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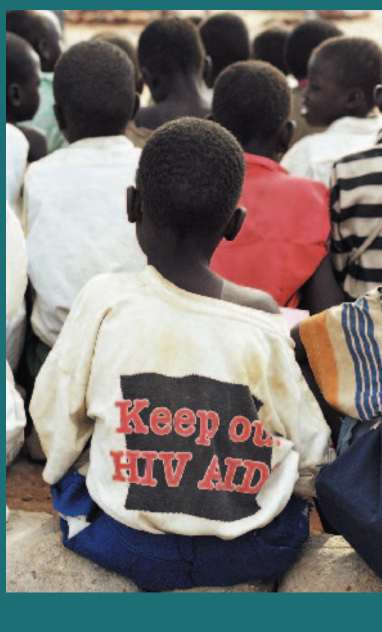
Achieve universal primary education
Ensure environmental sustainability
Reduce child mortality
Develop a global partnership for development
Ensure environmental sustainability
Improve maternal health

Breaking with Business as Usual

Perspectives from Civil Society in the Commonwealth on the Millennium Development Goals



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Tel: +44 (0)20 7930 3783
Fax: +44 (0)20 7839 8157
E-mail: geninfo@commonwealth.int
Website: www.commonwealthfoundation.com

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Breaking with Business as Usual

Perspectives from Civil Society in the Commonwealth on the Millennium Development Goals

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Commonwealth Foundation
August 2005

Contents

List of Abbreviations

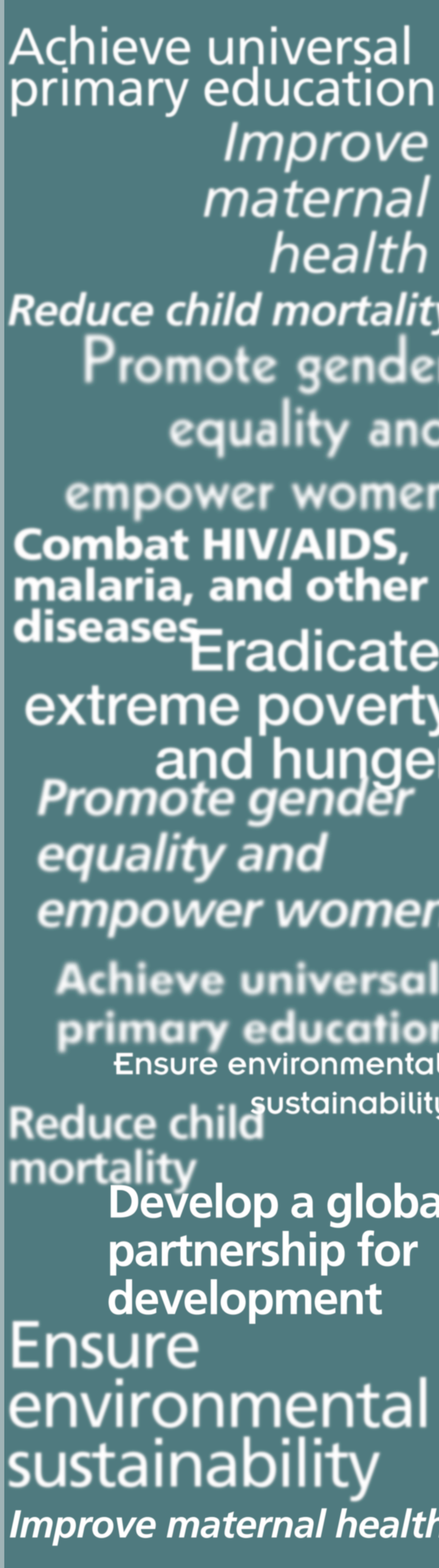
ACFID	Australian Council for International Development
ACORD	Agency for Co-operation and Research in Development
ACP	African, Caribbean and Pacific Group of States
AFRC	Armed Forces Rehabilitation Council (Sierra Leone)
AFRODAD	African Forum and Network on Debt and Development
AusAID	Australian Agency for International Development
BOND	British Overseas NGOs for Development
CAFOD	Catholic Agency for Overseas Development (UK)
CAP	Common Agricultural Policy
CARICOM	Caribbean Community
CAS	Country Assistance Strategy
CBO	Community-based organisation
CCIC	Canadian Council for International Co-operation
CEDAW	Convention on the Elimination of All Forms of Discrimination Against Women
CFC	Chlorofluorocarbon
CID	Council for International Development (New Zealand)
CIDA	Canadian International Development Agency
CIDSE	Coopération Internationale pour le Développement et la Solidarité
CPIA	Country Policy and Institutional Assessment
CSO	Civil society organisation
DAC	Development Assistance Committee
DFID	Department for International Development (UK)
EC	Eastern Caribbean
EC	European Commission
EITI	Extractive Industries Transparency Initiative
EPA	Economic Partnership Agreement
EU	European Union
Eurodad	European Network on Debt and Development
FBO	Faith-based organisation
FDI	Foreign direct investment
FFD	Financing for Development
G7	Group of Seven nations
G8	Group of Eight nations
GATS	General Agreement on Trade in Services
GCAP	Global Call to Action Against Poverty
GNI	Gross national income
GNP	Gross national product
HDI	Human Development Index
HIPC	Heavily Indebted Poor Country
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome
ICT	Information and communication technologies
IDA	International Development Association
IFF	International Finance Facility
IFI	International financial institution
IMF	International Monetary Fund
JLI	Joint Learning Initiative
LDC	Least developed country
LIC	Low-income country
LRA	Lord's Resistance Army (Uganda)
MDGs	Millennium Development Goals
NCRRR	National Commission for Resettlement, Rehabilitation and Re-integration (Sierra Leone)
NGO	Non-governmental organisation
NPRC	National Provisional Ruling Council (Sierra Leone)
NZ	New Zealand
NZAID	New Zealand Agency for International Development
ODA	Overseas development assistance
ODI	Overseas Development Institute
OECD	Organisation for Economic Co-operation and Development
PANCAP	Pan Caribbean Partnership Against AIDS
PNG	Papua New Guinea
PRGF	Poverty Reduction and Growth Facility
PRS	Poverty Reduction Strategy
PRSP	Poverty Reduction Strategy Paper
RUF	Revolutionary United Front (Sierra Leone)
SAP	Structural Adjustment Programme
SAPRI	Structural Adjustment Participatory Review Initiative
SAPRIN	Structural Adjustment Participatory Review International Network
SARS	Severe acute respiratory syndrome
SIDS	Small island developing states
SIPRI	Stockholm International Peace Research Institute
TRIPS	Trade-related aspects of International Property Rights
UAC	Uganda AIDS Commission
UK	United Kingdom
UN	United Nations
UNCTAD	United Nations Conference on Trade and Development
UNDP	United Nations Development Programme
UNESCO	United Nations Educational, Scientific and Cultural Organisation
UNICEF	United Nations Children's Fund
UPE	Universal primary education
US	United States of America
WHO	World Health Organisation
WTO	World Trade Organisation

Introduction

The Millennium Development Goals (MDGs) were never about revolution. Indeed, it is one of the frustrations of many civil society organisations that the MDGs make no effort to challenge the neo-liberal orthodoxies of trade policies or debt and aid conditionalities, but instead seek to modify some of their deleterious effects. Even though the goals arguably address the disease of poverty rather than its cause, they are currently the biggest show in town. Sustainable and long term success in eradicating poverty, rather than halving it, will depend upon a more searching analysis, but civil society has thrown its weight behind the goals in many ways. Campaigns such as the Global Call to Action Against Poverty present a bold public commitment, but it should not be forgotten that civil society organisations are at the cutting edge of delivering the goals on the ground. Through rural and environmental health schemes, education programmes and many other activities, partnerships between civil society and governments are a powerful force for change. In this report, experienced civil society practitioners point out the constraints on progress, and the way forward.

The MDGs emerged out of the United Nations system, as a means of actualising the commitment of the UN Millennium Declaration[1], agreed by world leaders at the Millennium Summit in 2000. Now, five years later, they are in focus as world leaders meet to assess progress on the goals, their targets and indicators, and seek to strengthen the systems supporting their attainment.

1 *For a copy of the United Nations Millennium Declaration [A/RES/55/2] see the Resource Section of the CD Rom Breaking with Business as Usual: Civil Society Country Reports on the Millennium Development Goals or go to http://www.un.org/millennium/declaration/ares552e.pdf*



Box 1 The Millennium Development Goals

Goal 1 Eradicate extreme poverty and hunger

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

Target 2. Halve, between 1990 and 2015, the proportion of people who suffer from hunger

Goal 2 Achieve universal primary education

Target 3. Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling

Goal 3 Promote gender equality and empower women

Target 4. Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015

Goal 4 Reduce child mortality

Target 5. Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate

Goal 5 Improve maternal health

Target 6. Reduce by three-quarters, between 1990 and 2015, the maternal mortality ratio

Goal 6 Combat HIV/AIDS, malaria, and other diseases

Target 7. Have halted by 2015 and begun to reverse the spread of HIV/AIDS

Target 8. Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases

Goal 7 Ensure environmental sustainability

Target 9. Integrate the principles of sustainable development into country policies and programmess and reverse the loss of environmental resources

Target 10. Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation

Target 11. Have achieved by 2020 a significant improvement in the lives of at least 100 million slum dwellers

Goal 8 Develop a global partnership for development

Target 12. Develop further an open, rule-based, predictable, nondiscriminatory trading and financial system (includes a commitment to good governance, development, and poverty reduction (both nationally and internationally)

Target 13. Address the special needs of the Least Developed Countries (includes tariff- and quota-free access for Least Developed Countries' exports, enhanced program of debt relief for heavily indebted poor countries [HIPCs] and cancellation of official bilateral debt, and more generous official development assistance for countries committed to poverty reduction)

Target 14. Address the special needs of landlocked developing countries and small island developing states (through the Program of Action for the Sustainable Development of Small Island Developing States and 22nd General Assembly provisions)

Target 15. 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 16. n cooperation with developing countries, develop and implement strategies for decent and productive work for youth

Target 17. In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries

Target 18. In cooperation with the private sector, make available the benefits of new technologies, especially information and communications technologies

Incorporating civil society perspectives

Breaking with Business as Usual: Perspectives from Civil Society in the Commonwealth on the Millennium Development Goals is a contribution to the process of assessment and enhancement. Through its seven chapters, this report provides a look at the global realities through the multifaceted lens of the Commonwealth and offers pointers to the way forward. It draws on the perspectives, experiences and analysis of civil society. Civil society analysis - often rooted in the realities of their situation - can provide a valuable counterpoise to official rhetoric at both national and international levels. Against this backdrop, the report's chapters have been informed by 14 country papers prepared by local civil society activists and researchers, which are available on a companion CD Rom.

Box 2 **National Reports on the Millennium Development Goals**

Asia

1. **A Civil Society Perspective on the Millennium Development Goals and the Poverty Reduction Strategy Paper: The Case of Pakistan**
   Ahmed Nawaz Hakro, Department of Economics, Qauid-I-Azam University and Mustafa Talpur, Action Aid Pakistan

2. **Sri Lanka National Paper on the Millennium Development Goals**
   Swarna Jayaweera, Centre for Women's Research

Caribbean

3. **Civil Society Perspectives on Attaining the Millennium Development Goals in the National Context of Grenada.**
   Aaron Moses, Grenada Community Development Agency

4. **The Millennium Development Goals: Whey Wi Seh (What We Say)! The Jamaica Civil Society Report**
   Joan Grant-Cummings, Coalition for Community Participation in Governance

5. **Broth Without Any Bread. A Report on Civil Society Engagement with the Millennium Development Goals in Trinidad and Tobago**
   Dylis McDonald, Caribbean Association for Feminist Research and Action

East and Southern Africa

6. **People's Report on the Millennium Development Goals: The Case of Malawi**
   Collins Magalasi, Malawi Economic Justice Network

7. **A Rat Race Reality: Civil Society's Perspective on the Millennium Development Goals in Tanzania**
   Rehema Joseph Sameji, Social Watch Tanzania

8. **A Long Way to Go. Civil Society Perspectives on Progress, Opportunities and Challenges of Attaining the Millennium Development Goals (MDGs) in Uganda**
   Abby Sebina-Zziwa, Warren Nyamugasira and Arthur Larok, The Uganda National NGO Forum

9. **Towards Attaining the Millennium Development Goals: Zambia**
   Opa Kapijimpanga

Pacific

10. **Shadow Report on the New Zealand Government's Performance in Relation to Millennium Development Goal 8**
    Ewan Morris, Council for International Development

11. **People's Report on Progress Towards the Millennium Development Goals in Samoa**
    F. Mata'ese Elisara-La'ulu, O Le Siosiomaga Society Incorporated

West Africa

12. **The Millennium Development Goals (MDGs) in Cameroon: How Far from the Target in 2005? A Civil Society Perspective on the Progress and Challenges of Attaining the MDGs**
    Martin Tsounkeu, Africa Development Interchange Network

13. **Analyses of Progress Towards the MDGs in Ghana: A Civil Society Perspective**
    Patrick Apoya A-engyuure, Community Partnerships for Health and Development and Nicholas Adamtey, Integrated Social Development Centre

14. **How is Sierra Leone Moving Towards the UN Millennium Development Goals? Civil Society Makes a Critical Review**
    Abu Brima, Network Movement for Justice and Development

The country papers are based on official and civil society policy and strategy documents, research and reports, official statistics, interviews with government and civil society officials and focus group meetings. They draw together and compare official and wider societal perspectives on the MDGs and on the development contexts within which the goals are being pursued. They also consider the extent and context of civil society involvement, the level and success of partnership, and the internal or external challenges being faced. These country reports include inputs from a cross section of countries with varying characteristics - small states, middle income, Highly Indebted Poor Countries (HIPCs), developed countries - to give an indicative picture of what is happening in the Commonwealth and, by extension, around the world.

Taking account of the gritty assessments provided in the national civil society papers, the report focuses what needs to be done if the MDGs are to be achieved within the targeted timeframe; reflecting in title and content the need to break with 'business as usual', as highlighted by UN Secretary General Kofi Annan in his recent report *In larger freedom: towards development, security and human rights for all.* Mr Annan noted: *"... our agenda is still achievable globally and in most or even all countries - but only if we break with business as usual and dramatically accelerate and scale up action until 2015, beginning over the next 12 months."*

Overview of *Breaking with Business as Usual*

Breaking with Business as Usual: Perspectives from Civil Society in the Commonwealth on the Millennium Development Goals provides a snapshot as at 2005 of some of the issues and concerns shared by civil society organisations across the Commonwealth about current trends in progress towards the MDGs.

The report begins with an overview of progress towards the goals in the Commonwealth. Chapter 1 draws out from national reports by governments some of the common threads which link countries that are making good progress towards some or all of the MDGs. It also looks at some of the challenges to attainment of the goals and presents policy lessons from good practice across the Commonwealth. Chapter 2 assesses civil society perceptions of progress towards the MDGs and examines the role that CSOs can and do play in realising the goals. The chapter also identifies challenges and opportunities for enhanced civil society participation in delivering the agenda for the MDGs.

Chapters 3, 4 and 5 examine some of the variables - natural disasters, conflict and loss of human resource capacity respectively - that can affect MDG attainment and makes recommendations on how they can be factored into planning. Chapter 3 reflects on progress that Grenada, Sri Lanka and Zambia are making towards the MDGs, in the context of the natural disasters that have affected them recently. Chapter 4 draws on the experiences of Sierra Leone and northern Uganda to discuss the catch-22 whereby people living in situations of conflict are worst affected by the very issues of poverty, disease and unsustainable livelihoods that the MDGs seek to address, but the very conflict or post conflict context presents a major obstacle to the MDG agenda. Having adequate human resources is an important aspect of domestic capacity for meeting the MDGs, but as Chapter 5 highlights, emigration of skilled professionals and the HIV/AIDS epidemic threaten the human resource base of several developing Commonwealth countries, particularly in the areas of health and education. Without careful planning, the human resources and human development needed to meet the MDGs will be eroded.

Chapter 6 explores the integration of the MDGs and Poverty Reduction Strategy Papers (PRSPs) in national planning, drawing attention to the effects of the international financial institutions and their lending instruments and conditionalities on local ownership of the PRSPs and therefore on stakeholder commitment; the role of development aid; and the key role of civil society organisations.

The contributions of Commonwealth members of the Development Assistance Committee (DAC) to MDG 8, with particular emphasis on development assistance, trade and debt are assessed in Chapter 7. The chapter authors conclude that the rich countries of the Commonwealth have the potential to do much more, both individually and within their various spheres of influences.

What is needed?

The way forward, according to the report, lies in holding the donor countries to the letter and the spirit of their commitments and beginning to change the global systems assessed in Goal 8 - systems that interact with national policy, budgetary and trade frameworks and dictate international economic and power structures. It also demands a spirit of partnership between state and civil society towards poverty reduction and enhanced health, education, gender equity and environmental conditions. Progress that is grounded in fundamental change requires tackling, head on, systemic obstacles as well as sudden shocks, in addition to developing and financing integrated policies and programme that are informed by national priorities.

Selected Issues and Concerns

- The "poverty" which is the focus of the MDGs relates often only to the most poor, the "absolute" poor, and the relevant Goals deal with reducing the proportions by half. An unfortunately limited objective, if you happen to be in the "other half" or just a bit more affluent than US $1 or $2 per day. There is an urgent need to recast the enterprise in terms of reaching all the poor, combating inequality and utilising a frame work of human rights as the basis.
- Reaching the poor and combating inequality within a human rights framework requires moving from a single-minded emphasis on growth to a comprehensive approach of equity-building development. Equity goes beyond the distribution of income and wealth to

include the "creation of opportunities for development of human capital such as health, education and production... Policies that are good for equity are good for growth, and good for converting growth into poverty reduction" (p18). Some key win-lose growth policies, such as trade liberalisation, may be rejected not only in the event they are not expected to stimulate growth but also, even when they are expected to promote growth, because of their harmful impact on distribution. This is especially relevant where income is unevenly distributed, as in most of sub-Saharan Africa.[2]

- Joined-up policy making and implementation are essential for meeting the MDGs. The interconnectedness of the goals and their centrality to the development process means that lack of progress in one area can undermine gains in another. One of civil society's critiques of the goals is that the adoption of targets can distort and fragment policy. The MDGs should be integrated into national strategic plans, as part of an overall sustainable development strategy, and not be treated as separate objectives (p59).

  Some countries have integrated the MDGs into their national planning frameworks, including the PRSPs, but, "translating PRSPs and other national or regional plans and strategies into effective policies and programmes to tackle the various dimensions of poverty, has become a challenging task for many countries" (p21). The attainment of the Goals is "dependent on reconciling the power relations between national ownership and donor control of the PRSPs" (p103).

  Joined-up approaches also means that programmes in support of the MDGs need to incorporate assessments of vulnerability to risk as part of the planning process to ensure that natural disasters or external shocks do not disrupt gains (p56). The spectre of climate change threatens to undermine achievement of the MDGs. Unexpected shifts in agricultural productivity and disease distribution, increased flooding, drought and fire present challenges across the Commonwealth. Commonwealth nations need to assess their vulnerability and ability to adapt to these events, as well as contribute to mitigation targets.

  Similarly, the link between peace, security and development cannot be ignored in policy processes and in post-conflict and conflict prone contexts the "MDG targets and indicators must be re-examined to ensure they are responsive to the realities of conflict and conflict transitions... and require whole-of-government approaches" (p79).

- The scaling up of effort needed between 2005 and 2015 to meet the MDGs requires innovation and new ways of working. Partnerships provide opportunities for transparency and accountability as part of a good-governance agenda, and they can allow for innovation as well as new ways of doing business. Progress towards the MDGs are in no small measure due to the interventions of, or partnerships with, civil society and other stakeholders, but one of the requirements for acceleration of social development at national level, is stronger partnership with CSOs. The partnerships for HIV/AIDS in the Bahamas, Barbados, Jamaica and Uganda stand out as successful examples of how multi-stakeholder ventures can contribute to progress (p19).

  For CSOs to be effective partners in development broadly, and in the MDG project specifically, they need to be supported to do so. The environment in which they operate needs to facilitate and enable their work and proper functioning, and arrangements for civil society participation in policy and programme implementation processes have to be institutionalised (p45 - 46). Sierra Leone and Zambia are among the countries in which the MDGs have provided a platform for forging and strengthening government-civil society relations (p36). Commonwealth nations should do much more to recognise the importance of civil society in achieving the MDGs, and to help build the capacity of civil society through building legal frameworks for NGOs, training and financial support. The G8 nations agreed in July 2005 to double aid by 2010, but cost-benefit from this investment will be enhanced if civil society is strengthened in delivering programmes at the grassroots.

  At the international level, donor countries need to do their part to meet their responsibility to the MDG agenda as outlined in MDG 8 and its targets. It is generally accepted that more resources are needed to meet the MDGs, but the role of donor countries goes beyond committing additional (and much needed) resources. It extends to creating an enabling environment for economic growth within the developing world by squarely putting equity at the centre of the development paradigm. And in so doing, addressing concerns related to relief from crippling levels of debt and creating a fair trading environment, including market access for poor countries. In doing their bit, donors also need to support nationally

2 *See, for example, Schmidt, R., 2005. Poverty-reducing growth strategies in poor countries. Ottawa: The North-South Institute.*

driven development strategies, rather than impose external agendas or conditionalities.

- Donor policy and practice across the board need to support rather than undermine the agenda for the MDGs. This calls for coherence between the development assistance and other national polices of donor countries as well as coherence between their domestic actions and polices and those they promulgate as the decision-makers of the international financial institutions (IFIs)."Assumptions regarding [...] inequality and even the nature and style of growth are unlikely to change unless the governance of the bodies that articulate them, particularly the IFIs are reformed to make them more representative of poorer countries, and that means changing, not only voice, but votes and quotas" (p125).

  The increase by many donors in the proportion of aid delivered through multilateral channels and the priority given to PRSPs and their effects on policy choices for developing countries is of concern to many CSOs. As the Canadian Council for International Co-operation points out both aid and debt relief have been used as tools for donors to impose their own policy prescriptions on the poorest countries over the past 40 years. "These donor policies - limiting the role of the state, liberalising trade policy, privatising state roles in health or education, commonly referred to as the Washington Consensus - often have had devastating consequences... these policies remain at the heart of the PRSPs, over which the World Bank and the IMF have final approval..."[3]

- Domestic capacity for meeting the MDGs can be undermined by the depletion of human resources due to HIV/AIDS and emigration. Such losses can impede the economic growth and human development needed to meet the Goals. The migration of teachers has been called one of the "underemphasised aspects of globalisation" that can affect progress towards the education-related MDGs (p85). Countering the loss of human capacity due to HIV/AIDS and emigration requires domestic and international partnerships. In the case of migration of health and education professionals, investment is needed to improve infrastructure and working conditions, particularly in the public sector. In the case of HIV/AIDS, human resource planning that takes into account the losses of skills and productivity due to the epidemic as well as its demographic impacts are as important as efforts to treat and prevent the disease.

- The Commonwealth's ability to influence international debates and policy can be further maximised in favour of the agenda for the MDGs. The shared values of Commonwealth member states - good governance, democracy, the rule of law - are essential conditions for achieving the MDGs. In microcosm, the Commonwealth is the institution most closely representative of the global situation and it has undoubted potential to influence other fora and agendas. The Commonwealth comprises 53 countries, including 24 small island developing states (SIDS). Its 1.8 billion citizens account for some 30% of the world's population. Ten of the 27 Heavily Indebted Poor Countries (HIPCs) are Commonwealth member states, as are three of the countries in high-risk conflict, with another 15 facing medium-risk conflicts and several in post-conflict situations. Four of the world's donor countries are in the Commonwealth, including two of the world's richest, G-8 countries - the UK and Canada. "If Commonwealth governments were united in the commitment to space for national strategies, they could be a powerful force in prying away the strictures" of IFI conditionalities (p126). They could similarly use the association as a platform to monitor and implement Goal 8 by extending the Commonwealth Plan of Action on the Monterrey Consensus, with a special focus on Goal 8, to include measuring and monitoring progress of the G8 2005 Gleneagles Summit and Monterrey commitments and to reject the calls for changing the terms of the debt relief and ensuring that relief is additional rather than substituted for the other forms of aid.[4]

- Scaling up efforts to meet the MDGs requires political will in developing and developed countries to: implement the necessary policies and programmes; allocate the required resources; and put in place the necessary institutional arrangements to facilitate partnerships. "Metaphorically, political will is the master key to opening the door to attaining the MDGs and effective partnerships are the hinges on which the doors will swing." (p46 - 47).

Breaking with Business as Usual: Perspectives from Civil Society in the Commonwealth on the Millennium Development Goals assesses more than the line items of the Millennium Development Goals; it looks at the spirit that infuses them. This introduction opened by acknowledging that the MDGs were never about revolution. But civil society's recommendations ask the MDGs to become the handmaidens of revolution, in order to truly achieve the aims of poverty eradication and equality of opportunity.

3 *See Tomlinson, B., 2005. Budget 2005: Mixed Messages for Canada's Commitment to Ending Global Poverty. A CCIC Analysis and Commentary. Ottawa: CCIC*

4 *See Commonwealth Foundation, 2005. Civil Society Statement on Delivering the Millennium Development Goals. Prepared for the Commonwealth Finance Ministers Meeting, 18 - 20 September 2005. London: Commonwealth Foundation.*

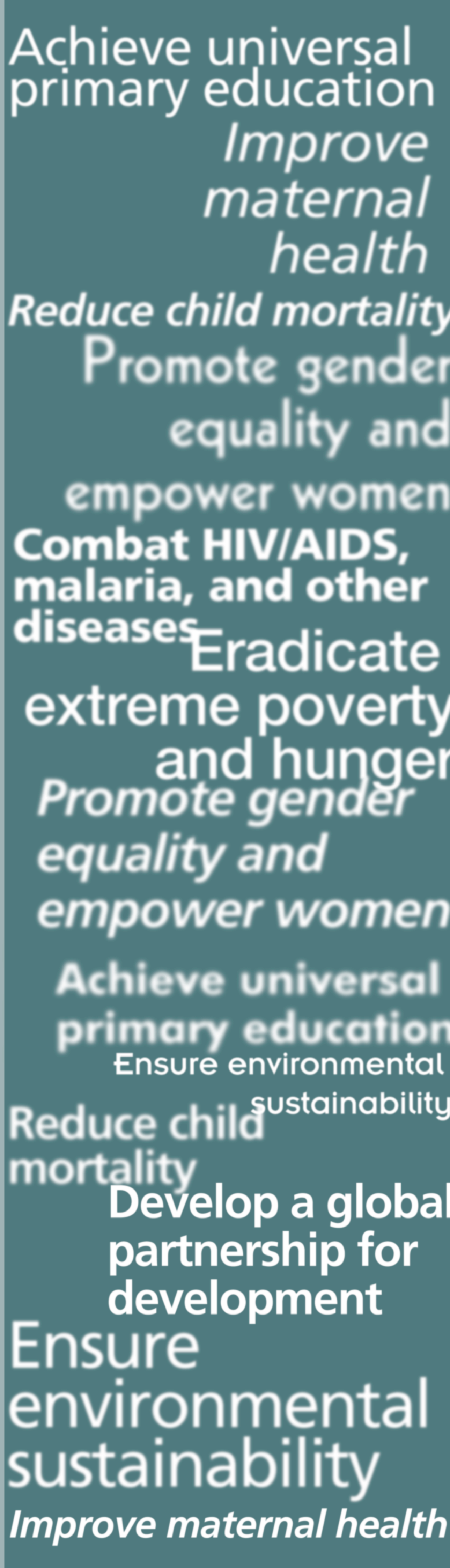
1

Progress towards the Millennium Development Goals in Commonwealth member states

Michael Chai
International Council on Social Welfare

[T]he institutional arrangements, political will, human and financial resources necessary to achieve the MDGs are as crucial as the MDGs themselves and must not be glossed over.

Analyses of Progress Towards the MDGs in Ghana: A Civil Society Perspective.



Chapter overview

To assess the level of progress that Commonwealth member states are making towards achieving the Millennium Development Goals (MDGs) by the target date of 2015, this chapter analyses the latest data from available national reports; adding, where necessary, relevant information from other regional and international civil society reports. The result is a mixed picture of progress and setbacks, with no groundbreaking revelations. But the reports from a range of countries across the Commonwealth indicate the importance of mobilising the necessary resources, at all levels, pulling together the stakeholders who can make a difference, and setting out to overcome inequality.

Overall, progress in moving towards the MDGs has been inadequate, especially for the poor. Of the 18 developing Commonwealth countries reviewed, ten are failing in half or more of the goals, while some do not have enough data to be assessed. Fewer than five are on track to meet half the goals or more; and this underlines the need for urgent and concerted efforts to reverse these trends. A common thread running across the Commonwealth countries which are lagging behind, is the persistence of core inequalities. These have to do with the distribution of assets, especially land, human capital, financial capital, and access to public assets such as rural infrastructure.

Commonwealth countries that show progress towards the MDGs are those able to mobilise the necessary resources - both local and global, human and financial. Some of the good practice lessons that emerge from across the Commonwealth include the importance of increased and more effective public expenditure on quality, accessible social services and the need for commitment to social development to be translated into the provision of adequate financial resources. Additionally, decreasing inequality is critical for poverty reduction, particularly in the area of distribution of assets, and partnerships with civil society organisations are important for delivering the MDGs as the sector can complement and supplement state-led initiatives.

While many of the necessary initiatives must be generated by developing countries, much more needs to be done to advance global partnerships for development, including developed country initiatives related to aid, trade and debt relief.

Author Profile: Michael Chai

Michael Chai is an associate of the International Council on Social Welfare and an independent consultant, having worked for several international and local development organisations in Southeast Asia. He holds degrees in philosophy, development studies and social anthropology and has more than 20 years professional experience in policy research and projects on poverty issues, indigenous people's rights, gender and development, and globalisation. He is currently serving as a consultant for the United Nations Economic and Social Commission for Asia and the Pacific, conducting an assessment of post-tsunami recovery efforts in Thailand.
Website: http://www.icsw.org/

1.1 Introduction

Are Commonwealth member states on track to achieve the various Millennium Development Goals (MDGs) by the 2015 target date? What are key points of progress, setback and missed opportunity in this regard? What factors have enabled the achievements already realised, or underpin other possible achievements by 2015? What are the reasons some countries are continuing to perform poorly or may never satisfactorily meet all of the goals? Finally, in the context of the MDG five-year review, how can the 53 Commonwealth members and their partners - local and global - push for real and significant progress in achieving the MDGs by 2015?

To address these questions, this chapter looks at the latest data on the MDG indicators from available national MDG reports from the following 18 Commonwealth member states: Bangladesh, Cameroon, The Gambia, Ghana, Jamaica, Kenya, Malawi, Malaysia, Mauritius, Mozambique, Namibia, Nigeria, Papua New Guinea, Samoa, Swaziland, Tanzania, Uganda and Zambia. Where necessary, additional and relevant information has been obtained from regional and civil society reports pertaining to the issues and countries concerned.

As do all collective sets of MDG reports, reports from this range of Commonwealth countries show a mixed picture of progress and setbacks, with a few having achieved almost all the MDGs and moving on to MDG Plus targets, while many others lag behind.[1]

Simply put, countries that show progress are those able to mobilise the necessary resources - both local and global, human and financial. They had already demonstrated the minimum necessary social, political and physical infrastructure and the technical capacity, especially in the 1990s, to make the finance and economics work. They had the plans and strategies worked out, which, intentionally or otherwise, reflected the human development targets of the MDGs. And they demonstrated at least a minimum level of stakeholder partnership - public, private and civil society - that helped deliver results. Most importantly, they had invested early in human capital, especially education and health.

If there is one common thread running across the Commonwealth countries which are lagging behind, it is that some core inequalities persist. These have to do with the distribution of assets, especially land, human capital, financial capital, and access to public assets such as rural infrastructure. This gross inequality of assets persists because of vested interests, entrenched power structures and a lack of adequate resources. Essential assets and services are not available, especially to the poor, because of a lack of political will; there is inadequate governance, both at global and local levels; and public policies and programmes are often inappropriate.

1.2 Overall picture of progress towards the MDGs

Progress towards the MDGs in 53 countries, spread around different regions across the world, is impossible to summarise adequately. With this proviso, it can be surmised that Commonwealth member countries showed very varied progress on meeting the MDGs during the half-decade since 2000. The range of progress rates varies from countries such as Namibia and Mozambique, which are most unlikely to meet most of the MDG targets, to such countries as Malaysia,[2] which have already achieved the MDGs and are moving to MDG Plus targets.[3]

Overall, however, progress in moving towards the MDGs has been inadequate, especially for the poor. Of the 18 developing Commonwealth countries reviewed, ten are failing in half or more of the goals, while some do not have enough data to be assessed. Fewer than five are on track to meet half the goals or more; and this underlines the need for urgent and concerted efforts to reverse these trends.

For Commonwealth countries without national reports, there are sometimes indications available from regional reports;[4] though regional reports are not always reliable, comparable or up-to-date. Different sources often give different estimates, without necessarily being inconsistent. Regional trends, moreover, are only estimates; they are never precise or actual values. Having said that, many regional reports reveal similarly mixed trends.

1.2.1 The Caribbean

In the Caribbean Community (CARICOM), for instance, the performance of Commonwealth member states

1 *Some countries where the goals are already within reach have adopted an MDG Plus strategy with more ambitious targets than those of the original MDGs.*

2 *Malaysia to date has achieved all the Millennium Development Goals (MDGs), set to be attained by countries worldwide by 2015, except for one on curbing the spread of HIV/AIDS. http://www.bernama.com/cgi-bin/snni2/list_item.cgi?peserta/malaysia/ma0308_4.txt, 4 August 2005.*

3 *Unless otherwise stated, the observations and analyses in this chapter are based on submitted national MDG reports, which are available from http://www.undp.org/content.cfm?id=79 and http://www.undp.org/mdg/countryreports.html.*

4 *The regional reports are: The MDGs in Africa: Promises and Progress, UNDP and UNICEF, June 2002; Promoting the MDGs in Asia and the Pacific, UN Economic and Social Commission for Asia and the Pacific (ESCAP), May 2003; Meeting the Millennium Poverty Reduction Targets in Latin America and the Caribbean, Economic Commission for Latin America and the Caribbean (ECLAC), December 2002. They are available at: http://www.undp.org/mdg/countryreports.html.*

shows that the poverty eradication goal seems attainable, although with much greater effort, political commitment and outlay of resources, especially in the region's poorer countries. Universal primary education is within reach in most countries although issues of quality and relevance need to be addressed. The Commonwealth member states in this region are far advanced in achieving gender equality and empowerment of women, although significant deficits exist and the report raises questions on the relevance of the standard targets and indicators. Reducing child and infant mortality seems attainable in most of the countries, but with the proviso that they experience no major setback. In contrast, the goal of reducing maternal mortality is in danger of not being met in quite a few countries, due to structural and other factors. The regional response to HIV/AIDS in recent years is encouraging, but several countries will need significant attention to prevention programmes and investment in care and treatment if the goal is to be achieved.

The Caribbean is significantly challenged by deforestation, watershed degradation, waste disposal and energy conservation. But by far its greatest challenges result from climate change and the destruction of coral reefs, which will require sustained attention at the regional and international as well as the local level. And finally, the goal of developing a global partnership for development premised on an open, rule-based, predictable and non-discriminatory trading and financial system is very much in doubt and is ultimately subject to progress in ongoing regional and global trade negotiations.

There are some other trends worth noting from this regional report. In terms of the eradication of poverty and extreme hunger, for instance, the averages show good progress. But there are still significant pockets of poverty, notably in Guyana and Jamaica.

HIV/AIDS continues to pose a major challenge for the Caribbean, which is second only to Sub-Saharan Africa in terms of prevalence rates. However, countries such as Barbados and Jamaica are indicating good progress towards the target of halving and beginning to reverse the spread of the disease by 2015.

1.2.2 Africa

The record for Commonwealth countries in Africa shows some progress but many setbacks. Commonwealth members such as Mauritius, Mozambique and Uganda, which have had sustained growth rates in recent years, and others with significant improvements in governance such as Ghana, Malawi, Nigeria, Tanzania, Uganda and Zambia, represent countries with progressively improving enabling environments necessary for meeting the MDGs. Concretely, the improvements in education in Malawi, as well as the containment of HIV/AIDS in Uganda, are examples of significant progress based on good policies and practice.

Indicators which do not augur well include the worsening of under-five mortality rates in Kenya, Malawi and Zambia; dropping primary school enrolment ratios in Cameroon, Mozambique and Tanzania; and little or no progress in reversing the HIV/AIDS pandemic in places such as Namibia, Nigeria and Swaziland. In this regard, one clear trend is that multiple increases in HIV prevalence rates, during the 1990s, severely undermined the feasibility of most MDGs, in health and beyond.

1.2.3 South Pacific

The developing Commonwealth member states in the South Pacific have generally been making slow progress towards the MDGs. Most countries in this region are small island developing states (SIDS) and remain very poor, with aggregate output not increasing sufficiently to keep pace with population growth. A number have also suffered widespread political unrest and civil disturbance. While there is a shortage of data on many countries - including Kiribati, Papua New Guinea and Vanuatu - it is clear that the poverty levels remain high. One of the stronger sectors in some states, such as Samoa, is education, where gender disparity has also been eliminated. Elsewhere, for example in Kiribati and Solomon Islands, school enrolment ratios are much lower, with Solomon Islands recording the lowest level among the SIDS. Health standards also vary: Tonga, for example, has already achieved many of these MDG targets but, like other countries, is experiencing new health challenges due to a surge in "lifestyle" diseases such as coronary heart disease and diabetes. At the other end of the scale is Papua New Guinea, where high rates of infant and maternal mortality, particularly in the rural areas, are typical of the poorest developing countries.

Many parts of the sub-region also lack adequate water supplies. Coverage of clean water is only 25% in the rural areas of Kiribati and 43% in urban areas of Fiji. There are also many environmental problems: most countries have problems of urban waste disposal; Papua New Guinea and Solomon Islands face widespread deforestation; extensive cultivation has led to soil erosion in Fiji; and virtually all of Nauru has been excavated for phosphate mining. However, one of the greatest environmental threats comes from outside the region in the form of global warming, with rising sea levels affecting a number of these states including Kiribati, Samoa and Tuvalu.

A continuing concern for the achievement of the MDGs in this sub-region is a general deterioration in public services. In Solomon Islands, for example, the government has often been unable to pay medical staff regularly. And long-term economic development opportunities, beyond tourism, are limited for many countries by the small size of their populations and their distance from overseas markets.[5]

1.2.4 Asia

As for undermining poverty in the Commonwealth states of South Asia: Bangladesh should easily achieve the dollar-a-day target, but only barely reach the national poverty line target. India will achieve the national target based on performance in the 1990s. Maldives does not have sufficient trend data on the dollar-a-day target, though it is likely to miss the national target. Pakistan also does not have sufficient trend data on the dollar-a-day target, but the country will meet the national target if it returns to its performance levels of the 1980s. And Sri Lanka should certainly meet the dollar-a-day as well as its national target.

Looking beyond consumption poverty to other indicators of social progress, the member states in the region have had encouraging success in some areas: for example, mortality in children under five has reduced substantially between 1990 and 2003, especially in Bangladesh - where the rate dropped from 144 to 69 per 1,000. Appreciable gains have also been achieved in school enrolments at primary and secondary levels. At the same time, challenges in South Asia remain in key areas such as child malnutrition, primary and secondary completion rates, maternal mortality, and gender balance in education and health outcomes. Nearly half of all children under the age of five are malnourished and youth illiteracy is high - 22% for males and 38% for females.[6] The resurgence of tuberculosis and the threat of HIV/AIDS also give cause for concern. In general, however, the quality of statistics on social MDGs needs to be improved considerably to make cross-country comparison meaningful.

Average national progress towards the MDGs masks considerable sub-national variation measured at state, province, district, and block levels. There are also persistent social inequalities reflecting caste, regional, tribal and ethnicity dimensions. This is true not just for the larger countries such as India, with wide state-level and district-level disparities, but also for smaller countries of the region such as Bangladesh.

In addition, various rounds of state-level Human Development Reports supported by the United Nations Development Programme (UNDP) for India, recent World Bank country-level MDG reports on India and Bangladesh, as well as poverty assessments of Sri Lanka carried out by the Bank, have revealed hidden regional and social inequalities with respect to basic service delivery within the South Asia sub-region.

1.2.5 Uneven progress

It appears, therefore, from the national and regional reports available to date, that progress within the Commonwealth countries has been very uneven from one goal to another. With the exception of Malaysia and Mauritius, the former indicating full achievement (apart from combating HIV/AIDS) and the latter able to meet most of the MDGs by 2015, most other countries show a strong probability of achieving only universal primary education. As for extreme poverty and hunger reduction; gender equality promotion and women's empowerment; reduction of child mortality; improvement of maternal heath; and combating HIV/AIDS, malaria and other diseases; most countries indicate "potentially achievable", at best. For Goals 7 and 8, the general trend is "unlikely to be achieved by the set time target". Similarly, the state of the enabling environment for achievement of the MDGs is generally just "fair" or "weak", except for universal primary education and gender equality promotion, where most countries report some strength.

For the countries generally lagging behind, progress is especially slow for child mortality, basic education, malnutrition, improved water supply, maternal mortality and gender discrimination in primary school enrolment.

Helpful as they are, the averages which enable these comparisons and which are commonly used to measure MDG progress, do not tell the full story of how far countries have gone in fulfilling the development aspirations of their people. Groups for which social progress has been fastest seldom include the most disadvantaged people. Thus, while averages give a good sense of overall progress, they can be misleading (see Chapter 2 which looks at civil society views on MDG progress in Commonwealth countries).

1.3 What are the core challenges?

The most notable challenges are those which must be overcome in order to consolidate past gains, while striving to address issues associated with meeting the most difficult targets facing individual countries. These

5 Asian Development Bank 2003.

6 Regional fact sheet from the World Development Indicators 2005: South Asia http://www.worldbank.org/data/databytopic/sas_wdi.pdf challenges may be usefully grouped in two main categories: challenges relating to policy formulation and challenges relating to policy implementation. But cutting across both categories are the challenges related to capacity - both technical and governance; resources - both financial and human; and partnerships - both local and global.

1.3.1 Joined-up policy formulation and implementation

For both policy formulation and implementation, governments face a central challenge in developing and implementing national development policies that capture the broad human development commitments of the MDGs. This is borne out by the performance of countries which show sustained progress in meeting the MDGs, both within the Commonwealth - for example, Malaysia and Mauritius - and outside. It is common knowledge that the MDGs are not merely a set of targets; they represent a clear and strong commitment to a broader process of human development accurately described as, "freedom, equality, solidarity, tolerance, respect for nature and shared responsibility". In fact, the adoption of targets has been criticised by many, especially from the civil society development community, as distorting policy. They contend that targets may encourage disconnected or uncoordinated actions, whereas joined-up policy is actually what is needed. For example, a health target, such as reducing child death rates, will require improvements in education, especially for girls and women, just as much as better health services.

1.3.2 Equity in human capital investment

Looking at countries within and outside the Commonwealth, the national development policies that appear to have contributed to progress towards the MDGs are those that took up the challenge of equity in human capital. Mauritius is one clear example. Its economic growth has been accompanied by an improvement in the overall level of social development, with a rise in the Human Development Index (HDI) from 0.661 in 1980 to 0.765 in 2001. Mauritius ranked 63rd on the HDI in 2001, moving up eight places from the previous year. Per capita gross national product (GNP) increased from US$3,637 to US$3,800 between 1999 and 2000, and Mauritius is now classified as an upper-middle income country, implying a sharp fall in overseas development assistance. Life expectancy at birth has increased from 61 years in the 1960s to 71 in the 1990s, and the primary enrolment rate has reached 105%. In terms of growth performance, Mauritius compares with East Asian tigers and Botswana.

Malaysia is another example. It succeeded in its poverty reduction efforts when it was able to reduce inequality and raise the income share of the poorest of the poor. Until 1970, economic growth in the country was relatively strong, averaging 6% annually in the 1960s, but it was accompanied by widening income inequality, with the share in national income of the poorest 20%, declining. Progress towards poverty reduction was slow, with about 60% of the population estimated to be below the poverty line at the end of the 1960s. In 1971, the country's "New Economic Policy" was adopted, placing equity and poverty reduction at the heart of government policy. Social programmes absorbed 60% of budget spending.

