The Millennium Development Goals Report 2015

UNITED NATIONS

This report is based on a master set of data that has been compiled by the Inter-Agency and Expert Group on MDG Indicators led by the Department of Economic and Social Affairs of the United Nations Secretariat, in response to the wishes of the General Assembly for periodic assessment of progress towards the MDGs. The Group comprises representatives of the international organizations whose activities include the preparation of one or more of the series of statistical indicators that were identified as appropriate for monitoring progress towards the MDGs, as reflected in the list below. A number of national statisticians and outside expert advisers also contributed.

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The Millennium Development Goals Report
2015

UNITED NATIONS
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2015
TIME FOR
GLOBAL ACTION
FOR PEOPLE AND PLANET

Foreword

The global mobilization behind the Millennium Development Goals has produced the most successful anti-poverty movement in history. The landmark commitment entered into by world leaders in the year 2000—to "spare no effort to free our fellow men, women and children from the abject and dehumanizing conditions of extreme poverty"—was translated into an inspiring framework of eight goals and, then, into wide-ranging practical steps that have enabled people across the world to improve their lives and their future prospects. The MDGs helped to lift more than one billion people out of extreme poverty, to make inroads against hunger, to enable more girls to attend school than ever before and to protect our planet. They generated new and innovative partnerships, galvanized public opinion and showed the immense value of setting ambitious goals. By putting people and their immediate needs at the forefront, the MDGs reshaped decision-making in developed and developing countries alike.

Yet for all the remarkable gains, I am keenly aware that inequalities persist and that progress has been uneven. The world's poor remain overwhelmingly concentrated in some parts of the world. In 2011, nearly 60 per cent of the world's one billion extremely poor people lived in just five countries. Too many women continue to die during pregnancy or from childbirth-related complications. Progress tends to bypass women and those who are lowest on the economic ladder or are disadvantaged because of their age, disability or ethnicity. Disparities between rural and urban areas remain pronounced.

Experiences and evidence from the efforts to achieve the MDGs demonstrate that we know what to do. But further progress will require an unswerving political will, and collective, long-term effort. We need to tackle root causes and do more to integrate the economic, social and environmental dimensions of sustainable development. The emerging post-2015 development agenda, including the set of Sustainable Development Goals, strives to reflect these lessons, build on our successes and put all countries, together, firmly on track towards a more prosperous, sustainable and equitable world.

Reflecting on the MDGs and looking ahead to the next fifteen years, there is no question that we can deliver on our shared responsibility to put an end to poverty, leave no one behind and create a world of dignity for all.

Ban Ki-moon
Secretary-General, United Nations

Overview

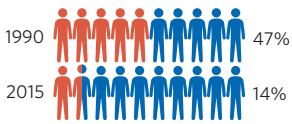
At the beginning of the new millennium, world leaders gathered at the United Nations to shape a broad vision to fight poverty in its many dimensions. That vision, which was translated into eight Millennium Development Goals (MDGs), has remained the overarching development framework for the world for the past 15 years.

As we reach the end of the MDG period, the world community has reason to celebrate. Thanks to concerted global, regional, national and local efforts, the MDGs have saved the lives of millions and improved conditions for many more. The data and analysis presented in this report prove that, with targeted interventions, sound strategies, adequate resources and political will, even the poorest countries can make dramatic and unprecedented progress. The report also acknowledges uneven achievements and shortfalls in many areas. The work is not complete, and it must continue in the new development era.

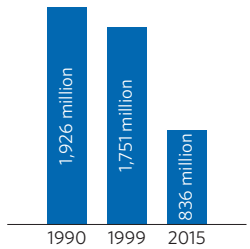
Unprecedented efforts have resulted in profound achievements

GOAL 1: ERADICATE EXTREME POVERTY AND HUNGER

Extreme poverty rate in developing countries



Global number of extreme poor

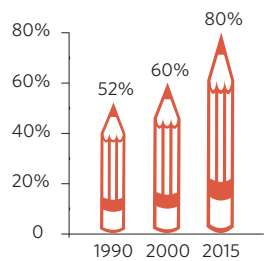


- Extreme poverty has declined significantly over the last two decades. In 1990, nearly half of the population in the developing world lived on less than $1.25 a day; that proportion dropped to 14 per cent in 2015.
- Globally, the number of people living in extreme poverty has declined by more than half, falling from 1.9 billion in 1990 to 836 million in 2015. Most progress has occurred since 2000.
- The number of people in the working middle class—living on more than $4 a day—has almost tripled between 1991 and 2015. This group now makes up half the workforce in the developing regions, up from just 18 per cent in 1991.
- The proportion of undernourished people in the developing regions has fallen by almost half since 1990, from 23.3 per cent in 1990–1992 to 12.9 per cent in 2014–2016.

GOAL 2: ACHIEVE UNIVERSAL PRIMARY EDUCATION

Global out-of-school children of primary school age

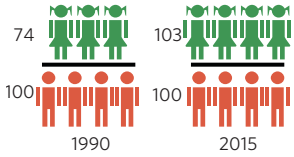
Primary school net enrolment rate in sub-Saharan Africa



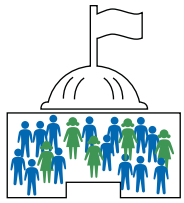
- The primary school net enrolment rate in the developing regions has reached 91 per cent in 2015, up from 83 per cent in 2000.
- The number of out-of-school children of primary school age worldwide has fallen by almost half, to an estimated 57 million in 2015, down from 100 million in 2000.
- Sub-Saharan Africa has had the best record of improvement in primary education of any region since the MDGs were established. The region achieved a 20 percentage point increase in the net enrolment rate from 2000 to 2015, compared to a gain of 8 percentage points between 1990 and 2000.
- The literacy rate among youth aged 15 to 24 has increased globally from 83 per cent to 91 per cent between 1990 and 2015. The gap between women and men has narrowed.

GOAL 3: PROMOTE GENDER EQUALITY AND EMPOWER WOMEN

Primary school enrolment ratio in Southern Asia



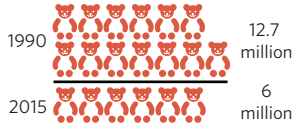
90% of countries have more women in parliament since 1995



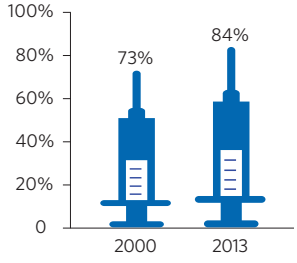
- Many more girls are now in school compared to 15 years ago. The developing regions as a whole have achieved the target to eliminate gender disparity in primary, secondary and tertiary education.
- In Southern Asia, only 74 girls were enrolled in primary school for every 100 boys in 1990. Today, 103 girls are enrolled for every 100 boys.
- Women now make up 41 per cent of paid workers outside the agricultural sector, an increase from 35 per cent in 1990.
- Between 1991 and 2015, the proportion of women in vulnerable employment as a share of total female employment has declined 13 percentage points. In contrast, vulnerable employment among men fell by 9 percentage points.
- Women have gained ground in parliamentary representation in nearly 90 per cent of the 174 countries with data over the past 20 years. The average proportion of women in parliament has nearly doubled during the same period. Yet still only one in five members are women.

GOAL 4: REDUCE CHILD MORTALITY

Global number of deaths of children under five



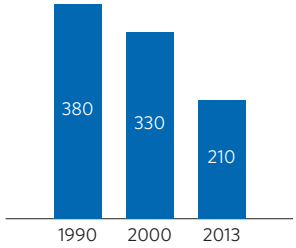
Global measles vaccine coverage



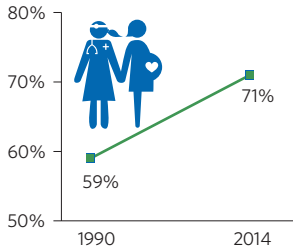
- The global under-five mortality rate has declined by more than half, dropping from 90 to 43 deaths per 1,000 live births between 1990 and 2015.
- Despite population growth in the developing regions, the number of deaths of children under five has declined from 12.7 million in 1990 to almost 6 million in 2015 globally.
- Since the early 1990s, the rate of reduction of under-five mortality has more than tripled globally.
- In sub-Saharan Africa, the annual rate of reduction of under-five mortality was over five times faster during 2005–2013 than it was during 1990–1995.
- Measles vaccination helped prevent nearly 15.6 million deaths between 2000 and 2013. The number of globally reported measles cases declined by 67 per cent for the same period.
- About 84 per cent of children worldwide received at least one dose of measles-containing vaccine in 2013, up from 73 per cent in 2000.

GOAL 5: IMPROVE MATERNAL HEALTH

Global maternal mortality ratio (deaths per 100,000 live births)



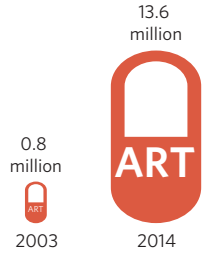
Global births attended by skilled health personnel



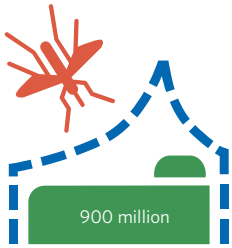
- Since 1990, the maternal mortality ratio has declined by 45 per cent worldwide, and most of the reduction has occurred since 2000.
- In Southern Asia, the maternal mortality ratio declined by 64 per cent between 1990 and 2013, and in sub-Saharan Africa it fell by 49 per cent.
- More than 71 per cent of births were assisted by skilled health personnel globally in 2014, an increase from 59 per cent in 1990.
- In Northern Africa, the proportion of pregnant women who received four or more antenatal visits increased from 50 per cent to 89 percent between 1990 and 2014.
- Contraceptive prevalence among women aged 15 to 49, married or in a union, increased from 55 per cent in 1990 worldwide to 64 per cent in 2015.

GOAL 6: COMBAT HIV/AIDS, MALARIA AND OTHER DISEASES

Global antiretroviral therapy treatment



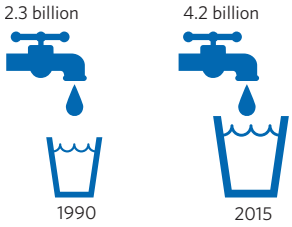
Number of insecticide-treated mosquito nets delivered in sub-Saharan Africa, 2004–2014



- New HIV infections fell by approximately 40 per cent between 2000 and 2013, from an estimated 3.5 million cases to 2.1 million.
- By June 2014, 13.6 million people living with HIV were receiving antiretroviral therapy (ART) globally, an immense increase from just 800,000 in 2003. ART averted 7.6 million deaths from AIDS between 1995 and 2013.
- Over 6.2 million malaria deaths have been averted between 2000 and 2015, primarily of children under five years of age in sub-Saharan Africa. The global malaria incidence rate has fallen by an estimated 37 per cent and the mortality rate by 58 per cent.
- More than 900 million insecticide-treated mosquito nets were delivered to malaria-endemic countries in sub-Saharan Africa between 2004 and 2014.
- Between 2000 and 2013, tuberculosis prevention, diagnosis and treatment interventions saved an estimated 37 million lives. The tuberculosis mortality rate fell by 45 per cent and the prevalence rate by 41 per cent between 1990 and 2013.

GOAL 7: ENSURE ENVIRONMENTAL SUSTAINABILITY

1.9 billion people have gained access to piped drinking water since 1990

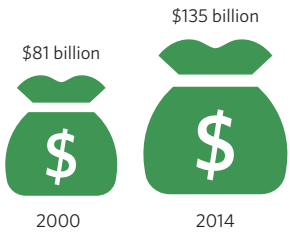


98% of ozone-depleting substances eliminated since 1990

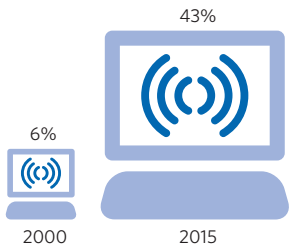
- Ozone-depleting substances have been virtually eliminated since 1990, and the ozone layer is expected to recover by the middle of this century.
- Terrestrial and marine protected areas in many regions have increased substantially since 1990. In Latin America and the Caribbean, coverage of terrestrial protected areas rose from 8.8 per cent to 23.4 per cent between 1990 and 2014.
- In 2015, 91 per cent of the global population is using an improved drinking water source, compared to 76 per cent in 1990.
- Of the 2.6 billion people who have gained access to improved drinking water since 1990, 1.9 billion gained access to piped drinking water on premises. Over half of the global population (58 per cent) now enjoys this higher level of service.
- Globally, 147 countries have met the drinking water target, 95 countries have met the sanitation target and 77 countries have met both.
- Worldwide, 2.1 billion people have gained access to improved sanitation. The proportion of people practicing open defecation has fallen almost by half since 1990.
- The proportion of urban population living in slums in the developing regions fell from approximately 39.4 per cent in 2000 to 29.7 per cent in 2014.

GOAL 8: DEVELOP A GLOBAL PARTNERSHIP FOR DEVELOPMENT

Official development assistance



Global Internet penetration



- Official development assistance from developed countries increased by 66 per cent in real terms between 2000 and 2014, reaching $135.2 billion.
- In 2014, Denmark, Luxembourg, Norway, Sweden and the United Kingdom continued to exceed the United Nations official development assistance target of 0.7 per cent of gross national income.
- In 2014, 79 per cent of imports from developing to developed countries were admitted duty free, up from 65 per cent in 2000.
- The proportion of external debt service to export revenue in developing countries fell from 12 per cent in 2000 to 3 per cent in 2013.
- As of 2015, 95 per cent of the world's population is covered by a mobile-cellular signal.
- The number of mobile-cellular subscriptions has grown almost tenfold in the last 15 years, from 738 million in 2000 to over 7 billion in 2015.
- Internet penetration has grown from just over 6 per cent of the world's population in 2000 to 43 per cent in 2015. As a result, 3.2 billion people are linked to a global network of content and applications.

Despite many successes, the poorest and most vulnerable people are being left behind

Although significant achievements have been made on many of the MDG targets worldwide, progress has been uneven across regions and countries, leaving significant gaps. Millions of people are being left behind, especially the poorest and those disadvantaged because of their sex, age, disability, ethnicity or geographic location. Targeted efforts will be needed to reach the most vulnerable people.

▶ Gender inequality persists

Women continue to face discrimination in access to work, economic assets and participation in private and public decision-making. Women are also more likely to live in poverty than men. In Latin America and the Caribbean, the ratio of women to men in poor households increased from 108 women for every 100 men in 1997 to 117 women for every 100 men in 2012, despite declining poverty rates for the whole region.

Women remain at a disadvantage in the labour market. Globally, about three quarters of working-age men participate in the labour force, compared to only half of working-age women. Women earn 24 per cent less than men globally. In 85 per cent of the 92 countries with data on unemployment rates by level of education for the years 2012–2013, women with advanced education have higher rates of unemployment than men with similar levels of education. Despite continuous progress, today the world still has far to go towards equal gender representation in private and public decision-making.

▶ Big gaps exist between the poorest and richest households, and between rural and urban areas

In the developing regions, children from the poorest 20 per cent of households are more than twice as likely to be stunted as those from the wealthiest 20 per cent. Children in the poorest households are four times as likely to be out of school as those in the richest households. Under-five mortality rates are almost twice as high for children in the poorest households as for children in the richest. In rural areas, only 56 per cent of births are attended by skilled health personnel, compared with 87 per cent in urban areas. About 16 per cent of the rural population do not use improved drinking water sources, compared to 4 per cent of the urban population. About 50 per cent of people living in rural areas lack improved sanitation facilities, compared to only 18 per cent of people in urban areas.

▶ Climate change and environmental degradation undermine progress achieved, and poor people suffer the most

Global emissions of carbon dioxide have increased by over 50 per cent since 1990. Addressing the unabated rise in greenhouse gas emissions and the resulting likely impacts of climate change, such as altered ecosystems, weather extremes and risks to society, remains an urgent, critical challenge for the global community.

An estimated 5.2 million hectares of forest were lost in 2010, an area about the size of Costa Rica. Overexploitation of marine fish stocks led to declines in the percentage of stocks within safe biological limits, down from 90 per cent in 1974 to 71 per cent in 2011. Species are declining overall in numbers and distribution. This means they are increasingly threatened with extinction. Water scarcity affects 40 per cent of people in the world and is projected to increase. Poor people's livelihoods are more directly tied to natural resources, and as they often live in the most vulnerable areas, they suffer the most from environmental degradation.

▶ Conflicts remain the biggest threat to human development

By the end of 2014, conflicts had forced almost 60 million people to abandon their homes—the highest level recorded since the Second World War. If these people were a nation, they would make up the twenty-fourth largest country in the world. Every day, 42,000 people on average are forcibly displaced and compelled to seek protection due to conflicts, almost four times the 2010 number of 11,000. Children accounted for half of the global refugee population under the responsibility of the United Nations High Commissioner for Refugees in 2014. In countries affected by conflict, the proportion of out-of-school children increased from 30 per cent in 1999 to 36 per cent in 2012. Fragile and conflict-affected countries typically have the highest poverty rates.

