on the basis of geographical location, population and exposure to natural disasters. A mapped understanding of ongoing and projected natural disaster preparedness-related activities within each participating country. A directory of contact information and focal points for persons/organizations relevant to ENDP. A situational analysis of ENDP in schools and disaster management activities A curriculum recommendation document for the integration of ENDP into school curricula
nd be			
Cambodia/ Ir Community a Capacity Enhancement to Support Cambodia's HIV and AIDS Response Response		Country/title	China, India, Indonesia, Japan, Philippines, Sri Lanka, Thailand and Vanuatu /Education for Natural Disaster Preparedness (ENDP) in the context of Education for Sustainable Development

Botswana, Tanzania, Zambia, Zimbabwe /Sustainable Integrated Management and Development of Arid and Semi-Arid Regions of Southern Africa (SIMDAS): Towards long term sustainable ecosystem management in the headstreams of arid/semi arid southern Africa

Quantified past and present development of land-cover ecosystem trends (including land-water interactions) in southern African headstreams in order to facilitate international (transboundary) decision-making pertaining to long-term sustainable management and poverty alleviation.

The project made a special contribution to reaching the MDG 7, the goals of the International Decade for Action 'Water for Life' (2005-2015) and the UN Decade Education for Sustainable Development' (2005-2014). Improved national policies and strategies for the water sector, supporting PRSP processes. Improved institutional and regulatory framework in participating Enhanced the management of transboundary basins through its support of the regional priorities of the AU-NEPAD action plans. Enhanced regional networking and the capacity of regional professional to accomplish IWRM objectives.

countries.

- Long'term monitoring strategies can be set up with the help of community involvement, SADC- wide databases can be established with interactive and comparable datasets, including rates of change under specific conditions which can provide a basis for the predictive modeling of catchment change for other areas.
- Strengthened the capacity of stakeholders who will be better able to effect sustainable implementation and management of land/water related issues

Africa (Burkina Faso, Kenya, Mali, Mauritania, Mozambique, Rwanda, Tanzania, Uganda)Provides capaci mainstream en mainstream en mainstream en in developmen such as MDG-b- and Asia (Bhutan and vietnam)Provides capaci mainstream en mainstream en mainstream en in developmen and Asia (Bhutan and vietnam)and Asia and Asia (Bhutan and Vietnam)Provides capaci mainstream en such as MDG-b- account of the account of the uchasid vieto capacity develo capacity develo	Americas and the Caribbean/UNESCO IHP- Project WET/Water and Education Programme on rising aware water and envi implemented b	Senegal/Millennium1.6 million people hProgramme for Safesafe drinking waterDrinking Water andSanitation in urbarSanitation Facilitiesadditional 830,000Sanitation Facilitiessewage systems or
Provides capacity building to governments to enable them to mainstream environment effectively. Targets key entry points in development planning and implementation processes, such as MDG-based national development strategies – taking account of the political and governance factors that underlie capacity development needs and priorities. Supports governments in their efforts to follow a programmatic approach to environmental mainstreaming – from diagnosis and analysis to developing policy options and meeting the challenge of financing and implementation.	At present the programme is being implemented in Argentina, Chile, Mexico, Guatemala, Panama, Costa Rica, Jamaica and Uruguay. Also the first steps have been taken for its implementation in Colombia. The Water and Education Programme aims at building new cultural patterns focused on rising awareness on the importance of the protection of water and environment through an educational programme implemented by teachers with children at schools.	 6 million people have benefited from reliable access to safe drinking water Sanitation in urban areas has improved with an additional 830,000 people having access to common sewage systems or individual sanitation facilities.
In order to coordinate and support the scale-up of the PEI, UNDP and UNEP have set up a joint Facility based in Nairobi in May 2007. The Facility will provide strategic direction for the PEI scale-up, coordinate relations with the donors, expand technical support and access to knowledge on poverty-environment mainstreaming to the UNDP-UNEP regional teams and the participating countries. To support the PEI scale-up process in Africa, UNDP and UNEP have formed an expanded PEI regional team. Over the period 2007-2012, the target is to secure funding for a scaled-up PEI Regional Support Programme that would support additional 8-10 countries.	Involving both teachers and water specialists in the elaboration of the didactic materials has ensured positive results in the adoption and applicability of the methodology with children. The commitment through the IHP National Committees has ensured the expansion of the programme in the region.	A National Roundtable has enabled an in-depth and participative analysis on safe drinking water, as well as mobilising the necessary financial support for the implementation of the programme until 2015.