By contrast, the case of India demonstrates high social and economic costs associated with low levels of human development. Progress on poverty reduction in India slowed during the second half of the 1980s, with the rate of poverty reduction for rural areas falling from 5% to 1% by the end of that decade. The country stepped up economic liberalisation in 1991, hoping to improve growth and poverty reduction, but the results were not positive. Growth was slower than average for the 1990s, and the incidence of rural poverty rose. This lack of success was attributed to insufficient investment in expanding opportunities for social development. Illiteracy remained high and public health was poor: both factors serving as obstacles to increasing employment and enhancing skills.

Addressing these challenges and overcoming inequity requires more than the distribution of income and wealth. Of course the distribution of productive assets is important: conventionally, these involve physical or financial capital such as land, productive inputs, savings and credit. However, equity is also about the distribution of human capital such as health and education. Indeed, income inequality generally reflects deeper inequalities in access to opportunities for health, education and production. Equity, therefore, is also about the creation of opportunities to develop human capital such as health, education and production. Improved access to education and better health enable poor people to contribute more fully to the growth process and to participate more equitably in the opportunities which growth creates and the benefits it offers. In short, policies that are good for equity are good for growth, and good for converting growth into poverty reduction.

The importance of government expenditure on education and health, in explaining the contrast between these countries with regard to literacy rates and expectation of life at birth, cannot be over-emphasised. Around 1970, when income levels among the South Asian countries were not greatly different, Malaysia, the Republic of Korea and Thailand spent much more per capita on education and health than did Bangladesh, India and Pakistan; multiples that have increased over time.

Other studies draw similar lessons from high-achievers in other regions. A study by the United Nations Children's Fund (UNICEF) on ten countries (including such member states of the Commonwealth as Barbados from Latin America and the Caribbean; Botswana and Mauritius in Africa; Kerala state [India] and Sri Lanka in South Asia; and Malaysia in Southeast Asia) shows how these countries have made advances in health and education that took nearly 200 years in the industrialised world.[7] All ten countries were low-income economies in the mid-20th century. Half of them have combined rapid economic growth with social achievement, and are now considered to have high-performing economies. Significantly, the high growth economies achieved social progress very early in their development process, when national incomes were still low. Others grew more slowly and experienced interrupted growth. They demonstrate that it is possible to achieve a high level of social development (and mitigate the worst manifestations of poverty as exemplified by the MDGs) even without a thriving economy, if the government sets the right priorities.

Importantly, in each of these high-achieving countries, the state's commitment to social development was translated into financial resources. Without exception, education expenditure as a proportion of gross domestic product (1978-93) for each of these countries was higher for the high achievers relative to the region to which they belong. In other words, the evidence suggests that the high achievers gave higher macro-economic priority to health and education than the so-called low achievers. And, once made, the social investment was sustained by the high achievers, in bad times as well as good.

A positive lesson is that social interventions in the countries experiencing higher growth were not so much a case of "big" spending as "good" or effective spending. These countries are not big spenders in social policy areas, relative to their income. Where they scored highly was in the efficiency of the spending, as measured by the human welfare outcomes over those decades. They concentrated their spending far more heavily on primary and basic secondary education, and on low-cost primary health interventions of greatest benefit to the poor.

It needs to be mentioned, however, that to varying extents, these countries also had high levels of equity in asset distribution. Access to land, credit and marketing infrastructure enabled their rural poor to produce and invest their way out of poverty. In turn, redistributive reforms in these areas helped to unleash the productive potential of the poor, reinforcing a virtuous circle of high growth and a widespread sharing of its benefits. In the rural areas of China, where three quarters of the poor live, inadequate access to land and insecurity of tenure prevent the poor from responding to market opportunities. Countries with highly unequal land ownership patterns have suffered on both counts of growth and poverty reduction. Taking 15 countries with the most unequal distribution of land, World Bank figures show that only two have sustained growth rates in excess of 2.5% per year; an abysmal level of performance.[8] Other research has also confirmed the negative impact of concentrated asset ownership for growth and poverty reduction in Latin America. According to the Inter-American Development Bank, asset distribution has been the single most significant influence on growth in the Latin American region, retarding overall performance by about 2% a year. Inequality in land ownership is one form of distribution which skews the benefits of growth against the poor.

1.3.3 Effective partnerships

There is one other core challenge that comes out from all the national reports - the need for effective partnerships at the local and global levels. The United Nations Millennium Declaration, ultimately, is an agreement that developing countries will work to maintain sound economies, to ensure their own development, and to address human and social needs. Developed countries, in turn, agree to support poorer countries through aid, trade and debt relief. A meaningful partnership between rich and poor must also address the need of developing countries for technology, medicines and jobs for their populations, particularly for the growing ranks of young people. And at the local level, the challenge is for governments, the private sector and civil society organisations to pool their resources, both human and financial, for the attainment of the MDGs.

Combating HIV/AIDS is the one MDG area that stands out with examples of successful partnerships from several countries, both in and out of the Commonwealth. Uganda and Zambia in Africa; the Bahamas, Barbados, Brazil, Haiti and Jamaica in Latin America and the Caribbean; and Thailand in Southeast Asia - all have shown remarkable progress in meeting the MDG target

7 Mehrotra 2000.

8 United Nations Economic and Social Commission for Asia and the Pacific 2002.

in this area by effectively pulling together human and financial resources. The formulation and implementation of the Caribbean Regional Strategy for HIV/AIDS and the establishment of a Pan Caribbean Partnership Against AIDS (PANCAP), have helped the region make important strides in responding to the epidemic. The Uganda AIDS Commission (UAC), established in 1992 under the Office of the President and charged with co-ordinating multi-sectoral efforts against the epidemic, is a partnership involving all stakeholders, including the Joint United Nations Programme on AIDS, non-governmental organisations (NGOs), community-based organisations (CBOs) and the private sector. This concerted national effort reduced HIV/AIDS infection rates for eight consecutive years in the 1990s. Zambia may also soon become the second African country, after Uganda, to slow the scourge of the disease primarily because of effective partnerships.

1.4 National adaptation of the MDGs

Several countries in the Commonwealth have developed their own national poverty reduction strategies and programmes. A number have also prepared or are in the process of preparing poverty reduction strategy papers (PRSPs) as a framework for poverty reduction. Several governments have established inter-ministerial co-ordinating committees to devise and implement co-ordinated strategic national plans and actions aimed at achieving the social development targets. There is also general agreement that MDGs must be integrated into a national planning framework and that there should be national ownership of the process by the governments concerned. In this regard, some governments have attempted to structure their budgetary allocations so as to ensure that they contribute directly to the promotion of the MDGs. There is also widespread consensus that the availability of adequate statistics is an essential precondition for the elaboration and promotion of the MDGs.

Some countries in the Caribbean, as well as Papua New Guinea in the South Pacific, consider most global targets associated with the MDGs as over-ambitious, unrealistic or irrelevant to local realities, and in some cases the goals are considered to be out of reach, at least for the year 2015. These countries have, therefore, in consultation with the relevant line departments, tailored or customised the global targets as well as the related indicators to reflect the realities and priorities in the particular country. The tailored targets are an important component of the particular government's response to the challenges these countries are facing.

Even countries that have been slow to incorporate the MDGs into national plans, policies and programmes, have made considerable progress in the past few years. In the Eastern Caribbean Commonwealth countries, for instance, discussions on achieving social development - underway since the 1995 World Social Summit - were not concretised until the formulation of the MDGs at the turn of this century. Development planning has not been a regular exercise; with greater emphasis placed on macro-economic, short-run policy matters during the 1990s. In the case of Barbados,[9] the last development plan covered the period 1993-2000. Yet, although such strategy and planning documents would not have explicitly addressed the MDGs, several initiatives related to the goals have taken place in the region. For example, poverty assessments have been undertaken to determine the extent of poverty and to identify policy measures that can reduce the extent of poverty. Several human resource development initiatives related to health, nutrition, education and training have been undertaken to assist with poverty reduction. For example, in St Lucia, the government has established a Poverty Reduction Fund, a micro-finance institution, a National Skills Development Centre and a Basic Needs Fund to assist in the reduction of poverty. Barbados has also set up a Social Investment Fund, a poverty alleviation programme and rural and urban development commissions. Bureaux/desks of gender affairs have also been established and there has been an on-going concern with sustainable development.

Individual countries have also become affiliated to regional plans. The progressive growth of PANCAP in the Caribbean, for instance, has demonstrated good progress towards tackling HIV/AIDS in a concerted manner. In Asia and Africa, similar initiatives on HIV/AIDS and other MDG-related goals have been put in place.[10] Examples include the Multi-country Collaboration for Model Code of Practice, initiated by the Southern African Development Community (SADC), in consultation with its tripartite structures of business, labour and government. SADC has developed a code of practice for the 14 member countries in Sub-Saharan Africa, which include the Commonwealth member states of Botswana, Malawi, Mauritius, Mozambique, Namibia, South Africa, Swaziland, Tanzania and Zambia. In Asia, Rotary Clubs, for example, have partnered within their communities and with other Rotary Clubs around the world to address HIV/AIDS. In Bangladesh, the Rotary Club of Dhaka, Metropolitan Dhaka and others in District 3280 worked with the Joint United Nations Programme on HIV/AIDS (UNAIDS) to organise a workshop and compile a resource guide to educate the media about HIV/AIDS. Another

9 The discussions were pursuant to the commitments of the 1995 World Summit on Social Development in Copenhagen, which had later developed into the MDGs of 2000.

10 See, for example, International Aids Trust, The HIV/AIDS Crisis: How are African Businesses Responding?

example is the Rotary Club of Delhi, South End, India, and a counterpart club from West San Fernando Valley, California, to support an HIV/AIDS awareness campaign in low-income housing areas.

However, translating PRSPs and other national or regional plans and strategies into effective policies and programmes to tackle the various dimensions of poverty, while operating with limited resources, has become a challenging task for many countries. Data collection on the indicators has been a particularly weak aspect of the implementation of the various plans and is, of course, related to the fact that the MDGs have not been explicitly incorporated in planning documents. These problems suggest that the quantitative indicators for the targets associated with the MDGs have not permeated government departments and statistical offices. There is, therefore, a need to relate policy design and analysis to data collection. Indeed, it would not be incorrect to say that the achievement of the MDGs has not infused policy making sufficiently.

1.5 Policy lessons from good practice across the Commonwealth

1.5.1 Public action, economic growth and poverty reduction

The first common theme that emerged from the survey of the very different countries across the Commonwealth is the pre-eminent role of the state in formulating policies aimed at ensuring that the vast majority of the population have access to basic social services. The earlier such policies had been adopted, the more successful the countries now were in terms of MDG progress.

Between 1960 and 1993, Botswana managed to increase life expectancy for its population from 48 years to 67 years and Mauritius from 60 to 73 years.[11] But why did Africa's most populous country, Nigeria, whose economy had grown at 9.7% per annum over the period 1965-1973, and which thereafter experienced the windfall gains of the oil price increases, only manage to reduce its under-five mortality rate by less than 10% (212 to 188) over three decades? And why did Barbados, Malaysia, Mauritius, Kerala state (India) and Sri Lanka make advances in health and education that took nearly 200 years in the industrialised world?

The answer lies in the role of public action. We see this in the case of the other high-achievers cited in this chapter. The support-led process in Malaysia or Mauritius did not wait for dramatic increases in per capita levels of real income. It worked by prioritising the provision of social services - particularly health care and basic education, which reduce mortality and enhance the quality of life. The contrast between the high achievers and others in this analysis is instructive in respect of the role of the state in education. For instance, primary education was the responsibility of the state in all the high-achievers mentioned in the earlier sections, from an early stage.

It needs to be recognised, however, that growth, and therefore poverty reduction and the achievement of the other social MDGs, could be reduced for any number of reasons: for example, declining terms of trade, shocks in the global economy, natural disasters, financial instability or regional conflicts. Individual countries may also have to deal with social and political instability, and the impact of HIV/AIDS. However, the outcomes will be better if governments adopt the appropriate policies to integrate the social and the economic.

A key policy must be to take specific steps to reduce inequality, particularly those forms that arise from corruption. Governments should try to distribute the "growth dividend'; using the gains from economic growth to offset some of the increases in inequality, by offering broad access to social development and by protecting the most vulnerable. This pro-active stance will become even more significant as poverty levels reach lower levels. At this point, macro-economic policies have less impact on poverty and governments must work with other partners to directly attack the remaining pockets of poverty.

One of the primary objectives of government policy should be to reduce inequality. The nature and extent of inequality will, of course, vary considerably from one country to another. But one common conclusion across the Commonwealth countries is that, for poverty reduction, some types of inequality matter more than others. The most important are those concerned with the distribution of assets, especially land, human capital, financial capital and access to public assets such as rural infrastructure.

1.5.2 Effective spending on basic services

In each of the high-achieving countries cited in this report, the state's commitment to social development was translated into financial resources. As mentioned earlier, education expenditure, as a proportion of GDP for each of the countries was higher for the high achievers relative to the region to which they belong, without exception. For health too, the expenditures were higher than the regional average.

11 Mehrotra 2000.

Relative to other countries in their regions, the high-achievers were spending much more per capita than other countries - though some of this may reflect differences in per capita income. This is particularly so in education, and to a lesser extent in health as well. Thus, in 1992, the median expenditure on education was US$49 in East Asia, but US$123 in Malaysia. The Sub-Saharan median was US$11, while Botswana and Mauritius spent several times as much.[12] This is evident in the Caribbean region as well. Despite economic constraints, Jamaica protected public spending in health and education, and ensured reforms in these sectors designed to afford higher priority to services that would be of greatest benefit to the poor. As a result, the country ranked number one in the Education For All assessment in the top 20 of the 89 developing countries that were included in the assessment.[13]

Education

Education is one of the most important investments that a country can make. Not only does it fulfil people's right to knowledge, but the benefits are both economic and social. Education is one of the most powerful ways of accelerating economic growth and reducing poverty. And education, particularly for girls, has important spillover effects for the society as a whole, helping to empower women, improve their status and enable them to exert greater influence at both the household and community levels. This not only tends to improve children's nutrition and health; it also results in a decline in fertility, as educated women tend to have smaller families. However, people need to be educated to a sufficient level: only if children have moved beyond a certain threshold of learning, in good-quality primary and lower secondary schools, can they fully capitalise on education through increases in productivity or in their social contributions.

As mentioned above, some Commonwealth countries, whether Jamaica or Mauritius, Malaysia or Bangladesh, have invested heavily in primary education before achieving rapid economic growth. The challenge for these countries which have invested heavily in primary education is to move to secondary and tertiary levels, as their economies develop and they move to higher levels of industrial production. At the same time, they have to improve the quality of education and ensure that children complete a full course of schooling; thus getting the benefits from crossing the critical thresholds.

The issue of quality of education cannot be over-emphasised. Although many countries, such as Bangladesh, have recently boosted their enrolment rates, the facilities in the schools are often poor, with a lack of books and qualified staff. A similar situation can be found in Commonwealth Caribbean countries such as Jamaica, which is doing well in terms of enrolment but appears to be reaching the limitations of the existing organisational structure, existing human and financial resources and reliance on traditional technology. These countries will need to invest more, both from domestic resources and with the support of official development assistance (ODA). And since the benefits will take some time to percolate into the economy and the society - at least eight years in most cases - these changes need to be made as soon as possible.

Health

Higher standards of health are also important both for society and the economy, with good health being one of the most vital components of human development. There are important linkages between improved health - of both mothers and children - and better performance at school. Good health also reduces population growth: when fewer children die in infancy, parents tend to have smaller families. And a healthy workforce is essential if countries are to achieve the highest levels of productivity.

All the developing countries of the Commonwealth face many threats to health and, often, these result from an unsafe environment, including poor sanitation and water supplies. However, there are also increasing threats from infectious diseases, including dengue fever; more resistant and resurgent forms of malaria and tuberculosis; HIV/AIDS; and emerging new diseases, such as severe acute respiratory syndrome (SARS) and new strains of influenza. Moreover, as societies become richer and older, some people also start to suffer from the diseases of affluence. This "health transition" means that there are fewer infant and child deaths, and more adult deaths from cancer, stroke, heart disease and the degenerative diseases of old age. There is also more death and illness related to smoking, road accidents, occupational accidents and unhealthy work environments.

Although it is one of the poorest countries in the world, Bangladesh was able to substantially reduce maternal mortality by focusing on skilled birth attendants, access to emergency obstetric care and expanded family planning programmes. The African continent is home to seven of the 12 countries with the highest number of maternal deaths - including Kenya, Nigeria, Tanzania and Uganda. Yet, The Gambia has successfully halved the estimated maternal mortality rate from 1990 to 2000: clearly the result of improved access to good ante-natal care. Within the same time period, the percentage of

12 Ibid.

13 UNDP 2004, p. 24.

deliveries attended by skilled health personnel in The Gambia increased from 42 to 54.6%. In Malaysia, maternal mortality was cut from 141 per 100,000 live births in 1970, to 20 in 1990. This rate is less than one-tenth of that in a number of neighbouring countries. This extraordinary accomplishment was the result of an extensive network of health centres and clinics, supported by trained midwives and other health workers, and delivered through an integrated maternal-and-child health programme. Upgrading the training level of public health nurses and midwives through the community nurse conversion programme, has served to bring child health services closer to homes and communities. In the early 1990s, Barbados allocated one quarter of its health expenditure to primary health care activities As a result, over 80% of the population gained access to affordable and essential drugs; and this rate rose to 100% in 2001.[14]

In Malawi, one million insecticide-treated mosquito nets were given out in 2003 alone, boosting coverage from 5% of households in 2000 to 43% by the end of 2003. At the same time, distribution of nets through the health-care network increased participation in routine preventive services. Other countries are now adopting the same approach because it is showing good results and Malawi is very likely to meet the MDG target of reversing the incidence of malaria.

It is clear that the countries making progress in the MDG health targets have invested in primary health activities, which have considerable overlap with preventive and basic curative services. Primary health care interventions are low-cost activities and they do not absorb a large part of public expenditure. It is the clinical activities, largely provided at the secondary or tertiary level, which are relatively more expensive. Moreover, qualitative evidence from the selected countries in the ten-country UNICEF study indicates that emphasis was placed on primary health care in the organisation of the health system; there was also an effort to attenuate the urban bias in health services that had previously existed.[15] All the focus countries succeeded in providing access to health services - in both physical and cost terms - in both rural and urban areas.[16] Access to health services was nearly 100% in urban areas for all the selected countries by the late 1980s, and in the range of 80-100% in rural areas, but this was not the case for other countries in their regions. A universally available and affordable system; financed out of government revenues with minimal out-of-pocket costs for users; functional at the lowest level; made effective by allocating resources at the lower end of the health system pyramid: these were the keys to an equitably-structured health system. This is in strong contrast to the pattern of intra-sectoral spending in most developing countries, where a significant proportion of the total health budget is spent on one or two centrally-located referral or teaching hospitals. By contrast, the primary health care system is starved, despite the fact that the latter services the majority of the population.

1.5.3 Increased incomes

Increased and more effective public expenditure on social services will make an important contribution to achieving the "social MDGs". But increasing the purchasing power of the poor also has a major impact, particularly at lower levels of income where households will usually spend any additional income on food, housing, health and education. This is an important goal in its own right as well as helping to boost the social MDGs. As people become more confident, they are in a better position to demand access to public resources. Consequently, countries that have been able to reduce income poverty at a faster rate are also among the front rank in social attainment.

It should be emphasised, however, that increasing incomes does not inevitably result in higher standards of health or nutrition. In many cases, government efforts, particularly through public information and special services, are needed to ensure that people take full advantage of their increasing incomes. One clear example is child nutrition. Even in better-off countries, rates of child malnutrition remain surprisingly high - 18% in Malaysia, for example. This is not because of a shortage of food in these countries but often because of the inadequate caring practices of mothers who may not be giving their children the right kinds of weaning food, sufficiently dense in protein and in important micro-nutrients such as iron. As a result, children can be effectively malnourished even in relatively well-off households. Often as families become richer, they change the food that adults eat - usually consuming more animal protein - but continue to give infants the traditional weaning food, which may be little more than a thin porridge. This underlines the importance of combining individual empowerment with public action.

1.5.4 Social protection

Importantly, those living at or near the poverty line may still be in danger of slipping into poverty: as well as having upward mobility, they also have downward mobility. Poverty is not just a matter of deprivation but also of vulnerability and macro-economic crisis is only one kind of shock that can trigger downward mobility for the

14 Downes et al. 2003, p. 34.
15 Mehrotra 2000.
16 Commonwealth member states in this list of ten countries are: Barbados, Botswana, Mauritius, Kerala state (India), Sri Lanka and Malaysia.

poor. People living in low-income countries, whether in Asia, Africa or Latin America, are regularly exposed to risks, uncertainties and shocks including social instability, loss of markets, crop failures, droughts, floods, hurricanes, tsunamis and other natural disasters. Individual households can also be hit by the sickness of a key family member. Any of these events can wipe out savings and assets and thus reverse poverty reduction or reduce its pace.

This means that countries need to explore different forms of social protection. Clearly only a few developing countries in the Commonwealth will be able to offer extensive welfare provisions similar to those in developed countries. However, even poorer countries can experiment on a smaller scale with programmes which fit within their financial constraints and work alongside existing patterns of informal insurance. These include simplified social insurance schemes for the self-employed; support for informal insurance; formal title for informal assets; and health insurance for the poor.

The Government of Barbados, for example, established a Ministry of Social Transformation and a Poverty Alleviation Bureau. This is one of the agencies within the Ministry, which seeks to alleviate poverty by ensuring that individuals have access to resources and opportunities at the community level. Several other human resource development initiatives - health, nutrition, education, training - have been undertaken to assist with poverty reduction, including a National Drug Service, pioneered in Barbados, which has become a model for other developing countries. The Service provides formulary drugs free of cost to persons aged 65 and over, children under 16, and those persons requiring drugs for the treatment of cancer, diabetes or hypertension. All these measures have, in effect, resulted in noteworthy progress towards the achievement of the MDGs.

Indeed, some countries - and even sub-national units - have been able to achieve rapid improvements in social development even at low levels of income, by putting in place various social protection schemes. Sri Lanka, Maldives, Mauritius, and the Indian state of Kerala, for example, have much higher levels of social attainment than would be expected at their levels of income. And some countries, such as India during the period 1981-91 and Bangladesh during the period 1983-2000, though less successful at reducing income poverty, nevertheless registered improvements on many social indicators.

In several cases, the social protection schemes are the result of non-governmental intervention rather than public policy. The goal to reduce maternal mortality rates has been achieved in Mauritius not because of special policy attention by health authorities, but because of health care schemes put in place by women's institutions. There are over 300 women's NGOs and CBOs in Uganda which, among other things, support women in various areas ranging from the facilitation of women's access to credit to the provision of legal services. And in The Gambia, NGOs work with public agencies in the provision of savings and credit schemes for women, health education, counselling and promotion, and family planning. In all these countries, the progress demonstrated towards the related MDGs are in no small measure due to the interventions of, or partnerships with, NGOs.

1.6 Global partnerships for development

The prime responsibility for human development, and the attainment of the MDGs, ultimately rests with the individual countries. Indeed, the real value of the MDGs is that they are focused on national attention and seek to change national decisions: increasing opportunities and equity, as well as engagement and energy, and expanding everyone's capabilities and creativity. This can only happen when a country's leaders, institutions and stakeholders are fully committed to the MDGs.

However, human development is a shared responsibility. The United Nations Millennium Declaration recognised this and resolved to develop "strong partnerships" to promote a more open and equitable system of international finance and trade, to increase development assistance and to enhance international commitment to good governance, development and poverty reduction.

International partners can and must support and enhance the commitments of individual countries. Through a series of partnerships, all can and must contribute resources, including knowledge and ideas, along with new technologies and new resources.

In terms of progress in this area, the data is seriously inadequate in most of the national MDG reports from developing, least developed and SIDS Commonwealth countries. However, regional reports from Africa, Asia, Latin America and the Caribbean, and the South Pacific suggest that the poor countries in these regions are simply not benefiting from global partnerships in trade, aid or debt relief. The prospects for achieving the MDGs in the poor countries of the Commonwealth depend in large measure on the extent to which these poor nations can increase their participation in the global economy.

But in the various regions, declining growth performance of poor countries since the 1980s is associated with a combination of trade-related factors: stagnant and declining export earnings, export concentration in primary commodities, falling terms of trade, rising debt service payments and severe balance-of payments problems.

Take an example: Target 12 under "global partnerships" (MDG 8) refers to the development of an open rule-based, predictable, non-discriminatory trading and financial system. It includes a commitment to good governance, development and poverty reduction - both nationally and internationally. While all Commonwealth countries subscribe to the principle of increased liberalisation, they have asserted the need for special and differential treatment to be accorded them, in view of their small size and relative underdevelopment, in various multilateral trade negotiations carried out within the World Trade Organisation (WTO) and regional Free Trade Agreements, such as the Free Trade Area of the Americas and the Cotonou Agreement (made between the African, Caribbean and Pacific countries and the European Union). However, the trade benefits are not happening or not enough.

Under this MDG, emphasis is also placed on the level of ODA in support of the various goals. While it is estimated that, globally, the achievement of the MDGs will require an additional US$50-$100 billion in aid, the reality is that total ODA still falls short of the estimated requirements for the implementation of the MDGs in the poor countries.

Levels of ODA have shown a steady decline in recent years. This is partly because of the declining geopolitical and strategic significance of many of the developing countries of the South in the wake of the end of the Cold War; and the increasing demands of other parts of the world - such as the "transition countries" in Europe, and more recently Afghanistan and Iraq - for increased development assistance.

It is appreciated, of course, that some African and Caribbean countries, have benefited from increased foreign direct investment (FDI), but such inflows cannot fully compensate for official development assistance which will need to be increased significantly if the MDG targets are to be achieved within the specified timeframe.

Take target 13, which seeks to address the special needs of the least developed countries, through tariff and quota free access for exports, an enhanced programme of debt relief for and cancellation of official bilateral debt, and more generous official development assistance for countries committed to poverty reduction. In the case of the Caribbean, for instance, only Haiti, which is a non-Commonwealth member state, is officially designated as a "least developed country". In terms of debt relief, Guyana is eligible for assistance under the Heavily Indebted Poor Countries (HIPC) Initiative. The country has, in fact, benefited from the initiative which is premised on debt forgiveness, on the understanding that the resources released will be used to fund poverty eradication programmes in keeping with the priorities identified in the PRSP prepared by the World Bank, in consultation with the government. However, the Caribbean and other developing countries have called for the HIPC Initiative to be further improved in order to speed up disbursements under the programme and also for debt cancellation to be extended to a wider range of developing countries. Debt relief remains an important but unresolved issue.

And, in terms of FDI, the flows move unpredictably since policies are largely directed by the market and by the choices of private investors. For a whole host of reasons, FDI is not moving to the benefit of the poor countries in the Commonwealth.

There are few good lessons in global partnerships in terms of least developed countries, landlocked countries or small island developing states in the Commonwealth.

1.7 Conclusion

The experience of many countries of the Commonwealth has shown the potential for poverty reduction and for improving many other aspects of human development. Economic growth is an important part of this. And although the prospects for growth may be more limited in the years ahead, there are many measures that governments and others can take to ensure that even moderate growth contributes to poverty reduction, particularly by trying to avoid any significant increases in inequality. It is clear, too, that poverty reduction is closely linked with the achievement of the other MDGs. In particular, higher standards of health and education are not just important in themselves; they also help to ensure that poverty reduction will be both widespread and sustained.

Some of the good practice lessons that emerge from across the Commonwealth include:

- Increased and more effective public expenditure on social services will make an important contribution to achieving the social MDGs. This is a key responsibility of governments that cannot be abdicated.
- The commitment to social development must be translated into the provision of adequate financial resources.
- The quality of basic services is as important as access.
- Social protection schemes are important in guarding against the loss in gains, or countering the vulnerability, of the poor in the face of shocks.
- Reducing inequality is critical for poverty reduction, particularly in the area of distribution of assets, especially land, human capital, financial capital and access to public assets such as rural infrastructure.
- Partnerships with civil society organisations are important for delivering the MDGs as the sector can complement and supplement state-led initiatives.

However, while many of the necessary initiatives must be generated by the developing countries under review, it is also fair to note that much, much more needs to be done in terms of global partnerships for development, including developed country initiatives related to aid, trade and debt relief.

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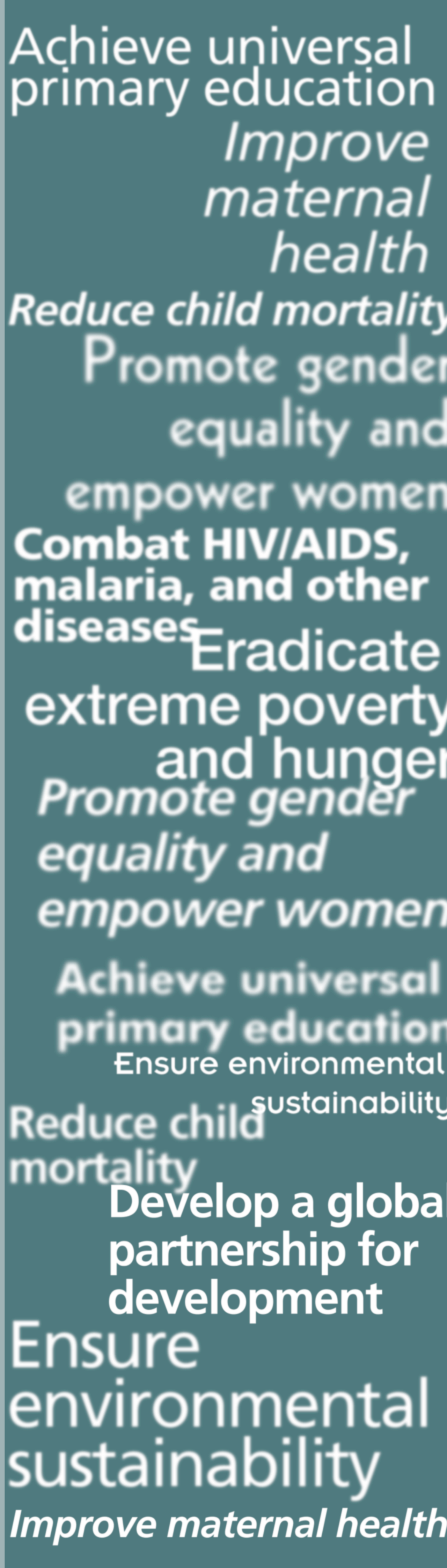
2

Civil society and the Millennium Development Goals in the Commonwealth

Warren Nyamugasira
National NGO Forum, Uganda

The MDGs need people who make things happen: people who build coalitions for the development of social compacts between politicians, policy makers, service providers and monitors. Civil society can help forge these compacts.

A Long Way to Go. Civil Society Perspectives on Progress, Opportunities and Challenges of Attaining the Millennium Development Goals in Uganda.



Chapter overview

The discussion in this chapter explores the views of civil society organisations in 13 countries of the Commonwealth where national background papers were prepared for this report. The countries are representative of all five regions of the Commonwealth with developing countries, namely: Asia, the Caribbean, East and Southern African, West Africa and the Pacific.[1] The chapter analyses civil society views of progress towards meeting the agenda for the Millennium Development Goals (MDGs), including evolving ways in which civil society organisations are contributing to meeting the Goals. It also analyses the challenges being faced and requirements for civil society organisations to maximise their contribution to attainment of the MDGs.

While civil society organisations were not on the MDG bandwagon initially, they have become increasingly involved in the agenda to attain the Goals, even though there remains a lack of widespread popular awareness of the MDGs. Civil society organisations affirm that the MDGs return development to the forefront of international commitment and provide an unparalleled opportunity for independent stocktaking of the progress being made. Civil society gives MDG attainment a mixed score-card: portraying some excellent progress, which needs to be sustained and scaled up, while calling attention to the need for special support to countries deemed to be "off-track". Although there has been no official and systematic stocktaking of civil society contributions to the MDGs, the national papers prepared for this report demonstrate that civil society organisations have made considerable contributions to the MDG agenda in Commonwealth member states. There is, however, potential for them to do more. National political will and multi-stakeholder partnerships have been identified by civil society organisations as two essential requirements for successful MDG implementation at national level. These, they say, need to be supported by delivery on MDG 8 commitments.

Author Profile: Warren Nyamugasira

Warren Nyamugasira is executive director of the Uganda National NGO Forum. He holds degrees in economics and economic and social studies and has more than 25 years' experience in development and policy work. The Uganda National NGO Forum seeks to represent the collective independent voice of CSOs involved in policy analysis and lobbying in Uganda. Membership includes a wide range of community based and other citizens' organisations.

Website: http://www.ngoforum.or.ug

2.1 Introduction

The Millennium Development Goals (MDGs) are increasingly being accepted as the overall framework within which to approach international development. In a report to the United Nations Secretary-General, the MDGs are referred to as the "most broadly supported, comprehensive, and specific poverty reduction targets the world has ever established".[2] Accordingly, their importance is manifold. For the international political system, they have become the fulcrum on which development policy is based. For the more than one billion people living in extreme poverty, they therefore, knowingly or unknowingly, represent a means to a productive and more rewarding life. For the global community, they are a linchpin in the quest for a more secure and peaceful world. As Kofi Annan, the Secretary-General of the United Nations (UN) has argued, there is a strong and explicit connection between the MDGs, development, security and human rights. According to Simon Maxwell of the UK-based Overseas Development Institute (ODI), the MDGs are part of the "meta-narrative" that is replacing the "Washington Consensus" development orthodoxy. This meta-narrative emphasises the MDGs as an overarching framework, lays out the link between MDGs, Poverty Reduction Strategy Papers (PRSPs), macro-economic policy, harmonised aid and effective public expenditure management in support of good governance policies.[3]

But how useful and adequate is the MDG framework to civil society and how are civil society organisations relating to the framework?

2.2 Progress towards the MDGs

In contrast to the outcomes of the global conferences of the 1980s and 1990s, the Millennium Development Goals were not developed out of a preparatory process that included direct and active civil society participation. As a result, civil society buy-in to the Goals was initially low. Many civil society organisations (CSOs) have criticised the manner in which they were developed, perceiving them as "a dumbing down of the commitments made already by UN member states", particularly in respect of the commitments of the decades of the 80s and 90s.[4] This created a "wariness and weariness of yet another development strategy".[5] Some were unaware of the MDGs or of their dominant significance on the international scene. Others were indifferent to, or sceptical about, yet "another set of development targets which lacked the vision and legality of its predecessors, such as the Universal Convention of Human Rights; the Covenant on Political, Economic, Social and Cultural Rights; the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW); the Convention of the Rights of the Child; and the comprehensiveness of the documents of the UN conferences held in Rio de Janeiro, Vienna, Cairo, Copenhagen and Beijing".[6]

Increasingly, however, CSOs are coming to realise the importance of the MDGs. For example, Jamaican civil society activists recognise that the MDGs return development to the forefront of international commitment and for CSOs in Trinidad and Tobago, they "provide an un-paralleled opportunity for stocktaking and re-committing to the achievement and implementation of the goals in the context where the development agenda is at the forefront".

Figure 2.1 overleaf summarises a stock-taking exercise undertaken in early 2005 by representatives of civil society organisations across the Commonwealth, as part of the exercise to prepare the national papers commissioned for this report. Since the authors did not use a standard measure in assessing national progress on the eight MDGs, there are variations in emphasis in the different reports, and this has influenced the summary presented in the table below. In addition, it must be borne in mind that some goals, notably those relating to child and maternal mortality, are expressed in terms of a reduction in levels compared to baseline statistics, rather than absolute measures. Therefore, countries with relatively high levels of attainment, which have seen progress in recent years, may be judged as doing far better than countries with relatively low levels, but with larger degrees of improvement. Nevertheless, what emerges is a broad picture, from the perspective of CSOs, of the trends in countries for which reports were prepared; and this can, broadly speaking, be generalised across the Commonwealth.

1 *In Asia: Pakistan and Sri Lanka; in West Africa: Cameroon, Ghana and Sierra Leone; in East and Southern Africa: Malawi, Tanzania, Uganda, and Zambia; in the Caribbean: Grenada, Jamaica, Trinidad and Tobago; in the Pacific: Samoa.*

2 *The Overview of the Millennium Project Report 2005, page 2.*

3 *Maxwell 2005.*

4 *Grant Cummings 2005.*

5 *Ibid.*

6 *Jayaweera 2005.*

Figure 2.1

CSOs' assessment of the progress towards the MDGs in national contexts

Goal	Already achieved	On track likely to achieve	Progress, potentially achievable	Slow progress, lagging	Off track, unlikely to be met without significant intervention	No change	Negative change
Goal 1 **Eradicate extreme poverty and hunger**	Samoa	Grenada	Uganda	Jamaica Sri Lanka Trinidad and Tobago	Cameroon Ghana Pakistan Tanzania Zambia		Malawi Sierra Leone
Goal 2 **Achieve universal primary education**	Grenada Sri Lanka	Cameroon Jamaica (divided perception) Pakistan Samoa Tanzania (divided perception) Trinidad and Tobago Uganda Zambia	Ghana Sierra Leone		Malawi		
Goal 3 **Promote gender equality and empower women**	Sri Lanka (education and literacy	Grenada Malawi Pakistan Samoa Trinidad and Tobago Uganda Zambia		Cameroon Ghana Jamaica (divided perception) Sierra Leone Sri Lanka	Sri Lanka (employment and representation) Tanzania		
Goal 4 **Reduce child mortality**	Grenada Sri Lanka	Malawi Pakistan Samoa Sierra Leone Trinidad and Tobago		Cameroon	Ghana Jamaica Tanzania Zambia	Uganda	

Goal	Already achieved	On track, likely to achieve	Progress, potentially achievable	Slow progress, lagging	Off track, unlikely to be met without significant intervention	No change	Negative change
Goal 5 Improve maternal health	Grenada	Samoa Pakistan Sierra Leone	Sri Lanka	Trinidad and Tobago Cameroon	Jamaica Malawi Zambia Tanzania	Ghana Uganda	
Goal 6 Combat HIV/AIDS, TB and malaria	Jamaica (malaria) Sri Lanka (malaria and TB) Uganda (HIV/AIDS)	Trinidad and Tobago	Grenada Samoa	Jamaica (HIV/AIDS) Malawi Cameroon	Ghana Pakistan Sierra Leone Tanzania Uganda (malaria) Zambia		
Goal 7 Ensure environmental sustainability	Grenada (water)	Ghana (water in rural areas) Jamaica (divided perception) Tanzania (water-divided perception) Trinidad and Tobago	Grenada Malawi (water) Samoa	Jamaica (divided perception)	Cameroon Pakistan Sierra Leone Sri Lanka Uganda Zambia		
Goal 8 global partnerships for development		Tanzania[7] (donor alignment with host government policies) Uganda (donor alignment with host government policies)	Grenada[8]	Jamaica Malawi (trade and market access) Samoa Sierra Leone Zambia	Cameroon Pakistan Sri Lanka[9]		

***Source:** Constructed from 13 national background papers prepared for Breaking with Business as Usual: Civil Society Perspectives on the Millennium Development Goals.*

The picture that emerges in the table above suggests the performance of the reporting countries can be grouped into three clusters. The first cluster is those countries - mainly middle income and a few low income countries - that have either already attained some MDGs, or are on track to do so. The second cluster comprises those countries with the potential to attain MDGs if interventions are scaled up. The third category is those countries that are either off-track or even regressing. Several countries, however, such as Jamaica, Pakistan, Samoa and Uganda, straddle more than one category, across and within the Goals.

7 In many countries, there is increased donor to donor policy harmonisation and donor alignment with host government policies. Most HIPC countries have received debt relief. MDGs have enhanced CSO-CSO and CSO-Govt-UN partnerships in most countries.

8 Grenada received post Hurricane Ivan support, but this will not necessarily have a positive impact on debt and trade issues.

9 Sri Lanka's post-Tsunami support seen as a very positive aspect of partnerships.

It is important to note that civil society perceptions are sometimes at variance with those of governments. What people see on the ground in communities, particularly marginal ones, can be different from the story told by the official statistics. One such example is the Jamaica CSO assessments on poverty, universal primary education (UPE) and environmental sustainability. The government contends it is "on track" to meet the goals on poverty and environmental sustainability. But, based on their work in communities - especially in marginalised inner-city and rural areas - CSOs feel that poverty rates are higher than reflected in the official statistics. They suggest environmental protection is lagging due to factors that include the inadequate institutional arrangements for environmental protection and enforcement of laws, a poor agricultural development plan, deforestation and solid waste disposal challenges. Whereas the Jamaican government says that it has already achieved UPE, CSOs argue that it is only "on track" to do so and suggest that the real measure should be literacy and numeracy and not simply enrolment, as is presently the case.

Another example comes from Pakistan, where on poverty, UPE, gender equality and child mortality the government has "no hesitation in declaring that Pakistan will meet these MDGs and their targets"; while CSOs, supported by the findings of the Global Monitoring Report 2005, have concluded that "the country remains seriously off-track in its race towards the MDGs".[10] In Tanzania the government says that UPE and access to safe water are likely to be achieved by 2015. But on UPE civil society says there are many hidden issues including high drop-out rates, poor teaching by unqualified teachers and long distances to schools, with some children having to walk more than eight kilometres to get to school. On access to water, CSOs report cases where "people (particularly during the dry season) have to walk over 20 kilometres to reach water streams that soon dry up".

While in most cases the civil society outlook is more pessimistic than that of governments, one notable exception is Zambia and UPE, where the government says that it is potentially likely that this Goal will be attained while CSOs say, "this Goal is more than likely to be met".

2.3 Reasons for good progress

Analysed further, the following observations and lessons can be drawn from the above assessment of the perceptions of civil society:

2.3.1 Level of development - where there is a good starting point

To a great extent, performance on the Goals is influenced by the level of development a country has attained. A middle-income country, for example, may meet a goal because its starting point was close to the target, so the progress needed may have been quite modest. Several of the countries featured in this report that are on track to reach certain MDGs are considered middle income developing countries, such as Grenada, Jamaica, Samoa, Sri Lanka, and Trinidad and Tobago; though the significant range within the middle-income bracket must also be noted. Jamaica and Sri Lanka, for instance, have gross national incomes (GNIs) of US$2,900 and US$1,010 respectively. Trinidad and Tobago's GNI is US$8,580 and Samoa's is US$1,860.[11] Notwithstanding, this contributes to indicators that show excellent progress on a number of MDGs, particularly those related to disease, education, and hunger. Trinidad and Tobago has an adult literacy rate of 98.5% and a youth literacy rate of 99.5%.

There is, however, no automatic correlation between good progress on the social development goals, such as health and education, and on poverty reduction. Trinidad, for example, is still "lagging" on Goal 1 - eradicating extreme poverty and hunger. Sri Lanka is similarly lagging in progress on Goal 1. The civil society report notes broad agreement that halving the proportion of people in poverty between the base year 1990 and 2015 was not an achievable goal. National surveys have reported that the proportion of the population below the official poverty line increased between 1990 and 1995 and declined somewhat subsequently, with an overall marginal decline from 26.1% in 1990 to the recent level of 22.7%.[12] While there is no record of Sri Lankans dying of extreme hunger, the only data pertaining to nutritional status indicates that the percentage of underweight children under five years of age declined from 38% in 1990 to just 29% in 2003; and the proportion of the population below minimum levels of dietary energy consumption was 50.9% in 1990 and 51.3% in 2003. CSO representatives noted also that the multiple dimensions of poverty needed to be incorporated in targets and indicators for a realistic appraisal of progress. Notwithstanding the slow progress on Goal 1, both participation and retention rates for primary schools and youth education are as high as 97% attained over six decades of compulsory education in Sri Lanka.

10 Cited in Hakro et al. 2005.
11 World Bank 2005.
12 Household Income and Expenditure Survey (HIES), 1990, 1995, 2002 need to clarify where from?

2.3.2 Good policies accompanied by political will

The level of economic development, though a contributing factor to MDG attainment rates, is not sufficient without good policies and "political will". All the countries with high attainment rates have had good policies in respect of those goals where performance is high. However, a country's performance may be strong in one goal and relatively weak in another, as is the case for Grenada on debt, Sri Lanka on poverty and the environment, and Trinidad and Tobago on HIV/AIDS. There are chances that more resources will be provided and performance will be enhanced on those goals that enjoy extra political focus, as is the case of Sierra Leone on child and maternal mortality, Uganda with HIV/AIDS and UPE, and Zambia with primary school enrolment.