▶ Millions of poor people still live in poverty and hunger, without access to basic services

Despite enormous progress, even today, about 800 million people still live in extreme poverty and suffer from hunger. Over 160 million children under age five have inadequate height for their age due to insufficient food. Currently, 57 million children of primary school age are not in school. Almost half of global workers are still working in vulnerable conditions, rarely enjoying the benefits associated with decent work. About 16,000 children die each day before celebrating their

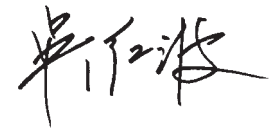
fifth birthday, mostly from preventable causes. The maternal mortality ratio in the developing regions is 14 times higher than in the developed regions. Just half of pregnant women in the developing regions receive the recommended minimum of four antenatal care visits. Only an estimated 36 per cent of the 31.5 million people living with HIV in the developing regions were receiving ART in 2013. In 2015, one in three people (2.4 billion) still use unimproved sanitation facilities, including 946 million people who still practise open defecation. Today over 880 million people are estimated to be living in slum-like conditions in the developing world's cities.

With global action, these numbers can be turned around.

The successes of the MDG agenda prove that global action works. It is the only path to ensure that the new development agenda leaves no one behind

The global community stands at a historic crossroads in 2015. As the MDGs are coming to their deadline, the world has the opportunity to build on their successes and momentum, while also embracing new ambitions for the future we want. A bold new agenda is emerging to transform the world to better meet human needs and the requirements of economic transformation, while protecting the environment, ensuring peace and realizing human rights. At the core of this agenda is sustainable development, which must become a living reality for every person on the planet.

This is the final MDG report. It documents the 15-year effort to achieve the aspirational goals set out in the Millennium Declaration and highlights the many successes across the globe, but acknowledges the gaps that remain. The experience of the MDGs offers numerous lessons, and they will serve as the springboard for our next steps. Leaders and stakeholders in every nation will work together, redoubling efforts to achieve a truly universal and transformative agenda. This is the only way to ensure a sustainable future and a dignified life for all people everywhere.



Wu Hongbo
Under-Secretary-General for Economic and Social Affairs

Measure what we treasure: sustainable data for sustainable development

As the post-2015 development agenda is being established, strengthening data production and the use of better data in policymaking and monitoring are becoming increasingly recognized as fundamental means for development. The MDG monitoring experience has clearly demonstrated that effective use of data can help to galvanize development efforts, implement successful targeted interventions, track performance and improve accountability. Thus sustainable development demands a data revolution to improve the availability, quality, timeliness and disaggregation of data to support the implementation of the new development agenda at all levels.

The monitoring of the MDGs taught us that data are an indispensable element of the development agenda

▶ What gets measured gets done

The MDG framework strengthened the use of robust and reliable data for evidence-based decision-making, as many countries integrated the MDGs into their own national priorities and development strategies. Using reliable data to monitor progress towards the MDGs also allowed governments at national and subnational levels to effectively focus their development policies, programmes and interventions.

Data at the local level proved extremely helpful. Subnational monitoring of net enrolment ratios in primary and secondary education revealed large disparities between the arid and semi-arid areas of northern Kenya. In response, the Kenyan government targeted these deprived areas by establishing a specific school feeding programme, low-cost boarding primary schools and mobile schools. In Colombia, data at the subnational level showed sharply uneven rates of progress, which motivated local governments to implement key interventions according to local priorities. The Nariño region, for instance, focused on Goal 3, aiming to reduce the large gender gaps in employment and political participation. In Cundinamarca, the focus was on accelerating progress on Goal 1 in the poorest municipalities.

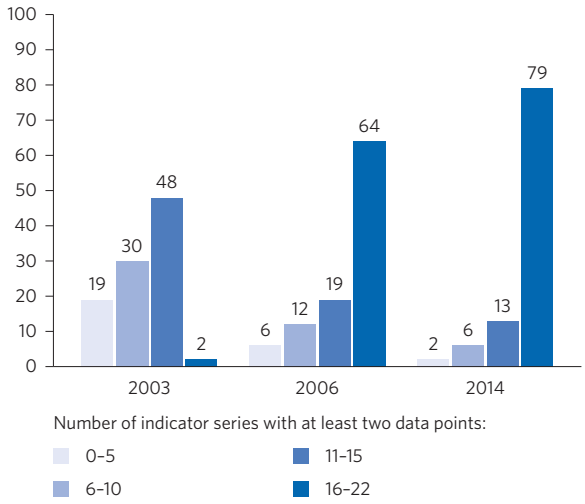
▶ Real data improvement occurs when demand and policy support meet

The MDGs energized efforts to increase the production and use of development data. Their monitoring requirements drew attention to the need for strengthening statistical capacity and improving statistical methodologies and information systems at both national and international levels. Over time, this increased the availability of more and better data, while improving coordination within national statistical systems and leading to new statistical methodologies.

To support MDGs monitoring in the Philippines, the National Statistical Coordination Board (NSCB) was designated as the national custodian of MDG indicators. The Board formulated an MDGs statistical development programme, which enabled data compilation from different sources and formulation of programmes and policies to support the collection, dissemination and improvement of data for policymaking. A community-based monitoring system was also developed to provide data to monitor and evaluate local development plans.

Global monitoring of the MDGs improved dramatically, assisted by a close collaboration between international agencies and country experts. Between 2000 and 2015, the number of surveys and censuses in the database of the WHO/UNICEF Joint Monitoring Programme on Water Supply and Sanitation has increased six-fold. Country coverage for a subset of 22 official MDG indicators improved significantly between 2003 and 2014. While in 2003, only 2 per cent of developing countries had at least two data points for 16 or more of the 22 indicators, by 2014 this figure had reached 79 per cent. This reflects the increased capacity of national statistical systems to address monitoring requirements and improvements in data-reporting mechanisms. It also shows the benefits of better access to national sources by international agencies.

Proportion of countries and territories in the developing regions with at least two data points for 22 selected MDG indicators, 2003, 2006 and 2014 (percentage)



Despite improvement, critical data for development policymaking are still lacking

Large data gaps remain in several development areas. Poor data quality, lack of timely data and unavailability of disaggregated data on important dimensions are among the major challenges. As a result, many national and local governments continue to rely on outdated data or data of insufficient quality to make planning and decisions.

A World Bank study shows that about half of the 155 countries lack adequate data to monitor poverty and, as a result, the poorest people in these countries often remain invisible. During the 10-year period between 2002 and 2011, as many as 57 countries (37 per cent) had none or only one poverty rate estimate. In sub-Saharan Africa, where poverty is most severe, 61 per cent of countries have no adequate data to monitor poverty trends.

Lack of well-functioning civil registration systems with national coverage also results in serious data gaps, especially for vital statistics. According to the UN Inter-agency Group for Child Mortality Estimation, only around 60 countries have such systems; the others rely mostly on household surveys or censuses to estimate child mortality.

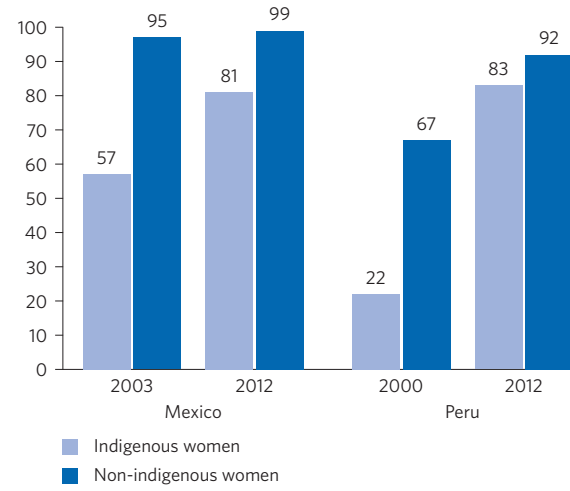
Better data are needed for the post-2015 development agenda

Only by counting the uncounted can we reach the unreached

High-quality data disaggregated by key dimensions beyond the basics of age and sex, including migrant status, indigenous status, ethnicity and disability among others, are key to making decisions and monitoring progress towards achieving sustainable development for all. Estimating the size and exploring the attributes of small population groups requires large sample sizes or full population counts. National population and housing censuses provide an important data source and sampling frame for estimating the size of vulnerable minority groups.

Remarkable progress has been made, for instance, in the availability of detailed data on indigenous peoples in Latin America. In the 2010 census round, 17 of 20 countries in Latin America included questions on indigenous people to provide detailed data for this group. Data on maternal care revealed that around 2000, the proportion of births attended by health professionals was 38 percentage points lower among indigenous women than non-indigenous women in Mexico, and 45 percentage points lower in Peru. The availability of these disaggregated data led to the adoption of more effective interventions to reduce inequality. By 2012, more than 80 per cent of births to indigenous women were attended by health personnel in both countries.

Births attended by skilled personnel in Mexico and Peru, by indigenous status, selected years (percentage)



▶ Real-time data are needed to deliver better decisions faster

In today's rapidly changing world, real-time information is needed to prepare and respond to economic, political, natural and health crises. However, most development data have a time lag of two to three years. Recent innovations are helping to circumvent this problem. For example, UNICEF and partners have used text messaging (SMS) technology to facilitate real-time collection and sharing of information about the Ebola outbreak. In Liberia, hundreds of health workers have used mHero (Health Worker Electronic Response and Outreach) and in Guinea and Sierra Leone, thousands of young people are using U-Report. This real-time information has helped rapidly locate new cases, determined what supplies are needed and disseminated lifesaving messages.

▶ Geospatial data can support monitoring in many aspects of development, from health care to natural resource management

Knowing where people and things are and their relationship to each other is essential for informed decision-making. Comprehensive location-based information is helping Governments to develop strategic priorities, make decisions, and measure and monitor outcomes. Once the geospatial data are created, they can be used many times to support a multiplicity of applications. A geodetic reference frame allows precise observations and 'positioning' of anything on the Earth and can be used for many social, economic and environmental purposes, such as precision agriculture and monitoring changes in sea level rise.

For example, geospatial information was used to support health care and design social intervention measures during the chikungunya virus (chick-V) outbreak across the Caribbean. In Trinidad and Tobago, geospatial applications for smart phones assisted the Ministry of Health to identify the location of infected persons and use the information to contain the outbreak.

Strong political commitment and significantly increased resources will be needed to meet the data demand for the new development agenda

▶ Strengthening statistical capacity is the foundation for monitoring progress of the new development agenda

To improve the availability, reliability, timeliness and accessibility of data to support the post-2015 development agenda, sustainable investments are needed in statistical capacity at all levels, especially the national level. The scaling-up of national statistical capacities and the strengthening and modernization of statistical systems will require ensuring effective institutional arrangements and internal coordination, sustainable human resources, sustainable financial resources (internal and external) and technical cooperation. National statistical offices should have a clear mandate to lead the coordination among national agencies involved and to become the data hub for monitoring.

For instance, improving a country's civil registration and vital statistics system requires strong commitment from the government and long-term efforts in strengthening administrative infrastructure. Progress in the past 20 years has been very slow, but a few countries have made great strides. In South Africa, for example, 85 per cent of births in 2012 were registered compared to 56 per cent of births in 2003. In Thailand, thanks to efforts begun in 1996, more than 95 per cent of births and deaths are now registered.

▶ New technology is changing the way data are collected and disseminated

New information and communication technologies provide unprecedented opportunities for data collection, analysis and dissemination. Today, 95 per cent of the global population is covered by a cellular network, while mobile-cellular subscriptions have grown to over 7 billion. Internet penetration has increased to 43 per cent of the world's population, linking 3.2 billion people to a global network of content and applications. New data collection technologies, such as Computer-Assisted Personal Interviewing (CAPI) and mobile text surveys (SMS), and new data sources, such as social media posts, online search records and mobile phone call records, allow faster data collection and provide near real-time information.

The 2010 Brazilian Census introduced several innovations in its operation. Digital census mapping was developed and integrated with the National Address File, which made the census data collection more efficient and more accurate. Field operations through CAPI devices equipped with a Global Positioning System receiver allowed better monitoring of the field operation and real-time data editing.

To cover difficult-to-reach populations, Brazil also used Internet data collection as a complementary system.

However, new data sources and new data collection technologies must be carefully applied to avoid a reporting bias favouring people who are wealthier, more educated, young and male. The use of these innovative tools might also favour those who have greater means to access technology, thus widening the gap between the "data poor" and the "data rich".

▶ Global standards and an integrated statistics system are key elements for effective monitoring

International standards are important for building national statistical capacity. One of the Fundamental Principles of Official Statistics states that "the use by statistical agencies in each country of international concepts, classifications and methods promotes the consistency and efficiency of statistical systems at all official levels". The Secretary-General's Independent Expert Advisory Group on the Data Revolution for Sustainable Development also highlighted in its report the need for a "Global consensus on data" to adopt principles concerning legal, technical, privacy, geospatial and statistical standards that facilitate openness and information exchange while promoting and protecting human rights.

Measuring sustainability is a highly technical task that requires capturing complex economic, societal and environmental interactions. Therefore, an integrated framework of indicators is needed to cover these three dimensions cohesively. Integration benefits not only data users, but also data producers and providers by reducing the respondents' burden, the likelihood of errors and the long-term costs. Harnessing the benefits of statistical integration requires investment in the adoption of statistical standards, developing and re-engineering of statistical production processes, and changing institutional arrangements.

▶ Promoting open, easily accessible data and data literacy is key for effective use of data for development decision-making

Data for development are public goods and should be made available to the public in open formats. Open data supports government transparency and accountability, enables the use of collective intelligence to make smarter policy decisions, increases citizen engagement and promotes government efficiency and effectiveness. Besides data, information on definitions, data quality, methods used in collecting data and other important metadata also need to be made widely available. In addition to opening up data, great efforts need to be made to release data in machine-readable formats and to provide free visualization and analysis tools.

With an increasing volume of data available, people will also need the skills to use and interpret them correctly. Governments, international organizations and other stakeholders should support implementation of data literacy programmes, provide e-learning opportunities and include data literacy as a part of school curriculum.

▶ Together we can measure what we treasure

Data, as the basis for evidence-based decision-making and accountability, are a crucial pillar of the post-2015 development agenda. The necessary data revolution is a joint responsibility of governments, international and regional organizations, the private sector and civil society. Building a new partnership will be essential to ensure that data are available to inform the post-2015 development agenda and support development decision-making for the next 15 years.

Goal 1

Eradicate extreme poverty and hunger

Key facts

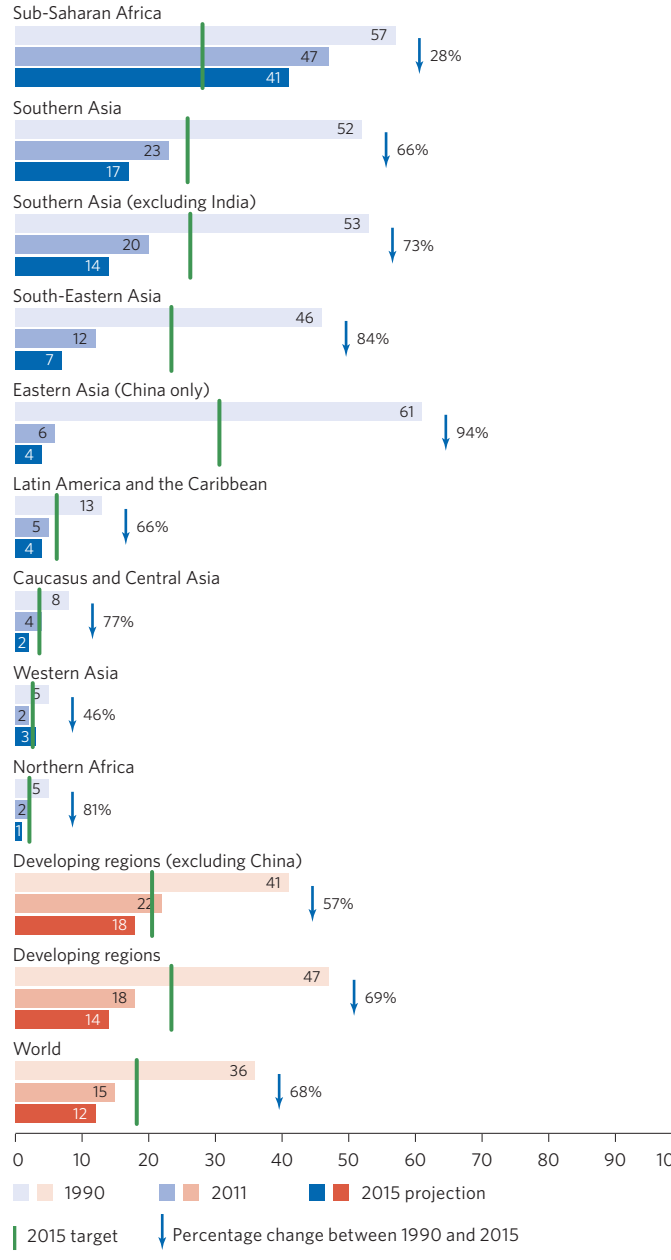
- More than 1 billion people have been lifted out of extreme poverty since 1990.
- Despite progress, almost half of the world's employed people work in vulnerable conditions.
- The proportion of undernourished people in the developing regions has fallen by almost half since 1990.
- One in seven children worldwide are underweight, down from one in four in 1990.
- By the end of 2014, conflicts had forced almost 60 million people to abandon their homes.