Key element(s) of success and "replicability"	Growing Sustainable Business initiative has worked with local farmers on improved harvesting, marketing and pest management procedures which may benefit other initiatives and production areas.	Absolutely crucial to involve national partners at the forefront of the activities – for example NGOs were organizers of 12 parliamentary debates Smaller institutions and informal groups such as students like to carry out their own activities under a greater umbrella of UN and UNDP, even if UNDP is not providing them any financial support. Important to be brave and innovative – as with the message that "Poland is a Paradise", which was really provocative
Impact Key elemen	 Reduce poverty and extend services to underdeveloped areas. UNDP helped to establish 10 partnership projects to help improve business and livelihoods. Kevian a juice manufacturer used to imported mango concentrates of from abroad, while Kenyan rotted on the ground due to poor harvesting and marketing systems. Kenya's 10 Growing Sustainable Business initiative projects are expected to generate over \$70 million in additional revenues and create thousands of jobs, reaching an estimated 42,000 beneficiaries. 	 Polish ODA increased from \$27 million in 2003 up to \$230 million 2006 Czech Republic follow-up commitment to increase ODA For first time development cooperation was discussed at high level in Malta, Estonia, Romania and Bulgaria For the first time MDGs became a part of election campaigns – in Poland (parliamentary elections) and in Cyprus (presidential elections)
Country/title	Kenya/ Growing Sustainable Business Initiative	UNDP Poland and Bratislava/ EC/"lt's time to help others!" in all 12 new member states of the European Union

Snapshots: Global Partnership for Development

Countervisitela	Snapshots: Cross-Cutting Issues	الامتدامينية المتحموم من عن المالية المناسبة المالية المالية المالية المالية المالية المالية المالية المالية ال
Country/title	Impact	Key element(s) of success and "replicability"
Albania/Localizing MDG (Cross- cutting)	Regional MDG reports (baseline MDG reports and MDR based local development strategies) developed and approved in all 12 regions of the country. Local policy makers and a broad public on regional level became aware of the importance of MDGs for local development and local MDG development agendas.	 Extensive facilitation of the process of the development of the reports and strategies, including MDG advocacy tours, expert support, local capacity building, training, etc. Support local officials to oversee the process and to strengthen key skills, including how to communicate about the MDGs, set targets, facilitate discussions on establishing development goals, and arrive at consensus. Support ocal governments and Regional Councils in their consultation processes with local stakeholders.
Brazil/ MDG Advocacy and Outreach National Campaign (Cross-cutting)	The legacy of the campaign quite impressive: two national MDGs reports (the first one in Portuguese and English); the first sub-national level MDG report to be published in the world; over 7,000 key municipal officials (mayors and senior officials) trained; production and dissemination of the first public management municipal library ever produced in Brazil. On resource mobilization impact, the campaign was able to catalyze numerous initiatives throughout the country. PETROBRAS, a national oil company, reoriented its social responsibility budget (over \$150 million in 3 years) towards MDG-based initiatives.	 Awareness of the MDGs (all 8 MDGs, as well as the overall concept of setting social time-bound targets), while also encouraging a debate on how to best adapt the MDGs to Brazilian conditions. Improved national capacity to monitor and report on the MDGs on a regular basis. Articulated the globally defined targets and the national commitments within local (state, municipal and even community-based) initiatives, including by executing strategic initiatives that bring the commitment to achieve the MDGs down to sub-national levels; and mobilized resources towards achievement of the MDGs.