Box 2.1 **Political will in Uganda and Sierra Leone**

Uganda has been ranked as a high performer on HIV/AIDS, notwithstanding its GDP of US$270. This remarkable achievement has been attributed to "effective political leadership". Uganda was among the first countries to go public on the issue of HIV/AIDS almost a decade ago and has consistently placed the issue very high on the political agenda. This has been reflected at the technical level, with the formation of a multi-sectoral commission on AIDS, support by donors and an effective public education campaign focused on abstinence, fidelity and condoms. The result has been a prevalence rate cut from more than 20% in 1991 to 6.5% in 2004, even as a number of other Sub-Saharan Africa countries have suffered from increasing prevalence in the face of a reluctance to acknowledge the existence of the problem until HIV/AIDS had spread widely, thereby making the disease much harder to contain.

Despite the fact that conflict ravaged Sierra Leone's economy for 11 years between 1991 and 2002, progress is being made on alleviating the problems of the health sector and this has improved the national child and maternal mortality rates. Data from the Ministry of Health currently puts child mortality at 170/1,000 live births in contrast to 286/1,000 in 1990. And despite sombre statistics on maternal mortality, there is demonstrable government commitment to improving national health delivery outreach to rural communities, through decentralisation of the health services, as a key component of the national recovery strategy.

"Political will" or lack of it has been mentioned in a number of national reports as an important factor affecting the attainment of the MDGs. CSOs sometimes perceive a lack of political will to be behind the unwillingness of governments to raise the profile of an issue. For example, they suggest this has stymied progress in Uganda on child mortality and maternal health, and in Jamaica and Tanzania on environmental protection. In Uganda, strong political will to address HIV/AIDS at an early stage has halted and reversed the spread of disease from a high prevalence rate of more than over 20% in 1991 to 6.5% in 2004, even as a number of other Sub-Saharan Africa countries, such as Malawi and Zambia, were reluctant to acknowledge the existence of the problem. Some CSOs suggest there is sometimes a correlation between a government's demonstration of political will and political capital. For Uganda, UPE, HIV/AIDS and women's empowerment have generated a lot of political capital for the National Resistance Movement Government now governing the country.

Political will can bridge the gap between rhetoric and reality, matching political statements to budgetary allocations and other forms of demonstrable political action. In the case of UPE, countries such as Sri Lanka and Zambia have backed policies with resources to ensure that children actually go to school and that facilities are adequate for them to learn. In Sri Lanka, both participation and retention rates for primary schools and youth education are as high as 97% because policy has been supported by budgetary resource allocations, which are then utilised as allocated because of the high political risks associated with abuse and misuse. In Uganda, primary school enrolment jumped from 2.5 million to 7.3 million (86% of all school going children) in less than ten years of the implementation of the UPE policy.

CSOs also suggest that a lack of political will may be behind the reluctance to enforce or even enact laws to counter those cultural and traditional beliefs and practices that militate against women's empowerment. This is particularly the case in strongly patriarchal societies, where both custom, and traditional male dominance in the executive and legislative branches of government, contribute to a lack of commitment to change, despite, in some instances, a willingness to express support for change during electoral contests. In Tanzania, for example, it is reported that "despite the existence of good policies and legislation, women - especially in rural areas - remain underrepresented in politics, economics and social decision making. This is attributed to customs that discriminate against women, particularly their ownership of land and other productive assets", which politicians are not ready to implement.

Lastly, lack of political will is also a contributing factor to the wide gap that exists between the rhetoric and reality in the performance of the international community on MDG 8, particularly with regard to fair trade. In addition, many donors have failed to increase the level of ODA to the agreed 0.7% of gross national product (GNP), which in turn has constrained developing countries in their efforts to meet the MDGs.

2.3.3 Effective partnerships

A number of country reports, such as Cameroon, Ghana, Jamaica, Sierra Leone and Zambia, have stated that partnerships play a critical role in progress towards attainment of the MDGs. For example in Zambia, "the MDGs have brought new space and opportunities for developing and strengthening partnerships especially by closing the gap between CSOs and the World Bank, the IMF and the United Nations system as a result of the interaction through the Task Force on the MDGs." In Uganda, the involvement of key players, such as donors, opinion leaders, church bishops, non-governmental organisations (NGOs), traditional healers, educationalists and many others in anti-HIV/AIDS programmes, has boosted the chances of success in halting and reversing the spread of the disease. Since its inception, the multi-sectoral Uganda AIDS Commission has been chaired by a church bishop, reflecting the central role that the church has played in fighting the pandemic.

The Cameroonian and Zambian community schools provide another example of effective partnerships (see box 2.2). They are founded and run by the churches and other CSOs, and enable more children to go to school, as well as increasing community awareness of the need for children to go to school. In Sierra Leone, the MDGs have strengthened the partnerships between CSOs, government and the private sector. This is expected to help mobilise the resources required to achieve the Goals and direct them to priority areas, such as agriculture, rehabilitation and reconstruction of infrastructure, a new approach to youth employment, women and children's empowerment; and more generally, to ensuring security.

2.4 Reasons for slow progress

2.4.1 Unfavourable power structures and economic systems

In Pakistan and Tanzania, CSOs note that power structures and economic systems are militating against the attainment of some Goals. In Tanzania, the focus is at the local level, where a combination of political power, and cultural and traditional beliefs conspire to keep women disempowered politically, economically and socially. The Pakistan report, on the other hand, seems to have the international political and economic structures and systems in mind when attesting, "without changing these power structures and economic systems, it is not realistic to expect dramatic changes in favour of attaining MDGs". It adds, "There is no indication that policies... will work without challenging the fundamental structures that create and perpetuate injustice, inequity and poverty".

2.4.2 Lack of a supportive environment for CSOs

A number of the country reports suggest the potential of civil society is not being harnessed, even though the recognition and engagement of civil society in the efforts to achieve the MDGs would contribute significantly to the level of progress. Notable cases are Pakistan, where CSO activity is politically restricted, and Grenada, where there has been tension between the government and CSO tensions for the past decade and the lack of an enabling environment for CSOs. This is also the case in other countries, such as Cameroon and Tanzania, where there is mutual mistrust between governments and the CSOs.

2.4.3 Harder to move people from the margins

An interesting issue to emerge out of the national reports is that after making initial progress and attaining a level of success, it becomes harder to make marginal gains. For example, in Samoa, it is considered "a major undertaking" to achieve a 100% enrolment rate of primary school children in ten years from the current 84.5%, requiring only an annual increase in enrolment of 1.6%.[13] This is because "children affected will increasingly be those at the margin", children with special needs and those from very poor rural and urban neighbourhoods. The Samoa case illustrates the equity

13 *Elisara-La'ulu 2005.*

challenge that middle-income countries face when struggling to address effectively what Jeffrey Sachs refers to as "pockets of poverty" in marginal populations - people with special needs, religious or ethnic minorities or the extremely poor. In this respect, the concerns of middle-income countries are quite different from those of low-income countries and what is needed for MDG attainment is different.

2.4.4 Limited awareness of the MDGs

Several of the countries reviewed, such as Ghana, Grenada, Jamaica, Samoa, Sri Lanka and Uganda, report limited knowledge of the MDGs among the poor, within CSOs and even among local and central government officials. This suggests the MDG agenda is not being championed within government or civil society. The lack of media coverage of MDG-related issues in many countries also suggests possible limited awareness and appreciation among media owners and professionals. In Grenada, the CSOs report, for example, that the MDGs have not yet permeated the government's planning processes, making it difficult to assess progress there. An assessment of local government in the Gulu, Jinja, Mbarara and Soroti districts in Uganda has revealed very low awareness of the MDGs, and as a result, they are not reflected in district development plans.

In contrast, the Ghana report notes the recent incorporation of the MDG framework in local government planning processes. This is mainly as a result of CSOs' efforts to increase awareness among these officials. "Most district assemblies (local governments) now relate their programmes to MDGs. CSOs have initiated local MDG projects aimed at empowering local governments to plan, monitor and review their programmes in the context of MDGs". General lack of awareness of MDGs limits the extent to which the framework is employed to spur development and the extent to which MDGs are used to hold governments to account.

2.5 Usefulness of MDGs as development framework

In the past, CSOs have criticised the MDGs as another development strategy with yet another set of targets, and as inadequate for addressing the development needs of poor countries. However, as emphasised by a respondent from the United Nations Development Programme (UNDP) in the Uganda report, it is critical that CSOs properly understand the MDGs in order to assess and criticise them for what they are, rather than for what they are not. "MDGs should only be perceived as a tool for analysing a country's development objectives. They do not prescribe the means by which a country attains its development goals. The country has to identify its own way of going about the attainment of the MDGs."[14] The following civil society perceptions illustrate the shift CSOs are making in their appreciation of the positive and value-adding role of the MDGs, although a number still consider the Goals inadequate in some areas, including conflict and gender.

2.5.1 MDGs as "oxygen"

Notwithstanding the limited popular awareness of the MDGs, CSOs have identified a number of positive attributes of the MDG framework. In the Cameroon report, MDGs are referred to as "oxygen" in the development process. Jamaican CSOs consider the MDGs a good tool for stocktaking and capturing more systematically the development work that governments and CSOs have been doing all along. According to the Tanzania report, CSOs actively advocated for time-bound commitments to end poverty to emerge from the UN conferences of the 1990s. MDGs are seen as a positive response to that call since they are specific, time-bound and appropriate, lending themselves to easy monitoring by CSOs.

MDGs have added value and focus to CSO advocacy work at both national and international levels. For example, according to the Tanzania report, MDGs offer the opportunity to create global South-South and North-South solidarity for "making poverty history". In Grenada, while the MDG framework has not significantly driven the agendas and work of CSOs, significant congruence exists, and many CSOs admit that MDGs are inherent in their philosophy and *raison d'etre.*

2.5.2 "MDG Plus" targets

The "MDG Plus" approach can be applied to raise the bar and set national targets that are more ambitious or relevant than those of the MDGs, or mitigate against the complacency that can develop after achievement of the initial targets. It can also motivate countries to set national targets which are more ambitious or relevant

14 Dr. Alexander Aboagye, cited in Sebina-Zziwa et al. 2005.

than those of the MDGs. In countries such as Samoa, Sri Lanka, Trinidad and Tobago, and other middle-income developing countries, there is reference to the "MDG plus" agenda. Trinidad and Tobago, for example, is reported to be well on course to eliminating gender disparity in all levels of education and has succeeded in achieving parity in gross secondary enrolment. However, this is not reflected in levels of employment or incomes. For instance in 2002, women earned 50% less than men in comparable positions, "despite their higher educational achievements". CSOs want targets that address this gender disparity. In Sri Lanka, where six decades of free primary, secondary and tertiary education, compulsory education legislation, and numerous incentives for participation in education have resulted in 97% enrolment and retention rates, with problems confined to small pockets in low-income urban neighbourhoods, remote rural areas, plantation workers and conflict zones. Sri Lanka's focus has now turned to indicators that reflect quality of education, learning achievements and participation in technical/vocational education. In Jamaica, CSOs would like educational achievement to be measured in terms of numeracy, literacy and a reading culture, not simply attendance. Similarly, male academic underachievement, which is well below par, should also be addressed. And civil society activists contend that while women's educational achievement is above that of their male counterparts, they are twice as likely to be unemployed as men. CSOs want the government to set targets and indicators for reversing these anomalies.

2.5.3 MDGs and national planning

In a number of countries, such as Cameroon, Ghana, Sierra Leone, Trinidad and Tobago and Zambia, the MDGs have been integrated into the PRSPs or the equivalent national development planning framework. In Trinidad and Tobago, they are at "the heart of the country's Vision 2020".[15] In Cameroon, the national PRSP has been designed to be in line with the MDGs. According to the Prime Minister, "government policies are strategically framed in the PRSP to reflect government's ambition to attain the Millennium Development Goals". In Sierra Leone, CSOs monitor MDGs in the context of PRSPs. However, in Ghana, while many of the Ghana Poverty Reduction Strategy goals are well linked to the MDGs, some of the links between the MDGs and this Strategy are "often tenuous", such as the link between macroeconomic stability and the reduction of extreme poverty and hunger. In many other poor countries, the former always supersedes the latter. The conditionalities associated with macroeconomic stability impose restrictions on efforts to attain MDGs. These include levels of investment in social sectors, also known as sector ceilings. In Zambia, although the MDGs feature very little in the PRSP, mentioned directly only three times in an 82 page document, they have in fact been domesticated, which, according to the Zambia national report, "is a necessary condition of their attainment". The Goals are expressed somewhat differently but without changing their essence. Consequently at least 11 of the MDG targets are represented in the Zambian PRSP under economic growth (Goal 1), social investments (Goals 2, 3, 4 and 5) and cross-cutting issues (Goals 6 and 7). As the report puts it, "it may need to be said that PRSP and MDGs are complementary. The MDGs will be a good basis for extending the targets of the Fifth National Development Plan (2006-11) now under formulation".

2.5.4 A tool for mobilising resources

CSOs acknowledge the potential of the MDGs to mobilise additional resources for development, coming as they do at an unprecedented time when the world community has at its disposal the proven technologies, policies and financial resources to make poverty history. The need for financing led to the 2002 Monterrey Financing for Development Conference, at which the donor community pledged the resources needed to attain the MDGs and sustain their impact on the poor. What is needed now is for the rich nations to demonstrate "political will" and fulfil their promises. CSOs have since engaged with the Finance Ministers of the Commonwealth Heavily Indebted Poor Countries (HIPCs) using the MDG framework to advocate total debt cancellation and support an enhanced version of a relevant UK proposal.

CSOs appreciate the MDGs as a means of streamlining the flow of resources to strengthen their performance and improve their ability to carry out their mandates. They also see them as a rallying point for increasing resources through aid, trade and debt relief, and as a means to curtail the ever-changing priorities of development partners.

2.5.5 A tool for re-prioritisation of poverty

CSOs view the MDGs as a countervailing force to, or at least a toning down of, the neo-liberal development paradigm, which has dominated global thinking and subjugated African analysis and analysts[16]. With the MDGs, CSOs feel they can persuade their governments to re-prioritise poverty by addressing issues that have not been on the national development agenda. These

15 McDonald 2005.

16 Sebina-Zziwa et al. 2005.

include such issues as: the right of the poor to basic services; the needs of women, youth and other vulnerable and marginalised groups; hunger; malaria; and the environment. In some countries, the MDGs address the neglect of development in rural areas where the majority of the poor live. The centrality of participation and ownership, issues of governance and other issues set out at the country level and not prescribed by the International Financial Institutions (IFIs), distinguish the MDGs from other development frameworks. Some of the papers, notably Cameroon, Malawi and Zambia, expressed serious concern about the impact of IFI conditionalities on education and health, especially with regard to the adequacy of trained personnel.

2.6 Where the MDGs fall short

However, in a number of countries, the MDGs are perceived to be minimalist, like the Basic Needs Initiatives of the 1970s, which, the Sri Lanka report notes, fell short of that country's more ambitious goals on education and health. Women's groups in particular find that MDGs compare unfavourably with CEDAW and the Beijing Platform of Action, particularly in their failure to adopt a rights-based approach. This is blamed partly on the fact that the Goals were not developed in the participatory manner that has come to be taken for granted in many national and international development initiatives. Putting it even more strongly, the Jamaica report asserts that the MDGs "signal a fundamental clash of values and principles... People wondered aloud, 'Where were we in the debate and adoption of MDGs? Where was the commitment to good governance underscored by people's participation and their lived experiences?'"

In Sri Lanka, women's organisations point to the fact that the MDGs have excluded reproductive health and rights, which featured strongly at the Cairo and Beijing Conferences and which were retained at the most recent Beijing Plus Ten meeting in New York. The questions of unequal power between the sexes and between nations are not addressed in the MDGs. The question of how to ensure political commitment to fundamental change in society, which is central to women's empowerment, is also not addressed. In Uganda, the neglect of issues related to conflict came up very strongly in a civil society meeting in the conflict-affected north of the country, "For us in the conflict areas, we feel marginalised even by the MDG framework itself. Looking through the 8 goals, we find nothing explicitly referring to conflict and yet this is a major challenge in Uganda and many other African countries."[17]

2.6.1 Resource flow mechanisms

CSOs point out that mechanisms to enhance the flow of resources to poor countries were not well articulated in the MDG framework. While obligations on donor governments are very well articulated in Goal 8, the mechanisms by which individual developing countries and their civil society sector can know how much aid is supposed to flow to their country are not at all clear. This has negative implications for popular support.

2.6.2 Goal 8 overcrowded

For many CSOs, Goal 8 is overcrowded, lumping together too many issues, which makes it difficult to assess. For example, Sri Lankan CSOs could not understand how youth employment related specifically to this goal. Issues of land-locked countries and small island developing states (SIDS) are not very well articulated. Reference to partnerships is limited to donor countries, excluding other players in the global arena, including the private sector, except for pharmaceutical companies, and corporations dealing in information and communication technologies (ICTs). There is no mention of the critical role of civil society organisations and people's organisations, this despite the Millennium Declaration's calls for strong partnerships with the private sector and CSOs in pursuit of development and poverty eradication.

2.6.3 Lack of data to assess donor performance

While donor-related indicators are critical to the global economic environment that impinges on the economic prospects of developing countries, CSOs lack access to the data needed to assess how well donor countries are performing. Likewise, while the introduction of macroeconomic policies that led to the imposition of user fees in health services has reduced the proportion of the population with access to affordable essential drugs, it is difficult to quantify the culpability of donors. Also, there is concern about the rural-urban and gender digital divide in access to rapidly advancing information and communication technologies. Donors are not providing the necessary support for poorer countries to close this divide.

2.6.4 Weaknesses of the global governance system

Various civil society fora, for example in Jamaica, have debated the rationale for increased resources being dedicated to the "war on terrorism", and the cost to developing countries of compliance with the demands of the "war". They have also questioned the rules-based system of the World Trade Organisation (WTO) which

17 *Sebina-Zziwa et al. 2005.*

favours the free movement of goods and services from the North to the South; and increasing restrictions on the movement of people except those, such as health and education professionals, needed in the North. CSOs believe that there is a clear double standard in operation,[18] with the global governance system failing to reflect the ideals set out in the Millennium Declaration.

2.7 Contributions of CSOs to the MDG agenda

From the national reports, two seemingly contradictory realities sit side by side. In a number of countries, there is a general lack of familiarity with the specifics of MDGs, and CSOs state that these do not drive their agendas. On the one hand, CSO familiarity with the MDGs is quite low in most of the countries. On the other hand, the MDGs strike a chord with CSOs as they are considered inherent in their philosophy and are even described as the raison d'etre for CSOs.[19] Therefore, in considering the contribution of CSOs to the realisation of the MDGs, it is important to acknowledge first that MDGs are very much a continuation of what CSOs are formed to achieve. CSOs say that the MDGs re-affirm the "values and principles" of member states such as solidarity and shared responsibility. They also serve as a renewal of commitments to ensuring "peace, security, development and poverty eradication", among others, issues that have long been on the development agenda of most, if not all CSOs. So while the term MDGs may be relatively new, the issues that they are dealing with are not. Many CSOs - ranging from faith-based organisations (FBOs) to community-based organisations (CBOs) to NGOs - have been addressing the issues encapsulated in the MDGs, without necessarily placing them in that framework. This is particularly so in education, health, HIV/AIDS, water and sanitation.

However, it should also be noted that in most of the countries, apart from feedback in meetings and occasional reports, there has been no consistent research undertaken to document the contribution of CSOs to the realisation of the MDGs. Nevertheless, as identified in the national papers written for this report and summarised in figure 2.2 below, in almost all countries, the important contributions of CSOs can be categorised as falling in the areas of service delivery, lobbying and advocacy, empowerment and awareness building.

In service delivery, other than involvement of international agencies in the delivery of infrastructural emergency/immediate post-emergency assistance, CSOs tend to focus on the "softer" aspects of development. In Grenada, for example, CSOs have contributed significantly towards the achievement of Goals 1-7, through their traditional focus on poverty reduction, employment, health, education, the environment and other people-related issues. This focus is historical as

Box 2.2 Service delivery in Cameroon and Zambia

In Cameroon, local NGOs and associations have registered significant achievements in relation to social services such as education and health at the community level. The Catholic Church has been acknowledged by the state for its community services and involvement in MDGs. It has to its credit: 1,166 schools with 360,440 students, which account for nearly one third of the total school services in the country. It has founded and manages 211 health centres, treating more than 200,000 cases annually. It also has social initiatives for poverty reduction operated through "Human Promotion Organisation", spread all over the country and involving the training of out of school students. It also has rural and urban community development programmes aimed at promoting gender equality and women's empowerment.

In 1996, CSOs involved in education in Zambia decided to expand the establishment of community schools in order to respond to the increasing numbers of children without access to education. Access was limited by distance to school and the costs of being in school. With only 38 schools and 6,599 pupils in 1996, the numbers increased to 1,335 schools and 176,629 pupils by 2002. It is estimated that in 2005 there are nearly 3,000 schools and 588,000 pupils, representing 25% of Zambia's total school population. More communities are being targeted for support to establish their own schools. It is expected that by 2015, all children in Zambia will be in school as per the MDG target. Community schools have been able to reduce, to the barest minimum, the cost of being in school through use of simple infrastructure and no demands on pupils for school uniforms or any other costs. The increase in the number of community schools has been facilitated by an agreement between the Government of Zambia and the Zambia Community Schools Secretariat representing more than 50 CSOs.

***Source:** Country reports on Cameroon (Tsounkeu 2005) and Zambia (Kapijimpanga 2005)*

18 Grant-Cummings 2005.

19 Moses 2005.

many CSOs were formed to address state and market failures in respect of social development, and they have often tackled specific societal needs. In Zambia, CSOs are actively involved in setting up and managing community schools, which contribute 25% of access to primary education. In Malawi, the Christian Health Association provides 40% of hospital beds in the country; while in Uganda, FBOs provide at least 30% of all health care services. In countries experiencing natural and man-made disasters, such as Grenada, Sierra Leone, Sri Lanka and Northern Uganda, CSOs have, in addition to their role in humanitarian emergency relief, proved effective at providing psycho-social care to those affected and bridging the gap between the relief and development phases. See Box 2.2 (left) Service delivery in Cameroon and Zambia.

CSOs strive to meet the needs of those not reached though the "trickle-down" approach to development, the dominant development paradigm. Increasingly, they do this through lobbying and advocacy aimed at getting more official resources to these marginalised groups. These include the chronically or seasonally poor, ethnic minorities and other vulnerable groups. CSOs have also become a source of information on vulnerable groups, such as orphans, and are the experts on chronic poverty, on whom governments themselves have to draw for policy-making.

In many low-income HIPCs, at least 10% of the population is chronically poor and requires social welfare. Another 10% is seasonally poor. However, most of the government interventions target "viable" households, leaving the 20% chronically and seasonally poor to be taken care of by the informal and family/community based welfare systems and where they exist, by CSO interventions. These are sometimes without adequate co-ordination and have fairly high transaction costs and often include in-kind support or micro-credit or are tied to specific economic activities. Yet what the chronically or seasonally poor need is cash to use flexibly for their priorities and contingencies. As a result, the very poor have largely remained unaffected by many of the interventions designed to assist them.

Consequently, current development thinking is moving in favour of social cash transfers to reach the chronic poor, like one being piloted in Kalomo district in Zambia. Households headed by children, the elderly and women are given US$6 in cash (equivalent to a 50kg bag of maize). The household heads make rational decisions about use of the transfers, relating specifically to their individual circumstances. Some buy basic necessities, others invest part of the transfer in subsistence agriculture, while others save some of the money in banks or through the traditional informal savings scheme - "chilamba". The impact has been significant: there are fewer incidences of begging, more children staying in school, and increased feelings of well-being and hope. If the scaling up is as successful as the pilot, such schemes are likely to gain greater currency in development discourse and in practice.

In countries such as Cameroon, Ghana, Tanzania and Malawi, CSOs have taken up the role of monitoring the performance of the MDGs, providing independent feedback to the government and the development partners. They are producing reports which inform government policy; and they are usually supported in this work by UNDP and other members of the UN system, such as the United Nations Children's Fund (UNICEF). In Malawi, for example, the Malawi Economic Justice Network and ActionAid International are tracking the utilisation of HIV/AIDS resources; while in Uganda, CSOs monitor the use of the Poverty Action Fund resources, which are savings from the HIPC debt relief. In Ghana, CSOs working in the water and sanitation sectors have recently put in place a framework for monitoring the relevant targets.

Figure 2.2 Contribution of civil society organisations to the realisation of the MDGs

Country	Type of contribution
Cameroon	• Education, vocational training for school drop-outs with 1166 schools in all the 23 church districts serving 360,440 students (1/3 of the total number of schools in Cameroon) • Medical care, water supply and sanitation • Setting up CBOs and building their capacity, community mobilisation, monitoring MDGs
Ghana	• Delivery of services, with the highest concentration of activity in the areas of health, water and sanitation, education and HIV/AIDS • CSOs also involved in agriculture and food security, advocacy, accountability, community mobilisation, and monitoring MDGs
Grenada	• CSOs are involved in advocating for good governance • Historical role is in Goals 1-7 for issues not addressed by government or the market • Since Hurricane Ivan, CSOs considered the best medium for engaging with, catering for, and delivering on community needs • Very active in advocacy, particularly on issues peculiar to SIDS
Jamaica	• Projects related to education, health, community development, disaster preparedness, environmental issues (such as biodiversity - marine and land conservation, water and sanitation)
	• Advocacy on gender, HIV/AIDS, child development, governance at local and global level, trade and debt cancellation, MDG awareness creation
Malawi	• CSOs are involved in good governance, plus campaigns on aid, trade and debt cancellation • Large international NGOs have aligned their development activities to MDGs • Some CSOs involved in the environment such as tree planting; some in monitoring; most in HIV/AIDS, food security and gender
Pakistan	• General lack of enabling environment for CSOs • Poor link between CSOs and government • Collective influence nominal • CSOs set up gender and human rights campaigns • Involved in awareness creation through information sharing
Samoa	• Providing services addressing children with special needs from a holistic development approach • Traditional healers providing maternal services • NGOs involved in preventive and remedial health care; women's health committees promote health • Partnerships in environment
Sierra Leone	• Emergency relief • School feeding in rural areas • Awareness raising in local communities, • Sensitisation on HIV/AIDS • Human rights advocacy
Sri Lanka	• Though CSOs are not directly involved with MDGs, they have been active for decades in MDG-type activities, such as poverty reduction through income-generating activities and livelihoods promotion; non-formal education and functional literacy; creation of tele-centres; promotion of gender equality; health issues, particularly child survival campaigns • CSOs delivering psycho-social support to people affected by the tsunami
Tanzania	• Education, health, disability, HIV/AIDS, environment and good governance including capacity building and awareness creation - mass media programmes; lobbying and advocacy • Shadow reports by Social Watch, setting up grassroots monitoring focal points
Trinidad and Tobago	• High level of advocacy, ensuring adequate representation of the voices of ordinary citizens, particularly on service delivery, resource mobilisation, research and innovation, human resource development, public information and education • CSOs represented on multi-sectoral committees; active on gender, collaborating on HIV/AIDS and the environment
Uganda	• Health, education and water: CSOs, particularly FBOs, founded and still manage schools and health facilities, providing 30-40% of health services; CSOs provide 30% of safe water • Support to vulnerable groups such as home care for HIV/AIDS patients, psycho-social support to fomally abducted children in northern Uganda, care for AIDS and war orphans • Policy advocacy: anti-corruption campaigning; gender budgeting training for government staff; environmental protection; debt and trade campaign • Women's empowerment
Zambia	• General sensitisation on MDGs, empowerment activities, • Education, particularly in starting the 1,149 "community schools", promoting girl-child education • Heath, particularly training of community health workers (such as traditional birth attendants) and delivery of services for HIV/AIDS under the Global Fund to fight AIDS, Tuberculosis and Malaria • Raising environmental awareness • Campaign for debt cancellation; one CSO working on trade issues

Source: *Constructed from 13 developing country national papers prepared for Breaking with Business as Usual: Civil Society Perspectives on the MDGs*

2.8 Challenges to civil society contributions

Civil society faces a variety of challenges in its attempts to contribute to the attainment of the MDGs. Some of these challenges are set out below.

- Limited advocacy capacity: The advocacy role of CSOs is limited and sometimes ineffective, as noted in reports from Ghana and Pakistan. The question of how to increase the effectiveness of CSO influence on public policy and practice is high on the agenda.
- Insufficient financial resources: CSOs expected that increased resources for MDG implementation would be channelled to them, given their on-the-ground role in service delivery. This has not happened and in many countries there are no clear mechanisms which might facilitate this. The smaller local NGOs and CBOs, which ironically are closest to the people and whose overhead costs are minimal, face the most adverse impacts of limited resources.
- Dominance of large and international: NGOs The lack of resources for smaller local organisations is compounded by the influence of larger national and international NGOs and UN agencies. These dominate the advocacy space, funding and operational programmes, resulting in the migration of staff to larger NGOs and donor agencies, and the dying off of those smaller CSOs that cannot compete favourably.
- Lack of clear mechanisms for enforcing donor compliance: The inability of the international community to enforce donor compliance on trade issues, for example, or on increasing aid levels to the agreed 0.7% of GNP, has been very frustrating for CSOs across the Commonwealth. This has proved a challenge to their campaigning and lobbying skills.
- Limited community ownership of development processes: Lack of community ownership and leadership of the development agenda, and limited understanding of the agenda for the MDGs at local level, have resulted in many communities not being able to mobilise or strategise within the MDG framework, as noted by the Ghana report.
- Absence of institutional arrangements for CSO-government engagement: The lack of clear principles for CSO-government partnerships can result in tensions between the two, leading to underutilised potential for implementation, as in the case of Grenada, where polarisation has hampered CSO involvement in community mobilisation.
- Scepticism bred by limited progress and perceived corruption: Scepticism de-motivates CSOs from playing their role effectively. In cases where CSOs perceive that government potential for attainment is high, but the attention it is giving to an issue is low, they and the population in general tend to become sceptical. In Zambia, CSOs are frustrated by the lack of visible progress and, as is the case in other countries, by their perception that their government may be corruptly diverting resources from their intended use.

2.9 Opportunities for civil society presented by the MDGs

2.9.1 Partnerships

According to the national reports - especially from Ghana, Grenada and Uganda - the CSO niche in most developing countries is at the community level. There, they forge partnerships with local governments and even gain access to funds through the decentralised system of government now obtaining in most countries in the Commonwealth. While this presupposes emphasis at the local level, CSOs should never lose sight of the bigger picture, given that policies are largely set at the national and international levels.

The MDGs have helped to improve CSO-government partnerships, even where these have been weak or strained. For example, in Cameroon, "the MDG framework has provided a platform for improving partnerships. Despite original reluctance by government to work with CSOs, MDGs have become the rallying point for government, donors, private sector and CSOs to meet and discuss developmental issues".[20] The MDG framework has also strengthened other partnerships among CSOs, especially between local and international NGOs and between CSOs and donors/UN in Zambia; as well as between CSO and the private sector, as is the case in Sierra Leone. In Zambia, the MDGs have provided new opportunities for partnerships particularly with regard to universal primary education, where the government has entered into a Memorandum of Understanding with the Forum for Female Educationalists of Zambia. Additionally, space has been created for CSO participation in the National Task Force on the MDGs; and CSOs have contributed to the elaboration of the National Policy on Environment, countering the lack of cohesion between CSOs and the government on environmental issues that previously existed.

Unfortunately, partnerships can sometimes unravel or work at cross purposes. For example, in the fight against HIV/AIDS, some partners have de-emphasised the use of

20 Tsounkeu 2005.

condoms in a bid to promote abstinence and fidelity; a focus believed to be engineered by some sections of the church and lobbies in some donor countries. In Uganda, this is actually threatening to reverse the gains of the last decade. While the church is a very important player, its conservative stance on HIV/AIDS poses a serious problem, as cited in the Uganda national report, "From the Vatican to the US Government, conservative forces continue to resist real understanding of the virus and the social conditions in which it flourishes - poverty, denial of women's rights and moral high ground".[21]

2.9.2 Increased networking

According to the Ghana and Cameroon reports, the MDGs have presented opportunities for increased networking between CSOs and government, as well as among CSOs within the countries; an approach which hitherto was only visible among NGOs working in the same geographical area. In Ghana, a National Committee on MDGs has been formed and brings together UN agencies, government departments, development partners and CSOs. Meeting monthly, this provides an important platform for improved co-ordination and networking. In a number of other countries, such as Tanzania, Uganda and Zambia, CSOs are working closely with the UNDP and with the government to increase general awareness of, and involvement with, the MDGs. Through the CSO-led Millennium Campaign, there is increased awareness and rallying around MDGs by the major development players locally, nationally and globally. In Zambia, the newly formed Civil Society National Committee has begun a process of mobilising resources in order to increase the capacity of its membership to take up sensitisation and increase the role of their stakeholders in contributing to the attainment of MDGs.

2.9.3 Increased capacity to lobby governments

According to the Ghana report, the MDGs have enhanced CSO ability to make effective demands on the government, by constantly emphasising national commitment to these international obligations. MDGs have thus become a tool for social accountability, particularly with respect to long-standing demands for improved quantity and quality of services. CSOs are also using the MDG framework to challenge their governments on the credibility of the official reports. In Soroti region in Eastern Uganda, CSOs have used the MDGs to compile status reports on their districts, and use the information to engage with the district officials in the planning process. In Tanzania, shadow reports have been produced by the Social Watch chapter and they provide an alternative, independent source against which to compare government reports. For example, using the Social Watch report, CSOs have been able to challenge and therefore to enrich the official statistics on the provision of clean and safe water. While government was painting a rosy picture of water coverage in rural areas, CSO sampling identified parts of the country where people walk up to 20 kilometres to get to streams, particularly during the dry season, a fact not included in the government report.[22]

2.9.4 Information dissemination

Several national reports highlight a lack of awareness about the MDGs, which they attribute to poor information dissemination. In Ghana and Tanzania, the mass media is being employed to change this. The proliferation of FM radio stations throughout Ghana makes this a feasible campaign for CSOs with limited resources. In countries such as Tanzania and Uganda, the presence of community radios means that information on MDGs can be disseminated widely, at minimal cost. CSOs also translate and simplify MDGs and key policy documents in order to make them more readily accessible to less literate people. In Tanzania, for example, MDGs have been translated into Swahili, the country's official language and lingua franca.

21 Sebina-Zziwa et al. 2005.

22 Social Watch Fact Finding report in Irimba-Singida and Kigoma-Kagoma areas, A case study 2004, cited in Sameji 2005.

2.10 Enhancing the CSO role in delivering the MDGs

Civil society is indispensable as a partner in the development process in general and in the implementation of the MDGs in particular. But the role it plays is not being maximised because the sector lacks certain requirements critical to the effective execution of that role. Extrapolating from the 13 national reports, the following can be highlighted as the requirements of CSOs to enhance their role in contributing to MDGs

Figure 2.3 Requirements for enhancing the role of CSOs in delivering the MDGs

Country	Required support
Cameroon	• Acceptance of CSOs as full partners in the development process • Additional financial resources for the work of CSOs • Development and implementation of a people-centred popular monitoring system • Access to information
Ghana	• Financial support for CSO work in accountability, monitoring and awareness creation at community level, e.g. support to the local "MDG projects" to strengthen the involvement of local government and communities
Grenada	• Increased financial and human resources • Improved CSO operating environment (reduction of CSO-government polarisation)
Jamaica	• Strengthening of resource mobilisation skills • Improved organisational management • Increased technological resources and skills • Exposure to best practices through documentation of learning and exchange mechanisms • Strengthening of CSO ability to partner government and donors, through formalised consultations • Strengthening of CSO networks/focal points
Malawi	• Support for small local NGOs in building their capacity and consolidating their resource bases - particularly important in light of overbearing local presence of large international NGOs • Strengthening of networks and networking • Assistance to make CSO interventions more focused
Pakistan	• Support for "professionalisation" of CSO work in research and evidence-based policy engagement, knowledge management and information sharing
Samoa	• Support with defining, streamlining and formalising the CSO-government relationship • Donor recognition • Increased access to government resources by CSOs
Sierra Leone	• Support for local CSOs to play their multiple roles effectively
Sri Lanka	• Financial resources for CSO programmes and advocacy work, particularly for MDG monitoring
Tanzania	• Capacity building for effective participation of CSOs, particularly in monitoring MDGs and other development initiatives
Trinidad and Tobago	• Support to mitigate the effects of HIV/AIDS on CSO capacity
Uganda	• Strengthening civil society sector co-ordination • Capacity enhancement for CSO policy analysis • Support in ensuring an enabling environment for CSOs
Zambia	• Additional financial resources for staffing, especially for smaller NGOs • Institutional and organisational capacity building

In addition to what has been listed in the national reports and summarised in figure 2.3 above, the following factors emerge as being critical to furthering the effectiveness of CSOs in engagement with MDGs.

2.10.1 Improved skills and capacities

CSOs must be able to navigate the political arena in order to maximise their involvement with the MDG and other development frameworks. Therefore, CSOs need skills to interact with and influence governments, as well as skills for dealing with and surviving in volatile political environments. CSOs also need to be able to communicate better to political players how they add value and contribute to the development process. This is particularly important since it has clearly emerged that "political will" is one of the more important determinants of how well or how badly a country performs on MDGs. It is evident that strained relationships between government and civil society undermine the capacity of CSOs to play their role effectively.

2.10.2 Evidence-based policy engagement

CSOs need to develop a credible monitoring system, which is community-based and feeds into the national monitoring system and policy processes. In some countries like Uganda, CSOs are working with their National Bureau of Statistics to develop micro-level poverty indicators and popular poverty-monitoring systems. These and similar initiatives need to be well documented and widely disseminated to assist countries that do not have such mechanisms. The capacity of CSOs to undertake policy analysis is also at various stages of development and needs to be strengthened. In this era of professionalisation, CSO effectiveness will depend on their ability to undertake credible research and to do independent analysis of official and quasi-government data, in order to come up with evidence-based alternatives. This will require systems for good knowledge management and capacity sharing. It may also require a pooling of resources, particularly within the main networks, so that smaller CSOs can tap into them.

2.10.3 Increased collaboration between local CSOs and international NGOs/agencies

The ability of international NGOs to drive and set CSO agendas in developing countries and dominate the policy space, along with the fact that they attract talented local personnel by offering higher salaries than local organisations, is a source of tension between local and international NGOs. The phenomenon has been described as "fish eating fish". This has been raised in a number of countries and needs to be taken seriously and addressed; preferably by CSOs themselves. International NGOs argue that they need visibility in order for them to grow and increase their effectiveness. This justification needs to take into account the concerns of smaller CSOs, which claim to know the local terrain much better and yet are starved of resources and visibility in their own right. For example, a report used in preparing the Uganda country paper, which documents the achievements of Kitgum district in northern Uganda, only mentions the contribution of two international organisations - the Agency for Co-operation and Research in Development (ACORD) and World Vision.[23] But numerous NGOs, FBOs and other community initiatives have played a significant role in sustaining the district during 19 years of conflict. While the ultimate responsibility for addressing this issue belongs to CSOs themselves, and especially to the leading national networks, the donor community should play its part by ensuring that eligibility criteria for its financial support take CSO resource needs into consideration.

2.11 Recommendations

So what are the keys to progress towards 2015 and MDG attainment? First, political leadership must indicate the political will, commitment and consistency to raise the profile of the MDGs, with particular attention to those goals where performance is "lagging", "off-track", or, in a few cases, "negative". Political will must be reflected in policy prioritisation and implementation; the creation of environments conducive to effective and broad partnerships; closing the gap between rhetoric and reality by governments and the international community; and dealing with cultural and traditional beliefs and practices that militate against the empowerment of girls and women, as well as other marginalised groups. It has clearly emerged that where there are good policies backed by political commitment, the outcomes are always very positive, in middle-income, low-income and post-conflict countries. This may also hold true for donor countries. There is a need to generate political capital in all MDGs, particularly the poor performing ones. It is also imperative that governments work collaboratively to bring the people on the margins of development into the mainstream. Metaphorically, political will is the master key to opening the door to the attainment of the MDGs.

Second, partners should avoid working at cross-purposes on critical aspects such as HIV/AIDS, despite the inevitable differences of approach and emphasis which such goals generate. The church may not want to embrace and emphasise those aspects that are seen to go against its mainstream teaching. However, the call is for all forces to try to understand the complexity of the

23 *Civil Society Organisations for Peace in Northern Uganda, 2002.*

issues, such as those surrounding HIV/AIDS and the social conditions in which it flourishes - poverty, denial of women's rights and moral high ground.

Third, the international community should honour its commitments contained in Goal 8 and free up the resources needed to enable countries that are on track to scale up their successes and those off-track to intervene more significantly; thus also providing a context in which CSOs can operate most effectively. On at least one of the goals, more than 50% of the reporting countries are off-track and at least two of the countries are regressing, while only five report having achieved at least one of the goals: three, for Goal 2, being the highest number of countries to have achieved any one goal. It is not insignificant that on Goal 8, none of the developing countries consider it to have been achieved. Therefore, time is of the essence. As more resources are committed, as at the recently concluded Gleneagles meeting of the Group of Eight (G8) leaders, rich countries must deliver on their promises and recipient countries must make more efficient and effective use of those resources. If there are constraining factors, such as the absorptive capacity of some of the weaker economies, this constraint must be addressed urgently.

Fourth, if political will is the key to opening the door to success of the MDGs, effective partnerships are the hinges on which the door will swing. Therefore, the important - even indispensable - role that CSOs play as key partners should be acknowledged, facilitated, expanded and enhanced. Civil society's contribution needs to be better and more systematically captured, and the constraining factors, identified above, must be addressed. In those countries where the operating environment for CSOs is disabling, there is an urgent need for all actors to combine in addressing this condition. Working collectively, partners will be better able to empty all the other columns, as more countries move faster towards the "Already achieved'" column in the MDG score sheet.

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3

When all things are not equal: natural disasters and attainment of the MDGs

Marlene Attzs PhD
Sustainable Economic Development Unit
Department of Economics,
University of the West Indies

Civil society organisations have had to rise to the challenges presented by Hurricane Ivan by playing a major role in the relief and recovery efforts. Their relevance as viable and pivotal links to communities has been reinforced.

Civil Society Perspectives on Attaining the Millennium Development Goals (MDGs) in the National Context of Grenada.

Achieve universal primary education
Improve maternal health
Reduce child mortality
Promote gender equality and empower women
Combat HIV/AIDS, malaria, and other diseases
Eradicate extreme poverty and hunger
Promote gender equality and empower women
Achieve universal primary education
Ensure environmental sustainability
Reduce child mortality
Develop a global partnership for development
Ensure environmental sustainability
Improve maternal health

Chapter overview

This chapter draws on the experiences of three geographically dispersed developing countries - Grenada, Sri Lanka and Zambia - which have recently been subjected to significant ecological shocks: Grenada and Hurricane Ivan, September 2004; Sri Lanka and the tsunami of December 2004; and Zambia with three severe droughts between 2001 and May 2005. It distils from the country experiences the impact that these shocks have had on progress towards the achievement of targeted levels of development embodied in the Millennium Development Goals.

While natural disasters do not discriminate, it is often the poor, the very group targeted by the Millennium Development Goals, who are most adversely affected because of the vulnerabilities that result from poverty. An effective sustainable development strategy must incorporate an assessment of vulnerability to natural hazards and integrate risk/vulnerability reduction measures into development planning, essentially in order to ensure that disasters do not significantly disrupt the developmental processes and erode gains towards the Millennium Development Goals. Additionally, ecological shocks cannot easily be divorced from the impacts of economic shocks since the former can exacerbate the latter, and vice versa. A proactive approach to managing shocks should be encouraged, with governments and civil society organisations seeking to implement vulnerability reduction policies that target "at risk" communities.