TARGET 1.A

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

The extreme poverty rate has dropped significantly in most developing regions

Proportion of people living on less than $1.25 a day, 1990, 2011 and 2015 (percentage)



Note: Sufficient country data are not available for Oceania.

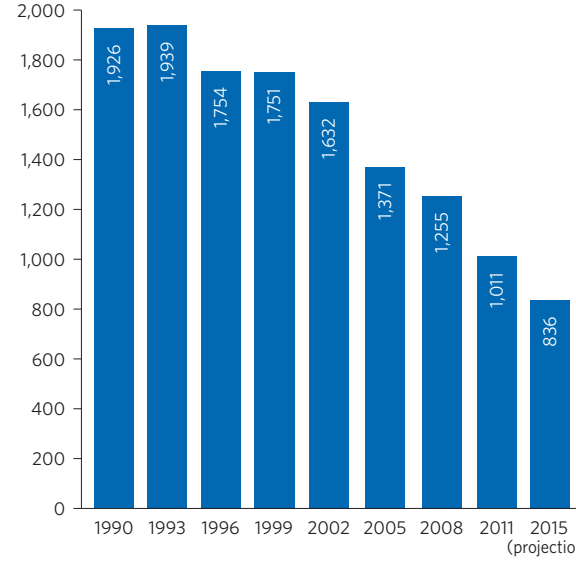
Global poverty has declined significantly over the past two decades. The MDG target of reducing by half the proportion of people living in extreme poverty was achieved five years ago, ahead of the 2015 deadline. The latest estimates show that the proportion of people living on less than $1.25 a day globally fell from 36 per cent in 1990 to 15 per cent in 2011. Projections indicate that the global extreme poverty rate has fallen further, to 12 per cent, as of 2015. The poverty rate in the developing regions has plummeted, from 47 per cent in 1990 to 14 per cent in 2015, a drop of more than two thirds.

By 2011, all developing regions except sub-Saharan Africa had met the target of halving the proportion of people who live in extreme poverty (Oceania has insufficient data). The world's most populous countries, China and India, played a central role in the global reduction of poverty. As a result of progress in China, the extreme poverty rate in Eastern Asia has dropped from 61 per cent in 1990 to only 4 per cent in 2015. Southern Asia's progress is almost as impressive—a decline from 52 per cent to 17 per cent for the same period—and its rate of reduction has accelerated since 2008.

In contrast, sub-Saharan Africa's poverty rate did not fall below its 1990 level until after 2002. Even though the decline of poverty has accelerated in the past decade, the region continues to lag behind. More than 40 per cent of the population in sub-Saharan Africa still lives in extreme poverty in 2015. In Western Asia, the extreme poverty rate is expected to increase between 2011 and 2015.

The number of people living in extreme poverty has declined by more than half since 1990

Number of people living on less than $1.25 a day worldwide, 1990–2015 (millions)

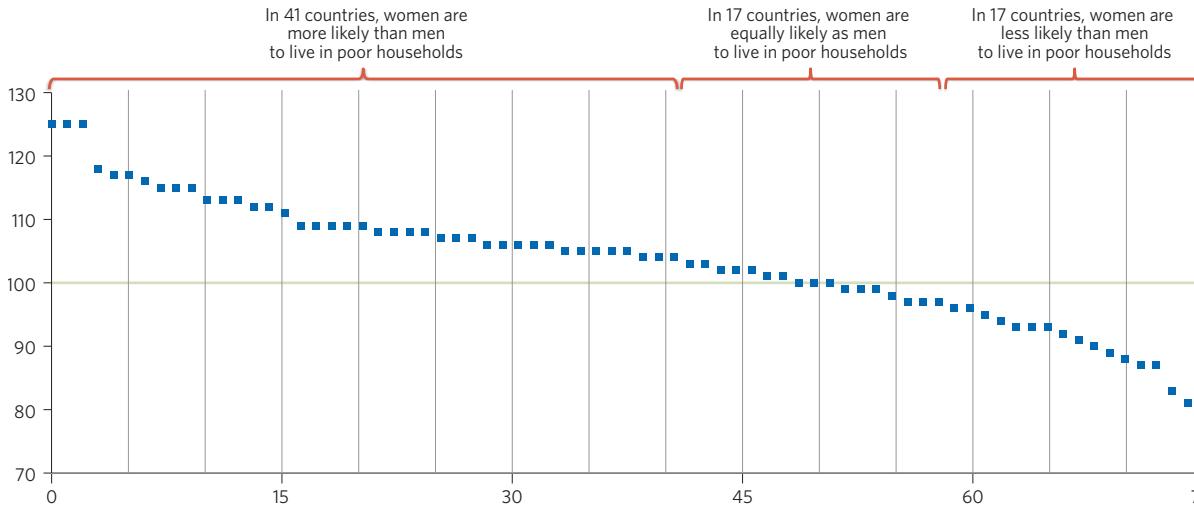


The absolute number of people living in extreme poverty globally fell from 1.9 billion in 1990 to 1 billion in 2011. Estimates suggest that another 175 million people have been lifted out of extreme poverty as of 2015. Thus, the number of people worldwide living on less than $1.25 a day has also been reduced by half from its 1990 level.

The world's extremely poor people are distributed very unevenly across regions and countries. The overwhelming majority of people living on less than $1.25 a day reside in two regions—Southern Asia and sub-Saharan Africa—and they account for about 80 per cent of the global total of extremely poor people. Nearly 60 per cent of the world's 1 billion extremely poor people lived in just five countries in 2011: India, Nigeria, China, Bangladesh and the Democratic Republic of the Congo (ranked from high to low).

Women face a greater risk of living in poverty

Ratio of women to men of working age (20 to 59) in the lowest wealth quintile of all households, selected developing countries, 2000–2013



Notes: This indicator is weighted by the ratio of females to males aged 20–59 in all households to reflect the fact that women may be overrepresented in the entire population. It uses the wealth asset index in the Demographic and Health Surveys and Multiple Indicator Cluster Surveys as a proxy measure for poverty. Values above 103 indicate that women are overrepresented in the lowest wealth quintile while values below 97 indicate that men are overrepresented in the lowest wealth quintile. Values between 97 and 103 indicate parity.

Among the 1 billion people who were still living in extreme poverty worldwide in 2011, it is unknown how many were women and girls. In part this is because measures of poverty rely on income or consumption data collected at the household level, rather than at the individual level. This makes it difficult to differentiate poverty rates within households, and hence to understand gender differences in the incidence, severity and impact of poverty.

A recent study used a wealth asset index as a proxy for household poverty to compare the percentage of women and men aged 20–59 who live in the lowest wealth quintile of all households. Using this measure, the study found that women are more likely to live in poverty in 41 out of 75 countries with data. Further analysis indicates that in countries where women are overrepresented in the lowest wealth quintile of households, the households are more likely to be headed by women or to have no male adults. This suggests a greater risk of poverty among separated women, widows and single mothers, including self-reported heads of household without a male partner.

Using conventional national poverty lines, another study found that in Latin America and the Caribbean, the ratio of women to men in poor households increased from 108 women for every 100 men in 1997 to 117 women to every 100 men in 2012. This upward trend is all the more concerning because it took place in the context of declining poverty rates for the whole region.

Many factors contribute to women's heightened vulnerability to poverty. These include unequal access to paid work, lower earnings, lack of social protection and limited access to assets, including land and property. Even where women are equally as likely to live in poor households as men, they are more likely to be deprived in other important areas of well-being, such as education.

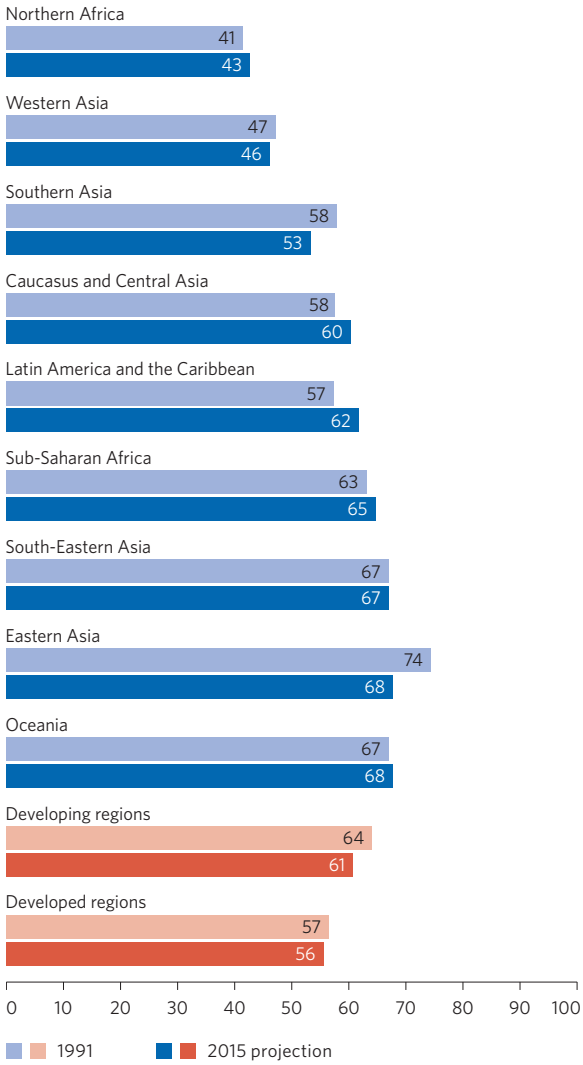
Understanding the characteristics of the world's poorest people and the reasons for their deprivation is crucial in determining how best to target and eradicate poverty. It is clear that greater efforts are needed to produce high-quality poverty and gender statistics if we are to monitor progress effectively in eradicating extreme poverty for all people everywhere.

TARGET 1.B

Achieve full and productive employment and decent work for all, including women and young people

Employment opportunities are being outpaced by the growing labour force

Employment-to-population ratio, 1991 and 2015 (percentage)



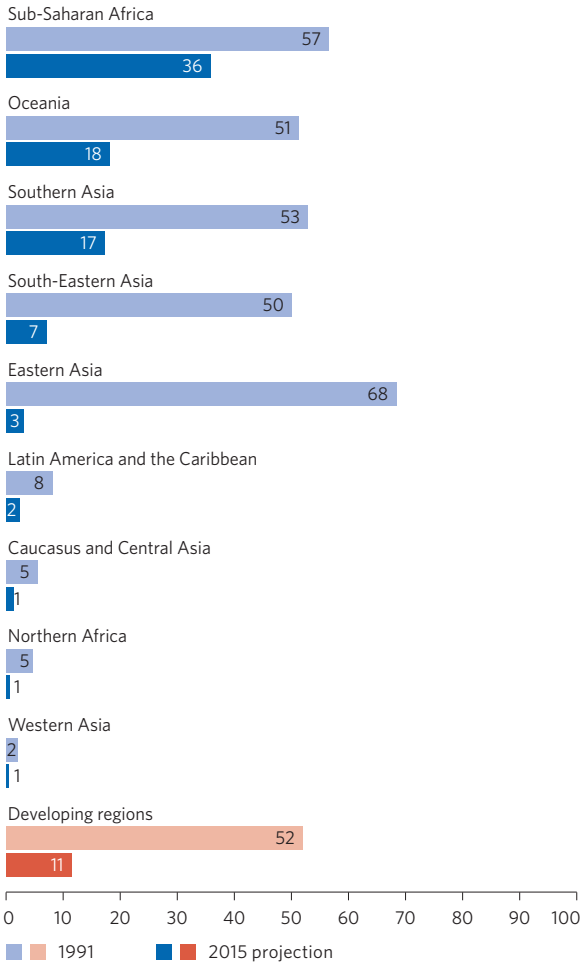
As the global economy has entered a new period combining slower growth, widening inequalities and turbulence, employment is not expanding fast enough to keep up with the growing labour force. The global employment-to-population ratio—the proportion of the working-age population that is employed—has fallen from 62 per cent in 1991 to 60 per cent in 2015, with an especially significant downturn during the global economic crisis of 2008/2009. According to the International Labour Organization, more than 204 million people are unemployed in 2015. This is over 34 million more than before the start of the economic crisis and 53 million more than in 1991.

Employment opportunities have diminished in both the developing and the developed regions. The employment-to-population ratio in the developing regions has fallen by 3.3 percentage points from 1991 to 2015, while in the developed regions it has declined by 1 percentage point. The largest declines are found in Eastern Asia and Southern Asia, which have experienced drops in the employment-to-population ratio of 6.7 and 4.6 percentage points, respectively. The employment situation has improved slightly in sub-Saharan Africa, but progress in livelihoods has been offset by persistently high underemployment and informal employment, as well as low labour productivity.

Youth, especially young women, continue to be disproportionately affected by limited employment opportunities and unemployment. Only four in ten young women and men aged 15–24 are employed in 2015, compared with five in ten in 1991. This represents a fall of more than 10 percentage points. While the drop is partially a result of young people staying longer in school, still about 74 million young people are looking for a job in 2015. Globally, the youth unemployment rate is almost three times higher than the rate for adults. In 2015, the situation is most acute in Northern Africa and Western Asia, where the proportion of young people that is employed is only half of that of the entire working-age population.

The proportion of workers living in extreme poverty has fallen sharply

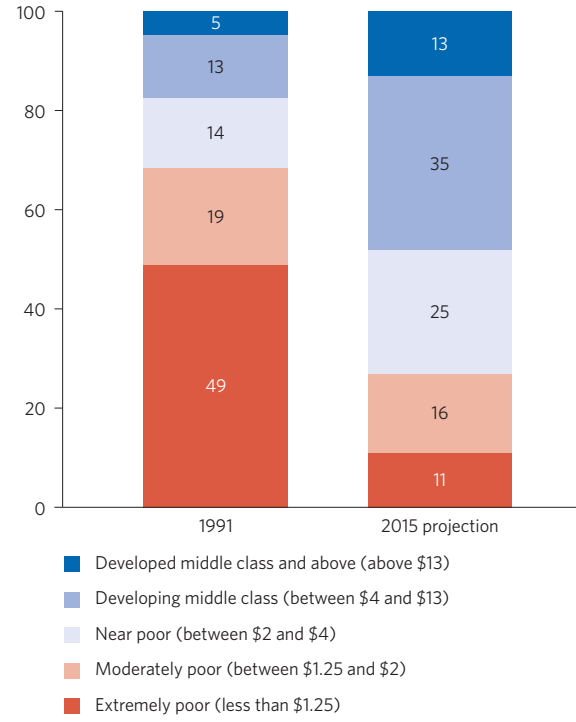
Proportion of employed people living on less than $1.25 a day, 1991 and 2015 (percentage)



The number of workers living in extreme poverty has declined dramatically over the past 25 years, despite the global economic crisis. In 1991, close to half of the workers in the developing regions were living with their families on less than $1.25 per person per day. This rate has dropped to 11 per cent in 2015, corresponding to a two-thirds decline in the number of extremely poor workers, from 900 million in 1991 to 300 million in 2015. However, progress across regions has been uneven. In 2015, 80 per cent of the working poor reside in sub-Saharan Africa and Southern Asia.