	Many other large corporations, along with medium and even small ones, follow the same pattern. In addition, the large NGOs operating in the country established initiatives to contribute towards the MDGs, bringing their technical expertise, networks and other resources.	
Sri Lanka/MDG-Based National Budgets (Cross-cutting)	Budget is pro poor and responds to the aspirations of strategically significant segments of the population, including the rural poor, small and medium-scale entrepreneurs and the general private-sector community, and communities in tsunami and conflict- affected areas.	 Gender budget analysis and gender equitable budget formulation All concerned Ministries and Agencies are required to recognize their roles and responsibilities in meeting the MDGs and to reflect these in their respective budget proposals. To reflect MDGs in the budgets, the Ministries are classified into nine sectors such as Pro-Poor Growth and Regional Development, Human Resource Development, Infrastructure Development, Production and Services and Social Protection.
Tajikistan/MDG Needs Assessment (Cross-cutting)	The assessment revealed a \$4.7 billion financing gap, suggesting the magnitude of the external financing that Tajikistan needs.	 Strong national ownership of needs assessment process and its results. Access to relatively good quality data Good analytical capacity of local experts.

Dramatically increased farm production while enhancing the environment through agro-forestry techniques.
Reduced malnutrition and increased access to anti- retroviral medicines.
Improved access to water and fuel wood, accessible clinics, mills for grain, and trucking and ambulance services, hence relieving burdens on women.
Increased school attendance
Reduced malaria case by insecticide-treated bed net and lower incidence of common diseases through immunization.
Increased access to safe water and energy through Innovative off-grid energy, water, and information technologies.

Table 1: Millennium Development Goals (MDGs) ¹	
Goals and Targets (from the Millennium Declaration)	Indicators for monitoring progress
Goal 1: Eradicate extreme poverty and hunger	
Target 1.A: Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day	 Proportion of population below \$1 (PPP) per dayⁱ Poverty gap ratio Share of poorest quintile in national consump- tion
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 who suffer from hunger	 Prevalence of underweight children under-five years of age Proportion of population below minimum level of dietary energy consumption
Goal 2: Achieve universal primary education	
Target 2.A: Ensure that, by 2015, children ev- erywhere, boys and girls alike, will be able to complete a full course of 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 empo	wer women
Target 3.A: Eliminate gender disparity in pri- mary and 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
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: Improve maternal health	
Target 5.A: Reduce by three quarters, be- tween 1990 and 2015, the maternal mortality ratio	5.1 Maternal mortality ratio5.2 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 one visit and at least four visits) 5.6 Unmet need for family planning
Goal 6: Combat HIV/AIDS, malaria and othe	er 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 years 6.2 Condom use at last high-risk sex 6.3 Proportion of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS 6.4 Ratio of school attendance of orphans to school attendance of non-orphans aged 10-14 years
Target 6.B: Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it	6.5 Proportion of population with advanced HIV infection with access to antiretroviral drugs
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 directly observed treatment short course
Goal 7: Ensure environmental sustainability	
Target 7.A: Integrate the principles of sustain- able development into country policies and programmes and reverse the loss of environ- mental resources Target 7.B: Reduce biodiversity loss, achiev- ing, 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
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 source7.9 Proportion of population using an improved sanitation facility
Target 7.D: By 2020, to have achieved a sig- nificant improvement in the lives of at least 100 million slum dwellers	7.10 Proportion of urban population living in slums ⁱⁱ

Goal 8: Develop a global partnership for development

Target 8.A: Develop further an open, rulebased, 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 the special needs of the least developed countries

Includes: tariff and quota free access for the least developed countries' exports; enhanced programme of debt relief for heavily indebted poor countries (HIPC) and cancellation of official bilateral debt; and more generous ODA for countries committed to poverty reduction

Target 8.C: Address the special needs of landlocked developing countries and small island developing States (through the Programme of Action for the Sustainable Development of Small Island Developing States and the outcome of the twenty-second special session of the General Assembly)

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

Target 8.E: In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries Some of the indicators listed below are monitored separately for the least developed countries (LDCs), Africa, landlocked developing countries and small island developing States.