Author Profile: Marlene Attzs

Marlene Attzs, senior technical officer at the Sustainable Economic Development Unit (SEDU), a specialised research unit in the Department of Economics, University of the West Indies (at the St Augustine campus, Trinidad and Tobago), is interested in economic development and the role of CSOs and proactive disaster management. SEDU researches some of the challenges facing small island developing states in the process of gaining sustainable economic development.
Website: http://sta.uwi.edu/fss/centre/sedu.asp

3.1 Introduction

Natural disasters can contribute significantly to a country's vulnerability and, in circumstances where they severely compromise a society's adaptive capacity; there may be enormous, unforeseen challenges to realising specific development targets such as those embodied in the Millennium Development Goals. Data from the Centre for Research on the Epidemiology of Disasters suggests the incidence of reported disasters is on the increase.[1] In 2004, there were 360 reported natural disasters, compared with a yearly average of 307 between 1994 and 2003.[2] Commonwealth member states Grenada and Sri Lanka were among the countries affected by serious natural disasters in 2004. On 7 September the Caribbean small island developing state of Grenada was struck by Hurricane Ivan, a category 3 storm[3] that killed 39 people and affected an estimated 60,000 others (out of a total population of approximately 89,500). Sri Lanka was one of the countries affected by the "Indian Ocean tsunami" of 26 December, which killed more than 30,000 people and affected over a million more in the country. While less spectacular in onset than hurricanes and tsunamis, droughts are no less devastating. According to the 2004 World Disasters Report, between 1994 and 2004 drought and famine accounted for at least 275,000 deaths - nearly half the total for all natural disasters, thus making them the deadliest disasters for that period.[4] Zambia has suffered severe droughts in 2001, 2002 and 2005, which together have affected no fewer than five million people. In all three of these countries, recent natural disasters have had implications for national development and progress towards the MDGs.

In each case above, the country's environmental vulnerability is exacerbated by unsustainable human activities, high population densities, and in some cases, high population growth rates. These characteristics reflect the fact that vulnerability is a complex, multi-faceted issue with economic, social and environmental repercussions.

Natural disasters set back the development process by diverting resources to emergency relief and recovery. There are direct costs of disasters associated with physical damage, and loss of social and economic infrastructure. There are indirect costs that result from "downstream disruption to the flow of good and services", including basic services and telecommunications, as well as loss of productivity due to injury, disease and death. There are also secondary effects, or short and long term impacts on the economy and socio-economic conditions, including such things as fiscal and economic performance, levels of household and national indebtedness, and the effects of relocating or restructuring the workforce.[5] While natural disasters do not discriminate, it is often the poor, the very group targeted by the MDGs, who are most adversely affected because of the vulnerabilities that result from poverty. These include living in poor housing stock and/or on marginal lands; limited cash reserves, if any; limited access to credit; and political marginalisation.

Although none of the MDGs relates specifically to disaster risk reduction, the Millennium Declaration resolves, "to press for the full implementation of the Convention on Biological Diversity and the Convention to Combat Desertification in those countries experiencing serious drought and/or desertification, particularly in Africa"; and "to intensify co-operation to reduce the number and effects of natural and man-made disasters".[6] The Hyogo Framework for Action 2005-15, which came out of the 2005 World Conference on Disaster Reduction, reaffirms the connection between sustainable development, poverty reduction, good governance and disaster risk reduction as mutually supportive objectives. According to the United Nations Development Programme (UNDP), appropriate development policies that reduce disaster risk can make an important contribution toward MDG attainment "by reducing losses and protecting new gains as well as avoiding the generation of new risks".[7]

3.2 Overview of country case studies

This section provides an overview of the three countries featured in this chapter. See the Appendix to this chapter for a summary of the progress of Grenada, Sri Lanka and Zambia towards the MDGs.

3.2.1 Grenada

Owing to its geographical location and small size, the island of Grenada is vulnerable to several different types of natural and other hazards including floods, landslides, tsunamis, storm surges, earthquakes, hurricanes, volcanoes and fires. A particular hazard is the underwater volcano "Kick 'em Jenny".[8] Two major

1 See http://www.em-dat.net/documents/figures/global_trends/nb_dis_global.

2 CRED 2005.

3 The Saffir-Simpson Hurricane Scale, which is commonly used for rating hurricanes, has a total of five categories, with a category 1 storm expected to cause minimal damage and a category 5 storm catastrophic damage. A category 3 hurricane, characterised by wind speeds of 111-130 mph or 178-209 kph, is expected to result in extensive damage, including damage to roofs, windows, doors and small buildings; coastal flooding; destruction of smaller buildings near the shore and wave damage to large buildings next to the shore.

4 International Federation of Red Cross and Red Crescent Societies 2004.

5 Benson 2002, cited in UNDP 2004a, p.12.

6 UN 2000.

7 UNDP 2004a, p. 10.

8 This is an active submarine volcano located approximately nine kilometres off the north coast of Grenada, and between that island and Carriacou. "Kick 'em Jenny" is the most active volcano in the Eastern Caribbean having erupted at least twelve times since its discovery in 1939. Kick 'em Jenny lies approximately 180 metres below sea level, and the last recorded major activity was in 2001.

earthquakes, recorded at 5.7 and 5.9 on the Richter scale, were experienced in 1997. The last recorded tsunami activity was in 1867. Several incidents of major flooding, landslides, hurricanes and storm activities were experienced in the last ten years. The effects of these disasters on the economy were particularly devastating and involved loss of lives and property, costly reconstruction, disruption to economic activity and loss of livelihoods.

On 7 September 2004, Grenada was hit by a category 3 hurricane that resulted in approximately US$900 million in damage to that country. Specific socio-economic impacts from that hurricane included:

- loss of an estimated 39 lives;
- approximately 4000 persons unemployed;
- 89% of the housing stock damaged or destroyed;
- 91% of forest areas and watersheds destroyed;
- 95% of nutmeg trees uprooted[9] and 90% of cash crops destroyed;
- 70% of the hotel room-stock rendered inoperable; and
- 85% of schools damaged or destroyed.

The cost of damage arising from Hurricane Ivan was more than 200% of gross domestic product (GDP). Pre-Ivan projected economic growth was estimated at 4.5% per year; but as a result of the hurricane, Grenada's economy actually contracted by 3.0% in 2004. Since the hurricane, government revenues have slumped dramatically, triggering severe fiscal disequilibrium.

Notwithstanding the socio-economic impact of Hurricane Ivan,[10] at least three of the MDGs - Goal 1 (achievement of universal primary education), Goal 4 (reduction of child mortality) and Goal 5 (improvements in maternal health care) - have already been achieved. In addition, there is an optimistic forecast for another four goals, i.e. the eradication of extreme poverty and hunger, the promotion of gender equity and empowerment of women, the promotion of global partnerships, and combating HIV/AIDS, malaria and other diseases. These four are seen as achievable by 2015. The challenge to maintaining this achievement and to realising the other Goal rests in Grenada's ability to recover sufficiently from Hurricane Ivan and to mitigate effectively against further disasters (given the island's inherent susceptibility to these natural hazards). At this time, the prognosis for Grenada's maintenance of the already achieved goals and for the realisation of additional goals is bleak, given that economic growth in the country declined significantly in the post-Ivan period.[11] The decline in economic growth will undoubtedly be reflected in economic development prospects, at least in the short to medium term.

3.2.2 Sri Lanka

Sri Lanka is vulnerable to two major natural hazards, tropical cyclones and tornadoes. Apart from these hazards, the country is also grappling with other environmental issues, such as air pollution, waste disposal, deforestation, soil erosion, coastal degradation from mining activities, and the increased pollution of freshwater resources by industrial wastes and sewage runoff. On 26 December 2004, Sri Lanka was one of approximately ten countries affected by a major tsunami.[12] The impact of the disaster on Sri Lanka included the following:

- damage or destruction to approximately 100,000 homes (along with crops and fishing boats);
- loss of jobs for more than 400,000 people - mostly in the fishing, hotel and tourism sectors;
- loss of more than 35,000 lives with another 4,000 reported missing;
- more than half a million people made homeless;
- estimated physical damage of between US$1.3 and $1.5 billion (though the indirect macroeconomic implications for the economy much greater than this);
- devastation of the fishing industry and reduced agricultural production;
- damage to tourism, especially in the short term, with earnings from tourism in 2004 expected to be 15% lower than in 2003;
- economic growth in 2004 expected to be 4%, i.e. about 1% less than previously forecast; and
- rise in inflation to 14%, compared to a previous estimate of 12%.

9 Apart from the significant contribution of the tourism sector to the economy of Grenada, agriculture, particularly the export of nutmegs, is a major earner of foreign exchange in Grenada. This coupled with loss of preferential access for Windward Island bananas under new World Trade Organisation arrangements, could have a significant negative economic impact on Grenada's economy and therefore its ability to realise the MDGs.

10 According to the 2005 budget presentation, physical damage was in excess of 2.4 billion Eastern Caribbean dollars (EC$) broken down as follows: housing EC$1.4 billion; tourism EC$406 million; education EC$196 million; agriculture EC$100 million.

11 Prime Minister Keith Mitchell in July 2005 reportedly said that Grenada suffered almost 200% losses to GDP, as a result of Hurricane Ivan. (Source: http://www.jamaica-gleaner.com/gleaner/20050705/business/business1.html).

12 Countries affected included India, Indonesia, Malaysia, Maldives, Somalia, Sri Lanka, Thailand, Bangladesh, Kenya and Seychelles. Other countries suffered secondary damage but the aforementioned countries recorded socio-economic impacts and in some cases, significant loss of life.

It should also be noted that before the tsunami struck, Sri Lanka's economy was experiencing positive growth. Reconstruction in the post-tsunami period is expected to be quite costly since its damaged infrastructure was highly developed in many of the affected areas. The Asian Development Bank estimates the reconstruction cost at US$1.5 billion. The longer-term impact of the tsunami, however, is the effect on the very significant tourism industry, for which infrastructure was concentrated on the south coast of the country. This infrastructure was heavily damaged by the tsunami and about one-fifth of hotels in the region have been put out of action.

In terms of progress towards the achievement of the MDGs, two of the targets have been achieved in Sri Lanka - universal primary education and the reduction of child mortality. However, the civil society forecast for the achievement of other MDGs by 2015 is dim. Civil society organisations (CSOs) are of the view that the extensive damage from the tsunami had a negative impact on social and economic indicators. The southern and eastern coastal areas most affected by the tsunami are among the poorest areas in the country, with approximately 40% living below the poverty line. This pre-existing vulnerability has exacerbated the impact of the ecological shock.

3.2.3 Zambia

The principal ecological shocks to which Zambia is vulnerable are periodic drought and tropical storms between the months of November to April. In addition to these two main hazards, the country also grapples with other environmental problems, such as air pollution and resulting acid rain in the mineral extraction and refining regions; chemical runoff into watersheds; desertification; and lack of adequate water treatment which could exacerbate human health risks. Some of the socio-economic impacts of the severe drought on Zambia have been as follows:

- total crop failure has occurred in the south of the country,
- an estimated 2.3 million people need food aid, and
- maize production fell by 30% in the 2000-01 season, so that there was little in store when the 2004 crops also failed. Thus a maize shortage of 630,000 tonnes is estimated.

The drought, coupled with high rates of HIV/AIDS, means that many people are especially vulnerable to hunger, while thousands of young people who should be working in the fields have died.

In spite of the above summary impacts, data and information detailing the effect of the drought on the Zambian economy are generally unavailable. Zambia has experienced many droughts during its 40 years of independence. In reality, however, observations on the impact of each drought include:

- shortage of food for the whole country, necessitating imports in the wake of low food security reserves;
- increased hardships for the people, especially the rural poor who do not have cash to buy food and have to depend on government or international community handouts; and
- increase in food prices because of shortage of many products dependent on rain.

Overall, drought has a tendency to impoverish rural populations, though the extent of this is currently unknown and many organisations are trying to make an assessment.

Food shortages in specific parts of the country have not been well documented. It is not even clear for which particular foods there are actual shortages, and whether or not some foods could be moved from one area to the other. The Food and Nutrition Commission in Zambia does not seem to have the capacity to articulate the current reality. It is not uncommon to see the chiefs (traditional leaders) from the different areas of the country appealing for food aid and assistance.[13]

It is difficult to make any assessment of the direct impact of drought on the attainment of MDGs given the fact, as noted above, that there is a dearth of detailed information on the socio-economic impacts of this ecological shock. Notwithstanding this, however, it would appear that any reversals in income gains would hinder the attainment of MDGs. It is only understood that pressure being put on government will result in government informing the nation the nature and impact of current drought. But this is not new and it is unlikely that any such effort will be made. The framework for the long-term taming of drought is already in place. It seems that it is only a question of implementation.

13 Kapijimpanga 2005.

Recommendations to reverse the negative impact of droughts on the people of Zambia include formulating a realigned policy for sustainable agriculture in which the following are important components:

- establishing a decentralised water system policy, which would encompass and encourage water harvesting and domestication of water. This should learn from the Zimbabwean example of vast man-made dams, providing year round water for irrigation. The Zambian Task Force on Irrigation, which was created in 2004, will present its report before June 2005 on what plans the government should implement on irrigation;
- reviving a collapsed agricultural extension system to advise on the appropriate production pattern in each area, given the vast knowledge of climatic change that has accumulated over many years. For example, the southern province of Zambia should now focus on animals rather than cereals, given that for the past 20 years it has been prone to drought; and
- streamlining and synergising the roles of the different institutions: those managing water resources and those dealing with agricultural production are increasingly important.

3.3 Ecological shocks and sustainable development

One component of development is the reduction of the vulnerabilities[14] of individuals, communities and countries to natural hazards. An effective sustainable development strategy must incorporate an assessment of vulnerability to natural hazards and integrate risk/vulnerability reduction measures into development planning, in order to ensure that disasters do not significantly disrupt the developmental processes.[15] Charvériat defines disaster risk management as, "a set of various activities at individual, community or society level designed to protect welfare against physical and economic risks associated with the occurrence of natural hazards".[16]

In order to be effective in reducing vulnerability to ecological shocks, coping strategies aimed at communities, especially poor communities, should address reductions in the economic, social and environmental vulnerabilities of such communities, while simultaneously building on inherent capabilities, skills and knowledge. In order to analyse the possible impact of ecological shocks on the attainment of the MDGs, a distinction should be made between quick, onset shocks, such as hurricanes and tsunamis; and other slow, creeping shocks such as the impacts associated with climate change (sea level rise, etc.). With such a distinction in mind, the following impacts of quick-onset shocks, may be identified:

1. If, in the aftermath of an ecological shock, physical infrastructure - such as schools - is damaged, enrolment rates in schools could decline significantly because, inter alia, there is no place to house students. Also, damage to hospitals and health clinics, etc., could affect maternal and child mortality rates, owing to a lack of facilities to treat expectant mothers or new born children. Another possible outcome from an ecological shock is that the number of orphans and/or street children could increase with dire consequences for the schooling of these children, and the number of them who may become undernourished, homeless and socially vulnerable. Given these scenarios, Goals 1, 2, and 4 may be negatively affected.

2. Related to 1 above, if the economic vulnerability of heads of households is increased after the shock, via loss of jobs and livelihoods, parents/guardians may no longer be able to afford the cost of primary school education, thus compromising the goal of universal primary education and subsequently adult literacy rates. Additionally, if economic vulnerability is increased, children may be required to join the labour force to provide additional financial support to affected households. In anticipation of such occurrences, mechanisms should be put in place to mitigate against these possible consequences of the ecological shock.

3. Goal 6, especially the threat of malaria and other diseases linked to stagnant or running water may not be achievable if health systems are compromised because of an ecological shock. Destruction of health facilities and a reduction in central government's allocations to the health sector, because of other national priorities after a shock, could both make the realisation of this goal a distant possibility. Related to this, untreated waste and poor sanitation facilities could further contribute to the spread of malaria, dengue, etc.

14 The definition of vulnerability employed here is the same as that which appears in the climate change literature. That is, vulnerability is the extent to which human or natural systems are susceptible to the impacts of climate change (or natural hazards). A resilient human or natural system would be one that is not very susceptible to the impacts of climate change (or natural hazards).

15 Freeman et al. 2002; Charvériat 2000; and UNDP 2004.

16 Charvériat 2000, p. 66.

4. With respect to Goal 8, an ecological shock can affect the capacity of a country to meet its debt obligations especially if the country already has a high debt-service ratio. A shock could mean a decline in GDP growth and could also result in re-allocations of central government's revenue to disaster-related priority areas. Additionally, a shock could increase the need for action by global partners, not only in terms of immediate relief, financial aid and economic recovery, but also in terms of longer-term, sustainable measures to ensure the development of the affected country and its ability to achieve targets outlined in the MDGs.

5. An overarching concern from a quick ecological shock, such as a hurricane or a tsunami, particularly on island states, could be the impact of saltwater intrusion, or the eutrophication of the water from increased pollution, especially sewage pollution. The ensuing negative impact on flora and fauna from these processes could exacerbate the vulnerability of coast lines. Either individually or combined, these impacts threaten the Goal of environmental sustainability.

The realisation of the MDGs with a threat of slow, creeping shocks could be equally challenging since, among other things, the impacts of these types of shocks may not be easily discernible though they may also have major impacts on countries. Some of the impacts of these types of shocks are summarised below:

- Environmental degradation - resulting, for example, from unsustainable land use practices - could lead to poor watershed management, which might result in reduced supplies of drinking water. This could lead to a decline in, or the inability to supply, clean water in sufficient quantities to achieve the MDG.

- Climate change impacts, which may be slow and less discernible than quick-onset shocks, could pose challenges to the livelihoods of communities that engage in activities susceptible to the impact of climate change. The following are examples:

  - the bleaching of corals is a serious challenge to the livelihoods and related poverty levels of island and coastal communities, given their role in sustaining healthy fish stocks and tourism;

  - as climate change affects agriculture, it could impact on food security and safety;

  - water- and vector-borne diseases may be exacerbated because of climate change and could have implications for the achievement of the health-related MDG goals in the area of health and water (shortages and flooding/displacement of communities).

Box 3.1 summarises the various social, economic and environmental implications of shocks that can compromise a country's ability to achieve sustainable development as encapsulated in the MDGs.

Box 3.1

Summary of likely social, economic and environmental consequences from an ecological shock

Social implications

- Displaced communities, increase in poverty and hunger
- Increase in unemployment leading to alternative income-generating activities, e.g. prostitution and other "high risk" jobs
- Absence from schools owing to lack of funds for schooling, etc., leading to less educated youth

Economic implications

- Reallocation of funds to finance disaster recovery, including rebuilding infrastructure
- Debt servicing compromised
- Increase in unemployment rates
- Labour force affected by loss of lives
- Increase in the prevalence of disease, which can cause the labour force to decline and/or result in children joining the labour force
- Decline in economic growth

Environmental implications

- Loss of land and environmental degradation
- Pollution of water sources
- Decline in level of sanitation in both rural and urban areas

The literature on the impact of ecological shocks suggests that the manner in which they are managed by governments can either increase or decrease a society's vulnerability to such shocks, thus contributing positively or negatively to the economic, social or environmental goals.

Figure 3.1 shows that there could be a symbiotic relationship between disasters and development, and this relationship could be manifested: (a) in terms of how low resilience to disasters could retard the realisation of development objectives; (b) how poor development strategies could cause disasters; or (c) alternatively, how planned and well executed development strategies could reduce disaster risk. In summary, disasters can retard development by destroying physical assets and infrastructure, thereby increasing pressure on already scarce resources; or, in terms of their social impacts, disasters can lead to death and reduction/erosion of social capital. Moreover, poorly planned or implemented development strategies can lead, *inter alia,* to environmental degradation and the exclusion of certain social groups. Ideally, however, a well orchestrated and executed development plan, which takes cognisance of economic, environmental and social concerns, and which permits active participation by civil society in these plans, can contribute significantly to risk reduction and increased resilience to ecological shocks.

Figure 3.1

Relationship between disasters and development

	Economic development	Social development
Disasters limit development	Destruction of fixed assets, loss of production capacity, market access or material inputs. Damage to transport, communications or energy infrastructure. Erosion of livelihoods, savings and physical capital.	Destruction of health or education infrastructure and personnel. Death, disablement or migration of key social actors leading to an erosion of social capital.
Development may cause disaster risk	Unsustainable development practices that create wealth for some at the expense of unsafe working or living conditions for others or degrade the environment.	Development paths generating cultural norms that promote social isolation or political exclusion.
Development can reduce disaster risk	Access to adequate drinking water, food, waste management and a secure dwelling increases people's resilience. Trade and technology can reduce poverty. Investing in financial mechanisms and social security can cushion against vulnerability.	Building community cohesion, recognising excluded individuals or social groups (such as women) and providing opportunities for greater involvement in decision making, enhanced educational and health capacity increases resilience.

Source: *UNDP 2004b, Table 1.1, p. 20*

3.4 The role of CSOs in managing ecological shocks

The avenues through which civil society is engaged in the development process can also impact on a country's adaptive capacity to deal with ecological shocks. Within the context of disaster management, development is defined as a process that reduces vulnerabilities and increases the adaptive capacity of communities. As noted in figure 3.1 these vulnerabilities can exacerbate a disaster's impact and get in the way of effective responses. Vulnerabilities can remain dormant long after the rehabilitation process is over - almost like a predator waiting to take advantage of unsuspecting communities.[17]

The national papers prepared as part of the Commonwealth Foundation project reinforce what the literature cites with respect to the benefits that can be derived from bottom-up, community-based approaches to disaster management. CSOs, especially community-based groups, may be more effective in addressing the needs of affected communities, and more equitable, in terms of distribution of recovery resources. Two general advantages of community-based approaches to dealing with ecological shocks may be identified, as follows:

- Community-based risk reduction programmes designed by and for the people in disaster-prone areas are likely to pay greater attention to addressing community dynamics and priorities, and in a more timely fashion.

17 See also paper by author on "Making the case for community-based disaster management in a rainy age".

18 Yodami 1999.

- There is also likely to be greater resident/indigenous knowledge about the localised threats and hazard prone areas. This is not to negate the advantages of scientific approaches to hazard assessment, but simply to make the point that community-based knowledge should be complemented by the science rather than replaced by it. On this score, Yodami proposed that with proper training and information, communities could safeguard against and minimise disaster risks.[18]

Of course, the ability of civil society to contribute to development objectives, which include the management of ecological shocks, may be constrained by a lack of:

- financial resources to put effective risk management systems in place;
- empowerment/ownership in local communities to put the necessary systems in place;
- confidence to assume responsibility for disaster management at the community level;
- a policy-making and legislative apparatus conducive to localised disaster management.

3.5 Policy conclusions and recommendations for the way forward

The national papers and a review of the literature on the role of CSOs in disaster management show that recovery from shocks is possible, but that the approach to implementation of the recovery strategy is important. There are clear advantages to decentralising recovery programmes, including the fact that CSOs, which work in specific communities, would have a greater sense of the needs of those communities. Another advantage of CSO involvement in development strategy is the facilitation of continuity, as CSOs often transcend political boundaries and biases. However, given the lack of financial resources that constrain the work of most CSOs, co-management or partnering with Government seems to be a more workable and sustainable solution to the problem.

In the case of the study countries, while some progress was being made prior to the respective ecological shock, the impacts of the hazard exacerbated the challenges along the road to MDG targets. In this regard, there were striking similarities in the views expressed by CSOs in all three countries on prerequisites for realising the MDGs, i.e.:

- there needs to be greater education about the MDGs and the potential benefits to be derived by attaining these targets;
- the MDGs should be integrated into national strategic plans, as part of an overall sustainable development strategy, and not be treated as separate objectives.

Based on the case studies reviewed, there are clear needs for increased institutional capacities and improved data at the national level, to facilitate monitoring; and a more participatory approach to realising the MDGs. Specifically with respect to ecological shocks, disaster planning and risk reduction need to be incorporated into strategies and actions to meet the MDGs, because gains towards the goals may be eroded by the onset of a natural hazard. Additionally, it is noted that ecological shocks cannot easily be divorced from the impacts of economic shocks since the former can exacerbate the latter, and vice versa. A proactive approach to managing these ecological shocks should therefore be encouraged with governments and CSOs seeking to implement vulnerability reduction policies that target "at risk" communities.

Although climate change has not been the focus of this chapter, given the relationship between climate change and natural disasters, and the more general under-representation of environmental impacts in the MDGs: "Action to limit climate change, mitigate global warming, and protect the vulnerable must command priority from 2005 forward."[19]

Countries challenged by natural disasters may need extra support beyond emergency relief to meet the MDG targets. If a country has to grapple with several challenges, such as, for example, an HIV/AIDS pandemic, declining economic growth and increasing poverty, as well as an ecological shock, it is perhaps too optimistic to assume that the country could address these and simultaneously meet some of the other targets set under the eight MDGs. As a corollary to the above, there should be greater financial and technical support, particularly from multilateral agencies, for developing countries to achieve their targets. This is especially important where some developing countries have implemented Structural Adjustment Programmes/Poverty Reduction Strategies which may have contributed to their slow progress towards achievement of the targets.

19 NSI and WFUNA 2005, p. 5.

APPENDIX

Grenada, Sri Lanka, Zambia and progress towards the MDGs

Goal 1: Eradicate extreme poverty and hunger

The data show that Zambia could face the greatest challenge of the three countries in realising this MDG. As figure 3.1 shows, as at 2002, the share of Zambia's population below US$1.00 a day was estimated at 63.7%, with a poverty gap ratio of 32.7%. The proportion of the population below the minimum level of dietary energy consumption as a percentage of the total population was estimated at 50%: up from 45% in 1990. Comparable figures for Grenada show that, as at 1999, an estimated 5% of that country's population was living on less than US$1.00 per day and that country's poverty gap was 15.3%. Data for Sri Lanka suggest that 6.6% of the population is surviving on less than US$1.00 per day, a poverty gap ratio of 1.0%, with 25% of the population below the minimum level of dietary energy consumption as a percentage of total population.

Figure 3.2

Goal 1: Eradication of extreme poverty and hunger

	Country		
	Grenada	Sri Lanka	Zambia
Proportion of population below US$1.00 (ppp) a day (1990- 2002)	*4.7%	6.6%	63.7%
Poverty gap ratio (incidence x depth of poverty) (1990-2001)	*15.3%	1.0%	32.7%
Share of poorest (10%) quintile in national consumption *Sri Lanka (1995) and **Zambia (1998)	N/A	*3.5%	**1.1%
Prevalence of underweight children under five years of age (1995-2002)	N/A	29%	28%
Proportion of population below minimum level of dietary energy consumption as a percentage of total population (1999-2001)	N/A	(29%) 25%	(45%) 50%

Source: *UNDP 2004a, (Tables 3, 7, 14) and Caribbean Development Bank 2004*

Goal 2: Achieve universal primary education

The net enrolment ratio in Zambia was estimated at 66% in 2004, a reduction from 79% in 1990. By comparison, in 2004, net enrolment in Grenada was 84% and for Sri Lanka it increased from 90% in 1990 to 105% in 2004. 77% of pupils in Zambia completed Grade 5, with approximately 94% of the cohort in Sri Lanka attaining this level of education. Comparable data on this indicator were not available for Grenada. An interesting indicator of this MDG is the literacy rate of the 15- to 24-year old youth cohort. The data suggest that literacy rates in this age group increased from 95% in 1990 to 97% in 2004 and from 81% to 89% in Sri Lanka and Zambia, respectively.

Figure 3.3

Goal 2: Achieve universal primary education

Country	Net enrolment ratio in primary education (2001-02)	Proportion of pupils starting grade 1 who reach grade 5 (2000-01)	Literacy rate of 15- to 24-year olds (2002)
Grenada	84%	N/A	N/A
Sri Lanka	(90) 105%	(94%) N/A	(95.1%) 97%
Zambia	(79) 66%	77%	(81.2%) 89.2%

Source: *UNDP 2004a, (Table 11)*

1 Figures 3.2-3.10 provide a snapshot of the performance of the case study countries with respect to their attainment of the MDGs. Data are taken from the UNDP Human Development Reports (2003, 2004) and the World Development Indicators (2004), and where available, the country's performance with respect to the specific MDG indicator is compared to two periods - 1990 (or earliest available) and 2002 (or latest available year). Data availability permitting, the snapshot compares the three countries so that comparisons may be made as to their level of progress towards attaining the particular goal. The earlier data are presented within brackets ( ).

2 The net enrolment ratio is the ratio of enrolled children of the official age for the education level indicated to the total population of that age. (Net enrolment rations exceeding 100% reflect discrepancies between those two data sets).

Goal 3: Promote gender equality and empower women

In 2004, Sri Lanka had the most equitable ratio of girls to boys in primary education, followed by Zambia and then Grenada. However, in that same year Grenada had the greatest number of women in its national parliament - 28.6% (an increase from 17.9% in 2003) compared to 4.4% in Sri Lanka and 12% in Zambia.

Figure 3.4
Goal 3: Promote gender equality and empower women

		Country	
Indicators	**Grenada**	**Sri Lanka**	**Zambia**
Ratio of girls to boys in primary education	0.90	1.00	0.99
Ratio of girls to boys in secondary education	N/A	N/A	0.85
Ratio of girls to boys in tertiary education	N/A	N/A	0.46
Ratio of literate women to men ages 15-24 (2002)	N/A	100%	95%
Share of women in wage employment in the non-agricultural sector	N/A	N/A	N/A
Proportion of seats held by women in national parliaments (2004)	(17.9%) 28.6%	4.4%	12%

Source: *UNDP 2004a, (Tables 25 and 26)*

Goal 4: Reduce child maternal mortality

Mortality rates in children under five were highest in Zambia - 192 per 1,000 under-five mortality rate (an increase from 181 in 1970), compared to 19 in Sri Lanka (a reduction from 100 in 1990) and 25 in Grenada. Infant mortality rates in Zambia (per 1,000 live births) declined only slightly - from 109 in 1990 to 108 in 2004. The comparable rates with respect to infant mortality rates were 17 (a significant reduction from 65 in 1990) for Sri Lanka and 20 for Grenada. The percentage of one-year olds immunised against measles was 99%, 94% and 85% for Sri Lanka, Grenada and Zambia respectively.

Figure 3.5
Goal 4: Reduce child mortality

Country	Under-five mortality rate (per 1,000 live births)	Infant mortality rate (per 1,000 live births) (2002)	Proportion of one-year-old children immunised against measles
Grenada	25	20	94%
Sri Lanka	(100) 19	(65) 17	99%
Zambia	(181) 92	(109) 108	85%

Source: *UNDP 2004a (Tables 6 and 9)*

Goal 5: Improve maternal health

The statistics on maternal mortality ratio are juxtaposed to the data on the number of births attended by skilled health personnel. In Zambia where the maternal mortality ratio is 750 per 1,000 live births, skilled health personnel attend to only 43% of the births. The data for Sri Lanka show a maternal mortality ratio of 92, with 97% of births being attended by skilled health personnel. Data were not available for Grenada on the maternal mortality ratio, but skilled health personnel attended to 99% of births in that country.

Figure 3.6

Goal 5: Improve maternal health

Country	Maternal mortality ratio (adjusted) (per 100,000 live births) (2000)	Proportion of births attended by skilled health personnel (1995-2002)
Grenada	N/A	99%
Sri Lanka	92	(97%)97%
Zambia	750	(47%)43%

Source: *UNDP 2004a, (Tables 6 and 9)*

Goal 6: Combat HIV/AIDS, malaria and other diseases

Limited data were available with respect to this goal, but what was noticeable was the high number of malaria-related deaths in Zambia - more than 30,000 per 100,000 people, with only 1,110 malaria-related deaths in Sri Lanka. Data on deaths caused by tuberculosis were not available but there is information on the prevalence of the disease (per 100,000) - 8, 73 and 588 for Grenada, Sri Lanka and Zambia, respectively. The rate of detection and cure of tuberculosis varied for Sri Lanka and Zambia - of 79% of cases detected in Sri Lanka, 80% were cured; while of the 40% detected in Zambia, 75% were cured.

Figure 3.7

Goal 6: Combat HIV/AIDS, malaria and other diseases

	Country					
Indicators	**Grenada**		**Sri Lanka**		**Zambia**	
HIV Prevalence among pregnant women ages 15-24	N/A		N/A		N/A	
Condom use at last high-risk sex (F = female and M = male)	**F** N/A	**M** N/A	**F** N/A	**M** 44%	**F** 33%	**M** 42%
Percentage of 15- to 24-year-olds with comprehensive correct knowledge of HIV/AIDS	N/A		N/A		N/A	
Ratio of school attendance of orphans to school attendance of non-orphans ages 10-14	N/A		N/A		N/A	
Prevalence and death rates associated with malaria per 100,000 people (2000)	N/A		1,110		34,204	
Proportion of population in malaria-risk areas using effective malaria prevention and treatment measures	?		?		?	
Prevalence and death rates associated with P tuberculosis (P = prevalence and D = death) per 100,000 people (2002)	**P** 8	**D** N/A	**P** 73	**D** N/A	**P** 588	**D** N/A
Proportion of tuberculosis cases detected and cured under directly observed treatment, short course D = detected (2002) and C = cured (2001)	**D** N/A	**C** N/A	**D** 79%	**C** 80&	**D** 40%	**C** 75%

Source: *UNDP 2004, (Table 8)*

Goal 7: Ensure environmental sustainability

Data on the environmental indicators captured in Goal 7 show, inter alia, that as at 2000 the majority of the populations in the three countries had sustainable access to an improved water source, urban and rural - 95%, 77% and 64% for Grenada, Sri Lanka and Zambia, respectively. With respect to another indicator, consumption of ozone-depleting chlorofluorocarbons (CFCs), between 1989-90 and 2000, Grenada's quota was the lowest (4 metric tons), Zambia's consumption declined from 35 metric tons to 23, while Sri Lanka's consumption was the highest, even though consumption declined from 209 metric tons in 1990 to 190 metric tons in 2000.

Figure 3.8

Goal 7: Ensure environmental sustainability

	Country		
Indicators	**Grenada**	**Sri Lanka**	**Zambia**
Proportion of land area covered by forest (2000)*	14.7%	(35.4%) 30%	(53.5%) 42%
Ratio of area protected to maintain biological diversity to surface area (2003)	0.02	0.13	0.31
Energy use (kilograms of oil equivalent) per US$1 GDP (1995 ppp) (2001)	N/A	(5.1) 7.3	(1.3) 1.2
Carbon dioxide emissions (metric tons) per capita (2000)	(0.5) 2.1	(0.2) 0.6	(0.6) 0.2
Consumption of ozone-depleting chlorofluorocarbons (ODP metric tons) (2001)*	4	(209) 190	(35) 23
Proportion of population using solid fuels Proportion of population with sustainable access	N/A	N/A	N/A
to an improved water source, urban and rural (2000)	95%	(68%) 77%	(52%) 64%
Proportion of population with access to improved sanitation, urban and rural (2000)	97%	(85%) 94%	(63%) 78%
Proportion of households with access to secure tenure	N/A	N/A	N/A

Source: *UNDP 2004a, (Tables 7 and 21) and World Bank 2004*

Goal 8: Develop a global partnership for development

There was a paucity of data for the majority of indicators for Goal 8 but debt service as a percentage of exports of goods and services during the period 1990 and 2002 increased for Grenada from 3.1% to 13.6%; declined for Sri Lanka from 13.8% to 9.8%, and almost doubled for Zambia from 14.9% to 27.1%.

Figure 3.9

Goal 8: Develop a global partnership for development

	Country		
Indicators	**Grenada**	**Sri Lanka**	**Zambia**
Debt relief committed under HIPC debt initiative (2003)	N/A	N/A	$3,850m
Debt service as a percentage of exports of goods and services (2002)	(3.1%) 13.6%	(13.8%) 9.8%	(14.9%) 27.1%

Source: *UNDP 2004a, (Table 18) and World Bank 2004*

Figure 3.10

Goal 8: Develop a global partnership for development

	Country		
Indicators	**Grenada**	**Sri Lanka**	**Zambia**
Unemployment rate of 15- to 24-year-olds, male and female and total	N/A	N/A	N/A
Proportion of population with access to affordable essential drugs on a sustainable basis (1999)	95-100%	95-100%	50-79%
Telephone lines and cellular subscribers per 100 people T = telephone line and C = cellular subscribers (2002)	T 31.6 C 7.1	T 4.7 C 4.9	T 0.8 C 1.3
Personal computers in use per 100 people* (2002)	N/A	1.3	0.75
Internet users per 100 people (2002)	14.15	1.06	0.48

Source: *UNDP 2004a, (Tables 6 and 12) and World Bank 2004*

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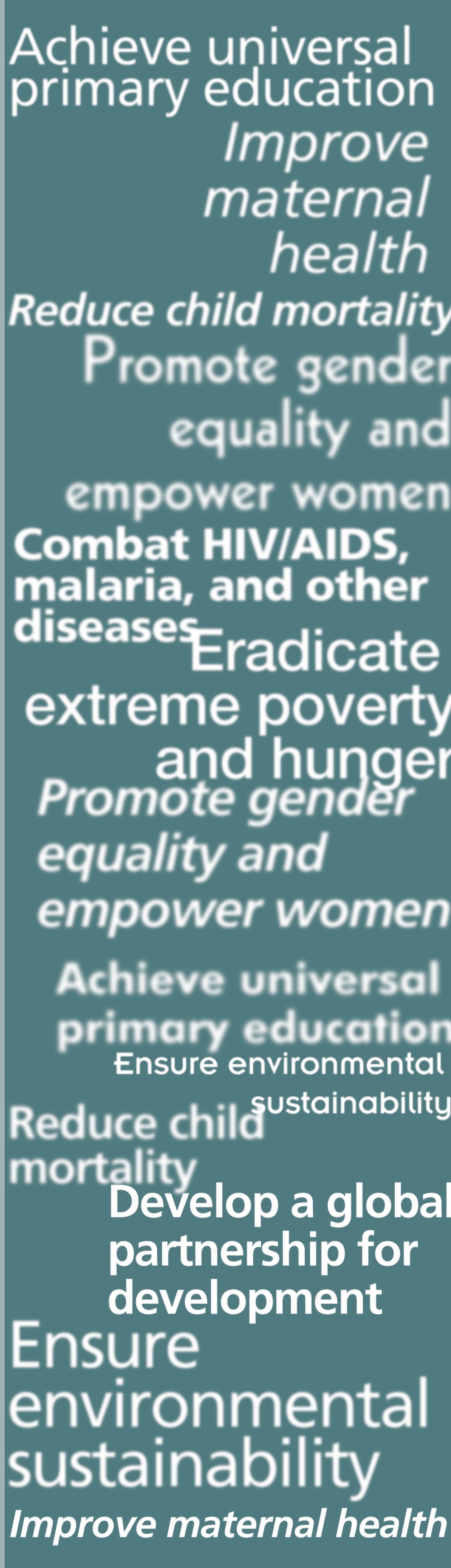
4

Conflict and the Millennium Development Goals

Memunatu Pratt
Centre for Peace and Conflict Studies,
Fourah Bay College
University of Sierra Leone

The MDGs… are conspicuously silent on the very crucial issues of regional and local security.

How is Sierra Leone Moving Towards the UN Millennium Development Goals? Civil Society Makes a Critical Review



Chapter overview

This chapter explores the interface between conflict, development and the Millennium Development Goals. Two Commonwealth case studies - those of Uganda and Sierra Leone - are used to illustrate the interplay between the Millennium Development Goals and conflict; examining progress or otherwise in an "in-conflict" and a "transition-to-post-conflict" country, respectively. While recognising the shortcomings of analysis based on limited data and a small number of cases, value is placed on the experience of these countries which amply illustrates many relevant issues, including specific requirements for attaining the Millennium Development Goals in conflict and post-conflict settings.

Violent conflict remains a significant obstacle to realising the Millennium Development Goals. Sustainable and inclusive development processes prevent and address violent conflict by contributing to the reduction of horizontal inequalities and enabling people to claim their rights through non-violent means. Countries moving out of conflict need support to prevent any recurrence of the conflict and to provide humanitarian assistance, as well as assistance in reconstruction. Within national borders, socio-economic and security challenges must be tackled simultaneously, enabling states to escape downward spirals of mutually reinforcing insecurity, criminalisation and under-development, which may pose insurmountable obstacles to the attainment of the Goals. National planning processes, as well as strategies and actions, must depart from the "business as usual" approach and should be developed within a framework which acknowledges and is adapted to conflict/post-conflict situations. The role of the private sector and civil society as active partners in human security, poverty reduction and development cannot be overstated and must be enhanced.

Author Profile: Memunatu Pratt

Memunatu Pratt is a lecturer and programme coordinator at the Centre for Peace and Conflict Studies, Fourah Bay College, University of Sierra Leone. She has studied conflict management, conflict analysis and early warning in Uganda, Ghana and the United Kingdom. The Peace and Conflict Studies Programme, with support from the UK Department for International Development (DFID), was established in 2002, and offers both academic and outreach courses on peace and conflict studies.

4.1 Introduction

In 2003, there were 36 armed conflicts in 28 countries, with more than four-fifths of these occurring in Africa and Asia.[1] Within the Commonwealth there were high-risk conflict situations in at least three of the 53 member states, while another 15 were facing medium-risk conflict situations.[2] Commonwealth countries such as Bangladesh, India, Pakistan, Sierra Leone, Solomon Islands, Sri Lanka and Uganda may not be embroiled in country-wide conflict, but they are in conflict or post-conflict situations that impact on social and economic development, and the attainment of the Millennium Development Goals (MDGs).[3] Indeed, the-day to-day and the long-term impacts of inter- and intra-state conflicts on human rights, livelihoods and basic survival present some of the most pressing challenges to achieving the MDGs. However, while the Millennium Declaration makes the linkage between peace, security and development, the MDGs neither mention conflict, nor include specific targets for addressing conflict.

Additionally, conflict has its greatest impact on the poor and marginalised - the main intended direct beneficiaries of the MDG agenda. Access of the poor to MDG-related programmes is fundamental to this agenda; but the millions who live in conflict-affected areas, or who have been displaced by conflict, often have no such access.

In Africa, unprecedented levels of political violence and protracted conflicts - some rooted in the colonial governance legacy - marred the last decade of the 20th century and have spilled over into the 21st. These have claimed the lives of millions of people and caused massive internal and external displacement, the disintegration of the social fabric, wastage and squandering of human and economic resources, and environmental degradation. The impact on poverty reduction and the related achievement of the MDGs is clear: the 2004 Human Development Report shows that 23 African countries will fail to achieve any of the MDGs by 2015 if current trends continue. Delivery of primary education for all will be 115 years late, in 2130; the halving of poverty will have to wait until 2150; and eliminating avoidable infant deaths will come in 150 years time rather than in ten. The situation in several places is getting worse by the day rather than improving. There are a number of countries, such as Sierra Leone where development slid back in the 1990s and which thus have astonishingly low starting benchmarks for the MDGs. Out of 27 such countries in the world, 21 are in Sub-Saharan Africa. The countries at the very bottom of the development scale are the countries in conflict or post-conflict situations.[4]

Ending violent conflicts in unstable countries and building the foundation for preventing future violent conflicts are prerequisites for sustainable social development in conflict-affected countries and in the Africa region in general. If the MDGs are to be attained, the scourges of war, death and disease have to be addressed as an overarching development challenge and in an integrated manner. Indeed, the root causes of conflict and post-war reconstruction processes - political, economic and social - warrant a re-examination of the MDGs to make the eight goals more responsive to the realities of conflict and conflict transformation.

4.2 Background to conflict

Theories of conflict suggest that human needs, asymmetric power relations and inequitable resource distribution underlie most conflicts and violence, which are often fuelled by primordial interpretations of religion, race, culture, ethnicity and gender, and the unequal representation of majority against minority. These and other forms of structural violence may themselves culminate in physical violence and deadly conflict; but they also form the basis of injustice which, in itself, frequently underlies the absence of peace. An examination of many poor countries embroiled in civil wars shows that gross economic and political inequalities prevail, which must be addressed if the territorial integrity of these countries is to be preserved. The promotion of justice in these societies must underlie both external and local efforts to prevent and resolve these crises; failing which, efforts to resolve these conflicts and rebuild these societies in a sustainable way will be meaningless.

In Africa, the root causes of proliferating violent conflicts have included the legacy of direct and indirect colonialism, deep corruption, uneven distribution of wealth, state militarisation, political exclusion based on religion and ethnicity, high unemployment, the demand for control over the extraction of valuable minerals, high levels of poverty and marginalisation among the population. However, while it is clear that these and other variables generally contribute to conflict or are characteristic of countries in conflict, there is still no accurate predictor; nor is the way in which the variables combine to spark conflict, fully understood.

1 The author gratefully acknowledges the contributions of Michael Chai of the International Council on Social Welfare to this chapter.

2 Stockholm International Peace Research Institute (SIPRI) 2003.

3 Goodhand 2000.

4 World Bank 2004.

What is clear is that resulting conflicts have contributed to the destruction of human lives and human security; increased levels of poverty, ill health, illiteracy, inequality, infant mortality and HIV/AIDS; and widened the gap between rich and poor countries.