The working middle class makes up almost half the workforce in the developing world

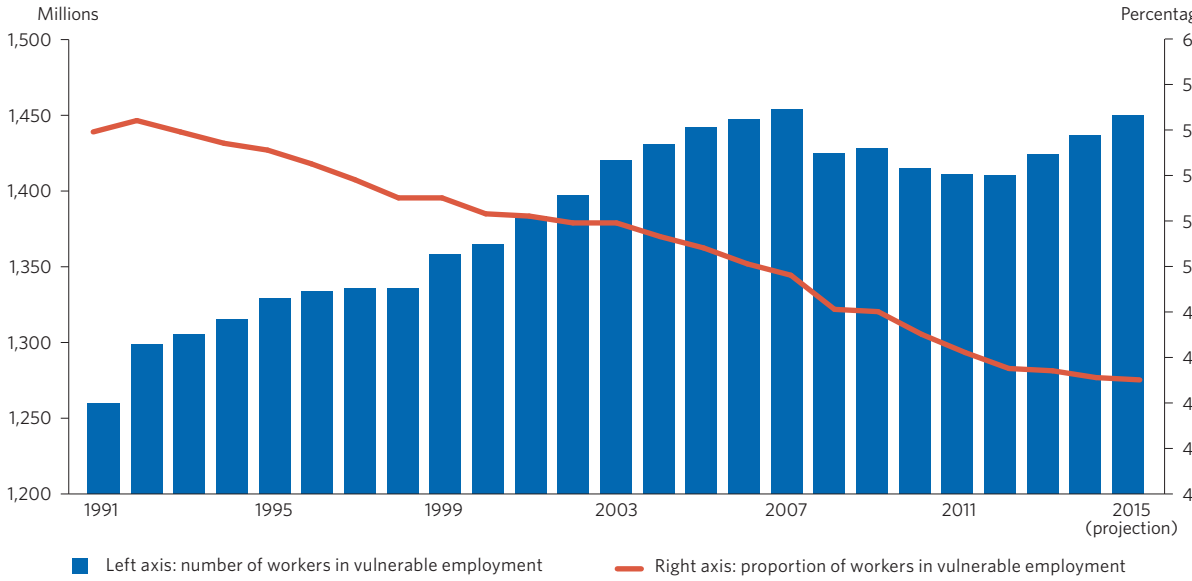
Employment by economic class in the developing regions, 1991 and 2015 (percentage of total employment)



Based on the five economic classes defined by the International Labour Organization, the number of people in the working middle classes—living on more than $4 a day—has almost tripled between 1991 and 2015. People in this group now make up almost half the workforce in the developing regions, up from 18 per cent in 1991. Yet, that means that half of workers and their families still live on less than $4 a day. Few are covered by social protection systems, and they face the constant risk of slipping back into poverty. Much work needs to be done to raise productivity, promote sustainable structural transformation and expand social protection systems for the poorest and most vulnerable workers and their families.

Despite progress, almost half of the world's employed people are still working in vulnerable conditions

Number and proportion of own-account and contributing family workers in total employment, 1991–2015



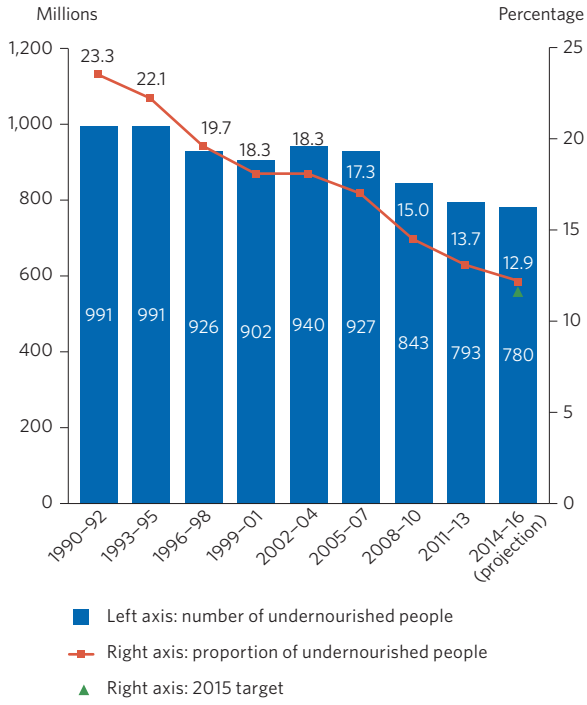
The proportion of workers in vulnerable employment—defined as the share of own-account work and contributing family employment in total employment—has continued to decline in all regions. The most significant progress has been made in Eastern Asia, where the proportion of people in vulnerable employment has dropped from 71.2 per cent in 1991 to 39.6 per cent in 2015. Globally, however, 45 per cent of all workers are still working in vulnerable conditions. These workers rarely have the benefits associated with decent work. Sub-Saharan Africa and Southern Asia account for more than half of the world's vulnerable employment, with three out of four workers falling in this category. The number of workers in vulnerable employment has increased by 25 million since 2008, because of the increasing number of people entering the labour market and limited opportunities for paid employment. Currently there are 1.45 billion workers in vulnerable employment worldwide.

TARGET 1.C

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

Progress on ending hunger has been significant despite the challenging global environment

Number and proportion of undernourished people in the developing regions, from 1990–1992 to 2014–2016

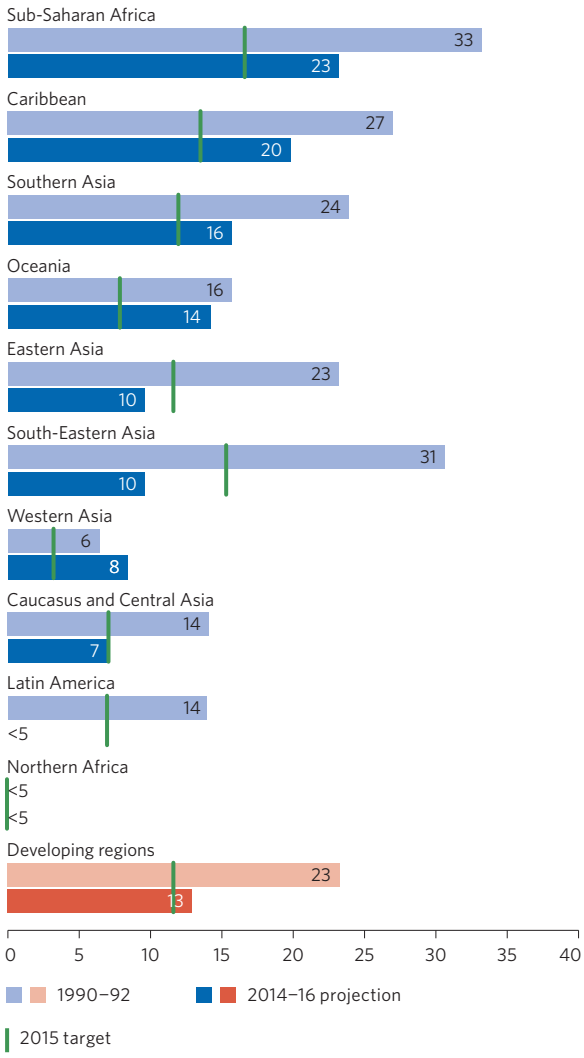


Current estimates suggest that about 795 million people are undernourished globally. This means that nearly one in nine individuals do not have enough to eat. The vast majority of them (780 million people) live in the developing regions. However, projections indicate a drop of almost half in the proportion of undernourished people in the developing regions, from 23.3 per cent in 1990–1992 to 12.9 per cent in 2014–2016. This is very close to the MDG hunger target. Rapid progress during the 1990s was followed by a slower decline in hunger in the first five years of the new millennium and then a rebound starting around 2008. The projections for the most recent period mark a new phase of slower progress.

Progress in reducing hunger has been significant despite the challenging global environment over the last decade. Obstacles have included volatile commodity prices, higher food and energy prices, rising unemployment and economic recessions in the late 1990s and in 2008/2009. Frequent extreme weather events and natural disasters have also taken a considerable toll on lives and livelihoods, and eventually on progress towards global food security. In a growing number of countries, political instability and civil strife have aggravated the effects of natural disasters, resulting in numerous and significant humanitarian crises. These developments have slowed progress in reducing food insecurity in some of the most vulnerable countries and regions of the world.

Marked differences in hunger prevalence persist across regions

Proportion of undernourished people, 1990–1992 and 2014–2016 (percentage)



The rate of hunger reduction varies widely by region. The Caucasus and Central Asia, Eastern Asia, Latin America and South-Eastern Asia have reached the hunger target, due mainly to rapid economic growth in the past two decades. China alone accounts for almost two thirds of the total reduction in the number of undernourished people in the developing regions since 1990. Northern Africa is close to eradicating severe food insecurity, having attained an overall level below 5 per cent.

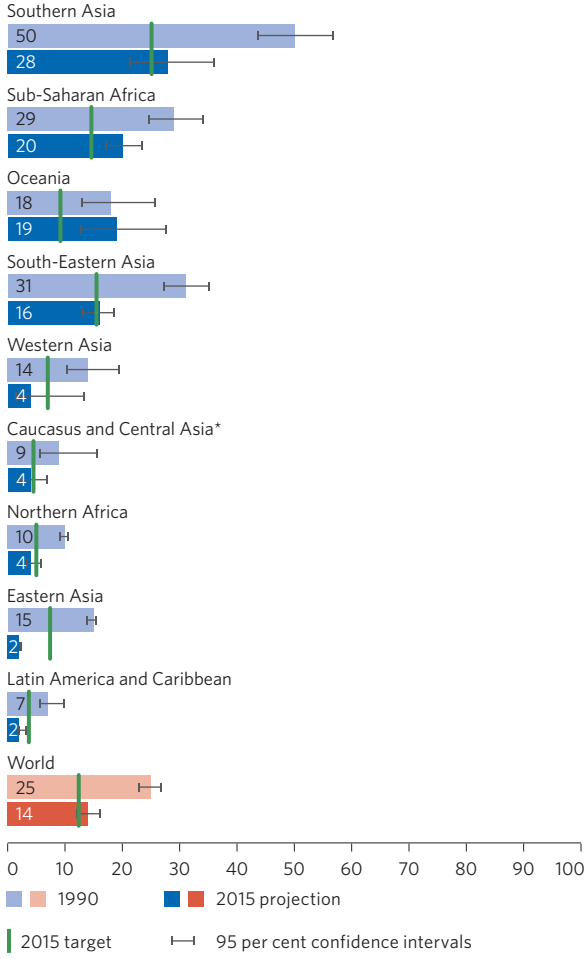
In contrast, the pace of reduction in the Caribbean, Oceania, Southern Asia and sub-Saharan Africa has been too slow to achieve the target. Southern Asia faces the greatest hunger burden, with about 281 million undernourished people. Progress in Oceania has been slow because of heavy dependence on food imports by the small islands that constitute the majority of countries in that region. Food security in this region is also hampered by natural and human-caused disasters, which often result in volatile prices and sudden and unpredictable changes in the availability of important staple foods.

In sub-Saharan Africa, projections for the 2014–2016 period indicate a rate of undernourishment of almost 23 per cent. While the hunger rate has fallen, the number of undernourished people has increased by 44 million since 1990, reflecting the region's high population growth rate. The situation varies widely across the subregions. Northern, Southern and Western Africa have already met or are close to meeting the target. But in Central Africa progress has been hampered by rapid population growth and environmental fragility as well as economic and political upheaval. The number of undernourished people in the subregion has doubled since 1990.

In Western Asia, a starkly different pattern emerges. Despite a relatively low number of undernourished people and fast progress in reducing food insecurity in several countries, projections indicate that the prevalence of undernourishment will rise by 32 per cent between 1990–1992 and 2014–2016 due to war, civil unrest and a rapidly growing number of refugees.

Prevalence of underweight children continues to decline but not fast enough for all regions to reach the target

Proportion of children under age five who are moderately or severely underweight, 1990 and 2015 (percentage)



* 1990 baseline data for Caucasus and Central Asia refer to 1995 and 2015 target is half of the 1995 rate.

Note: The trend analysis was based on harmonized estimates on child malnutrition from the United Nations Children's Fund, the World Health Organization and the World Bank.

The proportion of children under age five who are underweight has been cut almost in half between 1990 and 2015, according to global projections, and it is possible that the target has been achieved. Yet over 90 million children under age five—one in seven children worldwide—remain underweight. Being underweight puts children at greater risk of dying from common infections, increases the frequency and severity of such infections and contributes to delayed recovery. Poor nutrition in the first 1,000 days of life is also associated with impaired cognitive ability and reduced school and work performance. Two regions account for nearly 90 per cent of all underweight children in 2015—half live in Southern Asia and one third in sub-Saharan Africa.

Eastern Asia and Latin America and the Caribbean have clearly met the target. Projections indicate that the Caucasus and Central Asia, Northern Africa, South-Eastern Asia and Western Asia likely have met the target too. While Southern Asia has the highest underweight prevalence, with approximately one in three children still affected in 2015, the region has experienced the largest absolute decrease since 1990, a 22 percentage-point drop. In sub-Saharan Africa the underweight rate has fallen by only one third since 1990. However, due to the region's growing population, the number of underweight children has actually risen.

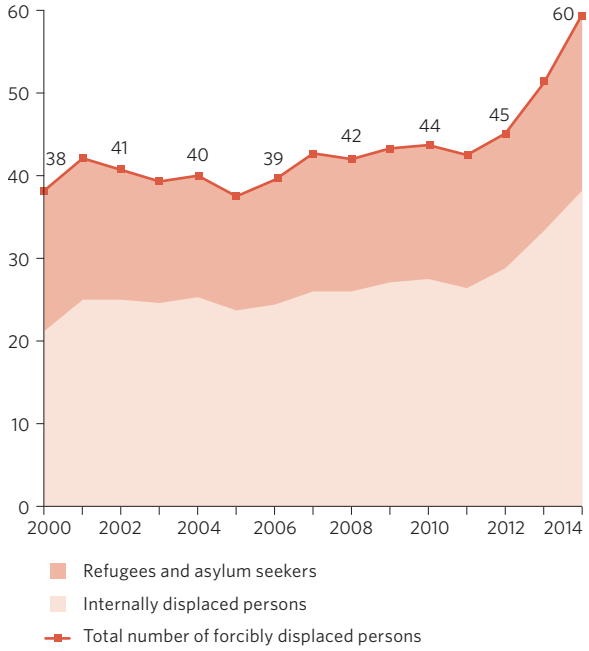
One in four children under five worldwide have stunted growth, but stunting is declining

Stunting—defined as inadequate height for age—is a better measure than underweight of the cumulative effects of undernutrition and infection during the critical 1,000-day period from pregnancy to the child's second birthday. Stunting is also more common than underweight, affecting approximately one in four children under five, or 161 million children worldwide in 2013. This chronic form of undernutrition puts these children at risk of diminished cognitive and physical development. The number of stunted children has fallen in all regions except sub-Saharan Africa, where the numbers increased by about one third between 1990 and 2013. Children from the poorest 20 per cent of the population are more than twice as likely to be stunted as those from the wealthiest quintile.

Stunting and other forms of malnutrition can be reduced through proven interventions. These include improving maternal nutrition, especially before, during and immediately after pregnancy; early and exclusive breastfeeding; and timely introduction of safe, appropriate and high-quality complementary food for infants, accompanied by appropriate micronutrient interventions.

Conflicts have forced almost 60 million people from their homes

Number of forcibly displaced persons, 2000–2014 (millions)



In 2014, the world witnessed conflicts, violence and human rights violations that resulted in the massive displacement of people, either within or outside their home countries. During the year, an average of 42,000 people each day were forced to abandon their homes and seek protection due to conflicts, such as those in Iraq, Nigeria, Pakistan, South Sudan, the Democratic Republic of the Congo, the Syrian Arab Republic and Ukraine. This is almost four times the figure of 11,000 people only four years earlier.

By the end of 2014, almost 60 million people had been forcibly displaced worldwide, the highest level recorded since the Second World War. If these people were a nation, they would make up the twenty-fourth largest country in the world. Roughly one third of them were refugees or asylum seekers, including 14.4 million individuals under the responsibility of the United Nations High Commissioner for Refugees (UNHCR) and 5.1 million Palestinian refugees registered with the United Nations Relief and Works Agency for Palestine Refugees in the Near East. In addition, close to 1.8 million individuals were waiting for a decision on asylum applications by the end of 2014. The global figure of displaced people also includes more than 38 million people displaced within the borders of their own countries.

Nine out of ten refugees under the UNHCR mandate are located in the developing regions. This compares to seven out of ten a decade ago. The top three source countries of refugees at the end of 2014 were the Syrian Arab Republic (3.9 million), Afghanistan (2.6 million) and Somalia (1.1 million). Together they accounted for more than half of all refugees under the responsibility of UNHCR.

Based on available evidence, children accounted for half of the global refugee population under the UNHCR mandate in 2014, the highest proportion in 10 years. Over the past decade, the number of refugee children has been growing intermittently, from a low of 41 per cent in 2009. This increase is principally driven by the growing number of Afghan, Somali and Syrian refugee children.

Eradicating poverty and hunger is central to the post-2015 development agenda

Although the MDG targets of halving the proportion of people living in extreme poverty and hunger have been met or almost met, the world is still far from reaching the MDG goal of eradicating extreme poverty and hunger. In 2015, an estimated 825 million people still live in extreme poverty and 800 million still suffer from hunger. Eradicating poverty and hunger remains at the core of the post-2015 development agenda.

Eliminating the remaining extreme poverty and hunger will be challenging. Many of the people suffering the most live in fragile contexts and remote areas. Access to good schools, health care, electricity, safe water and other critical services remains elusive for many people, and it is frequently determined by socioeconomic status, gender, ethnicity or geography. For those who have been able to climb out of poverty, progress is often fragile and temporary; economic shocks, food insecurity and climate change threaten to rob them of their hard-won gains.

The post-2015 development agenda will pick up where the MDGs left off. The remaining gaps must be filled in order to eradicate poverty and hunger and promote sustained and inclusive economic growth, allowing people everywhere to thrive.