Official development assistance (ODA)

- 8.1 Net ODA, total and to the least developed countries, 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, primary health care, nutrition, safe 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 Market access

- 8.6 Proportion of total developed country imports (by value and excluding arms) 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 number of countries that have reached their HIPC decision points and number that have reached their HIPC completion points (cumulative)
- 8.11 Debt relief committed under HIPC and MDRI Initiatives
- 8.12 Debt service as a percentage of exports of goods and services

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 Telephone lines per 100 population8.15 Cellular subscribers per 100 population8.16 Internet users per 100 population

The Millennium Development Goals and targets come from the Millennium Declaration, signed by 189 countries, including 147 heads of State and Government, in September 2000 (http://www.un.org/millennium/declaration/ares552e.htm) and from further agreement by member states at the 2005 World Summit (Resolution adopted by the General Assembly - A/ RES/60/1, http://www.un.org/Docs/journal/asp/ws.asp?m=A/RES/60/1). The goals and targets are interrelated and should be seen as a whole. They represent a partnership between the developed countries and the developing countries "to create an environment – at the national and global levels alike – which is conducive to development and the elimination of poverty".

¹ Available from http://mdgs.un.org/unsd/mdg/Host.aspx?Content=Indicators/OfficialList.htm

ⁱ For monitoring country poverty trends, indicators based on national poverty lines should be used, where available.

ⁱⁱ The actual proportion of people living in slums is measured by a proxy, represented by the urban population living in households with at least one of the four characteristics: (a) lack of access to improved water supply; (b) lack of access to improved sanitation; (c) overcrowding (3 or more persons per room); and (d) dwellings made of non-durable material.

Editor: Peter Stalker Core Research Team: Hideko Hadzialic, Renata Rubian, and Phoram Shah Designer: Gayan Peiris

Acknowledgments

The core research team for this publication would like to acknowledge and thank the inputs and advice received from the following: Adam Rogers, Aladeen Shawa, Aldo Natalizia, Ana Rosa Monteiro Soares, Andre M. Twigg, Auke Lootsma, Balakrishna Pisupati, Baton Osmani, Chiara Pace, Christopher Hutton, Claudia Vinay, Daniele Geltz, Ellen Houston, Ekaterina Paniklova, Fatima Elsheikh, Fewdays Lwando, Givaja Gautier, Guy Dionne, Haile Gebru, Hussin Serhan, leva Lazareviciute, Issa Sanogo, Jacek Cukrowski, Jennifer Gibson, John Karlsrud, Joshua Chaffin, Kent Paulusson, Khalid M Khalid, Khatuna Epremidze, Kodjo Esseim Mensah-Abrampa, Lianna Karatyan, Lionel Laurens, Luis Gradiz, Maha El-Adawy, Malin Herwig, Marielza Oliveira, Martin Stürmer, Mary-Ellen McGroarty, Mio Yokota, Mohammad Yonus , Naoko Takasu, Nguyen Thi Ngoc Van, Nicoletta Feruglio, Norma Garcia, Omer Abdelhameed, Paola Deda, Paola Storchi, Parviz Fartash, Patrick Haverman, Paul Ladd, Peggy Nelson, Peter Stalker, Rie Debabrata, Robert Pollock, Roger Shotton, Ronald McGill, Saad Al-Kadhimi, Salil Shetty, Sinan Shakir, Sumon Tuladhar, Shadin Goussous,Thomas Keusters, Tuya Altangerel, Xuesong Shen, Yassine Fall, Yoriko Yasukawa, Zena Ali-Ahmad, Zero Akyol and the MDG Monitor.

Disclaimer

The findings, interpretations, and conclusions expressed in this publication do not reflect the official policy of UN agencies, funds and programmes, and governments.

This paper draws facts and data from the *Millennium Development Goals Report 2008* and the UN Secretary-General Background Paper *Committing to Action: achieving the Millennium Development Goals* (0840768/E) issued for the occasion of the High-Level Event on MDGs.

Cover photo by UN Photo/Tim McKulka

The text and data in this publication may be reproduced as long as the source is cited. Reproductions for commercial purposes are forbidden.

First published on September 2008.



















For further information contact:

UNDG MDG Policy Network United Nations Development Programme Bureau for Development and Policy 304 East 45th Street 10th floor New York, NY 10017 USA www.mdg-gateway.org