4.2.1 Conflict and poverty

Poverty is one of the variables identified as contributing to violent change, although poverty alone, as measured by indicators of economic growth, does not necessarily lead to conflict. Indeed, those poor countries which have managed to avoid conflict also provide unfavourable development indicators for illustrating the importance of development, human security and the attainment of the MDGs.

While poverty can be a major contributing factor to conflict, it is ironic that violent conflict inevitably has greater impacts on the poor, whose limited financial means and lack of mobility make them most vulnerable in conflict situations. War is also impoverishing at the national level; indeed, it is noteworthy that 20 of the lowest ranking countries in the Human Development Index (HDI) of the United Nations Development Programme (UNDP) are in or emerging from conflict.[5] This fact is made clear by comparing the HDI ranking with measures taken from the annual report of the Stockholm International Peace Research Institute (SIPRI)[6] on major armed conflicts.

In general, violent conflict can be the outcome when poverty is combined with high income and asset inequality, particularly along ethnic and communal lines, or when it is accompanied by weak institutions, failed governance or lack of respect for political and individual rights. An evaluation of 14 peace accords over the past decade revealed that inclusive economic growth, equitable distribution and good governance are the standards for creating conditions that are favourable to enduring peace, security and development.[7]

4.2.2 Conflict and development

Development may be defined as increasing choice or opportunity and access on the supply side; yet this needs to be matched by increased capacity to choose on the demand side. This highlights the foundational importance of education, a particular challenge during situations of conflict, in addition to the immediate importance of managing competing interests and potential social, political, economic and ethnic conflict in society to achieve development and sustainable peace.

Conflict generally retards the development process. Huge sums of money, which may have otherwise gone into improving human welfare, have been diverted for conflict prevention, peace building and post-war reconstruction.

Beyond financial planning, issues of governance are important and, in this regard, two indices correlate highly with inequality and conflict: Transparency International's Corruption Perception Index and Freedom House's Index on Democracy. These indices, alongside the performance indicators set for the attainment of MDGs, clearly demonstrate the co-relationships between conflict and disparities within countries in conflict or coming out of conflict.

4.2.3 Conflict and development assistance

Outside some high profile situations, many conflicts remain neglected or "forgotten" by the international community; indeed, some persist in part due to a lack of adequate assistance.

International assistance given in the context of a violent conflict becomes part of that context.[8] Support provided during a conflict cannot remain separate from that conflict, though aid agencies often seek to be neutral or non-partisan toward the winners or losers of the war. Aid can reinforce, exacerbate and prolong the conflict; but it can also help to reduce tension and strengthen people's capacities to disengage from fighting, and find peaceful options for solving problems.

Critiques of the usefulness of ODA notwithstanding, it is a moral and logical fallacy to construe that because aid can do harm, a decision not to give aid would do no harm. In reality, the decision to withhold aid for people in need has unconscionable negative ramifications. The challenge is to figure out how to do good without inadvertently undermining local strength, promoting dependency and allowing aid resources to be misused in the pursuit of war. In conflict situations, aid has an opportunity to shape relief and development work so that it accomplishes its intended goals of alleviating human suffering and the pursuit of sustainable economic and social systems, whilst promoting a durable and just peace.

4.3 The conflicts in Sierra Leone and Uganda

Sierra Leone and Uganda are two Commonwealth countries that usefully illustrate how conflict and post-war reconstruction can affect achievement of the MDGs.

5 The HDI is by far the most comprehensive measure of poverty in relation to human security and combines consumptive power (as opposed to gross national product [GNP]), illiteracy and under-five mortality rates, among other variables, in a weighted index ranking countries on a Human Development Report Scale.

6 SIPRI 2003.

7 Richardson and Wang 1993.

8 Anderson 1996.

Sierra Leone has been through 11 years of war and is, gradually, transitioning to development with a post-conflict agenda, while northern Uganda is currently in a 19-year-old crisis of violence in which there is "No war, No peace". As the Uganda country paper prepared for this report illustrates, the conflict in northern Uganda must be resolved, or national efforts to achieve the eight MDG goals will be doomed, even though there may be progress towards reaching the goals in the other parts of the country.[9] In northern Uganda, the conflict has completely negated the attainment of the MDGs. In fact, the letters "MDG" are mockingly referred to as the "Minimum Development Goals" instead of "Millennium Development Goals".[10] For Sierra Leone in its post-conflict phase, the 11-year devastation of the country and 30 years of bad governance and corruption mean that the attainment of the MDGs will be a Herculean task, despite the strategies that have been instituted at both national and international levels. An assessment of progress towards the MDGs in that country reveals, for example, that at the current pace of implementation, only one indicator of the Goal on education could be attained by 2015.[11] Good governance, education, agriculture and health are among the current challenges in Sierra Leone.

4.3.1 The conflict in Northern Uganda: a brief description

The East African nation of Uganda has been bedevilled by civil strife and internal conflict in the north of the country since 1986, when the present government came to power. A rebellion, mainly under the auspices of the Lords Resistance Army (LRA) led by Joseph Kony, countered by the Uganda People's Defence Forces (Uganda's army), has claimed hundreds of thousands of lives and destroyed much property. While many elements have been resolved in one way or another, the close to 19-year old rebellion has persisted, with devastating consequences for the population across more than 12 districts. It is considered one of the major obstacles to poverty reduction and improved human development, as well as national attainment of the MDGs (see Figure 4.1).

There are differing perceptions on the causes and exact timeframe of the war. The Acholi, an ethnic group at the centre of the rebellion, dominated the national army between 1980 and 1985 and are accused of having been responsible for atrocities committed during successive governments before the current government of President Yoweri Kaguta Museveni took power in

Figure 4.1

A comparison of selected MDGs in Northern Uganda[12]

Millennium Development Goal	National average	Related statistic in conflict-affected areas	Comment
Eradicate extreme poverty and hunger	38% below the poverty line in 2003	68% living below the poverty line	Save the Children estimates that internally displaced persons (IDPs) live on US$0.25-0.30 cents a day. CSOs believe that unless the conflict is resolved the national poverty targets will not be attained.
Universal primary education	86% net enrolment in 200	Disaggregated data not readily available but considered comparable to national average	Issues of quality education a big concern. It is estimated that in northern Uganda, only 4% of lower primary going pupils are able to read and write.
Promote gender equality and empower women	Net primary school enrolment is almost 51% for boys and 49% for girls	Drop out rates at primary level is 29%, while the one for girls alone is 43%	The gender disparity is widening and in a conflict situation, the special needs of the girl child are of particular concern and are usually not catered for.
Reduce child mortality	88/1000 in 2001	122/1000 in 2001	Situation in the north is considered worse than anywhere else in the country.
Improve maternal health	At 504/100,000 in 2001, this target is out of reach	Exact figures for northernUganda not readily available	Possible that the situation is worse there than elsewhere in the country.
Combat HIV/AIDS, malaria and other diseases	6.1% in 2003 meant that Uganda had met this target by 1996	12-35% in some IDP camps	Without the resolution of the conflict, there are doubts that the status in the conflict zones will improve.

Source: *Compiled from various sources*

9 *Sebina-Zziwa et al. 2005.*
10 *Ibid.*
11 *Brima 2005.*
12 *Sebina-Zziwa et al. 2005.*

January 1986, after a five-year guerrilla war. The Acholi themselves believe that the present government has an interest in revenging these alleged atrocities.

It is difficult to explain the real reasons for the LRA-led rebellion, not least because the rebels appear to have no political arm. But there is no doubt that the people of northern Uganda feel marginalised. They are excluded from the mainstream political landscape which comes with both social and economic gains: poverty levels are unacceptably high in the region, service delivery is very poor, and investment is almost non-existent. There are also imbalances with regard to access to economic opportunities. All of these have made the people in the north resistant to the current government.

4.3.2 Background to conflict in Sierra Leone

Located on the south-west coast of Africa, bordered by Guinea and Liberia, Sierra Leone is endowed with diamonds, gold and iron-ore, in addition to being a producer of cash crops, in particular, coffee, cocoa and rice. Following independence in 1961, there were several military coups until a one-party system of government was established in 1978. The country experienced a steady decline throughout the 1980s and 90s, rooted in rampant corruption, unemployment, inadequate education and health services, diamond smuggling, nepotism and the failure of past governments to deliver basic social services to its citizens. In 1991, the combined forces of the Revolutionary United Front (RUF) headed by Foday Saybana Sankoh, and the National Patriotic Front of Liberia, controlled by Charles Taylor of neighbouring Liberia, struck Sierra Leone through a small eastern village called Bomaru.

What was initially conceived as a minor invasion of Sierra Leone turned into a brutal civil war, in which thousands of women were raped, men and children had limbs removed, thousands of houses were burned by fire, and there was widespread destruction of the economic and social fabric. The strong intervention of the Sierra Leone army served to further exacerbate the situation. Military coups led by Captain Valentine Strasser, who established the National Provisional Ruling Council (NPRC), and Major Johnny Paul Koromah who established the Armed Forces Revolutionary Council (AFRC), both in 1997, as well as the 1999 invasion of Freetown by the joint forces of the AFRC and RUF, opened the gateway for human rights abuses, bad governance, loss of a credible national process of development and increased hunger, poverty and disease.

On July 7 1999, the current President Dr Ahmad Tejan Kabbah signed the historic Lomé peace agreement that has now moved Sierra Leone into a post-conflict phase through several constructive processes of peace and sustainable development. Today, the challenges facing Sierra Leone reflect the MDG agenda: poverty is widespread; illiteracy abounds; there is food inadequacy, rampant unemployment and high infant mortality of 181 deaths per 1,000 live births. Efforts to address the effects of the conflict and the post-conflict reforms have been supported by several bilateral and multilateral agencies and the successful hosting of the 2002 presidential and legislative elections gives a glimmer of hope for re-instituting good governance. Yet, the current socio-economic indices of donor dependency cast a shadow over the possibility of achieving the MDGs.

4.4 Attaining the MDGs in situations of conflict

Since poverty reduction is the purpose of the MDGs, the interface between conflict, poverty and the attainment of MDGs becomes crucial. Poverty, disease and sustainable livelihoods, which the MDGs seek to address, are both root causes of conflict and possible sources of grievance. Whether poverty fuels conflict or vice-versa, they may hinder the attainment of the MDGs. And lack of support for MDG attainment will be a negative indicator of poverty and a possible predictor of conflict. Efforts to link the MDGs into national planning processes may also pose particular challenges in societies affected by conflict.

4.4.1 Marginalisation of conflict in the MDG framework

The eight MDGs and their accompanying performance indicators are unrealistic for many countries in conflict or coming out of conflict. Although the MDGs targets were set in 2000 for a 2015 deadline, they were based on a 1990 benchmark. While for many countries the 1990 benchmark provided a head start of 10 years of growth, the timing of the war in some post-conflict countries, such as Sierra Leone, means that they would have been experiencing development losses rather than gains during the decade between 1990 and 2000.[13]

The goals and their targets, as currently articulated, are premised on a stable environment. Inherent structural violence within mainly poor countries, coupled with poverty in both physical and human resources, negates the achievement of these goals.

13 *Humphreys and Richards 2005, p. 14.*

However, the acknowledgement of these negative systemic realities is not to deny the need to strive for at least a semblance of the attainment of the goals, in both conflict and post-conflict situations. In reality, support for war victims, internally displaced persons, refugees and host communities that have been violently uprooted, through the provision of emergency food, shelter, clothing and education, represents an attempt to respond to MDG attainment during violent crisis. What is required, however, are national planning processes as well as strategies and actions that acknowledge and are adapted for conflict/post-conflict conditions. The assessment of those living with the conflict is that the MDG framework does not adequately treat the issue of conflict. During a one-day consultation for civil society organisations (CSOs) in Gulu, northern Uganda, a participant put it thus:

"For us in the conflict areas, we feel marginalised even by the MDG framework itself since looking through the eight MDGs we find nothing explicitly referring to conflict and yet this is a major challenge in Uganda and other African countries. The UN System needs to reflect this need within the MDG framework for us to feel more comfortable that the world cares about our needs".[14]

In the example of northern Uganda, reference to the MDGs has been mainly to note that without a sustainable resolution of the conflict, the plight of the majority of the population remains precarious; and there is no chance of the goals being attained nationally. This is because the greater North, which is affected directly or indirectly by the conflict, comprises at least one-third of the country and is important economically. The conflict in northern Uganda has made people poorer; it has destroyed basic infrastructural service delivery for health and education. It has destroyed the social and physical environment as people have been forced into camps for "internally displaced persons" (IDPs). Indeed, the conflict has effectively cut the north away from other regions and from opportunities for investment and interaction with the wider world.

Box 4.1

Impacts of the conflict in northern Uganda: A view from Gulu

In a majority of areas, people have never lived in their homes for fear of their lives. There is a very artificial pattern of settlement in the districts and mushrooming peri-urban settlements where people have been forced to live close together for 'social and physical security'. Property worth millions of dollars has been destroyed while thousands of people, including children, have been abducted. UNICEF estimated that 8,000 children were abducted in 2003 alone. Thousands have lost lives and it is difficult, if not impossible, to find one family in Gulu which has not lost someone in this war.

With more than 1.6 million persons in IDP camps and thousands of others living with relatives in towns or having migrated to other districts and countries, the real number of displaced persons is difficult to establish. Those living in designated IDP camps live under appalling conditions and in dire poverty. Social services are insufficient or non-existent; prostitution without protection against HIV/AIDS is rampant; and there is a total breakdown in cultural norms. As far as CSOs in northern Uganda are concerned, such conditions leave no hope that any of the MDGs will be achieved for the people in the area.

Every night, hordes of children, referred to as 'night commuters', move from rural areas into the township to find shelter and security on the open streets and shop verandahs. It was estimated by the UN Office for the Coordination of Humanitarian Affairs (OCHA) (Humanitarian Update, April 2004) that by May 2004, more than 50,000 children fearing abduction - most of them unaccompanied - trekked as far as 10km on a daily basis in search of safer sites in towns, hospitals, churches and other institutions in the affected districts. With the future generation living like this from a tender age, many CSOs wonder whether to even continue dreaming of attaining the MDGs in certain parts of the country.

Source: *Excerpt from Sebina-Zziwa et al. 2005*

14 Sebina-Zziwa et al. 2005.

4.4.2 National planning processes distorted

Conflict distorts data and statistics, including those used to measure progress towards the MDGs. In Uganda, for example, statistics and projections often give wrong impressions because of the "northern factor". The national statistics, especially those involving development indicators, are depressed by spill over from extremely bad performances in the conflict areas. For example, the national poverty level stands at 37%. When the northern poverty level of 63% is set aside, this drops to 33%.

Conflict also distorts national planning processes and diverts resources. Uganda's continuing conflict has diverted the country's limited financial resources from investment in the social sector and other MDG-focused strategies, such as the Poverty Eradication Action Plan and sectoral plans, to the war. Analysts estimate that two to three per cent in economic growth could be gained with the resolution of the war, translating into a significant boost for the country.[15]

Specific problems rooted in the conflict include the following:

- Most local government authorities in northern Uganda are unable to collect taxes from the displaced persons, leading to a low revenue base to fund socio-economic development programmes.
- Conflict-affected areas cannot contribute to Uganda's productive capacity and domestic revenue.
- The conflict discourages investment in the region, as private investors are less inclined to invest their resources in an insecure region.
- Social infrastructure such as roads and bridges have been destroyed in the ongoing conflict, while many schools, health centres, protected water sources and community roads lie idle, having become inaccessible to the communities due to security issues.[16]

4.4.3 Aid support vital for communities in conflict

Development aid support is vital for communities in conflict; more so because, in the context of the MDGs, violence causes hunger, spreads diseases, increases poverty and weakens communities. Without support for physical resources to stabilise the effects of hunger, disease and inadequate shelter, grassroots activism can only have a minimal role in relation to high-level diplomatic efforts to resolve conflict.

Long-term violent conflicts are significant impediments to poverty reduction, the realisation of human rights and the MDGs in developing countries. For this reason, some, within and outside the Development Assistance Committee (DAC) of the Organisation for Economic Development and Co-operation (OECD), argue that official development assistance (ODA) funds should be used to fund "coherent and comprehensive" interventions in these conflicts. ODA can play an important role in responding to the threat and reality of violent conflict. Sustainable and inclusive development processes prevent and address violent conflict by contributing to the reduction of horizontal inequalities and enabling people to claim their rights through non-violent means. Peace support operations are shamefully under-funded, reflecting a wilful neglect of the international community's responsibility to protect vulnerable citizens.[17]

4.5 Incorporating MDGs in post-conflict reconstruction

In post-conflict or transitional settings, issues relevant to the attainment of the MDGs include the design of peace agreements; the role of mediation; and support of local and international partners in the context of conflict prevention and peace building - specifically, political, social, economic and psychological post-war reconstruction programmes.

When considered in relation to post-conflict reforms, the importance of attaining the eight MDGs is reinforced; especially given that some of the proximate factors causing conflicts are rooted in struggles to attain various development levels summed up in the MDG indicators. In this context, post-war reconstruction is the cornerstone for ensuring the attainment of the MDGs.

4.5.1 Poverty reduction strategy

In Sierra Leone, the poverty reduction strategy has been designed as a post-war transition process and to provide strategic directions for the MDG targets and Vision 2025. The 2005-07 Poverty Reduction Strategy Paper (PRSP) provides bold sectoral policies and institutional reforms to achieve economic growth; providing food security, job opportunities, basic social services and effective social safety nets. It proposes actions to address short-term living conditions and long-term causes of conflict and poverty. Consolidation of peace and security, and the continued deepening of reforms will ensure that growth translates into reduced poverty and improved human development. Risks include possible shortfalls in aid,

15 Ibid.
16 Ibid., p. 17.

17 Leonhardt 2000.

investment, and domestic revenue; regional insecurity; delays in providing social services and re-launching economic activities; the collapse of fiscal and monetary discipline; weak commitment to devolution; a failing anti-corruption agenda; and weak implementation capacity. There are also risks associated with the world economy, such as high fuel prices, continued protectionism by developed countries and deteriorating terms of trade.[18]

Much of Sierra Leone's food is imported, costing around US$50 million a year. The proportion of people experiencing hunger in 1999-2001 was estimated at 50%, an increase of 4% compared to 1990-92.[19] Food intake is well below the average for developing countries, resulting in widespread malnutrition, especially for women and children. The food deficit is linked to low productivity in traditional farming and there is an imminent threat of food insecurity.[20] Shelter is most deficient in rural communities culminating in a low life expectancy of 39 years compared to 45 in other Sub-Saharan African countries. Levels of education are low.

The impacts of the civil war on an already underdeveloped infrastructure do not only impede socio-economic development and limit access to services; they also have the potential to exacerbate future threats of civil disorder.

With 80% of Sierra Leone's 4.9 million people living in abject poverty, the UN Human Development Index designates Sierra Leone as the poorest country in the world and 26% of its people as extremely poor.[21] There is wide disparity in the geographical distribution of poverty in the country, mainly affecting three-quarters (66%) of the population living in rural settings. In the poorest districts, where war destroyed the social and economic infrastructure, eight out of ten people live in poverty.[22]

To ameliorate this pervasive poverty syndrome and improve progress in meeting the 2015 targets for the MDGs, the economy needs to grow by more than 6%, especially at the household level in rural communities; and must take population growth into account. Indeed, Sierra Leone illustrates one of the great challenges to meeting the MDGs that post-conflict countries in Africa, in particular, face: "… more and more rapid progress needs to be made over the next ten years than is required anywhere else in the world".[23] The government has submitted that each 1% of economic growth in Sierra Leone will reduce the incidence of individual poverty by 0.8%. To this end, its poverty reduction strategy defines "Three Pillars", whose objectives are closely tied to the MDGs. Pillar 1 seeks to promote good governance, security and peace; Pillar 2 will be pro-poor, working towards sustainable growth and food security as well as job creation; while Pillar 3 will promote human development. Despite this inferred recognition of the relationship between economic growth and poverty, the mechanisms to halve poverty by 2015 are not well articulated or adequately available in Sierra Leone.

4.5.2 Global impacts

In addition, there remain challenges related to global and regional economic shocks. Uncontrolled inflation and a dollar-exchange-driven market are defining factors in Sierra Leone's socio-economic development. Heavy dependence on donor aid creates a crucial vulnerability risk to shocks. Currently, 50% of the country's budget is donor money. Shortfalls or delays in donor disbursements often force government to cut down expenditures including poverty-related expenditures.

In recognition of government-proposed measures towards halving poverty, the Sierra Leone report contains the following civil society recommendations:

- A systematic national enquiry on poverty should be undertaken not only to unearth the depth and extent of the problem, but also to determine appropriate interventions and priorities. Interventions should be based on developing local capacity and poverty information.
- Trade policies should be structured and a comprehensive national investment code should be instituted, including proper utilisation of national resources.
- Integration of the National Anti-Corruption Strategy into the PRSP, all policy frameworks being developed and other national development programmes is imperative for any meaningful move towards poverty reduction.
- As part of the international community, and party to many international obligations, Sierra Leone needs to domesticate, apply and use international human-rights standards/instruments as the framework for approaching the development process. This will help in the formulation of pro-poor, people-oriented policies and programmes that clearly define the stakes and stakeholders.

18 *Government of Sierra Leone 2005.*
19 *Government of Sierra Leone 2000.*
20 *Government of Sierra Leone 2003a.*
21 *Extreme poverty is defined by Sierra Leonean civil society, as: "Even if these people were only to spend money on food alone, they will still be very poor". UNDP 2004, Government of Sierra Leone 2005.*
22 *Government of Sierra Leone 2003b.*
23 *Humphreys and Richards 2005, p. 15.*

The post-war reconstruction processes in Sierra Leone have laid the foundation for an effective process of working towards the MDGs. Politically, elections have been held and there is now a multi-party system in place based on parliamentary democracy. Some democratic institutions of governance have been established and a national economic reconstruction programme is in existence.

There has been increased government commitment to harmonise policy measures that would favour and scale up both international and local investment, to enhance public and private sector performance, and improve employment opportunities in Sierra Leone. There have also been increased budgetary allocations in the health and education sectors, all of which are geared to improve performance in these sectors and, therefore, improve the situation of citizens. These, with an improved national security environment and the pursuit of improved governance, should see Sierra Leone making significant inroads in the MDGs on health, gender, education, and reduced infant and child mortality by 2015. However, civil society engagement with government has centred on a discourse which contends that development, good governance and national security will remain illusionary if the majority of Sierra Leoneans are poor and unemployed.

4.6 Requirements for attaining MDGs in conflict and post-conflict settings

Among the issues that can be identified as necessary to attain the MDGs in conflict and post-conflict situations are the following:

- seeking political and diplomatic solutions;
- empowering civil society for advocacy and service delivery;
- addressing gender disparities;
- rehabilitating the economy and poverty reduction;
- improving effective governance;
- reforming the security sector to ensure civilian control over the military;
- re-integrating refugees and displaced persons;
- building local capacity for conflict prevention and resolution; and
- addressing issues relating to impunity.

4.6.1 Seeking political and diplomatic solutions

All groups or parties that can affect the peace - civil society included - must be included in the process. Marginalising any one group means marginalising the interests of members of the group. In Somalia, for example, the decision by officials of the United Nations Operation in Somalia and the United States of America (US) to isolate General Farah Aidid did more harm to the population than the political cost of including him in the peace process.

In the case of northern Uganda, the military option, which is government's preferred means of dealing with the problem, intensifies hostilities, increases civilian casualties and undermines a negotiated approach which many CSOs countrywide and cultural leaders in the north consider would lead to more lasting peace. Under the present approach, most people in the conflict areas never live in their homes for fear of their lives. The general perception is that, to a large extent, the government has failed to offer adequate protection to the population, which is always susceptible to attacks from the rebels.

Non-military means for resolving conflicts include confidence-building measures, establishing trust, identifying specific mechanisms for sustaining peace initiatives, and creating a strong interface between peace and democratisation.

4.6.2 Empowering civil society for advocacy and service delivery

CSOs are the innovators and promoters of the "bottom-up" approach to development. In addition, compared with government agencies, they have the benefit of remaining part of the society, having relatively simple structures, serving the deep-felt needs of the population and acting on what the people themselves consider as their priorities. CSOs are therefore a most important link in the development chain, and their empowerment should be a top priority for the international community in seeking to bring peace to war-torn countries. CSOs have the flexibility and space to be appropriate actors for third-party intervention, mediation, negotiation and advocating for peaceful resolution to crises.

Taking Sierra Leone as an example: during the civil war, CSOs organised themselves into coalitions to advocate for a peaceful resolution of the conflict, the promotion and protection of human rights, involvement of women in peace negotiations, support for the demobilisation and reintegration of ex-combatants, and for equal participation in governance and democratic transition. Currently CSOs are engaged in monitoring accountability and transparency of governance, actively supporting the strengthening of local government and advocating for recognition of the CSO role. These actions by CSOs will contribute immensely to achieving the eight MDGs, in terms of service delivery as well as a dvocacy for the richer countries to support poorer countries in attaining the goals.

4.6.3 Addressing gender disparities

Promoting gender equality and the empowerment of women is one of the MDGs. How can this be attained when women are most vulnerable during conflicts? Indeed, socio-cultural barriers are a serious hurdle in the way of women's empowerment, even in non-violent situations. It is therefore relevant that MDGs on gender equity address women affected by violent conflict. This also has implications for the other MDGs, such as reducing child mortality, improving maternal health, eradicating poverty and combating HIV/AIDS, malaria and other diseases.

The typical war survivor today is a civilian, often a female, who has lost close family members, possibly her home and many of her possession in war. She has conceivably been assaulted herself, and she might have witnessed the indiscriminate killing and torture of others, including close family members. She probably knows and has possibly lived with these perpetrators. She has fled her home at least once to escape the violence, retreating either to other relatives in other regions or to a camp. During this movement, she has sacrificed personal possessions and she may have lost her home to vandalism and occupation by others. Due to economic and physical devastation, her income source has deteriorated along with her buying power and she has little or no access to healthcare or adequate food sources, save from the nearest non-governmental organisation (NGO). In this condition she, like other war survivors, is more susceptible to mental distress and to distrusting past relationships. She is, therefore, not able to serve effectively as a contributing member of her community. This dismal portrayal poses challenges for psychological and social re-integration in post-war and new democracies.

The plight of war widows, sexually-abused women and single female-headed households created by conflict has been overlooked in the past partly because the victims are not so visible. These conditions have begun to change in recent years, but urgent assistance is still required by the category of female victims violated by soldiers belonging to warring factions. As the examples of Mozambique, the Philippines and Uganda show, it is not uncommon for soldiers to kidnap young women and force them into prostitution. In addition, stationed or advancing armies commit rape and other sexual abuses. A second and larger category requiring urgent aid comprises single female-headed households. In the aftermath of war, the number of such households swells because of the death of spouses in fighting, the migration of male family members and general social disorganisation. Relatively young and inexperienced women are forced to shoulder economic burdens for which they are often ill-prepared and which are exacerbated by strong patriarchal systems.

In Sierra Leone, two key policies have been promulgated to encourage gender mainstreaming and the advancement of women. These have been developed to address gender disparity as a post-conflict construct. Key crimes being addressed by the International Transitional Justice mechanism, now in place, include rape and other sexual abuses inflicted on women and children. In addition, women's organisations are specifically engaged in advocacy, training and capacity building, with the aim of empowering abused women; ensuring that support is provided for female victims; and advocating punishment for perpetrators of gender-related war crimes.

4.6.4 Rehabilitating the economy and reducing poverty

The task of sustaining peace in post-conflict societies must go hand in hand with human development and ecological restoration, as well as rehabilitation and reconstruction of the economy, based on replacing relief supplies with traditional economies.

Violence leads to the destruction of economies, waged income, financial structures, formal administration and access to essential services. In many cases, individuals required to run the institutions would have fled. Any political solution to the crises in conflict-ridden countries must therefore be accompanied by an economic development plan that offers employment alternatives for refugees, internally displaced returnees and combatants. The threat is that, in the absence of real changes in people's lives, a zero-sum mentality will prevail instead of moderation, thus undermining the chance of peace. It is imperative that people see the benefits of peace in an improved standard of living, and improved education, housing and access to basic food items. In Sierra Leone, the National Commission for Resettlement, Rehabilitation and Re-integration (NCRRR) was set up to assist in the reintegration of internally displaced persons, refugees and other vulnerable groups. The NCRRR has now been transformed into the National Commission for Social Action, a key programme for economic reform and reconstruction, with a national mandate.

MDGs advocate for the eradication of poverty and a general improvement in people's lives. Development cannot be achieved in the midst of violence, accompanied by poverty, illiteracy and disease. Therefore, poverty reduction strategies must be enhanced at the national and local levels, and the development of PRSPs is a step in the right direction. It is instructive to note, however, that, in post-conflict situations, huge sums are needed to achieve this, while the reality is that very little may be derived from donors, even when pledges are made. This poses a particular challenge for MDG 8 - global partnership - where the issue is not addressed in the context of conflict management, resolution and peace building, but is left hanging with a minor reference to improving governance. Since this makes a mockery of what Goal 8 actually sets out to achieve, the performance indicators of this goal should be overhauled to address this issue directly.

4.6.5 Improving governance

Poor governance has been identified as a major correlate of war and instability, especially in Africa. Corruption, bureaucratic harassment, and a lack of checks and balances, harms growth and delays improvement in people's lives. Allowing people to influence decisions that affect their lives is vital for increasing transparency against corruption and bureaucratic abuse. CSOs must be engaged in a fair and transparent decision-making process, in partnership with reformers in the executive, to achieve effective governance, which is crucial to the attainment of the MDGs. Indeed, all eight MDGs will be unrealisable if the institutional context for the relationship between governors and governed is ignored. Institutions for political, public and corporate governance are the key systems for attainment of the MDGs. In fact, the establishment of good governance should be a top priority.

4.6.6 Implementing reform and civilian control over the military

The military always plays a central role in the conduct of war, making it indispensable in the post-war, peace-building process, in terms of democratisation, state formation and nation building. The military therefore needs to avoid politics and agree to the establishment of civilian control and accountability to civil society. The presence of responsible security institutions is a necessary, but not sufficient, condition for peace building. Related is the development of a monitored cease-fire agreement, to ensure a complete cessation of hostilities; comprehensive disarmament; and demobilisation; without which, many post-conflict countries soon return to brutal warfare. Even if disarmament does not lead to lasting peace, it can reduce the degree of human carnage. Any disarmament agreement must rest on the restoration of civilian administration, but also on the emergence of economic alternatives for thousands of fighters. Development cannot occur in the midst of insecurity; and, since insecurity from the threat of military or armed groups is widespread in over 40 countries around the world, peace and security have to be included as a fundamental prerequisite for the attainment of the MDGs.

4.6.7 Re-integrating refugees and displaced persons

A major threat to development and security is the demobilisation and absorption into productive activities of the armed combatants. Providing profitable alternatives to violence, addressing the special needs of child soldiers, and accommodating other vulnerable groups, such as internally displaced persons, refugees and widows, are crucial dimensions of re-integration. In Sierra Leone, the National Commission for Disarmament, Demobilisation and Re-integration successfully demobilised over 80% of the country's armed combatants. Over 60% of these ex-combatants have returned to their communities with skills for self-employment. Uganda will need financial support for the re-integration of combatants once the conflict in the north of the country is resolved.[24]

4.6.8 Building local capacity for conflict prevention and resolution

Peace making and peace building are not sustainable unless locals shape the form and the content of the processes, in which all stakeholders must participate. These will include civil servants, scholars, women's organisations, labour unions, and activists in NGOs. The role played by local government agencies or NGOs in conflict areas may help them recognise signs of trouble, but they may not have the skills or resources to prevent potential clashes. Invariably they rely on directives and support from ill-equipped national governments.[25]

Confidence-building measures play a critical role in such circumstances. Local government officials need to be trained to utilise early warning systems and civil society must be involved in the monitoring of such systems. Structural risk factors need to be identified in the efforts to build local, national and sub-regional efficiency in preventing conflicts. This should be reinforced by an

24 Kumar ed. 1997.

25 Anderson 1996.

understanding of the root causes of conflict, which might include: unequal distribution of wealth, power relations, economic stagnation, undemocratic political systems, weak social structures, suppression of minority rights, flows of refugees, ethnic tensions, religious and cultural intolerance and the proliferation of weapons. Such understanding will improve conditions for resolving conflict and measures to address the root causes of armed conflict.

Some of the required steps towards an effective conflict prevention strategy include the creation of awareness through research and public education, a systemic build-up of knowledge, preparedness to respond to early warning, and improved co-ordination between various policy-makers. Such a well co-ordinated strategy must support local negotiation efforts and problem-solving approaches; and recognise that a well-informed and involved public is essential for the establishment of a durable and lasting peace. In addition, efforts should be directed towards strengthening the capacity of government and civil society through the transfer of skills and knowledge. Research should focus on risk factors, such as ethnicity, democratisation, economic development and the equitable use of natural resources.

4.7 Recommendations for the MDG+5 Review

The MDGs can be reached, but the HIV/AIDS pandemic, corruption and violent conflict constitute Herculean obstacles. Specifically, without peace and stability, the fight against poverty is doomed to fail. The 2004 Human Development Report states that, "war retards development, but conversely development retards war". Where development succeeds, countries become progressively safer from violent conflict, making subsequent development easier. Where development fails, countries are at high risk of becoming caught in a conflict trap in which war wrecks the economy and increases the risk of future war.[26]

Violent conflict remains a significant obstacle to realising the MDGs. Although the Millennium Declaration mentions peace, security and disarmament, and protection of the vulnerable, the correlation between conflict prevention, peace building and achievement of the MDGs is yet to be made in the post-declaration dialogue. Specifically, there is nothing in the MDGs about conflict, violence and terrorism, although 'security' is high on the agenda for the September 2005 High Level Review Meeting. At the 2005 MDG review, these issues must be incorporated, beyond an anti-terrorism, security agenda. In addition, existing MDG targets and indicators must be re-examined to ensure that they are responsive to the realities of conflict and conflict transition.

International donors agree that the prospects for achieving the MDGs in poor countries at war are slim, because conflicts doom people to poverty and despair. Conflict resolution is therefore an important focus, alongside greater respect for human rights and the restoration of democracy. Indeed, the international community must work, not only to react effectively to the outbreak of violence, but also to help prevent violent conflict. This is particularly important, as at least 18 of the 53 Commonwealth countries are at medium- to high-risk of internal conflict.[27] Holistic approaches to development co-operation and conflict prevention are prerequisites for peace and stability in the long-term. In addition, there are a variety of legitimate mechanisms through which the international community can and should intervene to save lives in situations of violent conflict. These include humanitarian assistance, human rights promotion, peacekeeping forces, peace support instruments and, in extreme cases, support for military intervention.

There is a clear need to improve the funding of initiatives which link peace, security and development. Official development aid can play an important role in this regard. Sustainable and inclusive development processes prevent and address violent conflict by contributing to the reduction of horizontal inequalities and enabling people to claim their rights through non-violent means.

Countries moving out of conflict need support to prevent any recurrence of the conflict, humanitarian assistance, as well as assistance in reconstruction.

It is also vital to close the gaps between relief and development. In the context of partnership assistance, the "peace-building" conditionality must be re-assessed in order to support peace implementation, and traditional economic and financial conditionalities to prevent the recurrence of conflict.

Within national borders, socio-economic and security challenges must be tackled simultaneously, enabling states to escape downward spirals of mutually reinforcing insecurity, criminalisation and under-development, which may pose insurmountable obstacles to the attainment of the MDGs. Activities such as security system reform to help stabilise fragile, conflict-prone or conflict-affected states, require "whole-of-government" approaches. These should be multi-sectoral, with commitments at the highest levels of government. They must successfully

26 Vaux and Goodhand 2001.

27 SIPRI 2003.

harmonise engagement: throughout relevant departments in partner countries, in nationally-owned and led visions; and throughout and between donor governments or multilateral organisations.

National planning processes, as well as strategies and actions, must depart from the business as usual approach and should be developed within a framework which acknowledges and is adapted to conflict/post-conflict situations.

Basic human rights and judicial reforms must be ensured as essential complements to the security, economic and social sectors within the overall national development framework .

The role of the private sector and civil society as active partners in human security, poverty reduction and development cannot be overstated and must be enhanced. The international community should support the empowerment of civil society in respect of development generally and the attainment and monitoring of MDGs specifically. In conflict and post-conflict situations, civil society organisations can play a vital role in facilitating third party intervention, mediation, negotiation and advocacy, in addition to delivering services.

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5

Human resources and domestic capacity for meeting the Millennium Development Goals

Gladys Mokhawa and Oleosi Nshebe
University of Botswana

Even though other human resources are needed to achieve the other MDGs, it would be a good start to overcome the deficit of 12,000 teachers for primary education and 9,000 health personnel at all levels of the system.

The Millennium Development Goals (MDGs) in Cameroon: How Far From the Target in 2005?

In the medium term, Malawi will experience a 4.8% reduction in GDP per capita because of HIV/AIDS. Much of this decrease is the result of lost knowledge and skills due to AIDS mortality within the workforce.

People's Report on the Millennium Development Goals: The Case of Malawi.

Achieve universal primary education
Improve maternal health
Reduce child mortality
Promote gender equality and empower women
Combat HIV/AIDS, malaria, and other diseases
Eradicate extreme poverty and hunger
Promote gender equality and empower women
Achieve universal primary education
Ensure environmental sustainability
Reduce child mortality
Develop a global partnership for development
Ensure environmental sustainability
Improve maternal health

Chapter overview

This chapter explores how domestic capacity for meeting the Millennium Development Goals (MDGs) is affected by human resource losses due to migration and HIV/AIDS, as well as human resource insufficiency or inefficient management of existing human resources. The discussion is based on national reports from Cameroon, Ghana, Jamaica, Malawi, and Trinidad and Tobago.

The depletion of existing human and material resources by HIV/AIDS and migration is impeding the economic growth and human development needed to meet the MDGs. The enhancement of human resource planning demands the implementation of HIV/AIDS interventions, informed by analysis of the impact of HIV/AIDS on the workforce. This would contribute to effective planning for jobs lost due to sickness, ill health, retirements, deaths, and other negative impacts of the epidemic on the achievement of MDG targets.

Given the impacts of migration on development, and on the human resource base in the health and education sectors, countries of origin and destination should undertake joint efforts to effectively address the problems. There is, therefore, a need for partnerships to tackle these at grassroots, regional and international levels.

Lastly, in respect of the broad context of which human resource issues are only one part, both development partners and national governments need to change their approach to managing the financial and human resources for attaining MDG targets, keeping poverty issues at the top of national and global development agendas.

Author Profile: Gladys Mokhawa and Oleosi Nshebe

Gladys Mokhawa, lecturer in the Department of Political and Administrative Studies at the University of Botswana, and **Olesi Nshebe,** who lectures at the University's Population Studies Centre, focus on the theme of human resources in their everyday work. The University of Botswana has a strong educational presence throughout Botswana and Southern Africa, and works to advance the intellectual and human capabilities of the region.
Website: http://www.ub.bw/

5.1 Introduction

Realisation of the Millennium Development Goals (MDGs) requires mobilisation of the necessary human as well as financial resources. Yet, several developing Commonwealth countries are grappling with the effects of being net exporters of trained professionals in the fields of health and education, in particular to their developed counterparts within and outside Commonwealth. The loss of capacity in these areas has implications not only for those health and education related goals, but more broadly for national development. The Joint Learning Initiative (JLI), a consortium of more than 100 global health leaders concerned with strengthening the workforce of health systems, estimates a global shortage of more than four million health workers. The JLI further estimates that Sub-Saharan African countries need to triple their current health workforce with an additional one million workers if they are to meet the health-related MDGs.[1] The UNESCO Centre for Comparative Education Research at the University of Nottingham has called the "significant international flows of trained teachers" one of the "under-emphasised aspects of globalisation", which can complicate progress toward the education-related MDGs.[2]

HIV/AIDS infection, especially in Sub-Saharan Africa, has placed a strain on communities and national economies. Resources needed to respond to the challenges posed by HIV/AIDS are often scarce and continue to be depleted by the expanding crisis. Additionally, spending on HIV/AIDS diverts resources from other social and economic sectors. Migration has been found to be one of the critical factors in the transmission, rapid growth and impact of HIV/AIDS in Southern Africa.[3]

5.2 Migration

Socio-economic, demographic, technological and labour changes are some of the factors influencing the global migration trends. The World Health Organisation (WHO) notes that growing poverty - both real and relative - is pushing people to move in search of work.[4] Indeed, the WHO suggests that cross-border migration, combined with the brain drain from developing to industrialised countries, will be among the major forces shaping the landscape of the 21st century.[5] But migration does not only occur between developing and developed countries, in some regions there is significant migration between developing countries. For example, since 1994 South Africa has had an influx of emigrants from countries across Sub-Saharan Africa, including Ghana, Kenya, Nigeria, Sierra Leone and Uganda.[6]

Migration is fuelled by structural as well as societal and economic issues. The movement of workers can also be spurred by political factors and conflict. Declining faith in the political system or distrust in the government of the day may precipitate the movement of workers to other countries with more appealing political environments.[7] Although there has not been extensive research on the subject, evidence suggests that the movement of workers is sometimes motivated by political factors. Crush and McDonald, for example, illustrate movement inspired by politics by citing the example of South Africa, claiming that the migration of skilled white South Africans is rooted in distrust of and dissatisfaction with the government's performance, especially in relation to affirmative action.[8]

Dodson argues that "migration to another country is always the outcome of a balance between push and pull factors, with source and destination countries weighed against each other in a complicated form of individual and household cost and benefits". [9] Moreover, the role played by the international mass media in the decision-making process of high level professionals intending to migrate, cannot be underestimated. Images of better and brighter lives or "greener pastures", as sold by the mass media, reach into communities which in turn make use of these opportunities. As a consequence of these factors, many developing countries are experiencing a brain drain as their professionals, particularly in the health and education sectors, leave home in a quest for jobs with competitive salaries.

5.2.1 Impacts of overseas migration

Within the African continent, 23,000 professionals leave their countries annually, contributing to the already poor human resources conditions.[10] For example, some 3,157 local health workers left Ghana between 1993 and 2002; and this accounted for more than 31% of health professionals trained in Ghana during that period.