Goal 2

Achieve universal primary education

Key facts

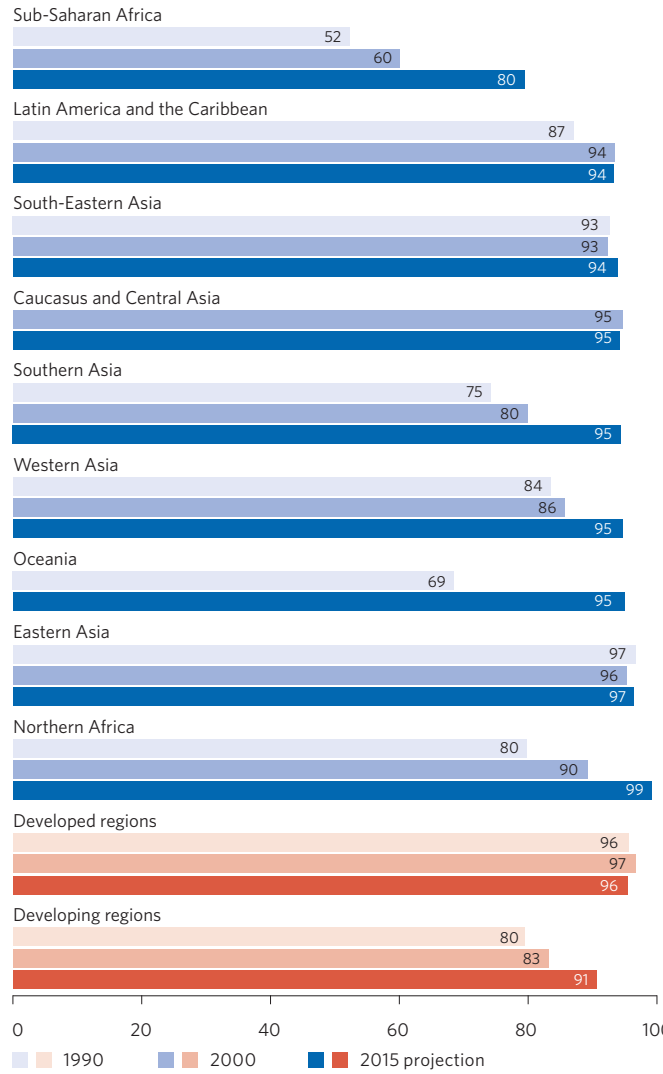
- The primary school net enrolment rate in the developing regions has reached an estimated 91 per cent in 2015, up from 83 per cent in 2000.
- The number of out-of-school children of primary school age worldwide has fallen by almost half, to an estimated 57 million in 2015, from 100 million in 2000.
- Between 1990 and 2012, the number of children enrolled in primary school in sub-Saharan Africa more than doubled, from 62 to 149 million.
- In the developing regions, children in the poorest households are four times as likely to be out of school as those in the richest households.
- The literacy rate among youth aged 15 to 24 has increased globally from 83 per cent to 91 per cent between 1990 and 2015.

TARGET 2.A

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

Across the world, tremendous progress has been made since 2000 in enrolling children in primary school

Adjusted net enrolment rate* in primary education, 1990, 2000 and 2015 (percentage)



* Adjusted net enrolment rate is defined as the number of pupils of the official age for primary education enrolled either in primary or secondary school, expressed as a percentage of the total population in that age group.

Note: 2000 figure for Oceania is not available.
1990 figure for Caucasus and Central Asia is not available.

Considerable progress has been made in expanding primary education enrolment since 1990, particularly since the adoption of the MDGs in 2000. Yet in some developing countries many children of primary education age do not attend school, and many children who begin primary school do not complete it.

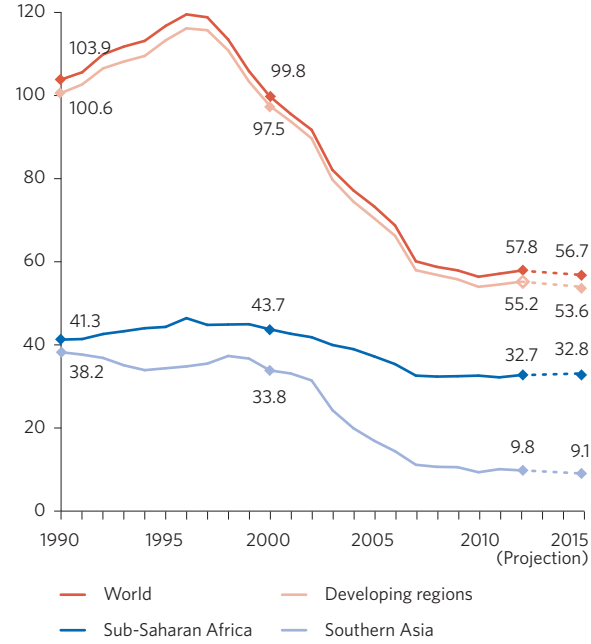
Progress has been erratic since 1990. Between 1990 and 2000, the enrolment rate in the developing regions increased from 80 per cent to just 83 per cent. After 2000, improvement accelerated, and the adjusted net enrolment rate in primary education reached 90 per cent in 2007. After 2007, progress stalled. The enrolment rate has not increased significantly, and projections based on the extrapolation of trends between 2007 and 2012 indicate that nearly one in ten primary-school-age children remain out of school in 2015.

A threshold of at least 97 per cent is frequently used to determine whether universal enrolment has been attained. Based on this threshold, enrolment in primary education is now universal or nearly universal in Eastern Asia and Northern Africa. The target is close to being reached in all regions except sub-Saharan Africa.

Sub-Saharan Africa faces daunting challenges. These include rapid growth of the primary-school-age population (which has increased 86 per cent between 1990 and 2015), high levels of poverty, armed conflicts and other emergencies. However, sub-Saharan Africa has made the greatest progress in primary school enrolment among all developing regions. Its enrolment rate grew from 52 per cent in 1990 to 78 per cent in 2012. In absolute numbers the region's enrolment more than doubled over this period, from 62 million children to 149 million.

The number of out-of-school children has been cut almost in half since 2000

Number of out-of-school children of primary school age, selected regions, 1990–2015 (millions)



The global number of out-of-school children has fallen considerably since 1990, although the pace of improvement has been insufficient to achieve universal primary enrolment by 2015. Currently, 57 million children of primary school age are estimated to be out of school, down from 100 million in 2000. Of these, 33 million are in sub-Saharan Africa, and more than half (55 per cent) are girls.

According to 2012 estimates, 43 per cent of out-of-school children globally will never go to school. However, regional disparities are large. In Southern Asia, an estimated 57 per cent of out-of-school children will never go to school, while in sub-Saharan Africa the proportion is 50 per cent. Gender is also an important factor. Almost half of out-of-school girls (48 per cent) are unlikely to ever go to school, compared to 37 per cent of boys. On the other hand, boys are more likely to leave school early.

In countries affected by conflict, the proportion of out-of-school children increased from 30 per cent in 1999 to 36 per cent in 2012. This worrying trend is particularly strong in Northern Africa (where the share increased from 28 per cent to 49 per cent) and Southern Asia (from 21 per cent to 42 per cent). In many cases, these estimates do not capture relatively recent outbreaks

of conflict. For example, in Western Asia the ongoing conflict in the Syrian Arab Republic has had a devastating impact on children's education. Data from the Syrian Ministry of Education indicate that enrolment rates fell by 34 percentage points for grades 1 to 12 in the school year ending in 2013. Among Syrian refugee children of primary and lower secondary school age (6 to 14 years) in Lebanon, the enrolment rate is estimated to be around 12 per cent.

Large disparities remain in primary school enrolment, and the poorest and most disadvantaged children bear the heaviest burden

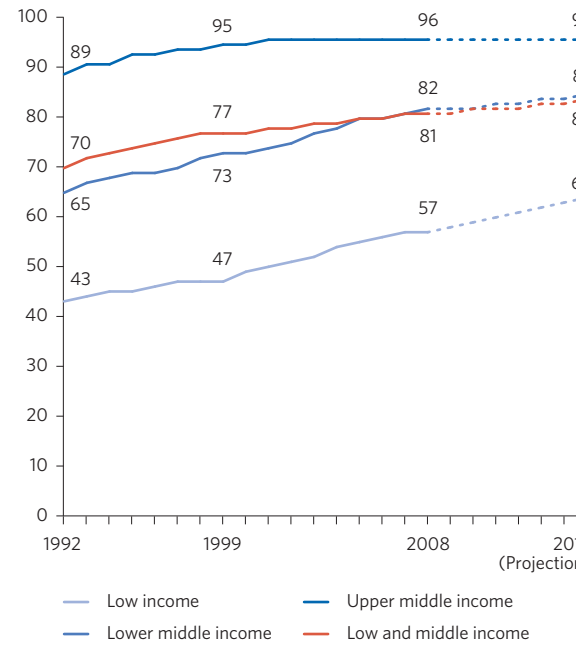
Household wealth remains an important determinant of a child's likelihood of attending school. For instance, 2008–2012 survey data from 63 developing countries show that children in the poorest households were four times as likely to be out of school as children in the richest households. More specifically, 21.9 per cent of primary-school-age children in the poorest quintile were out of school, compared to 5.5 per cent in the richest quintile.

The 2008–2012 survey data also show that disparities between urban and rural locations persist across countries. The average out-of-school rate in rural areas was twice as high (16 per cent) as the rate in urban areas (8 per cent). However, some countries have made significant progress in enrolling the most marginalized children. Recent studies indicate, for example, that only four in ten girls from poor, rural households in the Democratic Republic of the Congo were in school in 2001, but by 2013 nearly seven in ten were enrolled.

Disability is another major impediment to accessing education. In India, for instance, more than one third of children and adolescents aged 6 to 13 who live with disabilities are out of school. Yet the country has made remarkable efforts to make education more inclusive, such as through the Right to Education Act and allocation of funding for school infrastructure and teacher training.

More children are completing primary school in lower-income countries

Completion rate in primary education, low- and middle-income countries, 1992–2015 (percentage)



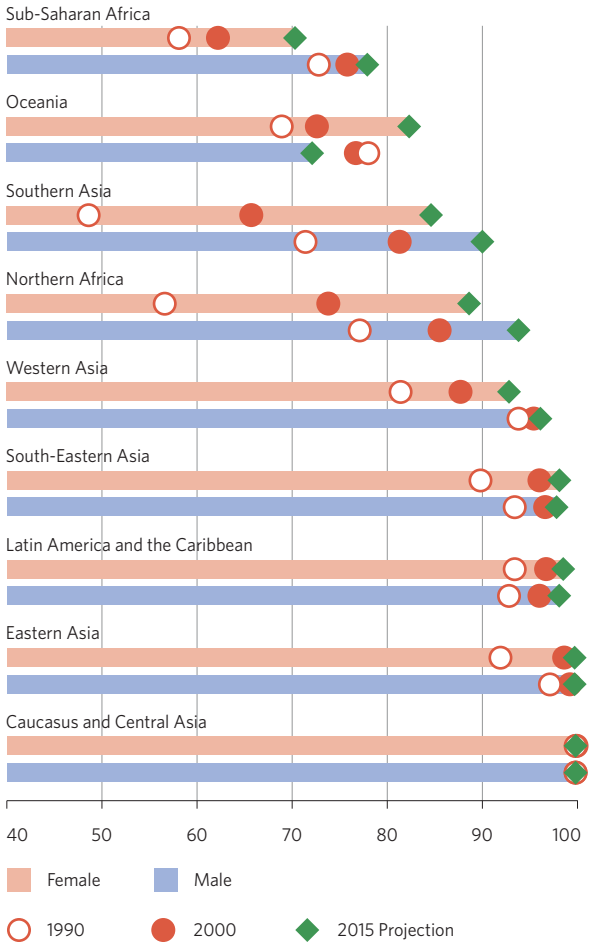
Note: The age group for which the completion rate is reported differs by country according to the official age of entry into the last grade of primary school, but it corresponds roughly to ages 14 to 16 (three to five years above the official primary-school-leaving age). The analysis is based on 72 countries representing 86 per cent of the population of low- and middle-income countries.

In low- and middle-income countries, survey data show that the proportion of adolescents aged about 14 to 16 years who had finished primary school increased from 70 per cent in the early 1990s to 81 per cent in 2008, and is projected to reach 84 per cent in 2015. However, this means that in 2015 one in every six adolescents in those countries—almost 100 million adolescents—are still not completing primary school.

Equally worrisome are wide disparities between poor and rich children in completing primary education. According to 2007–2013 survey data from 73 developing countries, adolescents from the poorest households were more than five times as likely not to complete primary school as children in the richest households. More specifically, 34.4 per cent of adolescents in the poorest quintile did not complete primary school, compared to 6.5 per cent in the richest quintile.

The gender gap in youth literacy has fallen since 1990, and a greater proportion of all youth can read and write

Literacy rate among youth aged 15 to 24 by sex and region, 1990, 2000 and 2015 (percentage)



Since the 1990s, global progress in youth and adult literacy has been slow but steady, and the gap between women and men has narrowed. The literacy rate among youth aged 15 to 24 increased globally from 83 per cent in 1990 to 89 per cent in 2010. This improvement was largely a result of increasing attendance in primary and secondary school among younger generations.

According to projections based on historical trends, 91 per cent of youth are expected to be able to read and write by the end of 2015. Youth literacy rates are estimated to be 93 per cent for young men and 90 per cent for young women. This still leaves an estimated 103 million illiterate youth in 2015, which is 22 million fewer than in 2010.

Northern Africa and Southern Asia have shown the greatest improvement in youth literacy, especially among young women. Over the past two decades, sub-Saharan Africa has also achieved a large increase in youth literacy. However, a smaller proportion of its young women and men are able to read and write than in any other region.

The unfinished work on education must rank high on the post-2015 development agenda

Despite enormous progress during the past 15 years, achieving universal primary education will require renewed attention in the post-2015 era, just as the global community seeks to extend the scope to universal secondary education. Drawing on lessons learned from the MDGs, interventions will have to be tailored to the needs of specific groups of children—particularly girls, children belonging to minorities and nomadic communities, children engaged in child labour and children living with disabilities, in conflict situations or in urban slums. Investing in the quality of education and ensuring a sustainable source of funding are also essential.

Stagnation in education progress has profound consequences for the children and adolescents who cannot go to school. As the world looks beyond 2015, it is crucial to reflect on and address the root causes of limited progress in youth literacy in some parts of the world. It is also necessary to explore new approaches to directly assess whether children have mastered the skills they are taught and whether they are being taught the skills they need in the twenty-first century.

Goal 3

Promote gender equality and empower women

Key facts

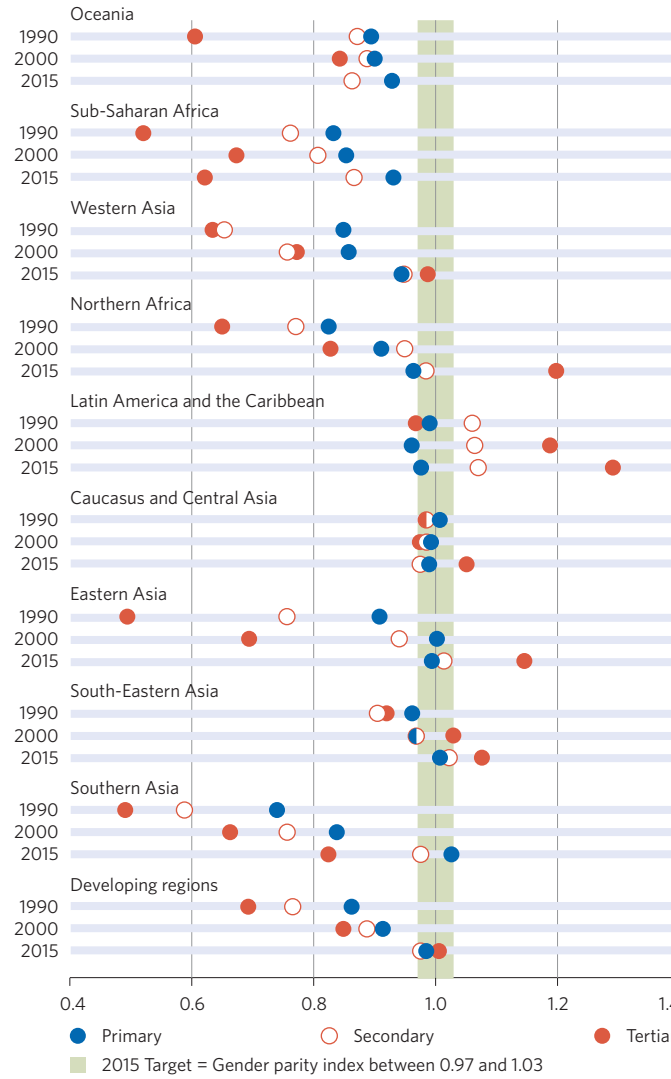
- About two thirds of countries in the developing regions have achieved gender parity in primary education.
- Globally, about three quarters of working-age men participate in the labour force, compared to half of working-age women.
- Today, women make up 41 per cent of paid workers outside of agriculture, an increase from 35 per cent in 1990.
- The average proportion of women in parliament has nearly doubled over the past 20 years, but still only one in five members are women.