In Cameroon, there is a reported deficit of "12,000 primary school teachers and 9,000 health personnel at all levels of the system".[11] However, there is no certainty of a job after training at the national schools for nurses and, indeed, recruitment is quite difficult. This is captured in the Cameroon country paper prepared for this report, which states: "despite the fact that public health facilities do not have enough staff, they (nurses and doctors)

1 *Joint Learning Initiative 2004.*
2 *See http://www.nottingham.ac.uk/education/centres/ccer/ DFID Teacher Mobility project.*
3 *Williams et al. 2002.*
4 *WHO 2003.*
5 *World Bank 2000.*
6 *Adepojou 2004.*
7 *Mattes and Richmond 2002.*
8 *Ibid.*
9 *Dodson 2002, p. 15.*
10 *Pang et al. 2002, as quoted in Marchal and Kegels 2003.*
11 *Tsounkeu 2005.*

are no more easily recruited by the state and have to migrate to other sectors or try their way outside of the country... The loss of capacity in the health and education sectors is due much more to resource management problems than to other reasons".[12] In 1992, the estimated doctor-patient ratio was one doctor for every 10,000 patients.[13] The doctor-patient ratio in Ghana is even worse at 1:66,000.[14] The migration of health workers can result in a serious loss of human capital from the countries of origin, impeding heath sector development and reducing the capacity of countries to deliver health services.[15]

Jamaica, in the Caribbean, has been forced to recruit nurses and teachers from Cuba to replace losses to the professions.[16] While many Jamaican teachers and health professionals emigrate to industrialised countries, they are also actively recruited within the region, as evidenced by the many advertisements placed in the Jamaican print media by institutions in the Bahamas, Bermuda, the Cayman Islands, and the Turks and Caicos Islands.[17] At the opening of a Caribbean workshop on the temporary movement of health professionals held in Barbados in July 2005, the Commonwealth Deputy Secretary-General, Mr Winston Cox, noted that the estimated cost of nurses emigrating from Caribbean Community (CARICOM) member states between 1999 and 2000 was US$16.7 million.[18]

In the South Pacific, Samoa has been losing 5-10% per cent of its young doctors each year.[19] This lack of capacity in critical public services will substantially increase the risk of failure to achieve the MDGs. The situation in the education sector follows a similar pattern. It has been observed in Samoa that the general attrition rate for teachers is high by international standards with primary level at 5.2% per year and secondary level at 7.5% per year, that is, 60 primary and 34 secondary teachers leave the service every year (see figure 1 below).[20]

However, the loss of education professionals is not always due to emigration since attrition can also be an underlying cause. In Cameroon, for example, there has been movement of teachers to other professions like tax administration. This is due to difficulties in recruitment and the way they are treated after recruitment: most remain unconfirmed in their posts for a long time, causing them to live on low wages which are often late in coming.[21] There are some 13,800 unconfirmed primary school teachers in Cameroon in 2005, of whom 7,500 are already eligible for confirmation, but still awaiting replies to their applications. Yet the government, in 2004, announced a recruitment project for 1,700 primary school teachers.[22]

5.2.2 Costs and trade-offs of exporting trained personnel

The impacts of the brain drain are grave. First, it creates imbalances in the workforce and, as a result, compromises the quality of healthcare or education in the affected countries.[23] Second, the cost implications are enormous. Pang et al. in Marchal and Kegels quotes figures from the United Nations Conference on Trade and Development (UNCTAD), indicating that each professional leaving Africa costs the continent US$184,000, and US$4 billion is spent yearly on the salaries of 100,000 foreign experts.[24] Given the financial investment that governments make in training their personnel, the loss of new graduates constitutes a huge financial, as well as human, resource strain for the affected countries, thus holding back development. Indeed, some commentators have argued that the training needs of developed countries are being subsidised by the developing countries. Third, a brain drain is reported among many developing country professionals who were initially sent north by their home countries for specialisation; and who remain there afterwards, but do not necessarily find jobs relevant to their qualifications. As a result, they end up

Figure 5.1

Teacher attrition 1999-2001 (Samoa)

Year	Primary Number	Per cent	Secondary Number	Per cent	Total Number
1999	56	4.7	37	8.2	93
2000	65	5.5	26	5.7	91
2001	63	5.4	40	8.8	103
Total	184		103		287
Average	61	5.2	34	7.5	96

Source: *Elisara-La'ulu 2005*

12 Tsounkeu 2005.
13 Ibid.
14 Apoya and Adamtey 2005.
15 WHO 2003.
16 Marchal and Kegels 2003 and Grant-Cummings 2005.
17 Grant-Cummings 2005.
18 Cox 2005.
19 Elisara-La'ulu 2005.
20 Ibid.
21 Tsounkeu 2005.
22 Ibid.
23 Marchal and Kegels 2003.
24 Marchal and Kegels 2003.

doing jobs which northern nationals are unwilling to do.

On the other side of the coin, it is sometimes argued that migration can contribute positively to the economies of home countries because of remittances: i.e. earnings sent back home by migrant workers. Remittance flows are the second largest source of external funding for developing countries, behind foreign direct investment. In 2001, worker remittances to developing countries stood at US$72.3 billion, which was much higher than the total official aid flows and private foreign direct investment flows.[25] However, remittances do not contribute directly to the investment in local health systems, but rather improve household incomes. Nonetheless, long-term professional networks and improved training are regarded as some of the positive consequences of the brain drain, even though Pang et al. in Marchal and Kegels[26] point out that the negative effects will usually predominate.

In addition, it has been argued that the brain drain is a result of industrialised countries poaching human resources from the South. Nevertheless, evidence suggests that the problem does not only lie with the receiving countries. There are instances where arrangements exist between countries to allow a free flow of the labour force. This is the case with Samoa, which has multilateral arrangements allowing nationals to work in developed countries like New Zealand, Australia and the United States of America.[27] Ineffective and inefficient management structures in the countries of origin are also blamed for exacerbating the problem of international migration. Health professionals, in particular, face the burden of heavy workloads often manifested in high patient-nurse ratios, emotional stress, poor pay and sub-standard equipment.

5.3 HIV/AIDS

HIV/AIDS is considered a time bomb as it threatens current and future public service delivery. Data from the Joint United Nations Programme on HIV/AIDS (UNAIDS) indicate that the number of people living with HIV/AIDS rose from 40 million in 2001 to 42 million in 2002, and about 60% of these people were in the Commonwealth. Recent global estimates show a decline in prevalence, with 37.8 million people now living with HIV/AIDS.[28]

According to UNAIDS,[29] Sub-Saharan Africa is home to over 10% of the world's population, yet it has two-thirds of all people living with HIV/AIDS and this is estimated at 25 million people. The adult prevalence in some of the countries in the Southern African Development Community (SADC) region is estimated as follows: Botswana - 37.3%, Lesotho - 28.9%, Malawi - 14.2%, Namibia - 21.3%, South Africa - 21.5%, Swaziland - 38.8%, and 16.5% in Zambia.[30]

Malawi, with a population of 10.7 million, estimates that between 850,000 and 1.1 million people are infected with HIV/AIDS.[31] Results of the country's 2003 Sentinel surveillance report indicate that levels of HIV infection are generally high, with prevalence peaking in urban areas. The report further shows that HIV prevalence in Malawi stabilised in the middle of the 1990s and is expected to remain at the same level for the next few years if the current conditions prevail.

The Caribbean has the second highest HIV/AIDS prevalence rate in the world after Sub-Saharan Africa. Trinidad and Tobago has approximately 360,000 people out of a population of 1.3 million living with HIV/AIDS; giving it the 17th highest incidence in the world, fifth among English-speaking countries and first among the larger Caribbean countries.[32]

HIV/AIDS affects all age cohorts, sexes and areas of residence across Southern Africa, but the highest prevalence is among adults aged 20-40, the most productive age group in society, and among women - probably due to gender inequalities which make it difficult for them to negotiate safe sex. Estimates suggest that 57% of infected adults are women, and 75% of the young people infected are women and girls.[33] In Malawi, about three-quarters of AIDS cases are found among adults aged 20-40 years.[34] However, the distribution varies significantly by age. Almost four times as many 15-19 year old females are affected as males in this age group. About one-third more females than males are affected in the 20-29 year age group, but more males than females in the age group of 30 years and over. A significant number of AIDS cases are also observed among children of 0-4 years and a smaller number of AIDS cases for the ages of 5-14 years. The above patterns seem to reflect the general pattern of heterosexual and mother-to-child transmission. In the case of Trinidad and Tobago, the percentage of infected women has seen an increase from 0% in 1983 to 37% in 2000.[35]

These trends and patterns have severe implications for the attainment of the MDGs. The impacts of HIV/AIDS go beyond public health as the epidemic has broader

25 *WHO 2003.*
26 *Marchal and Kegels 2003.*
27 *Elisara-La'ulu 2005.*
28 *UNAIDS 2004.*
29 *Ibid.*
30 *www.unaids.org/EN/Geographical+Area.*
31 *Malagasi 2005.*
32 *McDonald 2005.*
33 *UNAIDS 2004.*
34 *National AIDS Commission 2003.*
35 *McDonald 2005.*

developmental implications. These include: increasing adult and child mortality; potential loss of gains in educational achievement; reduced economic growth through diversion of investment, pressures on public resources and loss of adult labour (quality and supply) and productivity; deepening of poverty in affected households due to loss of incomes and increased expenditure on healthcare and funerals; threats to food security; and loss of social cohesion, through such things as loss of skills, leadership, disruption of social networks and breakdown of family structures.[36]

5.3.1 Economic costs

The impact of HIV/AIDS is felt by countries at both micro- and macro-economic levels. At the micro-economic level the impact is felt by individuals and their families, with the impact on the individual and at household level generally beginning as soon as the HIV status of an individual is known. Problems of stigma and discrimination often arise within the community and at the workplace, leading to poor attendance or even job loss. The effect on the family generally translates into loss of income and increased expenditure on medical care and funeral costs. Often this results in the depletion of savings and assets, such as land and cattle, to cover the costs associated with HIV/AIDS. Families fall deeper into poverty, and the challenge of ensuring that there will be no persons living below the poverty line (i.e. on an income of less than US$1 per day) by the year 2015 becomes greater. As HIV infected parents develop AIDS, become critically ill and die, school children are forced to drop out of school and assume adult roles, often without savings and assets. This depresses primary enrolment, eventually resulting in reduced numbers of qualified candidates for both secondary and tertiary education, with long-term effects on the development of countries. Already, the decline in primary enrolment has been observed in Botswana, South Africa, Swaziland and Zambia.[37] Most of the children who stay at school do not perform well, making it difficult to achieve universal primary education. It has been estimated that 15 million children were orphaned by HIV/AIDS up to 2003 and that eight out of ten of these children live in Sub-Saharan Africa.[38]

5.3.2 Impacts on labour supply and productivity

At the macro-economic level, the impact of HIV/AIDS has negative effects on productivity and profitability, with increased costs related to expenditure on health, education and other sectors. The deaths of skilled workers may lead to their replacement by less skilled persons, as well as increased recruitment and training costs. Indeed, it has been argued that the rate at which public servants in Africa are being lost to HIV/AIDS far outstrip their training rate.[39] In Zambia, for example, although no official figures are available, some 800 teachers are estimated to have died of HIV/AIDS in 1998 and anecdotal evidence suggests more have died since then.[40] In addition, economic output is affected by the loss of adults in their most productive years, with an overall negative impact on factors such as the gross domestic product and the Human Development Index.

Impacts on the education sector include effects on the supply of education, the demand for education, the quality of education, the way education is managed, and its capacity to respond to new and complex demands.[41] Specifically, HIV/AIDS affects the supply of education services through increased absenteeism, the early retirement and mortality of teachers, a reduced workforce, as well as teachers' care responsibilities for other family members. AIDS-related illnesses cause teachers to become increasingly unproductive, and studies show that the death or absence of even a single teacher affects the education of 50 or more children.[42] All this adds up to a loss of skills, leading to a serious human resource shortage and a gradual decline in the quality of the education.

The demographic impact of HIV/AIDS on the labour force in both the education and health sectors translates into increased morbidity, mortality and a fall in life expectancy; with implications for the loss of knowledge and skills within the workforce. A recent report from the US Agency for International Development suggests that by 2010, many countries in Southern Africa will see life expectancy falling to about 30 years.[43] In Malawi, for example, life expectancy in 2002 was estimated at 38.5 years, compared to a projected 56.3 years without AIDS; and this was expected to fall to 36.9 years by 2010.[44]

5.3.3 Budgetary strain

HIV/AIDS also has quite daunting effects on national budgetary allocations, to cater for the provision of anti-retroviral drugs and other costs associated with the treatment and prevention of the disease. This leads to budgetary strain and affects a country's macro-economic development. In the case of Botswana, budget allocations to the health sector were projected to rise by 50% in the fiscal year 2003-04. There have been other cases where financial resources have been diverted from other sectors to HIV/AIDS programmes. In Cameroon more than 5% of the national budget has been allocated

36 *Loewenson et al. 2001.*
37 *Coombe 2002.*
38 *UNICEF 2005.*
39 *Coombe 2002.*
40 *Government of the Republic of Zambia and the United Nations System in Zambia 2003. In Kapijimpanga 2005.*
41 *Ibid.*
42 *Ibid.*
43 *US Agency for International Development 2004.*
44 *Malagasi 2005.*

to HIV/AIDS for the past five years, and this contrasts with allocations to the rural sector, which in general stand at about 5%.[45] In Trinidad and Tobago, state resources are being diverted from otherwise productive pursuits to HIV/AIDS-related interventions, posing major challenges to the pursuit of sustainable development and exacerbating the vulnerabilities of this small island state.[46]

5.4 Responding to the issues

If developing countries are to succeed in attaining the MDGs, they must address human resource losses due to HIV/AIDS and emigration by adopting relevant strategies. Each country needs to assess its human capacity needs and review its national human resource policy to ensure that efforts made to offset the impact of HIV/AIDS and migration are based on current social, cultural and economic realities. National human resource planning should take into account resource gaps left by migration and HIV/AIDS deaths; where necessary, contingency plans should be developed for institutional strengthening. At the same time, mechanisms should be developed for succession planning, based on an assessment of the magnitude of the public sector losses and utilising situation analysis, human resource audits, scenario planning and multi-skilling. Skills gaps existing in the economies also have to be addressed, and improved policies put in place for training and retaining critical skills.

Policies addressing the effects of migration and HIV/AIDS on the size of the workforce could draw from frameworks for human development which resonate with the aspirations of the MDGs. Such initiatives include at a regional level the New Partnership for Africa's Development (NEPAD); and at a national level, Vision 2020 in Trinidad and Tobago and Vision 2016 in Botswana. In drawing up such policies, the participation of civil society should be sought, since civil society organisations have an important role to play in all aspects of reducing poverty.

5.4.1 Countering human capacity loss due to HIV/AIDS

If the effects of the HIV/AIDS pandemic are to be countered, governments should embrace and implement human resource policies that improve health system performance. The political leadership of the country is critical to mitigating the scourge of HIV/AIDS. In particular, the country's leadership should recognise the need for HIV/AIDS audits, in order to plan effectively for current and future impacts, including jobs lost due to sickness, ill health, retirement and death. Such planning requires the ability to make current and future predictions on the demographic impacts of HIV/AIDS on the workforce, to be able to adapt and make adjustments to employment, recruitment, training, health and benefit costs. Moreover, all plans, initiatives and programmes dealing with HIV/AIDS should be gender sensitive.

HIV/AIDS has to be recognised as a serious threat to productivity and development, and therefore, integrated into human resource development planning. In this context, several countries in Sub-Saharan Africa have national HIV/AIDS policies and national strategic frameworks through which to channel and activate efforts to curb the effects of HIV/AIDS on human resources. There is a need for institutional audits to enhance understanding of the impact of HIV/AIDS on human and financial resource bases, and to inform decisions on relevant mitigation measures. Assessments can look into areas such as:

- personnel profiling to assess the kinds of people employed, their skills and likely susceptibility to the HIV infection;
- critical post analysis, to identify personnel with skills which are difficult to replace and whose loss must be prevented;
- the size and composition of the national populace and institutions, as well as the likely effects of the epidemic on the population and workforce, to guide the replacement and/or training of personnel lost due to HIV/AIDS; and
- estimation of national and organisational liabilities to determine the costs incurred by institutions as a result of benefit packages, as more and more people die.

Productivity assessments should be undertaken to understand and compensate for the loss of productivity due to HIV/AIDS, including losses due to absenteeism and attrition as employees fall sick or care for sick dependants. National governments can minimise losses in productivity by establishing strong and responsive human resource management systems. To replace people who are sick or have died, multi-skilling or out-sourcing such skills may be pertinent. Multi-skilling at all levels would have to be supported by training strategies, which have cost implications, or through the substitution of skilled workers by unskilled workers, with impacts on institutional performance.

45 Tsounkeu 2005.

46 McDonald 2005.

In addition, it is essential to promote awareness training on HIV/AIDS in the workplace. Governments and organisations need to recognise the importance of sensitising both managers and employees on issues regarding the management of HIV/AIDS in the workplace.

5.4.2 Countering human capacity loss due to emigration

Governments need to tackle the human resource implications of emigration. To this end, they should improve infrastructure, offer incentives and provide conducive environments in order to reduce migration to developed countries and maximise the use of existing human capacity. In particular, they should ensure that trained medical and professional personnel receive domestically competitive salaries.

As with any other development challenges, greater regional and global co-operation is needed to address the issue of migration. For instance, co-operation between sending and receiving countries should ensure a fair distribution of benefits, especially given the needs for meeting the MDGs. One approach could be the Intellectual Resource Management Fund (IRMF) recommended by COSTED,[47] which would "fund actions at regional and international levels augmenting national efforts to produce and develop world class human resources in Science and Technology".[48]

Migration is complex in its scope and cause, and strategies to address it should include creative contracting: i.e. the financial subsidy of the health sector in the country of origin, by the recruiting country. In addition, since the aspirations of the professionals who migrate are high, strategies should aim at effectively retaining them and creating conducive environments with, at a minimum, economic growth, political stability and security. With regard to public sector workers, discrepancies in remuneration, working environments, working hours, supplies and equipment, and training should be eradicated, to reduce the extent of migration to other countries which offer better services.

5.5 Conclusion

The discussion has shown that the depletion of existing human and material resources, by HIV/AIDS and migration, is impeding the economic growth and human development needed to meet the MDGs. Certainly, Sub-Saharan Africa will not reach most of the MDGs, given the human resource challenges that exist in the region.

Depletion aside, the functions of such resources are also changing in response to a broader and more urgent range of needs. For instance, teachers in some of the countries in Sub-Saharan Africa die of AIDS almost as rapidly as they can be trained.[49] Thus, cost effectiveness and the enhancement of human resource planning demands the implementation of HIV/AIDS interventions, informed by the analysis of the impact of HIV/AIDS on the workforce. This would contribute to effective planning for jobs lost due to sickness, ill health, retirements, deaths, and other negative impacts of the epidemic on the achievement of MDG targets.

Given the impacts of migration on development, and on the human resource base in the health and education sectors, countries of origin and destination should undertake joint efforts to effectively address the problems. Hence, the need for partnerships at grassroots, regional and international levels. Indeed *The Commonwealth Code of Practice for the International Recruitment of Health Workers,* adopted in May 2003 and *The Commonwealth Teacher Recruitment Protocol* adopted in September 2004 are two examples of international partnerships.[50] While not binding, the code and protocol respectively provide guidelines for the international recruitment of health workers and teachers in a manner that takes into account the interests and welfare of the professionals, the obligations of the recruiting countries and the potential impact of such recruitment on health and education services in the source countries, which are for the most part developing countries.[51]

There is a noticeable gap in research and analysis on the relationship between migration and the MDGs. Research is, therefore, needed to understand the relationships between HIV/AIDS, migration and poverty, as well as to ascertain the ability of family, community and institutional structures to accommodate and manage the challenges that the epidemic poses.

Lastly, in respect of the broad context of which human resource issues are only one part, both development partners and national governments need to change their approach to managing the financial and human resources for attaining MDG targets, keeping poverty issues at the top of national and global development agendas.

47 COSTED 2001.

48 Ibid., p 51.

49 Coombe 2002.

50 For copies of these documents see www.thecommonwealth.org/shared_asp_files/uploadedfiles/%7B7BDD970B-53AE-441D-81DB-1B64C37E992A%7D_CommonwealthCodeofPractice.pdf and http://www.thecommonwealth.org/shared_asp_files/uploadedfiles/{90CCBAE1-D475-47EC-BD52-02BE05EA0D27}PROTOCOL.pdf

51 Cox 2005.

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6

Poverty Reduction Strategy Papers and the Millennium Development Goals

Opa Kapijimpanga
African Forum and Network on Debt and Development (AFRODAD)

Poverty reduction through projects that result in displacement of the poor is unacceptable, even if the aggregate numbers indicate that the number of poor may decline.

A Civil Society Perspective on the Millennium Development Goals and the Poverty Reduction Strategy Paper: The Case of Pakistan

Achieve universal primary education
Improve maternal health
Reduce child mortality
Promote gender equality and empower women
Combat HIV/AIDS, malaria, and other diseases
Eradicate extreme poverty and hunger
Promote gender equality and empower women
Achieve universal primary education
Ensure environmental sustainability
Reduce child mortality
Develop a global partnership for development
Ensure environmental sustainability
Improve maternal health

Chapter overview

This chapter draws on the country papers from Cameroon, Ghana, Pakistan, Tanzania and Zambia, which were prepared for this report. In analysing the relationship between the Poverty Reduction Strategy Papers (PRSPs) and the Millennium Development Goals (MDGs), this chapter draws attention to the following key issues:

- The power relationship between the poor and rich nations of this world, excercised in favour of the rich nations by the policies of International Financial Institutions, continues to undermine key aspects of national or local ownership of the PRSPs which are essential for consensus and for the commitment of the stakeholders to poverty reduction.

- The lending instruments of the International Monetary Fund, in particular the Poverty Reduction and Growth Facility, and those of the World Bank, namely the Country Assistance Strategy and the new Country Policy and Institutional Assessment, undermine the integrity of the PRSPs and threaten the achievement of the MDGs.

- MDGs can only be delivered through a combination of policies, appropriate programmes, and appropriate and adequate financing. The issue of financing development or PRSPs and, in particular, the role of development aid continues to be important in assessing the likely attainment of MDGs.

- Civil society organisations have a key role to play in the attainment of the MDGs through their roles in strengthening local, national and donor accountability, as well as influencing the development of policies biased towards meeting the MDGs.

Author Profile: Opa Kapijimpanga

Opa Kapijimpanga, founder and chairman of the African Forum and Network on Debt and Development (AFRODAD), is a senior research fellow at the Institute for Policy Studies in Lusaka, Zambia. His career spans 30 years in the field of development. AFRODAD, based in Harare, Zimbabwe, is a pan-African research and advocacy organisation that works to identify sustainable policy solutions to the African debt crisis.
Website: http://www.afrodad.org

6.1 Origins of PRSPs and MDGs

Both the Poverty Reduction Strategy Papers (PRSPs) and the Millennium Development Goals (MDGs) have common origins in global efforts, particularly through the United Nations fora and global civil society advocacy actions, to find solutions to the glaring poverty faced by the people of the southern hemisphere compared with higher standards of living in rich nations. The PRSPs and MDGs are however shaped by specific circumstances and influences. While the MDGs are a part of an urgent plan to deal with poverty, the PRSPs have been part of a "conditionality" structure for debt relief, a policy framework for poverty reduction and development assistance.

The focus on the debt problem emerged from the World Summit for Social Development held in Copenhagen, Denmark, in 1995. This summit revealed the failure of both the predominant, neo-liberal development paradigm and development aid, which had originally been expected to mitigate the development imbalance between rich and poor nations. Although it was recognised that poverty was multi-faceted and required holistic approaches and solutions, the contributing issue of debt was flagged for special attention. As a follow up to the Social Summit, a meeting of the Group of Seven (G7) nations instructed the World Bank and the International Monetary Fund (IMF) to come up with a comprehensive package to deal with the plight of the Heavily Indebted Poor Countries (HIPCs). The HIPC debt relief initiative was subsequently established in 1996 to provide a debt exit package, involving both bilateral and multilateral institutional creditors, for some 44 countries, most of them in Africa.

The implementation of the HIPC Initiative faced its own problems. Three years down the line, in 1999, the Initiative had only provided some limited relief to a small number of countries. International pressure from civil society and other organisations for deeper, faster and broader debt relief by way of outright unconditional debt cancellation, "forced" the G7 countries meeting in Cologne in 1999 to call for an enhanced HIPC.[1] Furthermore, calls for debt relief to be directed to poverty reduction activities resulted in the World Bank and the IMF adopting an enhanced HIPC with a stronger link between debt relief and poverty reduction. Affected countries were to draw PRSPs, which would constitute the framework for poverty reduction, for debt relief and for co-ordinating development financing from co-operating partners. The PRSP was to be prepared by governments through a consultative and participatory process, making it a consensus-based document with national ownership and stakeholder commitment to the strategy of poverty reduction. In essence, therefore, the PRSP was supposed to be a national development process and plan with a defined policy framework on how to go about reducing poverty.

The MDGs, on the other hand, are a crystallisation of the Millennium Declaration, which was signed by the international community in New York in September 2000. This constituted a commitment to face and deal with the challenges of widespread poverty, especially in the southern hemisphere, affecting mainly Africa, Asia and Latin America. The beginning of the new millennium was seen as an opportunity to address issues, especially growing poverty, which had daunted the world in the past millennium. The Declaration was therefore a culmination of debates and discussions within and outside the United Nations for many decades. The eight MDGs, formulated to operationalise the aspirations set out in the Declaration, are to be achieved by 2015. The first seven Goals commit leaders to eradicate poverty and hunger, get girls into schools, empower women, reduce incidents of child and maternal mortality, reduce the incidence of HIV/AIDS and other major diseases, and ensure environmental sustainability. The eighth Goal recognises that eradicating poverty and its underlying causes requires a global partnership for development.

6.2 Ownership of the development process and PRSPs

Although it is generally acknowledged that country ownership of development policy and reforms is essential for achieving poverty eradication, the process of preparing PRSPs largely involved the transformation of existing national development plans into the PRSP framework provided in guidelines from the World Bank and the IMF. Thus, for example, Mozambique transformed its Action Plan for the Reduction of Absolute Poverty (Plano de Accão para Reduçao da Pobreza Absoluta) into a PRSP; in Tanzania it was the National Poverty Eradication Strategy; and in Uganda it was the Poverty Eradication Action Plan.[2]

Broader civil society and other national stakeholder participation has been acknowledged as essential for national ownership. However, the process and impact of participation have varied across countries that have

1 See http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTDEBTDEPT/0,,contentMDK:20260411~menuPK:528655~pagePK:64166689~piPK:64166646~theSitePK:469043,00.html.
2 AFRODAD 2002.

undertaken the PRSPs, defined largely by the nature of the relationship between the state, civil society and civil society organisations (CSOs). In all the ten African countries whose PRSPs were reviewed by the African Forum and Network on Debt and Development (AFRODAD), the processes were rushed, thus undermining the extent and quality of participation.[3] Capacities, especially at local levels, needed to be strengthened in order to secure effective participation. There was also a need for institutional mechanisms that would deepen the level of stakeholder participation in the PRSP process.

Besides the low level of participation, other issues continue to undermine ownership in the PRSPs:[4]

- CSOs saw people's empowerment and human-centered development as being the most appropriate sustainable development strategy to begin empowering disadvantaged groups and sectors of the economy. This strategy would also ensure broad-based growth, for instance, by equitably distributing land and other assets, making credit available and building human capacities. However, it was evident that the PRSP approach was based on the old growth-centered, trickle-down-effect Structural Adjustment Programmes (SAPs) of the past. The only new feature was the increased need for paying attention to public spending on health and education, and the introduction of safety nets and targeted spending to mitigate the adverse impact of SAP policies on the poor.[5]

- The macro-economic framework of the PRSP was the same as the IMF's Poverty Reduction and Growth Facility (PRGF), whose definition and content were not exposed to public debate nor civil society participation.[6]

- The strong link between PRSP and debt relief made governments pay attention to debt relief rather than to poverty reduction strategies and policies.

Since PRSPs were reshaped into the IMF and World Bank guidelines and later approved by the Boards of the two institutions, they have rightly been perceived not to be nationally owned. Since ownership of development policy still remains key to attaining poverty reduction and particularly the MDGs, an ongoing assessment of the level of ownership of the development process remains a crucial indicator of the extent of commitment to development. More recent initiatives where PRSPs will be absorbed back into national development plans will strengthen ownership.[7] Part of the attainment of Goal 8, which requires genuine partnership between the developing countries and the developed countries, will be secured through the extent to which co-operating partners will respect the national development agenda. The instruments for securing development finance, and the actual policy content of the PRSPs, also undermine the potential for achieving MDGs and ownership and commitment to poverty eradication by national governments and people.

6.3 PRSP and IFI poverty reduction facilities

In the division of labour between the World Bank and the IMF, the World Bank is responsible for a country's structural adjustment which includes institutional reforms, policy changes around ownership of means of production, the nature of markets, governance, infrastructure, capacity building, etc. The Bank provides loan finance for such structural changes. The IMF on the other hand is responsible for stabilisation programmes which include fiscal and monetary policies - pricing regimes, exchange rate policy, financial policies and others. It also provides financial resources on the basis of some agreed levels in relation to the country's holding of Special Drawing Rights with the Fund. The Fund's programme is operationalised through the PRGF. A country must have a current PRGF programme to access both IMF and other donor financial resources, making the PRGF a particularly important instrument. We make a quick analysis of these instruments and their potential impact on poverty reduction and the attainment of MDGs.

6.3.1 The IMF's Poverty Reduction and Growth Facility (PRGF)

In 1999, the PRGF replaced the enhanced Structural Adjustment Facility, which itself had replaced the Structural Adjustment Facility in 1987. The development framework of the PRGF is a neo-liberal, economic development strategy, which is best described as an obsession with market liberalisation and reduction of the role of the state. The PRGF is itself operationalised through the Letter of Intent and Memorandum of Economic and Financial Policies between the government and the Fund. Although the Fund claims that the Letter of Intent belongs to the government, the reality is that governments must adhere to the PRGF parameters in order to secure financial resources. Across all countries, the Letter of Intent looks the same and the conditions to be attained under the programme are related to the neo-liberal growth model. It is therefore not surprising

3 AFRODAD 2003a.
4 AFRODAD 2003b.
5 Ibid., p. 7.
6 Ibid., p. 9.
7 Government of the Republic of Zambia 2005.

that the IMF guidelines for the PRSPs argue for a more rapid privatisation in order to create space for the private sector. They also recommend a faster pace of trade liberalisation to enhance the efficiency and competitiveness of the domestic producers, and speed up the country's integration into the global economy.

For Cameroon, Ghana, Pakistan, Tanzania and Zambia, like most poor countries, the PRSP is the basis for a PRGF approval. It is for this reason that countries like Pakistan, which is not a HIPC, opted to write a PRSP in order to secure a PRGF and whatever conditions go with it.[8]

The following can be observed from close examination of the PRGF Letters of Intent between the Fund and Cameroon, Ghana, Pakistan, Tanzania and Zambia:[9]

1. There is literally no mention of MDGs in the Letters of Intent and their corresponding benchmarks. This implies that the MDGs are not integral or important to the PRGF and accordingly to the PRSP implementation achievements in the PRGF. This is despite the fact that all parties involved in the Millennium Declaration, including the IMF, are expected to integrate the MDGs in all development parameters and instruments. In order to attain the MDGs, the International Financial Institutions (IFIs) should begin to integrate the MDG benchmarks into the PRGF and not just repeat the rhetoric that the PRSP is a sure way of attaining MDGs.[10]

2. All countries seem to report their development process on poverty reduction (with reference to the PRSP) in a particularly uniform way:

   - sustained economic growth in Tanzania remains key for better implementation of the Poverty Reduction Strategy (PRS), particularly for ensuring that the benefits from growth are realised for the poor in rural areas where the majority of the population live;[11]

   - actions were taken on Pakistan's macroeconomic, structural, and social policies in support of growth and poverty reduction, as well as associated external financing needs and major sources of financing;[12]

   - and, for Zambia: "Per capita income will increase in 2004, extending to a fifth year the longest period of sustained expansion in more than two decades. The 12 month rate of inflation has been held below 20% despite the sharp rise in fuel prices".[13]

In reality, the issue of poverty raised in the MDG 1 is glossed over under the assumption that the growth measures will address the poverty. Instead, there is a need to articulate, at national level, just how Goal 1 can be met concretely, including timelines for increasing employment (including self-employment) and levels of income over the PRSP period. If MDGs are to be achieved, their achievement cannot be related to the assumed relationship between growth and poverty reduction.

3. While Goal 1 is somewhat assumed in growth rates and macro-economic achievements, the other goals, except for Goal 8, are not mentioned in the PRSPs and related PRGFs. For Goal 8, reference is only to external trade, debt arrears and payment, reserves targets and shortfalls, Paris Club agreements, etc.

On the whole, the focus of the PRSP country review, in reporting to the IMF, relates to growth and inflation objectives; reduction of fiduciary risks (good financial management); monetary policy; external sector issues including exports, imports and foreign direct investments; private sector development with a focus on incentives, labour laws etc).

There is going to have to be a shift towards clear reporting to the IMF on PRSPs, indicating how the specific MDGs are being attained. So far, they are nowhere in the picture.

6.3.2 The impact of PRGF on resource mobilisation for the MDGs

The fact that all nations and institutions, including the IMF and the World Bank, have an unprecedented commitment to implement and realise the MDGs and targets, must continue to be emphasised at all stages. Aside from being affirmed as part of Goal 8 in the MDGs, such understanding has also been reaffirmed in the Monterrey Consensus on enhancing financing for development. Part of the global ability to realise the MDGs is dependent on financing of such development.

Yet, attaining the MDGs in the context of the PRGF requires improved understanding because there has been a lot of criticism of the Bank's and the Fund's approach to development. The realisation of the universally agreed MDGs should not be compromised by a development approach for which there is no universal consensus.[14] The PRSP should be more important than the PRGF. It is for this reason that global civil society has advocated the de-linking of the PRSP from the HIPC and PRGF process.[15] Slippages on budget deficits arising out of government actions to reduce poverty, such as increasing wages of government employees to get them above poverty levels,

8 *Hakro et al. 2005.*
9 *See Letters of Intent for these countries on www.imf.org.*
10 *Apoya et al. 2005.*
11 *IMF 2004.*
12 *IMF 2003.*
13 *See IMF website www.imf.org.*
14 *Anti-globalisation advocacy points to this.*
15 *AFRODAD 2004.*

have been interpreted by the IMF in a very narrow sense of slippage, resulting from fiscal irresponsibility of the government and not as a response to poverty reduction. The withholding of development funds by donors as a result of fiscal slippages is not interpreted as having a negative impact on poverty reduction; it is seen as a necessary conditionality for fiscal discipline.[16] In essence therefore, realisation of the MDGs is currently dependent not on the efforts of the countries themselves, but on whether these countries abide by the dictates of the IMF and the World Bank.

One is bound to conclude that the conditionality problem remains real and could be an obstacle to meeting of the MDGs. Although donors seem to fundamentally believe that the IFI conditionalities are justified as necessary measures to ensure that countries "behave" in an acceptable way, many people see them as imposed, insensitive to the plight of people, ambitious, difficult, frustrating and diminishing the recipient country's ability to fulfil them. It is through the failure to meet conditionalities that countries like Ghana and Zambia failed to reach the HIPC Completion Point quickly enough between 1999 and 2004. Civil society also recognises that in countries where governments are elitist (like Pakistan), or non-transparent and corrupt (as in some African countries), there is little possibility of achieving the MDGs. However, the solution is not to withhold development finance, but to strengthen the forces and institutions of democracy and governance in order to secure sustainable development.[17]

Given the predominance of the IFIs and their very narrow understanding of the need for a more holistic approach to development, civil society has put forward various essential recommendations for MDG attainment; and these include the following:[18]

1. The PRGF and PRSPs should be de-linked, given that the PRGF is a funding mechanism rather than a development strategy (which the PRSP is).

2. The PRSP should be de-linked from the HIPC process and Initiative to make it truly a planning framework, rather than being conditional on the HIPC conditionality and benchmarks.

3. The PRSP should be an integral part of the national planning process, in order for it to be truly owned by the nations. It is not up to the IFIs to approve national planning instruments but to support development efforts, outlined in the plans, with which they agree.

4. "One size fits all" PRGF conditionalities, such as whole sale privatisation, are not suitable for poverty reduction; in fact, they entrench poverty in many cases. This has been well documented and must therefore be respected.

5. Donors should adopt the human development concept which embraces human welfare as central to the development process, and not endorse policies that violate this underlying principle.
6. PRSPs should be funded for their ability to reduce poverty.

7. Developing countries need to explore ways in which to generate internal resources and reduce their dependency on external financing, which should be a supplement. This will go a long way in attaining sustainable development

6.3.3 The World Bank's lending policy[19]

Internal and external criticisms of the World Bank's structural and policy adjustment lending during the 1980s and 1990s moved the World Bank towards "development policy support lending", for developing and implementing policy measures and institutional reforms.[20] The fact that the Bank's lending is for specific programmes and projects makes it much easier to assess their potential impact on the attainment of the MDGs. Some examples of Bank funding in the five countries, during the period since the MDGs were announced, are set out below.[21]

Cameroon

Pro-MDG attainment: Multi-sectoral HIV/AIDS Project, US$50 million; Doula Infrastructure project, US$21.39 million and Community Development Support Programme, US$20 million.

High opportunity cost for MDGs: Cameroon III IDA Reflows 5th Dimension, US$7.8 million; IDA-12 5th Dimension Credit, US$5.1 million; Third Structural Adjustment Credit, US$3.31 million: refinancing of old loans whose opportunity cost for poverty reduction is extremely high. Money could have been spent on direct poverty reduction activities.

Pipeline projects seem to be moving towards meeting MDGs, namely: Forestry and Environment; Education Development Capacity Building; Transparency and Accountability Capacity Building.

16 *Zambia's inability to reach the HIPC Completion Point in 2003 was because of this so called budget slippage: Zambia did not conform to the narrow IMF criteria of what they considered to be a tolerable budget deficit level.*

17 *Commission for Africa Report 2005, Chapter 4: Governance and capacity building. www.direct.gov.uk.*

18 *AFRODAD 2004.*

19 *See World Bank Projects and Operations on www.worldbank.org.*

20 *World Bank 2002.*

21 *Seen in the World Bank Country projects on www.worldbank.org.*

Ghana

Pro-MDG: Community-Based Rural Development, US$60 million; Small Towns Water Supply and Sanitation Project, US$6 million; Urban Water Project, US$103 million; 2nd Urban Environmental Sanitation, Poverty Reduction Support Credit II, US$125 million; Education Sector Project, US$78 million; and others.

Pipeline Projects: Accra Urban Transport Project; Accountability Capacity Building and Decentralisation; Multi-sectoral HIV/AIDS Project; Public Sector Management Reform Project: varying degrees of MDG attainment, but essential.

Pakistan

Pakistan provides an interesting scenario in the high number of Bank-approved projects (including those that are dropped from being financed) for a total of 45 as compared to Zambia's only 20 projects between the time of the Millennium Declaration and May 2005.

Approved projects that have a positive potential for poverty reduction include: First and Second Poverty Alleviation Funds, US$228 million and Polio Eradication, US$20 million.

Projects with potential that were dropped from being financed by the Bank include: Community Based Maternal and Child Health Project, US$125 million; Karachi Water Loss Reduction and System Strengthening, US$75 million; Northern Areas Education Project US$20 million.

Those that do not have potential for MDG attainment include: Public Sector Capacity Building, US$55 million; Sind Farm Management Project, US$61.14 million; Highway Rehabilitation, US$200 million; Banking Sector Technical Assistance, US$26.5 million; Two Structural Adjustment Credits, US$700 million.

Tanzania

A larger percentage of the projects funded by the World Bank in Tanzania can be said to have the potential for contributing to MDG attainment. They include the Social Action Fund, US$150 million; Lake Victoria Environmental Management Project, US$3.5 million; Multi-Sectoral AIDS Project, US$70 million; Education Development Programme, US$150 million; Forests Conservation and Management Project, US$7 million; and Primary Education Development Programme, US$150 million.

Zambia

Projects with good potential have included: Zambia National Response to AIDS, US$42 million; Emergency Drought Recovery Project, US$50 million; Copperbelt Environmental Project, US$40 million.

Projects with doubtful consequences on MDGs: Fiscal Sustainability Credit, US$30.4 million; Regional Trade IDA Fifth Dimension Credit, US$6.7 million; Zambia Railways Restructuring Project, US$27 million; Support to Water Reform, US$35 million.

On the whole, it may be said that the World Bank has the potential to contribute to the meeting of the MDGs. It is really left to the governments and CSOs at the country level to ensure that a correct balance is maintained between resources directed towards MDG attainment and those spent on elite capacity building which does not translate into poverty eradication.

6.3.4 The World Bank's Country Assistance Strategy and the Country Policy and Institutional Assessment

The Country Assistance Strategy (CAS) is an instrument that outlines which Bank-financed activities would be implemented on the ground in cooperation with other creditors and donors. It also stipulates which policy conditions (i.e. "performance triggers") a government is required to implement. These triggers should be derived from the Bank's Country Policy and Institutional Assessment (CPIA) rating. The CPIA rates the policy and institutional performance of each government relative to 20 criteria grouped in four clusters: economic management, structural policies, public sector management and institutions, and an overall governance rating. For 2003 the ratings made for the five countries reviewed in this chapter are given in figure 6.1 below.

Figure 6.1

CPIA ratings 2003 - Cameroon, Ghana, Pakistan, Tanzania and Zambia

Country	Overall rating	Economic management	Structural policies	Policies for social inclusion /equity	Public sector Management and institutions	Governance
Cameroon	3	2	2	4	4	4
Ghana	2	3	2	2	1	1
Pakistan	2	2	1	3	1	3
Tanzania	1	1	2	1	1	1
Zambia	3	4	2	3	2	3

Source: *Derived from Alexander 2004*

These ratings are used for allocating loan and grant resources among borrowers; determining the policy direction of new operations; and establishing debt relief targets. The main policy prescriptions included in the CAS are focused on aspects of the CPIA that are shown to be weak. The triggers can also include policy targets from the PRSP, to the extent that they are expected to be strengthened. Given that the PRSP is the "road map" to MDGs, the attainment of MDGs is highly dependent on the CPIA-derived policy prescriptions which, in general, say little about attainment of MDGs.

The 2002 adoption of the Private Sector Development Strategy as the corporate focus of the World Bank Group, through the International Finance Corporation and the International Development Association (IDA), means that lending is expected to focus on promoting the privatisation agenda in low-income countries, despite the lack of regulatory systems there. Aside from rhetoric, the MDGs are not an integral part of the CPIA performance criteria; a position that would provide an incentive to high MDG attaining countries to secure more resources from the Bank Group. The MDGs therefore lie outside the realm of IFI focus; and the CPIA and CAS are purely instruments through which the IFIs can achieve their intended objectives, which are different from those of the developing countries. MDGs will need to be brought into the assessment criteria if their attainment is to be enhanced.

6.3.5 The HIPC Initiative and the HIPC triggers

The IMF and the World Bank are the main stakeholders in the HIPC debt relief process. For both institutions, participating countries must attain the HIPC triggers (or benchmarks) to reach the HIPC Completion Point, in order to secure debt relief. For all HIPCs, the Bank and the Fund have included triggers on health, education, and environment; not in the same detail as the MDGs, but close enough:

Ghana:

Diligent implementation of the PRSP for at least a year (general)

Increase school children enrolment in schools (Goal 2)

Increase girl child enrolment (Goal 3)

Increase recurrent health sector expenditures in district and lower levels (Goals 4,5,6)

Increase access to safe water (Goal 7)

Similar HIPC triggers, cast in different formats, have been placed on Tanzania, Zambia, Cameroon and other countries that have had to struggle through to the HIPC Completion point.

Zambia:

The case of Zambia is more illustrative.

Zambia's HIPC triggers on poverty reduction: Make progress in education sector and increase budget share from 18.5% to 20.5%; Raise teacher compensation above poverty line in rural areas and Increase student retention in outer provinces.

Zambia's HIPC triggers on progress in combating HIV/AIDS: Create National AIDS Council; implement HIV/AIDS education programme in ministries; make progress in health sector; draw up action plan for malaria prevention; develop transparent mechanism for drug procurement; ensure timely release of complete, detailed health data; and release at least 80% of budget to district Health Management Boards.

6.4 Policy relationship between PRSP and MDGs

Perhaps the most important relationship between the PRSPs and the MDGs lies in the policy content of the PRSPs and therefore the extent to which PRSPs can really contribute to attaining the MDGs. The MDGs offer to the PRSPs a tangible guide - a compass and landmarks along the road towards tangible outcomes, i.e., literal goals. The PRSPs, on the other hand, are expected to provide the framework within which the travellers can map the journey and decide how to get from one point to the next. The PRSPs therefore constitute a process (how to...) as well as articulating policy actions (what to...).

Research carried out by the United Nations Conference on Trade and Development (UNCTAD) and AFRODAD, among others, indicates that although PRSPs put a strong emphasis on poverty reduction, neo-liberal policies are still the core of policy content. These policies focus on trade and market liberalisation, and macro-economic stabilisation and adjustment; and they incorporate an ongoing argument about the need to limit the role of the state in the development process. As UNCTAD notes in a study of African PRSPs, there are only two new elements to the PRSPs driven by the World Bank and the IMF: they pay more attention to public expenditure on education and health; and they introduce safety nets and targeted spending to mitigate the adverse impact of adjustment policies on the poor.[22] The neo-liberal policies themselves have been proved incapable of addressing poverty, not only from the context of the

22 UNCTAD 2002.

assumed trickle-down effect of their policies, but because the policies themselves can induce and deepen poverty as a trade-off to fiscal and financial stabilisation policies. The very lack of critical analysis of the trade-offs between policies of macro-economic stability and their social and economic effects, render the policies unable to tackle poverty on the ground. Here, we allude to issues that have been highlighted for some 20 years. It is the rigidity of the IFIs which continues to impose a development model that is hardly responsive to development needs and, therefore, undermines any potential for attaining the MDGs. The following points are relevant:

1. The predominant IFI neo-liberal development model has found expression in the macro-economic content of the PRSP, and is essentially that of the old structural adjustment school embedded in the PRGF. What is needed for poverty reduction is not a wholesale market and trade liberalisation which marginalises the role of the state in environments where structural rigidities make it difficult for market forces to operate as theoretically expected. Rather it is a clear development policy that is responsive to people's needs while taking into account the short-term and long-term macro-economic imperatives. It would seem reasonable that under a poverty reduction programme, the choice between fiscal discipline and having 9,000 qualified teachers unemployed on the streets would favour employment of the teachers as a step towards meeting the MDGs on poverty reduction and also meeting the education Goal. The policy preference for fiscal discipline and therefore non-employment of teachers for fear of slippage on budget deficit under the PRGF, as was the case in Zambia, misses the point about development especially when its inflationary impact is minimal.[23]

   In nine countries covered by the Structural Adjustment Participatory Review Initiative (SAPRI) it was found that privatisation resulted in increased job losses and job insecurity and did not achieve the anticipated efficiency, while trade liberalisation was accompanied by de-industrialisation and an even greater number of job losses.[24] In both cases poverty was entrenched. Continued emphasis on privatisation and market liberalisation as part of the PRSP structural reforms (under PRGF and CPIA) clearly undermines poverty eradication and the attainment of the MDGs. A policy shift towards wealth creation for poverty reduction seems necessary.

2. The retrenchment that happens as a result of privatisation is characterised by workers made redundant with small retrenchment packages and with no possibilities of being deployed elsewhere. This also applies to civil service reform in the attempt to make the government "lean and efficient" under the PRSP reform processes. Under poverty reduction, the policy of retrenchment needs to be interpreted beyond the liberalised labour market. For, unless the people who are retrenched are provided with new skills and seed capital to start their lives over, they enter into the poverty envelop; a contradiction to achieving the MDGs.

3. It is important to recognise and secure the role of the state: public institutions in social, economic and financial sectors can play an important role in responding the country's development needs. Certainly, state institutions in efficient transport services and a strong financial sector play an important role in providing a framework for increased production and savings, and access to finance for rural investments. Yet, this is against the policy of liberalisation and total privatisation of the financial sector, with the inevitable consequences of withdrawal from rural areas by the private sector given higher profit margin requirements as opposed to zero government subsidies.

4. The Millennium Project has argued for the adoption of more direct policy instruments aimed at poverty reduction. These include public investments for empowering people; processes and mechanisms for increasing food production and distribution; support for urban development through promoting job creation and upgrading slums; improved resource management; and developing and promoting science and technology innovations, including building national capacities in these areas. The Project further argues that this requires a mature political leadership, which is able to set the vision and path for development.[25]

6.5 Requirements for coherence and consistency in PRSPs and MDGs

A close look at most PRSPs - certainly those for Cameroon, Ghana, Pakistan, Tanzania and Zambia - reveals that just two MDGs appear incompatible with the plans: Goal 1 of reducing poverty and hunger, and Goal 8 on development of global partnerships. These two goals have a difficult fit largely because they are about a

23 Kapijimpanga 2005.
24 SAPRIN 2002.
25 Commission for Africa 2005.

development paradigm. Therefore, they are concerned with policy content and directions for poverty reduction, as well as power relations between nations. The goals related to education, health, etc., have been much more easily articulated in the PRSPs.

Thus, the key point about securing coherence and consistency between PRSPs and MDGs is to address the contradictions with respect to policies and policy actions.

Domestication of the MDGs and integrating them into policy instruments including the PRSP, the national plans and budgetary process is going to be an essential part of this process. It is clear, in many countries, that specific MDG indicators require appropriate domestication beyond the global protocols. The fact that MDGs arrived at the national level much later than the PRSPs is evident from their absence in the PRSPs. Most governments did not have the capacity (Zambia), nor the interest (Pakistan), to "ground" them in the national context. They therefore seem "foreign" (Pakistan) and may require more effort to bring them to the communities; as is already happening through the civil society Global Call to Action Against Poverty (GCAP) in all the countries. The underlying notion is that: "the implementation of the PRSP is one of the strategies of achieving MDGs" and the MDG indicators are an integral part of PRSP monitoring.[26] It might be important to note that domestication of the MDGs up to community level can only be true for goals 2 to 7; and that such domestication could put more pressure on governments to secure their attainment at the local level. Goals 1 and 8, however, are remote to communities, and can only be dealt with at the level of engagement in policy debate and policy actions.

6.6 Financing of PRSPs and the MDGs

The issue of finance for development is central to any discussion of the attainment of the MDGs. The recent efforts at donor harmonisation will assist in securing a common approach to overcoming some of the constraints that development aid has had in delivering for sustainable development. Key to this process is the need for co-operating partners to work with national governments on the more strategic role of development finance, and how this could support national efforts to deliver on the MDGs. A specific focus on the attainment of MDGs can be expected to have the impact of redefining development policy and approaches.

The Millennium Project estimates that attaining the MDGs will require a per capita expenditure of US$100, of which local resources will have to contribute 40% and official development assistance will contribute 60%.[27] The reality on the ground is that it is not so much an issue of figures and percentages; it is more the ability to use available financial resources to respond to development needs on the ground. Currently, donors in Zambia are not willing to support the government in paying wages for more teachers and nurses, although this is essential for meeting the MDGs. Equally important is the need for donors to support the dismantling of the domestic debt which is hampering the government from paying out pensions and terminal benefits to retrenched workers, thus perpetuating poverty. Domestic debt is also crowding out capital for new businesses, again hampering growth. The donors in turn claim that Zambia has an absorptive capacity constraint, which is obviously only defined by them and not by Zambian development needs. So, in a way, a more responsive approach to official development assistance is what is needed for attaining the MDGs.

6.7 The Role of CSOs

Civil society organisations have, over the past 20 years, played an important role in shaping current reality, including the process of pushing the development of the MDGs. In terms of policy content, CSOs will continue to resist neo-liberal policies of deregulation, privatisation and import liberalisation, which have been shown to deepen poverty. Instead, they are more likely to support the adoption of recommendations from the Commission for Africa Report, the Millennium Report, progressive Commonwealth communiqués in relation to trade, public services and fiscal policies, etc. In addition, there are three specific areas in which the role of CSOs is clearly established and could be enhanced to secure the attainment of MDGs:

- Policy process and public management: Strengthening local democratic accountability to break the external stranglehold over domestic policies, in order to make national ownership work.

- Accountable governance: Effective involvement in the administration of national budgets - not just expenditure but fair taxation; playing a role in loan oversight; and broadly playing a role in building a more responsible and mature political leadership through challenging of pronouncements and actions that are not conducive to poverty eradication. There remains a need for CSOs to continue drawing attention to national mobilisation and retention of local resources, and therefore, away from external dependence which comes with strings attached.

26 Ibid., p.19.

27 UN Millennium Project 2005.

- In relation to MDG 8: Build coalitions, as international civil society, through the GCAP and other campaigns in order to make the countries of the Organisation for Economic Co-operation and Development (OECD) deliver on Goal 8.

6.8 Conclusion

Recognising that the roots of both the MDGs and PRSPs lie in the failure of the dominant development paradigm and development aid - aid effectiveness and conditionality, the attainment of MDGs is dependent on reconciling the power relations between national ownership and donor control of both the MDGs and the PRSPs. In this regard it is shown that the interlocking processes of control and influence, enshrined in the various donor instruments, not only undermine the national ownership objective but effectively bias the policy content of PRSPs in their favour. Certainly, these instruments are not necessarily in line with national aspirations which are essential for the attainment of MDGs.

The need for a shift towards programmes and policies that have a direct impact on poverty reduction seems to be the most reasonable approach to development. PRSPs and MDGs must, of necessity, be in harmony and not in contradiction.

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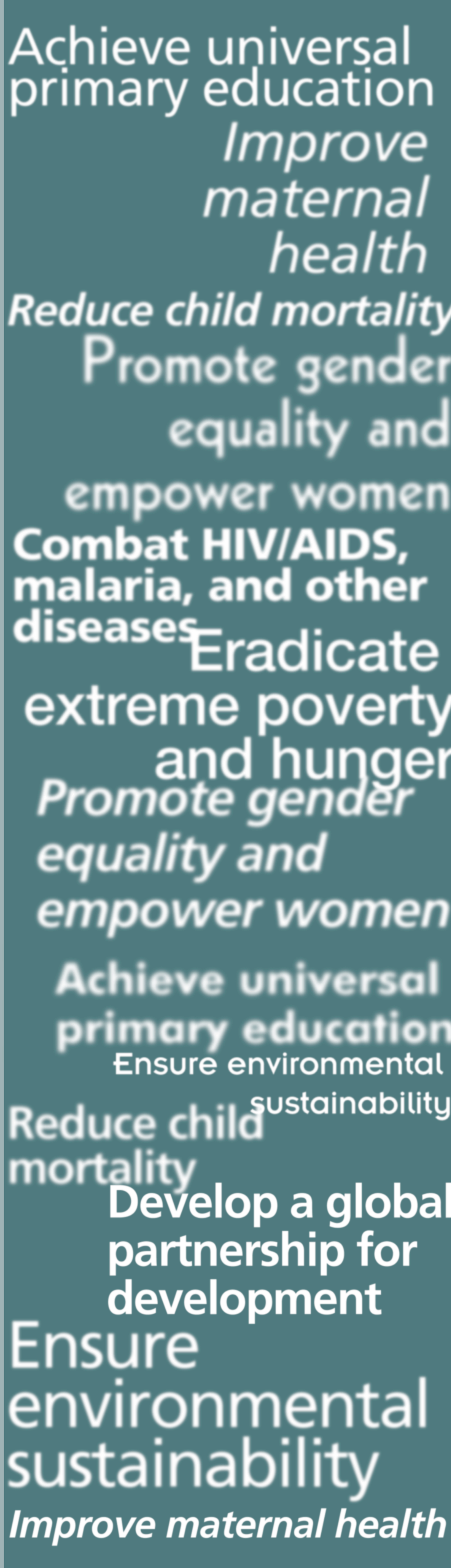
7

Commonwealth donor countries' contribution to the Millennium Development Goals: A comparative assessment

Mejlina Modanu and John W. Foster
North-South Institute

Increased aid, fairer trade and debt cancellation are like the three legs of a stool. A stool cannot stand with only one or two legs.

Council for International Development, New Zealand



Chapter overview

This chapter reviews the contribution of the four Commonwealth donor countries to Millennium Development Goal 8, with a specific focus on official development assistance, trade and debt cancellation. The chapter assesses and compares the official MDG reports and self-evaluations of the four Commonwealth donor countries, as well as any comprehensive responses by civil society organisations (CSOs) to those reports or independent CSO assessments of behaviour. Given the necessity of making the assessment in May 2005, the data, self-assessments and independent assessments remain quite incomplete. Only one official country report (United Kingdom) was available at the time of writing. No comprehensive CSO assessments of any of the four donor governments had yet been published although three are in pre-publication status. Just before publication, however, the results of the Gleneagles Summit of the Group of Eight nations (G8) became available and provided a window on the posture of at least two of the key Commonwealth donor governments. The authors have thus assembled as comprehensive a review as is possible, utilising those sectoral and thematic reports and studies that are currently at hand.

The global “partnership” envisaged under Goal 8 can only work if it remains true to the sense of the word, where donor countries eschew interference in the national systems and development plans of recipient countries, and countries work together in mutual respect and consultation. Aid for development should not only double, but the iniquitous rules of the international trading and financial system need to be amended to give the developing countries a fairer chance to achieve the MDGs. Good governance must not only be applied to the management of donor funding at the local level, but also to the maintenance of the global financial system, giving a greater voice to developing countries. Beyond the scaling up of commitment and effort that Commonwealth donor countries can do in their individual and associational roles towards the realisation of MDGs, there is scope for using the Commonwealth platform in support of Goal 8. The association’s work on policy enhancement can be strengthened through greater interaction and partnership with civil society and the Commonwealth can be used for leadership and to forge partnerships for influencing policy dialogues.

Author Profile: John W. Foster and Mejlina Modanu

John W. Foster, principal researcher - civil society/governance at the North-South Institute and author of several reports on civil society and the MDGs, and **Mejlina Modanu,** research assistant, have been instrumental in the North-South Institute’s survey entitled We the peoples...2005: Special Report: The UN Millennium Declaration and Beyond. The North-South Institute is an international development research institute that works to eradicate global poverty and enhance social justice through research that promotes international co-operation and democratic governance. The Institute has a particular interest in Canada’s relations with developing countries.
Website: http://www.nsi-ins.ca

7.1 Donor countries and the Millennium Development Goals

While many of the targets of the Millennium Development Goals (MDGs) relate to significant efforts that need to be taken by developing countries, the effort will fail if the enabling environment is lacking.[1] For this reason, MDG 8 specifically outlines several targets that developed countries need to meet in order to facilitate the achievement of all the goals by 2015. It focuses in particular on developed countries' sustained contribution of development aid, "manageable" debt, as well as the development of a fair and open trading and financial system that would truly epitomise good North-South relations.

The Goals are not as specific in targets and time-lines regarding donors as they are regarding developing country governments. In this, as in a number of other dimensions, they reproduce unequal power and accountability relationships characteristic of developed-developing country engagement. The Goals do not challenge current neo-liberal policy frameworks as vested in trade policy, debt and aid conditionalities, but attempt, in part, to modify their deleterious effects. Yet, as many civil society organisations have pointed out, unless dramatic action is undertaken to cancel debt and provide sustainable and reliable, ongoing development financing, the binding frame of dependency and the continued export of debt service and other payments will secure developing countries in continuing poverty or further decline.

Four key donor countries - Australia, Canada, New Zealand (NZ) and the United Kingdom (UK) - are members of the Commonwealth. Two of them are members of the G8, which the UK hosted at Gleneagles, Scotland, in July 2005. The UK is a member of the European Union (EU) and currently holds its Presidency. The UK is a permanent, veto-empowered member of the Security Council of the United Nations (UN), giving it particular power in any major reform of the UN. Canada is also a member of *la Francophonie.* Australia and New Zealand, like Canada, belong to relevant regional organisations. Thus, in addition to their individual roles, they each can play a significant leadership role in the greater family of nations.

7.1.1 The reporting process and donor countries

Like their developing country counterparts, donor countries are expected to prepare reports that analyse their contribution to Goal 8 and the MDGs in order to accurately measure progress. Countries have committed to producing at least one MDG progress report by the UN Millennium + 5 Summit (14 to 16 September 2005). In 2004, all the Scandinavian countries submitted a progress report, as have Belgium, Denmark and the Netherlands, while in 2005 Ireland, Luxembourg, the UK and the European Commission, on behalf of the EU, submitted their first reports.

The low number of donor countries submitting a progress report reflects poorly on how seriously they consider their commitment to the MDGs and their responsibility to account for their policies on that level.[2]

Of the currently used MDG indicators, only ten out of 48 directly monitor the contributions of developed countries and seven indicators relate to outcomes that may arise due to developed country policies (such as telephone lines per 1000 people, number of people with access to affordable drugs, etc.).

The trade and aid-related indicators are an integral element of the monitoring process as they represent an effective and quantifiable method of holding donor countries accountable. However, many studies note that the objectives, targets and indicators that form part of the goal have a number of weaknesses.[3] They are not specific, have a narrow focus and lack specific timelines for cutting tariffs for example, making it difficult to properly hold donor countries to account for their policies and the extent to which they contribute to, or hinder, the achievement of the MDGs. While imperfect, they do provide some measure of the economic environment in which developing countries must situate and operate their national development strategy plans *(see Appendix to this chapter).*

7.1.2 Official development assistance

The UN Secretary-General Kofi Annan has called on donor countries to significantly increase aid levels or risk the failure of the MDGs.[4] The 2004 OECD *Annual*

1 *The authors would like to thank the staff of the Commonwealth Foundation and a number of CSO personnel, including colleagues at the North-South Institute, who have contributed advice, reports and data.*

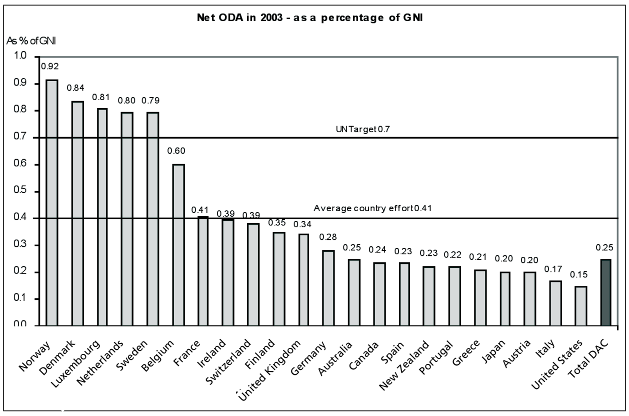
2 *Ibid.*
3 *Weston et al. 2005b.*
4 *UN 2004, p.19.*

Development Co-operation Report also noted that major aid donor countries have a long way to go if they are to reach the levels of aid promised at Monterrey in 2002. The report notes that at current rates, many of the MDGs will not be met, particularly in Sub-Saharan Africa.

The 2001 High Level Panel on Financing for Development estimated that an additional US$50 billion per year in official development assistance (ODA) would be needed to achieve the MDGs.[5] Other studies have cited up to US$75 billion more for each year.[6] Meeting the UN target of allocating 0.7% of gross national income (GNI) to ODA would generate about US$120 billion, more than enough to meet the MDGs. However, current global ODA levels are not anywhere close to the 0.7% target and donor countries are also failing to meet the target of 0.15% - 0.2% of GNI in aid for the least developed countries (LDCs).

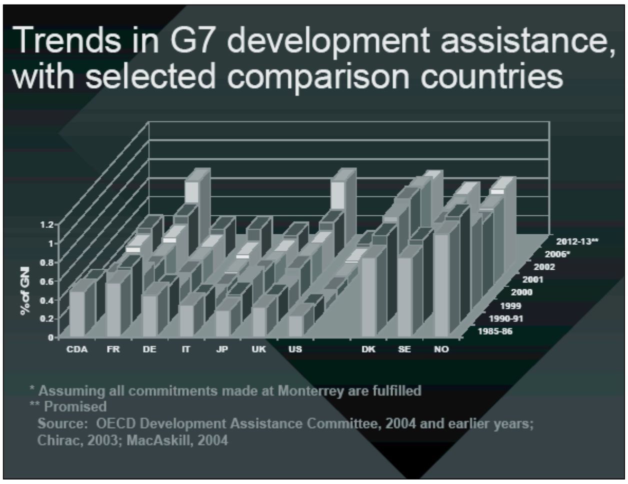
Indeed, only five countries have reached the 0.7% target; four of them members of the EU (see figure 7.1). Overall donor countries' aid contributions have actually decreased since the 1960s. Following even greater aid decreases in the 1990s, donor countries are now slowly increasing their ODA flows although not nearly enough to achieve the MDGs by 2015 at current rates. Moreover, Australia, Canada, New Zealand and Japan have not even set timetables for achieving this target.

Figure 7.1



Source: *OECD 2004b*

Figure 7.2

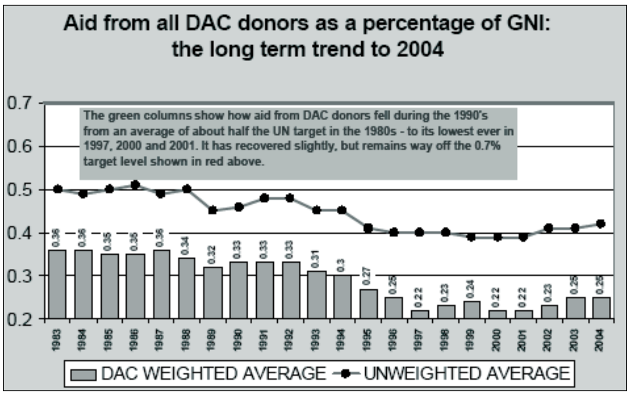


Source: *Labonte, R. and Schrecker, T.,* The G8, Globalization and Health: Beyond the "Washington Consensus" Toward Global Health Equity. *Seminar Presentation at the University of Ottawa, Institute of Population Health, 11 January 2005. Ottawa: The North-South Institute.*

The January 2005 *Millennium Project Report* has assessed the resources needed to achieve the MDGs, highlighting the substantial increase in ODA required if developing countries are to achieve the goals: from 0.25% of donors' GNI in 2003 to 0.44% in 2006, and a minimum of 0.54% in 2015.[7]

However, Development Initiatives has noted that despite an increase of 4.6% in real terms in preliminary ODA figures for 2004, aid from donors remains below the aid levels of the 1980s and 1990 (see figure 7.3).

Figure 7.3



Source: *Development Initiatives 2004, p. 1.*

According to Development Initiatives, among Commonwealth countries, the UK provided around 0.36% of GNI in aid in 2004, while Canada gave 0.26%, Australia 0.25% and New Zealand 0.23% respectively. In terms of aid volume, the UK ranked fourth, while New

5 *See the 2001 Report of the High Level Panel on Financing for Development, available at http://www.un.org/reports/financing/summary.htm.*

6 *Clemens et al. 2004, p. 6.*

7 *UN Millennium Project 2005.*

Zealand provided the least amount of aid, with Canada and Australia placed in the mid-range of all donors on the Development Assistance Committee (DAC) of the OECD.

Figure 7.4

ODA Commitments of Commonwealth donor countries

	Aid as % GNI, 2004	Aid increase/decrease 2003-04, percentage	Amount going to increasing aid with each $100 increase in GDP, in US dollars
UK	0.36	8.8	0.48
Canada	0.26	12.2	0.40
Australia	0.25	2.3	0.22
New Zealand	0.23	8.2	0.24*

Source: *Development Initiatives 2004.*

* The New Zealand Council for International Development (CID) notes that figures for 2004-05 are at present estimated to reach 0.26% of GNI, taking into consideration the tsunami aid package assigned by the government. On the other hand, the 2004 issue of CID's magazine, *Devforum,* confirms the 0.24% figure. *(See Morris 2004, p. 22.)*

While increasing aid flows is crucial for achieving the Goals, the quality and allocation of aid is also important. Donors have often used their aid to further foreign policy interests and, increasingly, their security agenda as well - note sizeable debt forgiveness to Iraq by Canada among others - which may not necessarily address the real priorities of developing countries. Similarly, Brian Tomlinson of the Canadian Council for International Co-operation argues that while ODA is an essential requirement for poverty reduction in developing countries, its impact is often minimised by donor countries' trade and investment policies.[8] The Global Call to Action Against Poverty (GCAAP) and its national constituents, including Make Poverty History, have managed, with media assistance from megastars, to raise the profile of more and better aid in recent months.

7.1.3 Trade

The 2004 OECD Annual Development Co-operation Report urged donor countries to deliver on their promises to create a fair trade environment for the private sector of developing countries and promote pro-poor policies.

The ongoing juggernaut of complex and multi-faceted multilateral, regional and bilateral trade negotiations continues apace, requiring a high proportion of the limited resources of commerce ministries in many developing countries. Expectations remain following the declaration of the 2001 Doha Ministerial meeting of the World Trade Organisation (WTO) as inaugurating a "development round", with echoes in the 2002 Monterrey Consensus. However, the 2003 Cancun Ministerial failed, in large part due to the resistance of southern governments to proposals that did not deal adequately with their concerns over agricultural subsidies and market access. Trade negotiators admit they are two years behind on negotiating the agenda set in Doha. The Gleneagles Summit made further declarations of intent to shape a deal before the Hong Kong WTO Ministerial in December 2005.

An international Trade Justice campaign has been initiated by a wide coalition of northern and southern CSOs, with a week of study and action in April, and further events planned leading up to the WTO Ministerial.

7.1.4 Debt

Target 15 of MDG 8 focuses on the debt sustainability of developing countries, while the set of indicators aims to assess the reduction of debt through the Heavily Indebted Poor Countries (HIPC) Initiative (see Appendix 1). The establishment of the HIPC Initiative in the 1990s remains the most ambitious programme to manage the debt problem. However, according to a March 2005 paper by the coalition of French civil society organisations *"2005 no more excuses!"*, the HIPC objective of sustainable debt has yet to be fulfilled, as many of the most indebted countries still suffer from high levels of debt, making it difficult to use funds for achieving the MDGs.[9] As the paper notes, at the end of the Initiative only about a third of the stock of debt will have been removed, representing less than 5% of the total amount of debt of the developing countries.

Poor countries continue to pay more to their creditors than they spend on providing basic social services; low-income countries (LICs) paid US$39 billion in 2003, while receiving $27 billion in aid.[10]

The insupportable nature of indebtedness needs to be recognised for the middle income countries as well, who are equally strained for resources to achieve the goals. While many donor countries are progressively cancelling the bilateral debt of low-income countries, multilateral debt remains an equally crippling obstacle.

The locus of decision making rests primarily with member governments of the G8 and with their finance ministers.

8 See Tomlinson 2005a.

9 Coalition "2005 no more excuses" 2005, p. 12.

The UK and Canada can and do play important roles. The G8 in July endorsed a long-delayed debt relief package put together by their Finance Ministers in early June. Meanwhile, developing country governments must plan as best they can, in a state of continued dependency in which debt plays a decisive role.

7.2 The Commonwealth donor countries

7.2.1 Australia

The Australian Agency for International Development's (AusAID's)[11] overarching poverty reduction framework was set out in its 1997 statement to the Parliament, entitled *Better Aid for a Better Future,* and restated in 2001 in *Reducing poverty: the central integrating factor of Australia's aid program.*[12] Australia states as its key priorities: the enhancement of trade liberalisation and market access for developing country products, supporting economic governance and law and justice reform through stronger engagement with local partners and the promotion of a policy-coherent agenda internationally which would take account of developing country interests and needs. However, it has still to produce an MDG progress report.

Official development assistance

The 2004 Peer Review of Australia by the DAC noted that Australia was "underperforming on its aid levels". The Review argued that the consistent solid economic performance of Australia in the past decade is not reflected in its ODA/GNI ratio.[13] The ratio has fallen progressively to reach 0.25% in 2003 (from the high point of 0.65% in 1975).[14] Australia has endorsed the 0.7% objective but has yet to publish a timeframe for achieving it and was one of the few countries that did not make a specific commitment to maintain or increase its ODA at the 2002 Monterrey Conference.[15] The Australian Council for International Development (ACFID) estimated that on current trends, Australia will have the third lowest level of ODA in the OECD by 2006.[16] Similarly, data from Development Initiatives on ODA for 2004 notes that Australia is off track to meet the 0.7% target by 2015.[17] Australia would have to double its aid to reach at least 0.5% of GNI along the recommendations of the UN Secretary-General who has called for 0.5% levels by 2009 and 0.7% by 2015.[18] The Peer Review recommended that Australia increase its aid and introduce medium and long-term targets for the 0.7% target, similar to other DAC donors.[19]

The Review also noted that Australian aid is too geographically focused, with a national and security interest clearly tied to development objectives. In addition, its comprehensive approach to governance leads Australia to include, as ODA, elements related to counter terrorism and illegal migration.

Australia's focus within the Pacific is very strongly oriented towards improving governance and peace-building initiatives. The DAC Review recognised Australia's leading role in its neighbourhood and noted that in Papua New Guinea (PNG) and the Solomon Islands, the Australian development agenda coexists with its foreign policy and security agendas. The focus on the Pacific countries - 47% of total bilateral aid for 2003 was given to PNG - ensures that Australia is also addressing target 14 of Goal 8 regarding the special needs of small island developing states.[20]

The Review recommended that the link between poverty reduction, good governance and security be set out more clearly, in light of the government's increasing humanitarian activity which amounted to 11% of gross ODA in 2003. However, the lack of policy-relevant DAC data makes it difficult to monitor donor performance on humanitarian action.

Australia devotes 76% of its aid volume to LDCs and other low income countries (the DAC average is 55%). *Reality of Aid* 2004 notes that Australia gives 41.9% of its bilateral aid to the least developed and low-income countries.

According to Australia's Overseas Aid Programme Budget for 2005-06, Australia will provide AU$2.491 billion as ODA in 2005-6, or 11.7% real increase budget-to-budget. The Aid Budget estimates that the ODA/GNI ratio for 2004-05 and 2005-06 will be 0.27% and 0.28% respectively[21] - both of which numbers fall below the required 0.29% in 2004 that Development Initiatives notes should be the level of Australian ODA if the 2015 target is to be achieved, thus making Australia off track on its aid commitment. Development Initiatives also quotes the April 2005 preliminary data by the DAC which lists 0.25% ODA/GNI for Australia for 2004 (instead of the 0.27% figures given as an estimate in the Aid Budget).[22]

The 0.28% ODA/GNI figure for 2005-06 is an ambitious target and much of the aid is aimed at rebuilding and stabilising countries in the Pacific, primarily Indonesia, PNG and the Solomon Islands. The AU$1 billion over

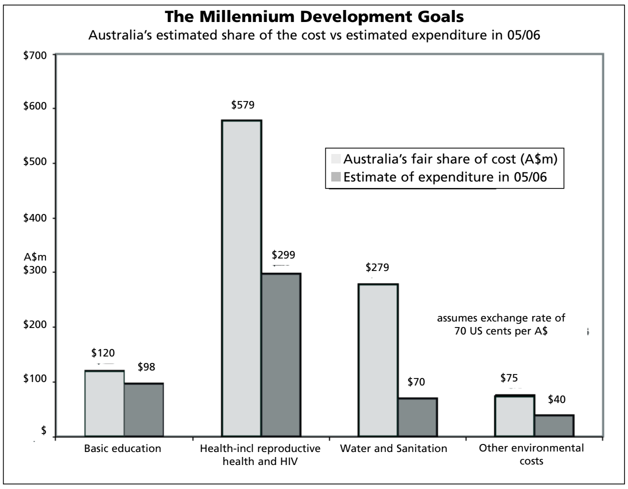
10 Ensor 2004.
11 AusAID is an autonomous agency within the Foreign Affairs and Trade Department.
12 AusAID 2001.
13 OECD 2005a.
14 The Reality of Aid 2004, p. 195.
15 Ensor 2004.
16 Smillie 2004, p.12.
17 Development Initiatives 2004, p. 8.
18 UN 2005, p. 17.
19 OECD 2005a.
20 Ibid.
21 Government of Australia 2005, p. 68. http://www.ausaid.gov.au/budget05/default.cfm.

5 years commitment to the Australia-Indonesia Partnership for Reconstruction and Development, made by Australia in January 2005, represents the single largest aid package in its history and comes in response to the tsunami disaster in 2004.

The Aid Budget reiterates the Australian position that its aid programme advances the national interest of Australia by assisting developing countries in reducing poverty and maintaining stability. It also notes that Australia's aid is focused on providing the right environment for achieving the MDGs. It focuses on the essential building blocks of stability, governance and growth, while also providing direct assistance for water and sanitation, HIV/AIDS, health and education, and the environment.[23] It notes that Australia's first MDG report, due later this year, will seek to outline a partnership approach which focuses on improving economic policy, governance, debt and trade as the best way of achieving progress on the MDGs.[24]

ACFID's submission to the 2005-06 federal budget in February 2005 called on the Government of Australia to make a commitment to raising aid to a minimum 0.5% of GNI by 2008, which would be easily achieved by annual budget increases of 0.08% of GNI.[25] ACFID also notes that the 2005-06 estimated expenditure still does not allocate Australia's fair share of the cost for achieving the MDGs (see figure 7.5).

Figure 7.5



***Source:** Australian Council For International Development 2005.*

The Peer Review noted that Australia has adopted an in-principle policy of untying free standing technical assistance to LDCs in January 2004, although its technical co-operation - accounting for about 46% of total ODA in 2003 - still relies heavily on Australian managing contractors. In addition, *Reality of Aid* 2004 notes that a significant part of Australian ODA is spent by non-aid government agencies, in particular for the funding of Australian immigration policies, such as the detention of asylum seekers.[26]

Trade

AusAID has welcomed the Financing for Development process. It is the Chair of the Cairns Group of Agricultural Trading Nations and it is actively seeking the reduction of trade barriers in this area. Australia has focused its access enhancement activities on assisting small and island developing countries, primarily in the Pacific. In 2003, it opened its markets to tariff and quota-free access for all goods produced in the 49 LDCs and East Timor.[27]

Nevertheless, the Centre for Global Development's 2004 Commitment to Development Index puts Australia 18th out of 21 on its trade openness. The Index apportions points to developed countries on their policies, depending on whether these help or hinder the development of poor countries. Agricultural subsidies, tariffs and quotas hurt developing country exports as well as their markets, and despite Australia's relatively low protectionist levels in 2004, its higher tariffs on developing country exports contributed to its low rank on the trade aspect.[28]

Debt

The DAC review noted that there are few countries that owe bilateral official debt to Australia, with the majority of that being in the form of export credits.[29] The Government of Australia has committed to providing 100% debt relief to countries qualifying under the HIPC Initiative and has committed AU$77 million by 2004 to assist the IMF and the World Bank to provide debt relief through HIPC.

Following the tsunami disaster, Australia, as part of the Paris Club of creditor nations, offered an unconditional freeze on debt repayments to Indonesia - which owes US$1.25 billion to Australia alone - Sri Lanka and the Seychelles to help them recover.[30] Moreover, Australia stated that the debt moratorium, which would cost an estimated AU$20 million of the 2004-05 budget, would not be used as a substitute for additionally needed assistance.[31]

22 Development Initiatives 2004.
23 Government of Australia 2005, p. 7.
24 Ibid.
25 Australian Council for International Development 2005b, p. 7.
26 Spillane 2004.
27 Ibid.
28 See Centre for Global Development 2004. http://www.cgdev.org/rankingtherich/.
29 OECD 2005a.
30 Sydney Morning Herald 2005.
31 The Age 2005.

7.2.2 New Zealand

The 2005 DAC Peer Review for New Zealand commended the 2002 creation of the New Zealand Agency for International Development (NZAID) as a semi-autonomous agency, calling it "a success" and noted its central role in promoting greater harmonisation of donor procedures and aid effectiveness.[32] The Peer Review noted that New Zealand's "whole of government" approach and its overarching objective of poverty eradication are to be commended. Technical and trade assistance remain key elements of NZAID's development programme, with the primary focus on education. The New Zealand Aid Minister, Marian Hobbs, recently stated that NZAID is closely considering the recommendations of the UN's Millennium Project Report which argues that both developed and developing countries need to do more to reduce extreme poverty.[33]

Official development assistance

New Zealand is underperforming on ODA volumes, while its multilateral aid has decreased and its programmes are too widely dispersed. The ODA portion of New Zealand's GNI fell in the early 2000s, decreasing by 0.03 percentage points between 2001 and 2002.[34] The preliminary data on ODA levels for 2004, as noted in a briefing by Development Initiatives on aid, shows that New Zealand is off track in meeting the 0.7% by 2015.[35]

The New Zealand Government could be doing more on aid, trade and debt to help developing countries meet the MDGs. That is the message put forth in the 2004 Devforum magazine issued by CID of New Zealand.[36] CID stated that the Government of New Zealand has so far failed to set a timetable for meeting its obligations to contribute 0.7% of its income to aid.[37] CID handed a petition to the parliament to demand the setting of a timetable and an increase in aid that would allow it to reach 0.7%, while several political party members have also called on the government to honour this commitment.[38]

In February 2005, CID submitted a commentary to the Finance and Expenditure Committee on the New Zealand Government's budget policy statement for 2005, arguing that the government must use the budget to start increasing its ODA to honour its MDG commitments. CID called for an increase of ODA to 0.3% of GNI in the 2005-06 budget, and the setting of a clear timetable for reaching 0.7%.[39] It is noted that following the announcement by the government of an aid package following the tsunami disaster, ODA levels for 2004-05 are likely to reach 0.26%, and suggested that in order for New Zealand to achieve 0.7% by 2015, increases of 0.04% of GNI per year are required, with an interim target of 0.5% of GNI by 2010. Given the solid economic growth of New Zealand, CID believes such a figure is economically feasible and manageable.

In May 2005, New Zealand produced its 2005-06 Overseas Aid Budget, noting a 21% increase in aid. This would lead to an expected ODA expenditure of 0.27% of GNI, with a view to future increases that would ensure ODA/GNI figures of 0.27% in 2006-07 and 0.28% in 2007-08.[40] CID has stated that the new increase falls short of the required levels for reaching the 0.7% target for New Zealand, leaving it once again below the DAC average.[41]

Debt

New Zealand does not hold outstanding bilateral development debt. However, according to Debt Action, the New Zealand Government has given low priority to the debt policy issue and has opposed any extension of the current HIPC Initiative or a reduction in the conditionality of debt relief.[42] Oxfam has called for New Zealand to support the UK's proposal to fund the cancellation of multilateral debt by revaluing the IMF's gold reserves, which would release up to US$32 billion.[43] New Zealand has so far paid NZ$6.4 million into the HIPC Initiative trust fund and Oxfam notes that the bill to match the British commitment would probably come to NZ$15 million.[44]

Trade

New Zealand was one of the first donor countries to provide duty- and quota-free access to LDC imports and continues to support the exemption of LDC products from liberalisation requirements under the WTO. In this respect, its policies are consistent with its commitment to the MDGs. However, it has tended to overlook the need to allow developing countries protectionist measures

32 OECD 2004b.

33 Government of New Zealand 2005a. The minister also announced that New Zealand would provide an additional $1.3 million this year to the Global Fund for AIDS, TB and Malaria and $1.5 million to the joint UNICEF/WHO/Rotary Global Polio Eradication Initiative (see Government of New Zealand 2005b).

34 European Commission 2004, p.6.

35 Development Initiatives 2004.

36 CID is an umbrella organisation representing over 70 development NGOs in New Zealand and spearheading the point seven campaign which calls on the Government of New Zealand to set a timetable for the 0.7% ODA/GNI target.

37 Council for International Development 2005a/b.

38 Both the Green Party and the United Future party are supporting the target or including it in their platforms.

39 Council for International Development 2005c.

40 New Zealand's International Aid and Development Agency 2005.

41 Council for International Development 2005a/b.

42 Jubilee Aoteroa Debt Action Network 2005.

43 Oxfam New Zealand 2004.

44 Ibid.

45.Ewan 2004, p.22

that would support the building up of their local industries before opening up to the global trade market.[45] The government has also showed an eagerness to engage in negotiating future free trade agreements, as the provisions of the Pacific Agreement on Closer Economic Relations look likely to allow.[46]

7.2.3 United Kingdom

The United Kingdom is positioned to play a decisive leadership role in development deliberations in the second half of 2005. The UK holds the Presidency of the EU from 1 July 2005 to 31 December 2005. It hosted the G8 Summit in July, and worked to reinvigorate the climate change policy process and bring together a concerted leap forward for Africa. The Blair and Brown agenda, while successful to some extent, was frustrated by the resistance of three members - including Canada - to taking appropriately ambitious steps and by the fateful intervention of terrorists in London.

The main UK priorities on the way towards 2015 are:

- increased financing for development, through the International Finance Facility (IFF) and/or IMF gold stocks revaluation;
- more effective development assistance, to be sought partly through greater donor practice harmonisation and coherent aid conditions, tied to benchmarks under a local poverty reduction strategy;
- focusing on tackling transnational corruption practices by foreign businesses, and clear methodology and standards for trade, as well as trade reforms that ensure coherence between trade, development and environment policies;
- focusing on Africa;[47] and
- supporting progress on the environment and climate change.[48]

In addition, the government will be seeking agreement with donors on providing extra funds for the MDGs and in particular for the doubling of aid to Africa as recommended by the Commission for Africa report of March 2005.[49] In the same month, the UK set out a policy of conditionality that calls for a new approach between donor countries and recipient countries.[50]

The UK published its first progress report on the MDGs early in 2005, making it the only one of the Commonwealth donors to do so to date. A central theme of this report is the crucial importance and centrality of national development plans and policy strategies. The report consistently reinforces the need for donor countries to place their support behind these plans, as long term development also depends on strengthening governance and improving local capacity and systems. The report notes an increased focus on the enabling environment, in particular the tackling of corruption practices. Specifically, it will seek the implementation of a law that would allow prosecution of UK businesses that bribe foreign public officials as well as work towards the development of international anti-corruption conventions and standards. The UK will also focus on the Extractive Industries Transparency Initiative (EITI), as part of increasing accountability of payments and resources.[51]

Official development assistance

The UK "represents the most radical positive change in several years among OECD member states in overall ODA management and direction",[52] concludes a review of changes in ODA among OECD governments. Poverty eradication has been inserted into legislation, and the UK is one of only two EU member states to report 100% of their bilateral aid as untied.

The UK is one of six EU member states to have published a timetable for reaching the target of 0.7% (2013). In 2003, the UK provided 0.34% of ODA/GNI ratio and preliminary data for 2004 shows this number to have increased to 0.36%. DFID states that the plan is to increase its budget to reach 0.7% of GNI by 2013, possibly 2008-09 if the IFF is successful.[53] Support for the UK IFF proposal is growing, with France, Germany and Italy signing on.[54]

An NGO estimate is that 4.96% of UK aid was spent on basic social services in 2003.[55] DFID has challenged this assertion stating that the real figure is 30% as set out in the UK MDG report. On the other hand, the shadow

46 Ibid.

47 The UK states that it will increase spending in Sub-Saharan Africa from £0.7 billion in 2003-04 to £1.25 billion by 2007-08, meeting the Kananaskis commitment of half of bilateral finance being channelled to this region.

48 The UK will publish a new Sustainable Development Strategy in 2005 that will incorporate international commitments from the World Summit for Social Development 2002. See Department for International Development 2005c, p. 66.

49 Commission for Africa 2005.

50 The policy is based on a shared commitment to poverty reduction and notes that mutually agreed benchmarks for measuring progress on the reduction of poverty are to be closely linked to government accountability. See Department for International Development 2005d.

51 The EITI aims to ensure that revenues from extractive industries contribute towards sustainable development and poverty reduction, and the UK has spearheaded the initiative since 2002. For more information, see http://www.eitransparency.org/.

52 Smillie 2004, p.8.

53 Department for International Development 2005b.

54 The UK also intends to seek from other donors a firm commitment to launch the IFF in 2005.

55 ActionAid et al. 2005.

report by Coopération Internationale pour le Développement et la Solidarité (CIDSE) on EU progress towards Goal 8 notes aid to basic services as share of total bilateral aid to be 12.33% for the UK.[56] Moreover, the CIDSE report also shows that while over US$6 billion are spent on ODA, the UK spends more than five times that amount on military aid, ranking as number one in Europe.[57]

The *Pumping Poverty* report published by Platform Research, Friends of the Earth and Plan B, investigates the role of British development aid in facilitating the development of oil and argues that such aid often serves the wealthiest corporations, aggravating climate change and worsening the condition of the world's poorest people. It concludes that DFID's actions on oil development depart from its stated objective of poverty alleviation and are closely tied to the foreign policy agenda of the UK.[58] The report argues that the UK Government is rejecting the reforms proposed by the World Bank's Extractive Industries Review, while the Department for International Development (DFID) is using development aid to reform the oil taxation of developing countries and their regulation regimes in a manner favourable to British business interests. The World Bank Review noted that "project funding in the extractive industries has not had poverty reduction as its main goal or outcome".[59]

Trade

The UK MDG report notes that the government will be working on the reform of the EU's Sugar Regime, while ensuring that appropriate transitional arrangements for the African, Caribbean and Pacific (ACP) Group of States are put in place.[60] The UK is working with the EU to end export subsidies and ensure that the Economic Partnership Agreements take the needs of developing partners fully into account. The UK is also a strong supporter of reforming the EU Common Agricultural Policy (CAP), aiming to eliminate export subsidies by 2010; or at the very minimum, agree on an elimination schedule; reduce the production-linked domestic support by 10% over the already agreed cuts; and cut - or agree to cut - average EU tariffs on a number of agricultural imports by a minimum of 36% by 2008.[61] Similarly, the UK intends to press for an increase in the value of EU imports from LDCs by roughly 50% of exports in 2002, by 2010.[62] While these initiatives greatly depend on the consensus the UK is able to build within the European Union institutions, they in general represent a refinement of the Goal 8 targets and further strengthen the cross-departmental approach of the government.