TARGET 3.A

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

A majority of regions have reached gender parity in primary education, but disparities persist at higher levels

Gender parity index* for gross enrolment ratios in primary, secondary and tertiary education in developing regions, 1990, 2000 and 2015



* The gender parity index is defined as the ratio of the female gross enrolment ratio to the male gross enrolment ratio for each level of education.

Notes: Data for 2015 are projections. Data for 1990 for the Caucasus and Central Asia refer to 1993. Projections for 2015 for primary and tertiary education in Oceania are not available. For primary education, 2012 data are used.

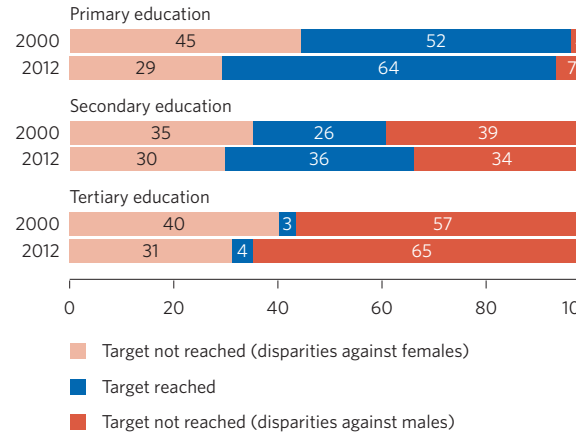
The education of women and girls has a positive multiplier effect on progress across all development areas. Driven by national and international efforts and the MDG campaign, many more girls are now in school compared with 15 years ago. Gender disparity has narrowed substantially at all levels of education since 2000. The developing regions as a whole have achieved the target to eliminate gender disparity at all levels of education, with a gender parity index of 0.98 in primary and secondary education and 1.01 in tertiary education in 2015 (the accepted measure of gender parity is between 0.97 and 1.03). However, significant differences remain across regions and countries, as disparities favouring either sex can cancel each other out when aggregated.

The greatest improvements have been made in primary education. Today, five of the nine developing regions have achieved parity: the Caucasus and Central Asia, Eastern Asia, Latin America and the Caribbean, South-Eastern Asia and Southern Asia. The most substantial progress has been made in Southern Asia, where the gender parity index has increased from 0.74—the lowest starting point of all regions in 1990—to 1.03 in 2015. The gap between girls and boys has also narrowed considerably in North Africa, sub-Saharan Africa and Western Asia. Overall, 64 per cent of countries in the developing regions reporting data by sex had achieved gender parity in primary education in 2012. More than half of the countries with gender disparity in primary education in 2012 (56 per cent) were in sub-Saharan Africa.

In secondary education, gender parity has been achieved in 2015 in the Caucasus and Central Asia, Eastern Asia, Northern Africa, South-Eastern Asia and Southern Asia. In Oceania, sub-Saharan Africa and Western Asia, girls remain at a disadvantage, while in Latin America and the Caribbean, boys are at a disadvantage. Gender parity in secondary education had been achieved in 36 per cent of countries with available data in the developing regions in 2012.

The largest gender disparities in enrolment ratios are found in tertiary education, with only one developing region, Western Asia, achieving the target. The most extreme disparities are those at the expense of women in sub-Saharan Africa and Southern Asia and at the expense of men in Eastern Asia, Northern Africa and Latin America and the Caribbean. Only 4 per cent of countries with available data in the developing regions had achieved the target for tertiary education in 2012.

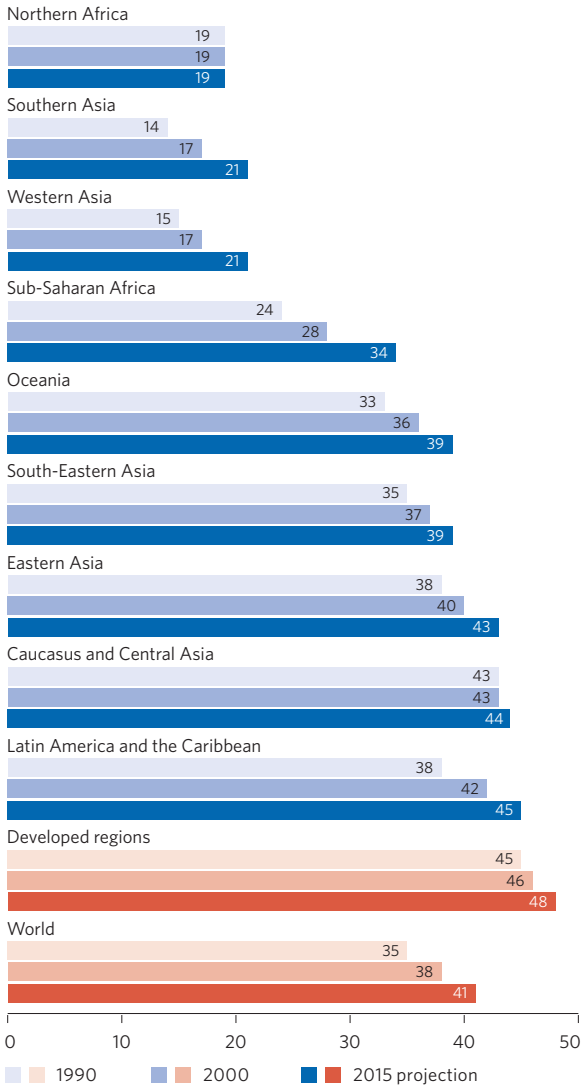
Distribution of countries* in the developing regions by status of gender parity target achievement in primary, secondary and tertiary education, 2000 and 2012 (percentage)



* Based on available data for 164 countries or territories for primary education, 148 countries or territories for secondary education, and 122 countries or territories for tertiary education.

Women's access to paid employment continues to expand, but remains low in some regions

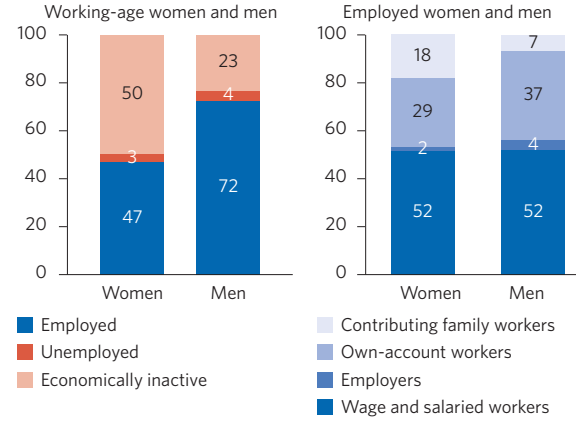
Share of women in wage employment in the non-agricultural sector, 1990, 2000 and 2015 (percentage)



Over the last 25 years, women's share of wage employment has continued to grow, though at a slow pace. The proportion of women in paid employment outside the agriculture sector has increased from 35 per cent in 1990 to 41 per cent in 2015. Over the period 1991–2015, the proportion of women in vulnerable employment (being a contributing family worker or an own-account worker) as a share of total female employment has declined 13 percentage points, from 59 per cent to 46 per cent. In contrast, vulnerable employment among men has fallen by 9 percentage points, from 53 per cent to 44 per cent.

Women remain at a disadvantage in the labour market

Distribution of working-age women and men (aged 15 and above) by labour force participation and employed women and men by status in employment, 2015 (percentage)



Note: Data for 2015 are projections.
Percentages in charts may not always add to 100 because of rounding.

Despite notable gains by women, significant gaps remain between women and men in the labour market. Women are still less likely to participate in the labour force than men. As of 2015, about 50 per cent of all working-age women (aged 15 and above) are in the labour force, compared to 77 per cent of men.

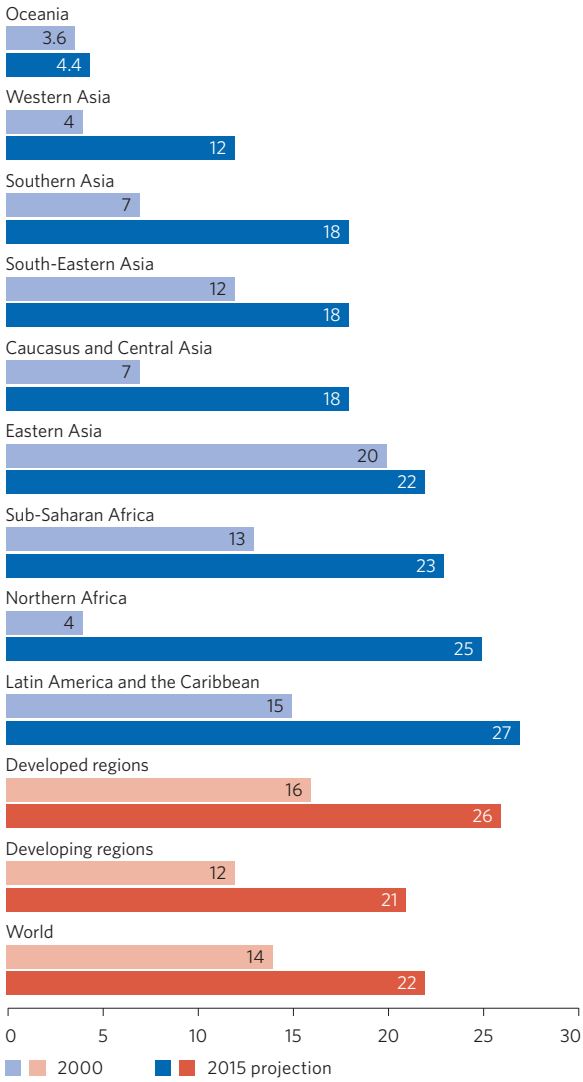
Despite their progress in education, women face a more difficult transition to paid work and receive lower earnings than men. Globally women earn 24 per cent less than men, with the largest disparities found in Southern Asia (33 per cent) and sub-Saharan Africa (30 per cent). Of 92 countries with data on unemployment rates by level of education for 2012–2013, in 78 countries women with advanced education have higher rates of unemployment than men with similar levels of education.

Female participation in the labour force remains especially low in Northern Africa, Southern Asia and Western Asia, where women's participation rate is one quarter to one third of men's rate. Barriers to women's employment include household responsibilities and cultural constraints. These factors contribute to limiting women's earnings.

Women are more likely than men to work as contributing family workers, who have little or no financial security or social benefits. In 2015, the proportion of employed women working as contributing family workers is 18 per cent, compared to 7 per cent of employed men. Women are less likely to work as own-account workers.

Women's political representation has increased, but parity remains a distant goal

Proportion of seats held by women in single or lower houses of national parliament, 2000 and 2015 (percentage)



Since 1995, when the Beijing Platform for Action on women's empowerment was adopted, the global average proportion of women in parliament has nearly doubled, growing from 11 per cent in 1995 to 22 per cent in January 2015. Women in parliament have gained ground in nearly 90 per cent of the 174 countries for which data are available for 1995–2015. The number of single or lower houses of parliament where women occupy more than 30 per cent of the seats has increased from 5 to 42, while those with more than 40 per cent have jumped from 1 to 13. In January 2015, there were four countries with more than 50 per cent of parliamentary seats held by women, and in Rwanda, women hold more than 60 per cent of such posts.

These successes are also now shared more evenly across regions. In 1995, Europe dominated the top 10 spots in world rankings of women in parliament. As of January 2015, 4 of the top 10 countries are in sub-Saharan Africa, while the Americas and Europe each have 3 countries in the top 10. The biggest gains in women's representation during the last 20 years have been made in Rwanda, with an increase of 60 percentage points; Andorra, 46 percentage points; and Bolivia, 42 percentage points. The number of male-only parliaments has also dropped, from 10 to 5.

Electoral quotas in more than 120 countries have underpinned this success. However, a significant slowdown in progress since 2014 could be an indicator that the 'fast-track' impact of gender quotas has reached its peak. This calls for additional measures to advance women's political empowerment.

Progress in leadership positions has been slow. Just 16 per cent of parliamentary leaders (speakers of parliament) are women, while women represent 18 per cent of all government ministers in the world, an increase of only 4 percentage points since 2005.

The fundamental causes of inequality between women and men must be rectified

While much progress has been made towards women's and girls' equality in education, employment and political representation over the last two decades, many gaps remain, particularly in areas that were not addressed in the MDGs. To achieve universal realization of gender equality and empowerment of women, it is critical to address the key areas of gender inequality, including gender-based discrimination in law and in practice; violence against women and girls; women's and men's unequal opportunities in the labour market; the unequal division of unpaid care and domestic work; women's limited control over assets and property; and women's unequal participation in private and public decision-making. Gender perspectives should be integrated fully into all goals of the post-2015 development agenda.

Goal 4

Reduce child mortality

Key facts

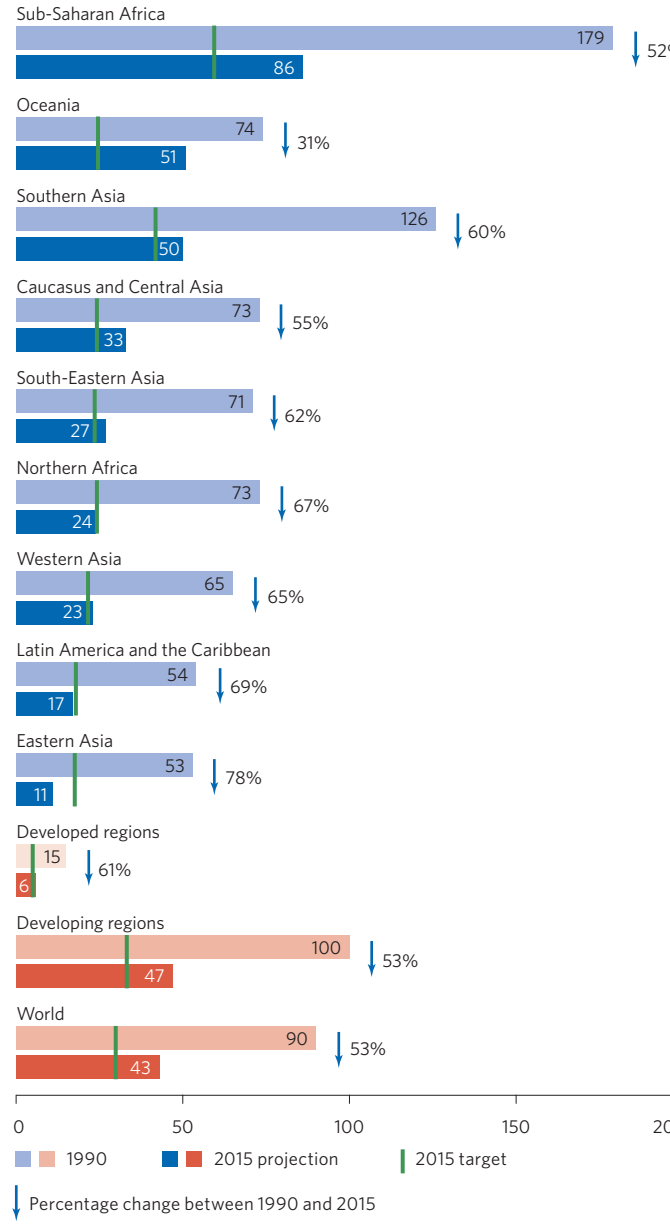
- The global under-five mortality rate has declined by more than half, dropping from 90 to 43 deaths per 1,000 live births between 1990 and 2015.
- The rate of reduction in under-five mortality has more than tripled globally since the early 1990s.
- Measles vaccination helped prevent nearly 15.6 million deaths between 2000 and 2013.
- About 84 per cent of children worldwide received at least one dose of measles-containing vaccine in 2013.
- Every day in 2015, 16,000 children under five continue to die, mostly from preventable causes. Child survival must remain the focus of the post-2015 development agenda.

TARGET 4.A

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

Substantial progress in reducing child mortality has been made, but more children can be saved from death due to preventable causes

Under-five mortality rate, 1990 and 2015 (deaths per 1,000 live births)



Note: Percentage change calculations are based on unrounded numbers.

The dramatic decline in preventable child deaths over the past quarter of a century is one of the most significant achievements in human history. According to preliminary estimates, the global under-five mortality rate has declined by more than half, dropping from 90 to 43 deaths per 1,000 live births between 1990 and 2015. This translates into almost 6 million deaths of children under five in 2015, a decline from 12.7 million in 1990. The under-five mortality rate has fallen by 50 per cent or more in every region except Oceania.