However, in a 2004 paper, the Catholic Agency for Overseas Development (CAFOD) argued that the UK Government's strategic focus on Africa and its trade-related measures are, while laudable, seriously undermined by the inequitable trade agreements negotiated between the EU and African countries.[63] The EU is asking African countries to liberalise 90% of their markets, while the highly protectionist CAP remains in place. Recent events in the EU with respect to textile imports from China point to a rising protectionism within the Union.[64]

A Christian Aid report published in May 2005 claims that the unfettered liberalisation of UK trade policies have contributed to spiralling rural debt in India. It suggests that despite the government's rhetoric on the need for developing countries to protect markets, liberalisation principles still underpin development policies.[65]

DFID responded that "without reform, the state governments would have continued to spend hundreds of millions of pounds subsidising loss-making enterprises... money [that] can now be used for more productive expenditure, including in the social sectors, such as health and education".[66] It reiterated that the UK does not support unfettered free trade or forced liberalisation. However, studies of Bank conditionalities underline the extent to which the World Bank, of which the UK is a key member, forcefully encourages liberalisation.[67]

The UK MDG progress report notes the country's central role in the G8 commitment on access to medicines, which will allow countries with little or no pharmaceutical manufacturing capacity to import copies of patented medicines. In addition, the UK government has committed itself to working with the pharmaceutical industries to

56 Co-opération Internationale pour le Développement et la Solidarité 2005a, Annex.
57 Ibid.
58 Platform Research 2005, Executive Summary. Moreover, despite DFID's focus on the Extractive Industries Transparency Initiative, it has opposed the recommendation to protect the rights of indigenous peoples by ensuring their informed and free consent to oil development policies.
59 Ibid.
60 Department for International Development 2005c, p. 63.
61 Morton and Weston 2005b, p. 11.
62 Ibid.
63 Griffith and Stuart 2004.
64 The EU launched an inquiry into the sharp increase of specific textile imports from China, following strong pressure from countries such as France, Italy and Portugal which have argued that the surge threatens the European textile industry and demanded the institution of safeguard measures. These moves have also been couched in terms of equitable access for goods produced by other developing countries. Specifically, the EU Commissioner in charge of trade, Peter Mandelson, said: "the EU has 'a responsibility' to countries such as Morocco, Tunisia and Turkey, which export as much as 95% of their textile production into the EU market, and other non-Mediterranean textile-dependent developing countries like Bangladesh. (See BBC News 2005 and EU Observer 2005.)
65 Christian Aid 2005.
66 Department for International Development 2005a.
67 See Commonwealth Foundation 2004 and supporting studies.

increase the affordability of existing medicines. It has also supported initiatives such as the Global Alliance for Vaccines and Immunisation, using the proposed IFF to frontload such programmes. The UK has made a general commitment to work within the WTO and the EU to amend agreements on intellectual property. However, its position on patent rules, which prevent access to affordable vaccines in developing countries, goes against its commitment to Goal 8, while its MDG progress report is silent on the question of local production of generic drugs.

Debt

The UK is at the forefront of proposals for debt cancellation, supporting the revaluation of IMF gold reserves for funding the cancellation of IMF debt. The government views debt relief as a key element for meeting the MDGs, noting however that this must be linked to pro-poor policies to avoid further indebtedness.

The UK has committed itself to cancelling 100% of the bilateral debt owed to it by the HIPCs as well as by other low-income countries. However, of its US$95 million ilateral pledge to the HIPC Trust Fund in 2002, the UK has only paid around US$29 million.[68]

The UK's new Multilateral Debt Relief Initiative does not involve IMF conditionality and Development Minister, Hilary Benn, has announced that the UK will no longer impose policy conditionality but will set transparently agreed benchmarks based on the country's own poverty reduction plans.

The UK has agreed to cancel its share of the debts owed by developing countries to the multilateral institutions. It has also proposed writing off the debts owed to the World Bank and IMF by countries that have passed Completion Point in the HIPC Initiative.[69] The government noted that it would provide its share of 100% debt relief on International Development Association (IDA) and African Development Fund loans for low income countries which have sound public expenditure management policies. The UK will also persist in calling for a revaluation or off-market sale of further IMF gold to fund multilateral debt relief for low income countries,70 one of DFID's objectives for the 2005 spring meetings of the World Bank and the IMF.[71]

The debt package resolved by the G8 Finance Ministers and their Prime Ministers concludes the current phase of debt considerations on the part of donor governments.

7.2.4 The European Commission

The United Kingdom is also a member of the European Union. The EU is a major intermediary for UK aid (up to a third of the total in recent years). As this complicates an evaluation of the UK's MDG response, a brief review of the relevant EU policies is essential.

The EU relates to several Commonwealth developing countries through its relations with the ACP Group of countries. Development aid is carried out at a number of levels: while the European Commission (EC) provides the overall policy framework, all member states run their own bilateral programmes. The EC also runs development programmes from the EU budget and the EU Development Fund, largely oriented towards the 79 ACP countries, 38 of which are Commonwealth members.

The Commission has recently argued that EU development assistance must form part of a coherent external relations policy.[72] While development policy is a shared competence between the EC and member states, other external policies that could significantly impact the effectiveness of development policies remain under the sole competence of member states. Co-ordination is therefore necessary to ensure policy coherence.

In January 2005, the EU launched a consultation on the review of its 2000 Development Policy Statement. The Statement puts national ownership and partnership between the EU and developing countries at the core of the development programme. However, as Mikaela Gavas of British Overseas NGOs for Development (BOND) argues, there has been a shift in priorities following 9/11.[73] The focus of development policy is increasingly shifting to failed or failing states as potential exporters of security problems. Due to the intense lobbying of civil

68 ActionAid et al. 2005, p. 10.
69 Co-opération Internationale pour le Développement et la Solidarité 2005b, p.11.
70 ActionAid et al. 2005.
71 Department for International Development 2005d.
72 European Commission 2004, p. 12. Under the Italian Presidency of the EU in 2003, a proposal was drafted that would allow development co-operation to be subordinated to the Common Foreign and Security Policy of the EU, which falls under Pillar II of the Maastricht Treaty and is subject to intergovernmental, rather than supranational, decision processes. (See Reisen 2004.)
73 Gavas 2005.

society groups for greater inclusion in the consultation process, the production of a new policy statement has been delayed until later in 2005 to ensure that all actors are adequately consulted.

According to the EC's report on the MDGs, development co-operation is focused primarily on trade and development, support for macroeconomic policies, regional integration, transport and food security among others.[74] Its implementation is steered by the so called 3 Cs: *co-ordination, coherence and complementarity*. The overall focus is on the enabling environment that would allow the MDGs to be reached and, especially with recourse to budgetary support, backing for macroeconomic policies and transport; both vital to effective policy and infrastructure in developing countries. Structural stability and conflict prevention are key objectives as they significantly impact the creation of a peaceful and stable environment in which to pursue specific development policies.

Official development assistance

The so-called "Barcelona commitments" which the EU made in the context of the 2002 Financing for Development (FFD) Conference, comprised commitments for increased ODA volumes, innovative financing, debt relief, untying of aid, trade-related assistance, harmonisation of aid procedure and reform of the international financial system.[75]

Collectively, the EU contributes more than 50% of worldwide ODA. The share of ODA for LDCs and LICs is currently above the DAC average and a large share of the assistance was moved towards budget support and sector support; reflecting the EC's specific focus on the enabling environment. In addition, EU member states have untied their aid to LDCs.

The EU countries had committed themselves to providing 0.39% of GNI as aid by 2006 in order to reach the MDGs. EU member states provided an average of 0.34% of their collective GNI in 2003.[76] The EC in its 2004 communication to the Council and Parliament on the EU and its Monterrey commitments argued that the implementation of the commitment on ODA is well on track.[77] However, most EU donors are failing to meet the UN target on aid to LDCs, the UK included. Moreover, a sizeable proportion of the increase in EU aid is due to debt relief which is not in accordance with the Barcelona commitments.

The EU member states adopted a proposal in May 2005 to set a new interim individual aid target of 0.51% of ODA/GNI ratio by 2010 for the older EU member states, and 0.17% for the new members.[78] This will amount to an increase in ODA of 120 billion per year as of 2010, while setting a fixed date for the achievement of the 0.7% target. The EU Minister for Development Co-operation and Humanitarian Action has called the agreement "a significant step forward made in terms of development since the definition of the Millennium Goals".[79]

Trade

The EU accounts for about 20% of world trade. It is the largest trading partner with 40% of its imports originating in developing countries. The EC white paper on market access for developing countries notes that in 2003, around 80% of developing country exports entered the EU duty-free or at reduced rates.[80] Moreover, the EU is the main importer of agricultural products from developing countries, absorbing more than the US, Canada and Japan together.[81]

Divisions among member states hamper the creation of internal political consensus required for trade policy to be implemented. This is especially acute in the case of agricultural trade reform. The CAP is recognised as being vastly inefficient, generating vast surpluses of goods which are then dumped in developing countries, causing serious damage to local producers. The EU continues to maintain these export and domestic subsidies despite commitments to abolish them. According to the CIDSE shadow report, the EU has increased its spending on subsidies for agriculture by $37 billion since 2000, more than the total spent on aid in 2003.[82] Given that over 96% of the world's farmers live in developing countries, meaningful reform of the CAP and increased access to the EU for goods from developing markets are crucial if poverty is to be alleviated and not perpetuated. While the UK is in favour of reforming agricultural policy, it nevertheless led the opposition in 2003 aimed at preventing proposals that would limit payments to individual farms.[83]

The increasing trend towards negotiating bilateral free

74 European Commission 2005a.
75 European Commission 2005c, p. 3.
76 Ibid., p. 4.
77 European Commission 2004, p. 5.
78 European Commission 2005b.
79 Luxembourg Presidency of the Council of European Union 2005.
80 European Commission 2005d.
81 Ibid., p. 9.
82 Co-opération Internationale pour le Développement et la Solidarité 2005a, p. 8.
83 ActionAid et al. 2005, p.13.

trade areas between developing and developed countries is worrying as the inequalities of power in such negotiations are often even greater than those within the WTO. Regional arrangements can undermine commitments under the WTO and prove more harmful as they set out so-called "WTO plus" conditions; usually more stringent on trade liberalisation or tariff levels.[84] Such is the case with negotiations on the Economic Partnership Agreements (EPA) that the EU is conducting with the ACP countries. Despite the EU rhetoric on the need for protecting developing markets, pressure is put on the ACP countries through these agreements, demanding reciprocation in market liberalisation and a set timetable for trade liberalisation that fails to take into account the impact such moves will have on poor communities. Moreover, Kenyan and international NGOs have warned that the EPAs will mean greater unrestricted access for EU goods and services, undermining the development of East African countries.[85] Similarly, research carried out by the Institute for Development Studies showed that EPAs are likely to harm regional integration between developing countries, without achieving significant liberalisation of trade between the EU and ACP countries.[86]

In addition, despite the *"Everything But Arms"* Initiative, trade barriers still exist in the form of standards requirements and complex rules of origin that stymie trade co-operation within the developing world.[87] The UK MDG report acknowledges the restrictions arising from complex administrative procedures and rules of origin and states that it is working within the EU to simplify these and support developing country products.

Debt

The EC recently stated that the EU is "well on track to deliver on most of the Barcelona commitments" made ahead of the 2002 Monterrey summit.[88] The EU member states have committed themselves to explore innovative sources of financing, including international taxation mechanisms, public/private partnerships and the HIPC Initiative for debt cancellation. While the majority of EU states have committed themselves to cancelling the bilateral debts of the world's poorest countries, delivery on these promises has been slow. Efforts to manage aid and debt are stymied by the lack of progress on trade issues, especially in the area of agricultural trade.

The Commission notes that the EU is well on track in its support for the implementation of the extended HIPC Initiative. However, in the short term, the overall funding of the Initiative is not fully secured as long as non-Paris Club creditors do not deliver their part of debt relief; while the HIPC Initiative will not suffice to ensure sustainable debt levels for poor countries in the long run.[89] In addition, the European Network on Debt and Development (Eurodad) points out that in a survey asking EU member states how far they would support further debt relief measures for HIPCs, only the UK said *"yes"* to additional multilateral and bilateral debt relief without conditions attached.[90] Moreover, a majority of the states said *"no"* to the idea of achieving the minimum target of 0.7% of ODA/GNI if the figures excluded debt relief.[91]

7.2.5 Canada

Canada, as a member of the G8 and close ally of the United States, has access and should have influence beyond its relatively limited population. The current Canadian Prime Minister was instrumental in forming the G20 group of finance ministers from richer and more populous nations. The current Canadian Finance Minister has served as a member of the UK-initiated Africa Commission, sparking expectations that commitments to targets for 0.7% aid levels would emerge. Nevertheless, the government has yet to produce an MDG country progress report and the most recent Federal Budget was silent on 0.7% targets.

In April 2005, the Canadian Government published a comprehensive document: Canada's International Policy Statement.[92] The Statement addresses a number of issues integral to development approaches, including "building a more secure world" - e.g. stabilising failed and failing states; "increasing global prosperity" - e.g. promoting sustainable development; and "taking responsibility" - e.g., respecting human rights, building genuine development. The Development volume recognises a new international consensus expressed in the MDGs and seeks to engage Canada capacities "well beyond the field of aid". It cites, for example, the provision of debt relief, the lowering of tariffs and the legislative initiative to facilitate the export of affordable medicines to combat HIV/AIDS.[93]

Official development assistance

Canada's aid has been "in recovery" recently, struggling

84 Oxfam 2005b, p. 29.

85 Africa, Caribbean, Pacific Civil Society Forum 2004.

86 Institute of Development Studies 2005.

87 Oxfam gives the example of textile products which enjoy duty free access to the EU, but only if the fabric is produced locally, whereby textile producers such as those in Bangladesh and Cambodia are obliged to pay duty as they need to import fabric. See ActionAid et al. 2005, p. 13.

88 European Network on Debt and Development 2005.

89 European Commission 2005c, p. 16.

90 European Network on Debt and Development 2005.

91 Ibid.

92 Government of Canada 2005. Canada's International Policy Statement was issued in five volumes: Overview, Commerce, Defence, Development, and Diplomacy. The statement expressed the Government's intentions but has not, at the time of writing, been subject to parliamentary review or public hearings.

93 Ibid.

back toward levels attained in 1991. The budget was cut by 29% over six years and, as a result its ODA/GNI ratio fell from 0.45% in the 1990s to 0.22% in 2001.[94] At Monterrey, the Canadian government committed itself to double aid by 2010 via an 8% per annum increase in aid levels and this has continued, bringing levels to about 0.3% and rising. Canada has announced a number of measures to support the development of African states. The 2005 Federal Budget accelerates increases for Africa, from less than C$1.1 billion in 2002, growing to almost C$2.8 by 2008. In addition, LDCs are to be given free access to the Canadian market, with the exception of certain areas of agricultural trade.

The Canadian International Development Agency's (CIDA's) *Social Development Priorities: A Framework for Action* strategy set up precise funding levels for the period 1999-2004 in four priority areas: basic health and nutrition, basic education, HIV/AIDS eradication and child protection.[95] The wide dispersion of aid among a number of small programmes is to be significantly reduced by the promised increase in Canadian ODA of 8% annually. The DAC Peer Review noted that only 45% of Canadian bilateral aid could be traced to particular developing country partners and regions, which was the lowest ratio in the DAC.[96]

The *International Policy Statement* commits the government to reduce the number of target countries, focusing mainly on sub-Saharan Africa. The goal is to concentrate at least two-thirds of bilateral aid - 40% of its total international assistance budget - on up to 25 *"development partner"* countries by 2010. CIDA will concentrate on five sectors related to MDG fulfilment: good governance, health (with a focus on HIV/AIDS), basic education, private sector development, and environmental sustainability. CIDA describes its vision for the new millennium as being "focused on reducing poverty".[97]

In terms of actual and likely performance, even Canada's enhanced commitments leave the country performing below its "share" of donor responsibility. The Canadian Council for International Co-operation (CCIC) estimates that even with 8% per year increases, Canada will be about C$5 billion short of its requirements. Projecting current rates of growth, Canada will have reached only 0.37% of GNI by 2015, and would only reach 0.7% in 2027.[98] The Council has called for consistent increases of 15% per annum - almost twice the current rate - to reach 0.7% by 2015. A temporary boost resulted from a deal between the current minority Liberal government and the opposition New Democratic Party, adding C$250 million to the aid budgets for each of 2005 and 2006. This has the salutary effect of increasing likely totals for 2005 to 0.36% - inflated as well by expenditures for debt relief to Iraq and Cameroon, and 0.30% for the following year.[99] In short, the Canadian government, has failed, to date, to make a clear commitment to a target and timetable for reaching 0.7%.

A decline in the concentration of aid on LDCs between 1990 and 2002 meant that their share dipped to 27% of expenditure, a mere half of the UN's target for LDCs. However, a policy shift in 2002 has meant the concentration of increased expenditure on nine low income countries, of which seven were LDCs. Their share of aid rose from 18% to 30% over two years, a salutary change.

A concern that sectors strategic to poverty reduction should receive greater attention has been met with significantly enhanced disbursements for education, health and agriculture. Nevertheless, agriculture and rural development, which are relevant to 75% of the world's poor, are not cited as clear priorities in CIDA's strategy.

Canada has been notorious for tied aid, being placed 17th out of 18 reporting DAC donors. However, the proportion of tied aid is moving in the right direction, from 60% in 1990 to less than 47% more recently. Food aid remains 90% tied and technical assistance is unreported. If it was reported, Canada's proportion of tied aid would probably rise to over 65%.[100]

Canadian spokespeople cite the importance of local "ownership" of aid strategies and programmes. Applying a methodology utilised in the 2002 *Reality of Aid* Report, 60% of Canadian aid in 1990 could be said to be under developing country partner control. By 2002 this had shrunk to 34%, slightly less than Reality of Aid's estimated 37% average for developing countries partners as a whole.[101]

Trade

There is little if any reference to the MDGs as a motivation for changes in Canadian trade policy. However, Canada

94 Organisation for Economic Co-operation and Development 2004.
95 CIDA (undated).
96 Ibid.
97 Government of Canada 2005, p. 31.
98 Tomlinson 2005a.
99 Ibid.
100 Tomlinson 2005a.
101 Tomlinson 2005b. For additional detail on Reality of Aid see www.realityofaid.org.

has undertaken a number of steps to enhance market access which is in line with the objectives of the Goals.

The MDGs are, in themselves, not an adequate menu of the steps necessary to ensure that the global trading system delivers real benefits for developing countries. The Doha Ministerial (November 2001) promised a broader approach, including "balanced rules". Further, in several key areas, such as the removal of barriers to the exports of the LDCs, the MDG targets are not time-bound. In general, countries have left the specifics to the WTO, where developing countries have often been at a disadvantage. Inadequate respect to the need for special and differential treatment continues to characterise relationships long after it has been promised.

In January 2003, Canada removed tariffs and quotas on all imports from 49 LDCs, with the exception of dairy products, poultry and eggs. This had fairly generous rules of origins, and in 2002-03, Canadian imports from all LDCs rose from C$627 million to C$1,078 million, while the average tariff on them fell from 5.36% to 0.86%. Bangladesh, for example, doubled its exports to Canada.[102] On the other hand, New Zealand had, by that point, already granted tariff and quota-free access to all LDC imports.

In 2004, Canada extended the General Preferential Tariff and the Least Developed Countries Initiative to 2014, and on January 1 2005 imports of textiles and clothing from developing countries were freed from quotas, fulfilling Canada's Uruguay Round commitments related to the Multi-fibre Agreement. Canada included non-WTO members.

Canada was the first developed country to amend its drug patent legislation, in May 2004, to encourage non-producing developing country access to cheap pharmaceuticals for treating AIDS and other devastating diseases.

Canada has contributed $280 million to trade-related technical assistance and capacity building since 2001 and is sixth among bilateral donors in this regard. Most of these projects deal with trade policy and regulation.
Canada might do much more in the following areas:

- Extend tariff cuts to include low-income as well as LDC countries.
- Refrain from requests, in services negotiations, which are likely to compromise developing country ability to meet the MDGs.
- Support developing country requests for policy flexibility with respect to non-agricultural market access and agriculture, permitting developing country producers to compete effectively at home.
- Advocate greater policy flexibility, and ensure that WTO-acceding countries are not required to accept WTO-plus conditions, especially in areas like trade-related aspects of intellectual property rights (TRIPS).
- Support the recommendations of the Commission on Intellectual Property Rights, and LDC requests for an extension of the requirement that they enforce TRIPS obligations well beyond the current 2006 deadline.
- Refrain from making WTO-plus demands in its bilateral and regional trade negotiations.

Overall Canada has made some progress toward the trade targets under MDG 8, but there is scope for further change of attitude and new action. The current government's pre-occupation with deep integration with the United States could radically compromise the ability of Canada to exercise policy autonomy with respect to developing countries. As the North-South Institute and other Canadian NGOs have pointed out, Canadian officials need to adopt a more critical approach to trade expansion, one which takes into account its impacts on poverty, health, environment and other dimensions.

Debt

Canada has undertaken debt forgiveness via three mechanisms: the HIPC Initiative, the Paris Club and the Canadian Debt Initiative.

In the case of HIPC, Canada has provided C$312 million to two trust funds, C$247 million to the HIPC Trust Fund, administered by the World Bank - 4.7% of total commitments; and C$65 million to the Poverty Reduction and Growth Facility of the IMF - 3.1% of total commitments. These compare with Canada's overall share of 3.5% of total ODA.
Through the Paris Club Canada has provided relief to countries that owe it official bilateral debt. Canada has provided relief, in some cases several times, to 48 countries, including, for example, Poland for which it has

102 This section draws extensively from Morton and Weston 2005a (Forthcoming).

cancelled C$419 million in interest payments. The Paris Club agreed to forgive 80% of the US$38.9 billion public external debt of Iraq, of which Canada's share is C$570 million over three years.

The Canadian Debt Initiative provides additional bilateral debt relief. It allows a 100% moratorium on debt repayments for HIPCs and full debt cancellation for those completing the HIPC process. Some 13 countries have benefited from the moratorium, including Ghana, Guyana and Tanzania among Commonwealth members which have had debt cancelled, and Zambia which has received partial debt relief.

Multilateral debt remains a more serious concern, as do the limitations of the HIPC Initiative. Canada, in February 2005, put forward a proposal for a 100% cancellation of debt-servicing payments owed to the key multilateral institutions. This would apply to 41 countries in addition to the current 15 eligible HIPC states. Canada's financial obligation, should others agree to the scheme, would amount to C$172 million over five years. Meanwhile Canada has been less enthusiastic about the UK proposal of providing debt relief by selling or revaluing the IMF's gold reserves.[103] In an analysis of Canadian debt pledges related to the 2005 Federal Budget, the CCIC commented that even if donors accepted Canada's debt initiative, countries dealing with deep-rooted poverty would still be carrying 60% to 70% of their debt by 2015, when full servicing would return.[104]

Canadian NGOs organised in the CCIC and in the Halifax Initiative coalitions have urged a more generous initiative on the Finance Minister. In a joint letter on 28 January 2005, these two coalitions and the Africa Canada Forum called on Canada to "champion the unconditional cancellation of 100% of the multilateral debts owed by impoverished countries". They further urged that payments not only be suspended but cancelled, and were critical of proposals like those of the UK Chancellor, which "appear" to offer cancellation but are neither real cancellation nor applicable even to all countries having passed their HIPC decision points.[105]

7.3. Comparisons

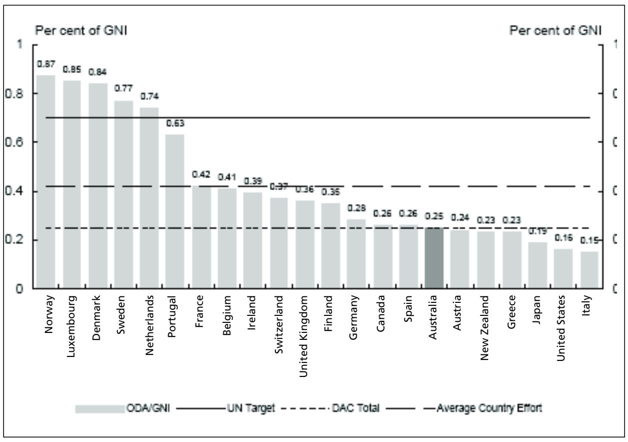
Lack of the official country reports prevent a full comparative review of the four donor countries. However, selected windows are analysed.

7.3.1 Financing

Preliminary figures from the DAC for 2004 show only the UK above 0.30% of GNI, at 0.36% (see figures 7.6 and 7.7). If global leadership is to come from this caucus of donors, it has a long way to go. The figures give some encouragement, showing respective growth rates over 2003 levels at 8.8%, 12.2%, 2.3% and 8.2%. Whether the September 2005 High Level Plenary Meeting of the General Assembly (MDG +5) will occasion further acceleration in upward movement remains to be seen.[106]

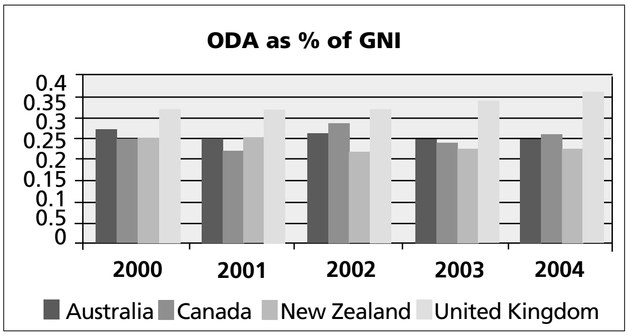
Figure 7.6

DAC member countries' ODA/GNI ratios for 2004



Source: *OECD Development Assistance Committee (DAC) provisional figures for members' 2004 ODA, Appendix, Official Development Assistance, Australian Government Budget 2005-06*

Figure 7.7

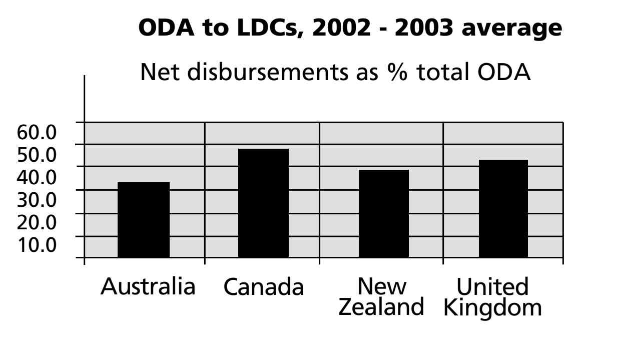


Source: *Statistical Annex, OECD-DAC 2004 Annual Report; preliminary data for 2004 is from Development Initiatives 2004*

103 Morton and Culpeper 2005 (Forthcoming).
104 Tomlinson 2005b.
105 Halifax Initiative 2005a.

106 Organisation for Economic Co-operation and Development 2005b. The largest single ODA contributor is the United States and its contribution only rose to 0.16% of GND in 2004.

Figure 7.8



***Source:** Statistical Annex, OECD-DAC 2004 Annual Report*

The question also arises: when are ODA increases actually increases? Those monitoring changes in ODA levels were warned at the UN's 2005 High-Level Session on Financing for Development that global figures are not always what they seem. For example, the extraordinary response to the Indian Ocean tsunami provided a welcome, but exceptional, bump in both private and public aid in 2005. Similarly, up to US$15 billion of the debt relief granted to Iraq by the 2004 decision of the Paris Club may be reportable as ODA by DAC donor members in 2005.

Further, donors have been diverting aid and attention to security concerns and the war on terrorism. There have been attempts by Canada and some other donors in the DAC to stretch criteria for what may be accounted as aid, particularly resources with military and security purposes within peace operations. Of new resources allocated to aid by Canada in 2001-03, 30% went to Afghanistan and Iran for foreign policy, rather than long-term development rationales. Similarly, there has been an overt shift in Australia's aid, with the inclusion of counter-terrorism initiatives. As Shennia Spillane from ACFID points out, the 2003 statement by Foreign Affairs Minister Downer noted that Australian aid was contributing to its national interest by creating regional stability and security, and poverty reduction; thus effectively placing poverty as secondary in importance to security.[107] Moreover, in May 2004, the Australian Minister for Foreign Affairs approved the *Guidelines to Strengthen Counter-Terrorism Measures in the Australian Aid Program,* outlining strengthened procedures to manage the potential risk that development aid activities might inadvertently support terrorist organisations or activities.[108] These guidelines are also to apply to any accredited NGOs working on development projects.

7.3.2 Policy

The evaluation of donor contributions must encompass more than aid levels. Financing alone includes debt relief and that, in turn, encompasses a number of types of debts and creditors. Policy changes and leadership through bilateral, regional or associational (Commonwealth) or multilateral initiatives can also be significant. The UK and Canada, along with the UN and many civil society organisations have taken the lead in some policy initiatives with potential for taking forward the MDG agenda.

The UK-sponsored Commission for Africa is one example of a donor policy initiative, as was the earlier UK Commission on intellectual property rights and development.[109] The Canadian Prime Minister shared leadership in the UN group on investment in developing countries. The UN Secretary-General's encouragement of the Millennium Project research and report is perhaps the most monumental of these recent enterprises.

7.3.3 Debt relief

The G8 Finance Ministers on 11 June 2005 agreed a debt package proposal which was endorsed by their heads of government on 8 July. "The G8 has agreed a proposal to cancel 100% of outstanding debts of eligible Heavily Indebted Poor Countries to the IMF, IDA and African Development Fund, and to provide additional resources to ensure that the financing capacity of the international financial institutions (IFIs) is not reduced, as set out in the statement of 11 July. We welcome the agreement in principle by the Paris Club aimed at achieving a sustainable exit for Nigeria from its debt problems". [110]

New Zealand Aid Minister, Marian Hobbs, announced in June 2005 that New Zealand would support debt relief initiatives by paying off a share of developing country debt held by the World Bank. New Zealand has agreed to support the G8 package and the estimated cost would be under NZ$1 million, moving to nearly NZ$3 million by 2015. The Australian government has supported the HIPC Initiative and cancelled the bilateral debts of HIPCs that qualified for debt relief. On the other hand, Australia has only contributed 0.4% of the global total for the HIPC Trust Fund.[111]

Development groups are much less enthusiastic than Ministers about the June 11 package. As one analysis puts it: "If one evaluates the G8's offer in qualitative terms, which is taking into account the conditions

107 Spillane 2004, p. 197.
108 AusAID 2004.
109 Commission on Intellectual Property Rights 2002.
110 G8 Gleneagles Summit 2005.
111 UNDP 2004, p. 197.

attached, then it is more likely to prolong poverty for countries seeking to qualify for the program than to end it."[112] Nevertheless, the package is a significant improvement over earlier initiatives by France, Germany and Japan, and the debt-service moratorium proposals initiated by the UK and Canada.

The likely cost to the UK is initially estimated to be US$700-960 million, and that for Canada between C$400 and C$500 million.

The problems include basing eligibility on adherence to Bank and IMF policy conditions for three years. Spending curbs conditioned by the IMF can conflict directly with the need to invest in health and education to meet MDG targets. While covering 18 countries initially, the agreement doesn't include seven low income African countries and eight middle-income African countries not eligible for HIPC. The 18 countries represent 5% of developing countries population, and even if all HIPCs were included, it would affect only 11% of the people in the developing world. Civil society critics state that there are a minimum of 62 countries requiring immediate 100% debt cancellation, if they are expected to meet the MDGs. Gleneagles ended up far distant from the goal.

Improvements are still possible, and could be made by leaders prior to submission of the package to Bank and Fund annual meetings on 25 September 2005, but it is unlikely that they will come close to the target of 100% cancellation.

Further, as Jubilee South stated bluntly: "The G8 statement does not express any measure of acknowledgement of the historical and structural causes of debt and poverty, and their own culpability. Without this recognition, the G8 governments cannot make poverty history".[113]

7.3.4 Innovative financing

Despite enthusiasm for innovative initiatives voiced by the British Development Minister at the June Financing for Development High-Level Session at the UN, not one of the Commonwealth donors has yet joined with Algeria, Chile, France, Germany and Spain in supporting the Action Against Hunger and Poverty initiative of Brazil's Lula government, aimed at innovative forms of financing development. Pilot projects in such areas as air ticket levies and the currency transaction tax are under consideration, and would benefit from the support and engagement of Commonwealth donor governments.

7.3.5 Infectious diseases

The Canadian government's initiative on facilitating the export of generic drugs for HIV/AIDS is an example of sector specific initiatives related to accomplishing the MDGs. Despite its significant limitations, it could be a building block for a more effective "whole of government" or multi-government strategy for ramping up life-saving responses to this human crisis.

The UK government is cognisant of the fact that national patent law in developing countries should take advantage of any flexibilities in the TRIPS agreement to produce affordable versions of new patented drugs. Australia has also supported the declaration on the TRIPS agreement that would allow developing countries to produce generic drugs during emergencies. Australia has made HIV/AIDS a priority in its ODA budget, committing approximately AU$60 million per year. Its level of support for the Global Fund - initially AU$25 million - is a start, but the government is being urged to do much more.[114]

The Gleneagles communiqué includes a significant section on HIV/AIDS, malaria and tuberculosis, but while the general intentions are positive, the specifics and resource commitments are inadequate.

7.3.6 Civil society

Political leaders, from the UN Secretary-General on, cite the integral importance of partnership with CSOs in defining and delivering development. The tremendous role played by civil society at ground level, as well as by donor-country non-governmental agencies, in responding to the tsunami disaster dramatised the fact that the MDGs cannot be accomplished without both. Recent campaigning on behalf of the MDGs and the GCAAP have focused media and public attention on development issues.

However, official development agencies are sometimes ambiguous or even negative about their relationship with and support of non-governmental development agencies. According to CCIC, CIDA's support for NGOs declined by 6% between 1999 and 2002, despite overall growth in CIDA. This affected participation in bilateral programmes and, more recently, the branch responsible for partnership relations with NGOs was "flatlined" budgetarily. The relevant Minister has announced a fresh initiative to review partnership arrangements and their priority.

112 Halifax Initiative 2005b.

113 Jubilee South 2005.

114 ACFID notes regarding Australian policy that "the next battle ground for AIDS will be the Asia-Pacific, unless drastic steps are taken ... to its credit, Australia has made HIV/AIDS a priority in the aid program... ACFID believes that doing our fair share should include a significantly shortfall in funding to finance its needs - including assisting the WHO reach its target of three million people receiving anti-retroviral treatment for HIV/AIDS by the end of 2005." See Australian Council for International Development 2005b.

The approach of the UK appears to contrast with that of Canada. Since 1996 DFID has enlarged support for UK civil society organisations by 32% to £223 million for 2003-04, and is committed to increase its central funding to UK aid agencies by almost 28% in 2005-06. This approach appears similar in spirit to that taken by other European governments, including Finland, the Netherlands, Norway and Sweden.

In the case of Australia, ACFID pointed out that there was a decline in the proportion of Australian aid allocated for projects through NGOs in the 2003-04 aid budget.[115] However, the 2005-06 budget has seen an increase of AU$1.4 million for 48 accredited NGOs under the core funding programme, the AusAID-NGO Co-operation Agreement; amounting to an increase of 3%.116 ACFID also points out that the funding allocation for NGOs has slightly increased in other areas, such as country and regional programmes, and calls for the building of greater NGO in-country relationships, pointing out the churches' partnership in PNG as a possible model.[117]

New Zealand too maintains a strong relationship with NGOs. Its Voluntary Agencies Support Scheme is the main scheme through which New Zealand NGOs can access funds from NZAID for projects in developing countries. The recently published Overseas Aid Budget for 2005-06 notes an increase in the support for development programmes carried out by New Zealand NGOs that would amount to NZ$5.7 million over the next three years.[118]

7.4 Further areas of concern

Policy areas which can have significant impact on development prospects, but which are not included in emphases on aid, debt and trade need also to be included in evaluating performance. The engagement of governments with Kyoto commitments - reluctant and long-delayed in the case of Canada, for example - and generous commitment to developing post-Kyoto targets and commitments, will have long-lasting effects on everyone's prospects.

Some salient areas of concern include the following:

- Assumptions regarding such issues as inequality and even the nature or style of growth are unlikely to change unless the governance of bodies which articulate them, particularly the IFIs, are reformed to make them more representative of poorer countries, and that means changing not only voice, but votes and quotas. Demands for reform were met at the Monterrey FFD Conference with promises which may have raised expectations, but which have not been implemented with changes in voting power and quotas. Commonwealth donor countries could play a role in advancing reform, a role which is overdue.
- Commonwealth donor countries taking part in negotiations related to the Doha round and the General Agreement on Trade in Services GATS) negotiations need to review the coherence of their trade, investment and regulation positions with their human rights commitments. For example, each government has the duty to exercise regulatory responsibility to, as the High Commissioner for Human Rights states: "guarantee the availability, accessibility and adaptability of essential services including their supply, especially to the poor, vulnerable and marginalised."[119] The effect of the GATS, and of pressure to expand its purview, is to reduce the state's ability to regulate in the public interest; to erode universally accessible public services, publicly delivered; and to do so in an irreversible fashion. Commonwealth donor countries should abstain from such policy pressure. Further, a mechanism for monitoring and evaluating the effect of WTO agreements and their administration on development objectives, parallel to that for the IFIs, should be developed under Commonwealth initiative and with civil society participation.

7.5 Moving Forward

The global "partnership" envisaged under Goal 8 can only work if it remains true to the sense of the word, where donor countries eschew interference in the national systems and development plans of recipient countries; and countries work together in mutual respect and consultation. Aid for development should not only double, but the iniquitous rules of the international trading and financial system need to be amended to give the developing countries a fairer chance to achieve the MDGs. Good governance must not only be applied to the management of donor funding at the local level, but also to the maintenance of the global financial system, giving a greater voice to developing countries.

The Paris Declaration on Aid Effectiveness was agreed

115 Spillane 2004, p. 198.
116 Australian Council for International Development 2005a.
117 Ibid.
118 New Zealand's International Aid and Development Agency 2005.
119 UN 2002.

by developed and developing countries as well as multilateral banks at the High Level Forum held in March 2005. It made a number of commitments on improving aid quality by making it more streamlined to better meet the needs of developing countries; commitments to be monitored by a set of twelve indicators. The Gleneagles Africa agreement, affecting two of the four Commonwealth donors, reiterate these commitments but also include a perhaps even more relevant comment which requires further elaboration as well as implementation: "It is up to developing countries themselves and their governments to take the lead on development. They need to decide, plan and sequence their economic policies to fit with their own development strategies, for which they should be accountable to all their people."[120] It is clear that this commitment, which implies support for greater "policy space" for developing country governments and their peoples, may run into blocks from multilateral or bilateral aid, debt or trade policy conditionalities. A conscious effort on the part of Commonwealth donors is required to make these words effective.

7.5.1 Commonwealth potential

Beyond the scaling up of commitment and effort that Commonwealth donor countries can do in their individual and associational roles towards the realisation of MDGs, there is scope for using the Commonwealth platform in support of Goal 8. The association's work on policy enhancement can be strengthened through greater interaction and partnership with civil society and the Commonwealth can be used for leadership and to forge partnerships for influencing policy dialogues.

Partnership with civil society

In taking on the Monterrey agenda of Financing for Development, the Commonwealth Secretariat developed a plan of action (2002-05), much of which was a potential basis for further action on the MDGs.[121]

The plan proposed national level facilitation of multi-stakeholder dialogue. The civil society initiatives of the Commonwealth Foundation vis-à-vis the Finance Ministers have resulted in detailed policy submissions and garnered the support of expert advisors.[122] Are there any indications of a fresh dedication of serious dialogue in this key year of focus on development?

The Commonwealth has initiated a process of evaluating and monitoring the performance of IFIs in their country assistance in Commonwealth countries. This is a particularly fertile ground for collaboration with civil society, many of whose organisations are monitoring PRSPs and MDG implementation and implications, at various levels and in considerable detail. Has the potential for practical collaboration been adequately explored? Assistance in trade negotiation capacity was included in the plan and is currently being implemented through the "Hubs and Spokes" project. Too often, trade capacity building is limited to instructing developing country representatives on how to play the developed country-defined game, in ways that meet developed country interests. It is important for the Commonwealth initiative to enable developing countries to negotiate in their own interest. In recent years civil society capacity in trade, investment and intellectual property areas has developed considerably. Has the opportunity for civil society-resourced, trade capacity building been adequately examined or supported?

Leadership

The Commonwealth Plan of Action on the Monterrey Consensus places emphasis on the "process of defining effective and sustainable national development and poverty reduction strategies".[123] The "space" for development of truly national strategies remains constricted by World Bank, IMF and WTO conditionalities and policy supervision. *If* Commonwealth governments were united in the commitment to space for national strategies, they could be a powerful force in prying away the strictures of these conditionalities.

As the Commonwealth donor countries approach the key decision points in 2005 - e.g. the UN General Assembly and the WTO meeting, among others - one element of their relative affluence is perhaps more important than the others, and this is their political capital. Whether through the G8, regional bodies like the EU, Asia-Pacific Economic Co-operation (APEC) and the North American Free Trade Agreement, or through the UN, the World Bank, the IMF and the WTO, they have significant voice and considerable influence. They really have little excuse to repeat the mantra of "lack of political will". They represent a considerable store of political will and clout, if used judiciously and with commitment. Commonwealth Finance Ministers have a history of regular meetings and linkages and on occasion have been a catalyst for new global initiatives. The Commonwealth Heads of Government meet later in 2005 when the "sums" on the accomplishments of 2005 will be calculated. Will a new "ramped up" commitment be noted, or will it be a ritual of business as usual? There is still time to make a difference.

120 G8 Gleneagles Summit 2005, Africa paragraph 31.
121 Commonwealth Secretariat 2002.
122 See, for example, Commonwealth Foundation 2004 and others at www.commonwealthfoundation.com.
123 Commonwealth Secretariat 2002.

APPENDIX

MDG 8 targets and indicators on ODA, debt and trade

Targets	Indicators*
Target 12: Develop further an open, rule-based, predictable, non-discriminatory trading system	Official Development Assistance indicators: **Indicator 33:** Net ODA, total and to LDCs, as percentage of OECD/DAC donors' gross national income **Indicator 34:** 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) **Indicator 35:** Proportion of bilateral ODA of OECD/DAC donors that is untied
Target 13: Address the special needs of LDCs. Includes: tariff and quota free access for LDC exports	**Indicator 38:** Proportion of developed country imports (by value and excluding arms) admitted free of duties and quotas from developing countries and LDCs **Indicator 39:** Average tariffs on agricultural products and textiles and clothing from developing countries **Indicator 40:** Agricultural support estimates for OECD countries as a percentage of their GDP **Indicator 41:** Proportion of ODA provided to help build trade capacity
Target 14: Address the special needs of land-locked countries and small island developing states through the Programme of Action for the Sustainable Development of Small Island Developing States and 22nd General Assembly provisions	**Indicator 36:** ODA received in landlocked countries as proportion of their GNIs **Indicator 37:** ODA received in small island developing states as proportion of their GNIs
Target 15: Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term	**Indicator 42:** Total number of countries that have reached their HIPC decision points and number that have reached their HIPC completion points (cumulative) **Indicator 43:** Debt relief committed under HIPC initiative, US$ **Indicator 44:** Debt service as a percentage of exports of goods and services

**NB the numbering and the description of the indicators has changed over time. These are taken from UN 2004 and are not exhaustive.*

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screen resolution 600 x 800
8Mb RAM (16Mb Recommended)
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Connection to the Internet *(optional)*

Breaking with Business as Usual: Perspectives from Civil Society in the Commonwealth on the Millennium Development Goals provides a snapshot as at 2005 of some of the issues and concerns shared by civil society organisations across the Commonwealth about current trends in progress towards the Millennium Development Goals.

The report analyses progress towards the Goals in the Commonwealth, drawing on reports by governments and civil society organisations. The role of civil society is particularly considered, given the sector's traditional involvement in social development and the broader current concern to promote partnerships for development at the national and international levels.

The report also considers variables that present challenges to meeting the Millennium Development Goals including conflict, unexpected natural disasters and the flow of qualified professionals from the developing world towards the brighter lights of industrialised countries. *Breaking with Business as Usual* also looks at the policy environment, both domestic and international, as well as the resources available for meeting the Goals - including, crucially, the level of commitment shown by Commonwealth donor countries towards creating the necessary global environment in the areas of aid, trade and debt cancellation.

B*reaking with Business as Usual* aims to inform policy making and programme implementation in support of the Millennium Development Goals with analysis and perspectives from civil society. Each of its chapters therefore draws on specially commissioned papers prepared by civil society researchers and activists from a representative sample of Commonwealth countries. The 14 reports from Cameroon, Ghana, Grenada, Jamaica, Malawi, New Zealand, Pakistan, Samoa, Sierra Leone, Sri Lanka, Tanzania, Trinidad and Tobago, Uganda, and Zambia are available on a companion CD Rom.

Commonwealth
Foundation

The Commonwealth Foundation
Marlborough House
Pall Mall
London SW1Y 5HY
United Kingdom

Tel: +44 (0) 20 7930 3783
Fax: +44 (0) 20 7839 8157
Email: geninfo@commonwealth.int
www.commonwealthfoundation.com

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