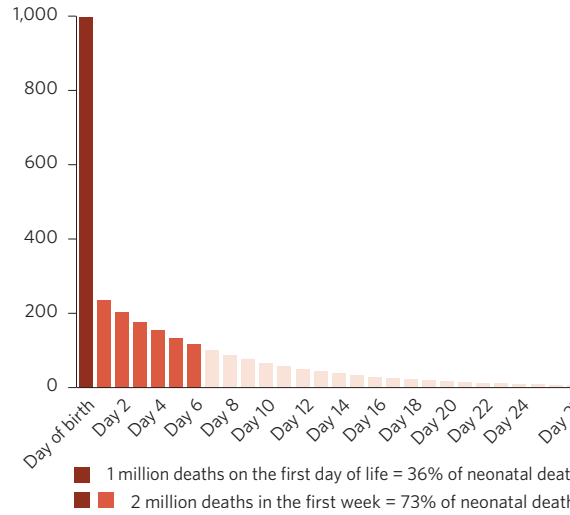
Despite the impressive improvements in most regions, current trends are not sufficient to meet the MDG target. At today's rate of progress, it will take about 10 more years to reach the global target. The global advance in child survival continues to elude many of the world's youngest children and children in the most vulnerable situations. About 16,000 children under five continue to die every day in 2015. Most of them will perish from preventable causes, such as pneumonia, diarrhoea and malaria.

Though sub-Saharan Africa has the world's highest child mortality rate, the absolute decline in child mortality has been the largest over the past two decades. The under-five mortality rate has fallen from 179 deaths per 1,000 live births in 1990 to 86 in 2015. Yet the region still faces an urgent need to accelerate progress. Not only does sub-Saharan Africa carry about half of the burden of the world's under-five deaths—3 million in 2015—but it is also the only region where both the number of live births and the under-five population are expected to rise substantially over the next decades. This means that the number of under-five deaths will increase unless progress in reducing the under-five mortality rate is enough to outpace population growth.

Southern Asia also continues to have both a high rate of under-five mortality, at 50 deaths per 1,000 live births in 2015, and a large number of total deaths, at 1.8 million.

Focusing on newborns is critical to further accelerating progress in child survival

Number of deaths by day in the first 28 days of life, 2013 (thousands)



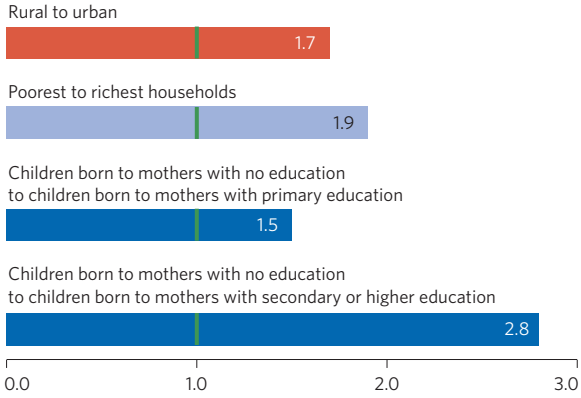
The first day, week and month of life are the most critical for the survival of children. Of the almost 6 million children who die before their fifth birthday in 2015, about 1 million will take their first and final breath on the day they are born. An additional 1 million will die in the first week, and around 2.8 million will die during their first 28 days of life (the neonatal period).

Between 1990 and 2015, the worldwide neonatal mortality rate has fallen from 33 deaths to 19 deaths per 1,000 live births. As the decline in neonatal mortality has been slower than the decline in mortality for children aged 1–59 months, neonatal deaths now represent a larger share of total under-five deaths. Every region of the world is experiencing an increase in the proportion of under-five deaths that occur in the neonatal period.

The majority of neonatal deaths worldwide are caused by preterm birth complications (35 per cent), complications during labour and delivery (24 per cent) and sepsis (15 per cent). In sub-Saharan Africa and Southern Asia many deaths are also due to preventable infectious diseases. Many neonatal deaths could be avoided with simple, cost-effective and high-impact interventions that address the needs of women and newborns across the continuum of care, with an emphasis on care around the time of birth. However, analysis shows that too many newborns and mothers miss out on these key interventions.

Further improvements in child survival require concerted efforts to reduce socioeconomic disparities

Ratio of under-five mortality rate for children by residence, wealth quintile and mother's education, 2005–2013



Note: Data are based on the MICS and DHS survey that took place between 2005 and July 2013. Data from most recent survey in that period are used for countries with multiple surveys. Data by wealth quintile are based on 55 surveys, data on education are based on 59 surveys, data on residence are based on 60 surveys.

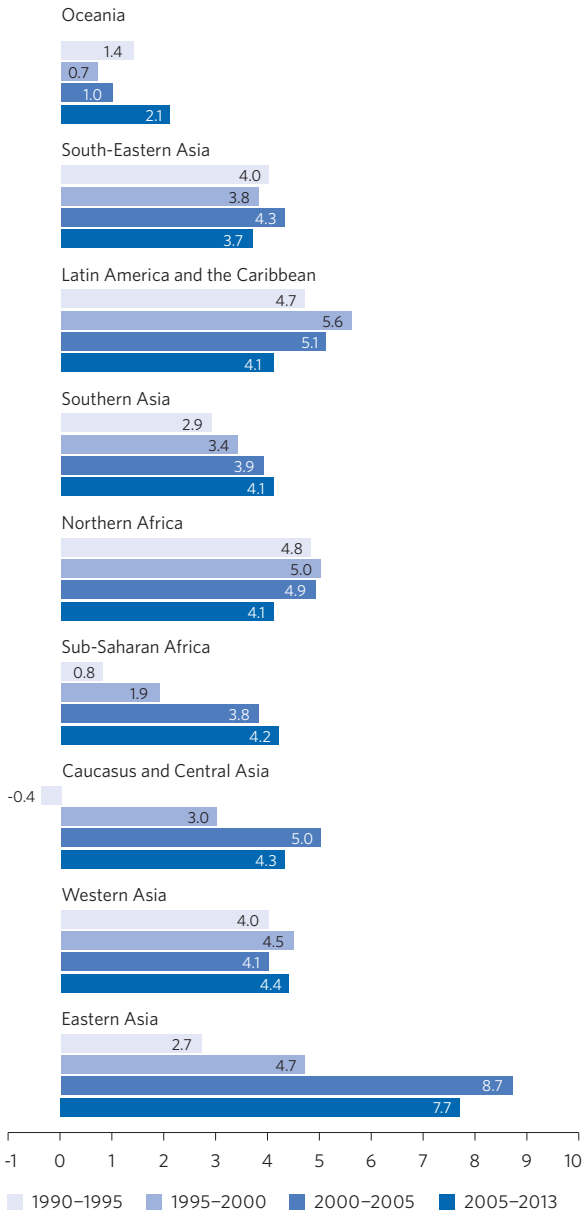
The dramatic improvement in child survival is welcome news, but not every family is sharing equally in this success. Household survey data suggest that children from poorer households remain disproportionately vulnerable compared with the wealthiest households. On average, under-five mortality rates are almost twice as high for children in the poorest households as for children in the richest.

Mortality is also more likely to strike children in rural areas. These children are about 1.7 times more likely to die before their fifth birthday as those in urban areas. Mother's education remains the most powerful determinant of inequality in survival. Children of mothers with secondary or higher education are almost three times as likely to survive as children of mothers with no education.

Under-five mortality has been declining faster among the poorest households in the most recent decade, a sign of improving equity. As the pace of progress accelerates among these households, the gap between the richest and poorest households is narrowing in most regions. The disparities in under-five mortality by mother's education and residence are also narrowing in some countries. Sustaining this progress calls for strategies that target the most vulnerable children from the poorest households and from rural areas, and that support women's education and empowerment. Also needed are continued efforts to monitor and report the inequities that are often concealed by global or national averages.

Child mortality rates are falling faster than ever

Annual rate of reduction in the under-five mortality rate in developing regions, 1990–2013 (percentage)

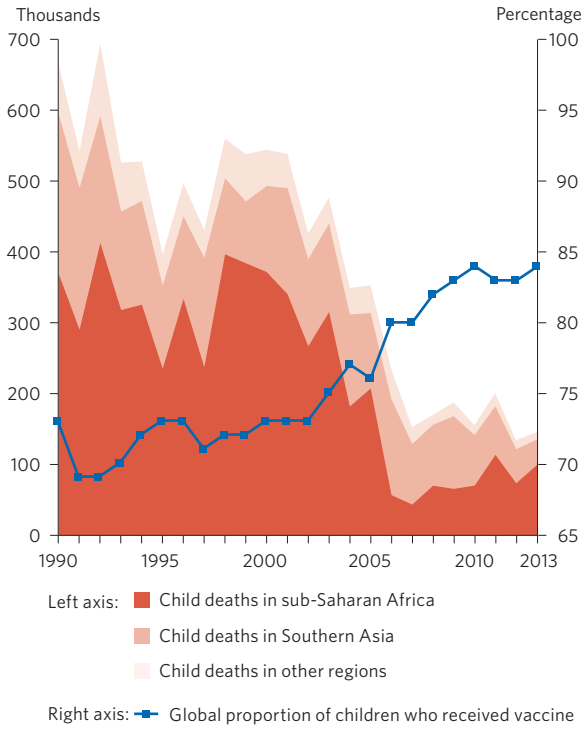


Under-five mortality is declining faster than at any other time during the past two decades. The global annual rate of reduction has more than tripled since the early 1990s. In sub-Saharan Africa, despite the relatively high rate of under-five mortality, the rate of decline was over five times faster during 2005–2013 than it was during 1990–1995, accelerating from 0.8 per cent per year to 4.2 per cent per year.

The annual rate of reduction in under-five mortality has accelerated since 1995 in countries of all income levels except in high-income countries. Although there is a link between a country's level of income and its child mortality, the strong reductions in under-five mortality rates in a number of low-income countries—notably, Bangladesh, Cambodia, Eritrea, Ethiopia, Liberia, Madagascar, Malawi, Mozambique, Nepal, Niger, Rwanda, Uganda and United Republic of Tanzania—prove that low income need not be an impediment to saving children's lives.

Measles immunization has saved millions of children's lives, but progress towards eliminating measles has stalled

Estimated child deaths due to measles (thousands) and proportion of children in the appropriate age group who received at least one dose of measles-containing vaccine (percentage), 1990–2013



Measles deaths have declined rapidly since 2000, from 544,200 deaths to 145,700 deaths in 2013, mostly among children under five years of age. Compared with estimated mortality in the absence of a measles vaccination programme, nearly 15.6 million deaths were averted by measles vaccination between 2000 and 2013. Measles deaths in sub-Saharan Africa (96,000) and Southern Asia (39,800) accounted for 93 per cent of the estimated measles deaths worldwide during 2013.

Also, between 2000 and 2013, the number of annual reported measles cases globally declined by 67 per cent, from more than 853,000 in 2000 to under 279,000 in 2013. However, the number of measles cases in 2013 increased from the 2012 level of 227,700. Unfortunately, continued outbreaks—due to weak routine immunization systems and delayed implementation of accelerated disease control—have stalled momentum towards achievement of regional and global targets for measles control and elimination.

Measles can be prevented with two doses of a safe, effective and inexpensive vaccine. Between 2000 and 2009, global coverage with the first dose of measles-containing vaccine (MCV1) increased from 73 per cent to 83 per cent, but it stagnated at 83–84 per cent from 2010 to 2013. The most impressive progress was made in sub-Saharan Africa, where coverage increased from 53 per cent in 2000 to 74 per cent in 2013. Between 2000 and 2013, the number of countries providing a second dose of the vaccine (MCV2) increased from 96 to 148, and global coverage of MCV2 increased from 15 to 53 per cent.

Impressive as these gains are, progress has stalled since 2010 and remains fragile. An estimated 21.6 million infants did not receive MCV1 in 2013. Many of them are from the poorest and most marginalized communities, residing in especially hard-to-reach areas. Ramping up progress will require countries and the international community to continue to campaign for measles elimination. Achieving equitable increases in immunization coverage will also require substantial and sustained investments in strengthening health systems.

Child survival must remain at the heart of the post-2015 global development agenda

Reducing under-five mortality requires political will, sound strategies and adequate resources. The MDGs have led to dramatic and unprecedented progress in reducing child deaths. Effective and affordable treatments, improved service delivery and political commitment have all contributed. Yet every minute around the world, 11 children die before celebrating their fifth birthday, mostly from preventable causes. More work is needed to improve child survival rates.

Achievement of Goal 4 by a significant number of countries, even very poor countries, shows that it can be done. With millions of women and children still at risk of dying of preventable causes, maternal, newborn and child survival must remain at the heart of the post-2015 global development agenda.

Goal 5

Improve maternal health

Key facts

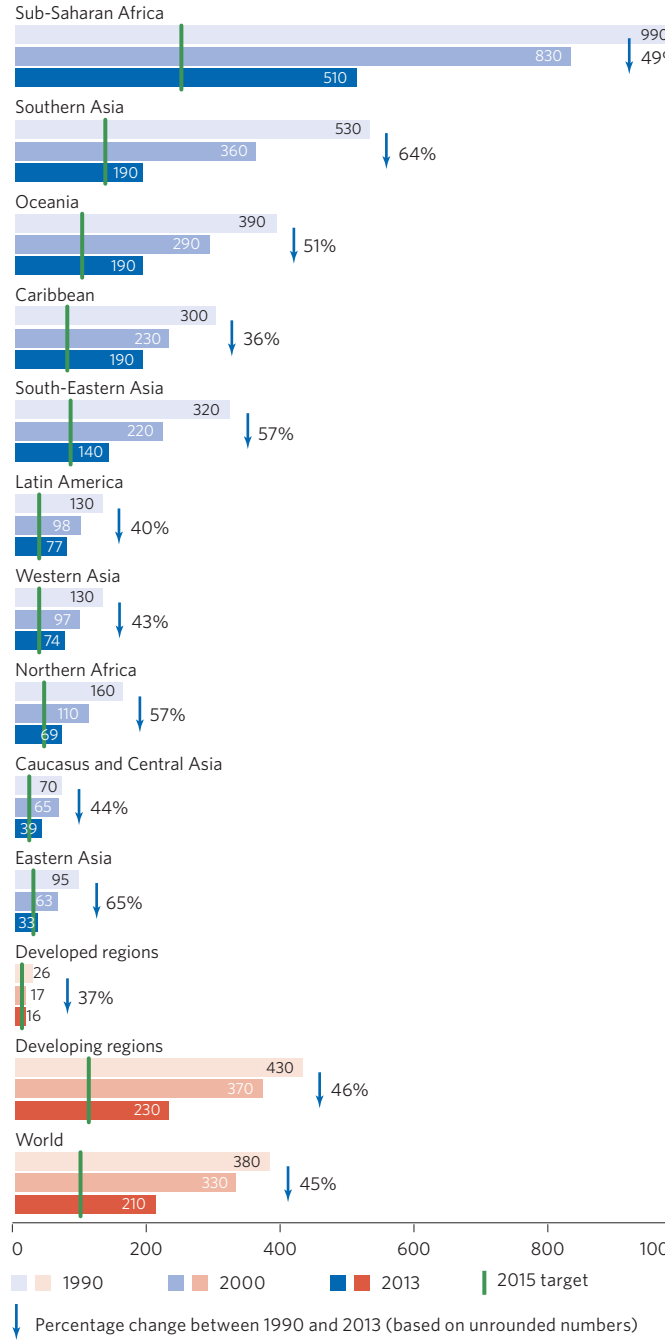
- Since 1990, the maternal mortality ratio has been cut nearly in half, and most of the reduction has occurred since 2000.
- More than 71 per cent of births were assisted by skilled health personnel globally in 2014, an increase from 59 per cent in 1990.
- In the developing regions, only 56 per cent of births in rural areas are attended by skilled health personnel, compared with 87 per cent in urban areas.
- Only half of pregnant women in the developing regions receive the recommended minimum of four antenatal care visits.
- Just 51 per cent of countries have data on maternal cause of death.

TARGET 5.A

Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio

Southern Asia and Eastern Asia have made the greatest progress in reducing maternal mortality

Maternal mortality ratio, 1990, 2000 and 2013 (maternal deaths per 100,000 live births, women aged 15–49)



Maternal survival has significantly improved since the adoption of the MDGs. The maternal mortality ratio dropped by 45 per cent worldwide between 1990 and 2013, from 380 maternal deaths per 100,000 live births to 210. Many developing regions have made steady progress in improving maternal health, including the regions with the highest maternal mortality ratios. For example, in Southern Asia the maternal mortality ratio declined by 64 per cent between 1990 and 2013, and in sub-Saharan Africa it fell by 49 per cent.

Despite this progress, every day hundreds of women die during pregnancy or from childbirth-related complications. In 2013, most of these deaths were in the developing regions, where the maternal mortality ratio is about 14 times higher than in the developed regions. Globally, there were an estimated 289,000 maternal deaths in 2013, equivalent to about 800 women dying each day. Maternal deaths are concentrated in sub-Saharan Africa and Southern Asia, which together accounted for 86 per cent of such deaths globally in 2013.

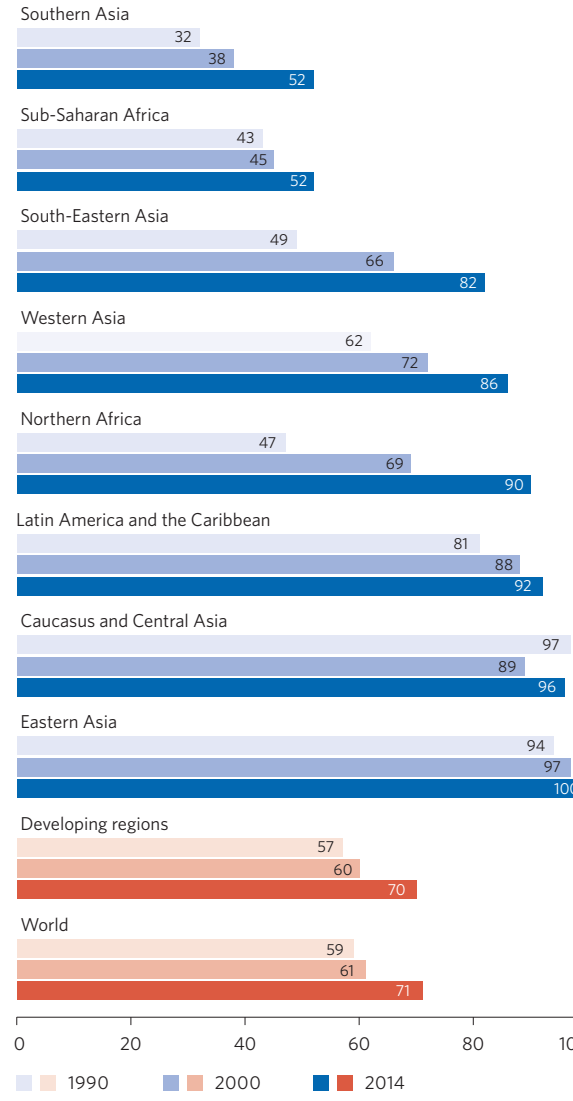
Most of these deaths are preventable. Based on data from 2003–2009, haemorrhage was the cause of the greatest number of maternal deaths. It accounted for more than 27 per cent of maternal deaths in the developing regions and approximately 16 per cent in the developed regions. Other major complications include infections, high blood pressure during pregnancy, complications from delivery and unsafe abortion. Proven health-care interventions can prevent or manage these complications, including antenatal care in pregnancy, skilled care during childbirth and care and support in the weeks after childbirth.

One in four babies worldwide are delivered without skilled care

A key strategy for reducing maternal morbidity and mortality is ensuring that every birth occurs with the assistance of skilled health personnel, meaning a medical doctor, nurse or midwife. Progress in raising the proportion of births delivered with skilled attendance has been modest over the course of the MDG time frame, reflecting lack of universal access to care.

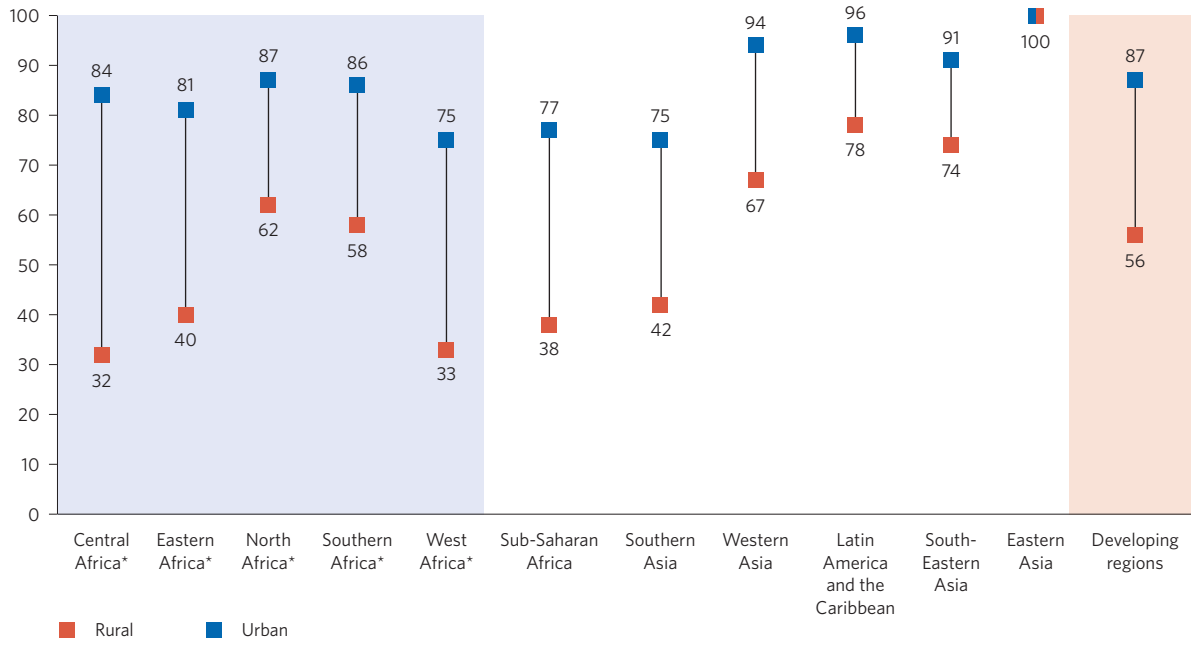
Globally, the proportion of deliveries attended by skilled health personnel increased from 59 per cent around 1990 to 71 per cent around 2014. Yet this leaves more than one in four babies and their mothers without access to crucial medical care during childbirth. Wide disparities are found among regions in the coverage of skilled attendance at birth. Coverage ranges from universal in Eastern Asia and nearly universal (96 per cent) in the Caucasus and Central Asia to a low of about 52 per cent in sub-Saharan Africa and Southern Asia. These two regions have the highest rates of maternal and newborn mortality in the world.

Proportion of deliveries attended by skilled health personnel, 1990, 2000 and 2014 (percentage)



Inequalities in access to maternal health care persist across most regions

Proportion of deliveries attended by skilled health personnel in rural and urban areas, 2010–2014 (percentage)



*The composition of the subregions of Africa is shown on page 71.

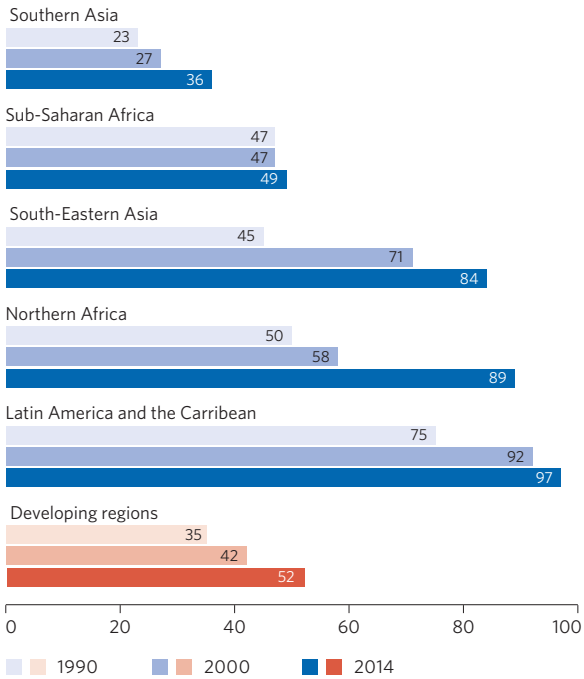
Profound inequalities in access to and use of reproductive health services persist within and across regions. In the developing regions, there is a 31 percentage-point gap between urban and rural areas in the coverage of births attended by skilled health personnel, but even this large disparity masks the range of inequalities among regions. The largest difference between rural and urban coverage is found in Central Africa, at 52 percentage points. In contrast, Eastern Asia has no gap—100 per cent of births are attended by skilled health personnel in both urban and rural settings.

TARGET 5.B

Achieve, by 2015, universal access to reproductive health

After years of slow progress, only half of pregnant women receive the recommended amount of antenatal care

Proportion of women aged 15–49 attended four or more times by any provider during pregnancy, 1990, 2000 and 2014 (percentage)

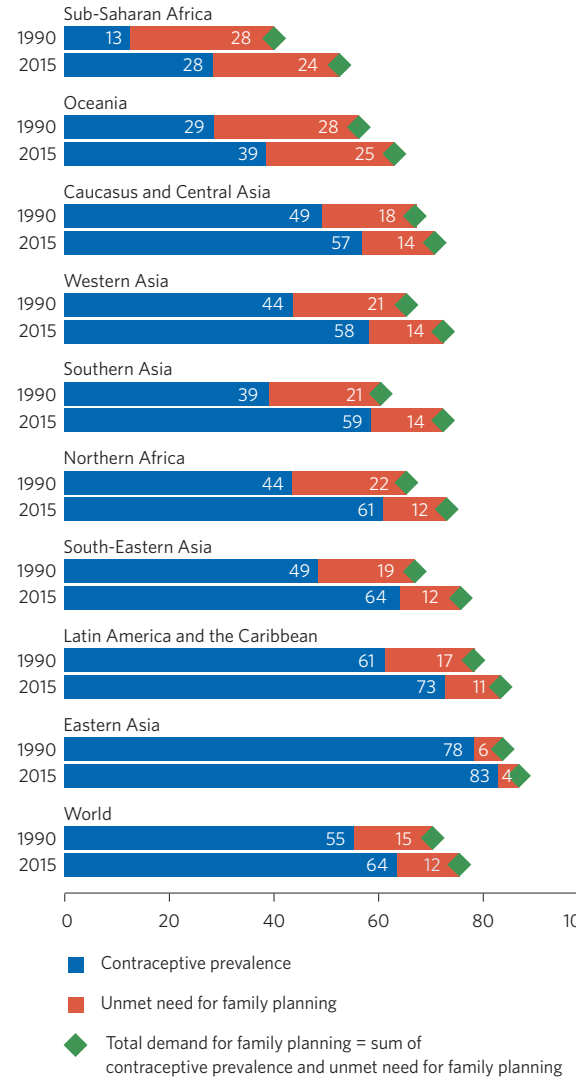


The World Health Organization recommends a minimum of four antenatal care visits during pregnancy to ensure the well-being of mothers and newborns. At these visits, women should receive at least a basic care package, including nutritional advice. They should also be alerted to warning signs indicating possible problems during their pregnancy and get support in planning a safe delivery. As of 2014, on average only 52 per cent of pregnant women in the developing regions received the recommended number of antenatal care visits during pregnancy.

Progress has been slow over the past 25 years, with an average increase in coverage of just 17 percentage points since around 1990. In Southern Asia, just 36 per cent of pregnant women received four or more antenatal visits around 2014. In sub-Saharan Africa, coverage levels have stagnated over the past two decades, with a small increase from 47 to 49 per cent of pregnant women receiving the recommended care.

Contraceptive use has risen, but the unmet need is still high in some regions

Proportion of women aged 15–49 worldwide, married or in union, who have an unmet need for family planning or who are using any method of contraception, 1990 and 2015 (percentage)



Use of contraception contributes to reducing the number of unintended pregnancies, unsafe abortions and maternal deaths. Worldwide the proportion of women aged 15 to 49, married or in a union, who were using any method of contraception has increased from 55 per cent in 1990 to 64 per cent in 2015. In sub-Saharan Africa, this proportion more than doubled between 1990 and 2015, from 13 per cent to 28 per cent. In Southern Asia, the proportion increased from 39 per cent to 59 per cent during the same period.

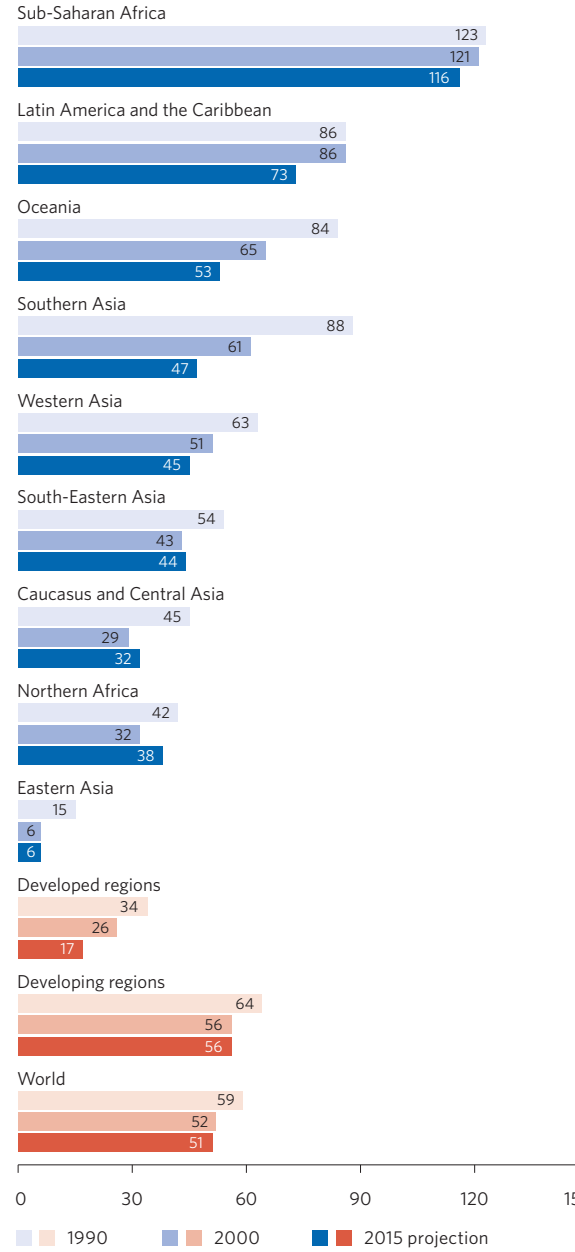
Nine in ten contraceptive users were using effective methods, including female and male sterilization, oral hormonal pills, intrauterine devices, condoms, injectables or an implant. Yet even in 2015, 12 per cent of married or in-union women of reproductive age worldwide want to delay or avoid pregnancy but are not using any method of contraception. Women who are sexually active but not married or in a union are not included in this indicator, but they also need access to pregnancy prevention information and services.

Sub-Saharan Africa and Latin America and the Caribbean have made slow progress in reducing adolescent childbearing

Adolescent childbearing can have harmful consequences for the health of both adolescent girls and the children they bear. Early childbearing also reflects broader forms of social and economic marginalization of girls. Intensified efforts are urgently needed to delay childbearing and prevent unintended pregnancies among this vulnerable age group. One part of the solution is increasing their opportunities to go to school and eventually engage in paid employment. These efforts will not only improve maternal and child health, but will contribute to reduced poverty, greater gender equality and the empowerment of women.

Worldwide, the birth rate among adolescent girls aged 15 to 19 has declined from 59 births per 1,000 girls in 1990 to 51 births in 2015. This global trend masks wide variations among regions and countries in the level of adolescent childbearing and the speed of its decline over time. In all regions, the adolescent birth rate fell between 1990 and 2015, with the most dramatic progress in Eastern Asia, Oceania and Southern Asia. Adolescent childbearing remains high in sub-Saharan Africa, at 116 births per 1,000 adolescent girls in 2015. This region has made the least progress since 1990, in both relative terms and absolute numbers.

Number of births to women aged 15–19, 1990, 2000 and 2015 (per 1,000 women)



Lack of basic data on births, deaths and health hampers effective policymaking

Proportion of countries with data on maternal cause of death, 2003–2009 (percentage)

The MDGs helped spur improvements in the availability and accessibility of basic data on births, deaths, cause of death and health service coverage. Yet inequalities in data availability on maternal health hamper efforts to guide establishment of priorities on national, regional and global health. Globally, only 51 per cent of countries have some data on maternal causes of death. In the developed regions these data are primarily from civil registration, while in the developing regions data primarily come from other sources. The availability of data varies widely by region. More than 90 per cent of countries in Latin America have nationally representative data on maternal cause of death compared to less than 20 per cent of sub-Saharan African countries.

The disparity among countries in the production of maternal cause-of-death statistics extends to data on all causes of death for all people. While high-income countries have been routinely generating such information for many years, the majority of low- and middle-income countries continue to struggle to produce high-quality statistics on cause of death.

Improving maternal health is part of the unfinished agenda for the post-2015 period

Goal 5 brought a concentrated focus on efforts to reduce maternal deaths and ensure universal access to reproductive health. Significant progress has been made, but it fell far short of the global goal and targets. This leaves an unfinished agenda to ensure that all people receive comprehensive sexual and reproductive health services. In-depth analyses reveal insufficient and greatly uneven progress.

Averages at the global, regional and even country level mask what can be profound health disparities among subgroups that are vulnerable, because of their level of education, place of residence, economic status or age. Large inequities remain in maternal health, along with gaps in access to and use of sexual and reproductive health services that must be consistently addressed and monitored. In addition, country capacity needs to be strengthened to help reduce inequalities in both the availability and the quality of health-related data, as well as registration of births and deaths. This information is crucial for establishing informed policy priorities, targeting resources more efficiently and measuring improvements in maternal health and universal access to sexual and reproductive health care.

Goal 6

Combat HIV/AIDS, malaria and other diseases

Key facts

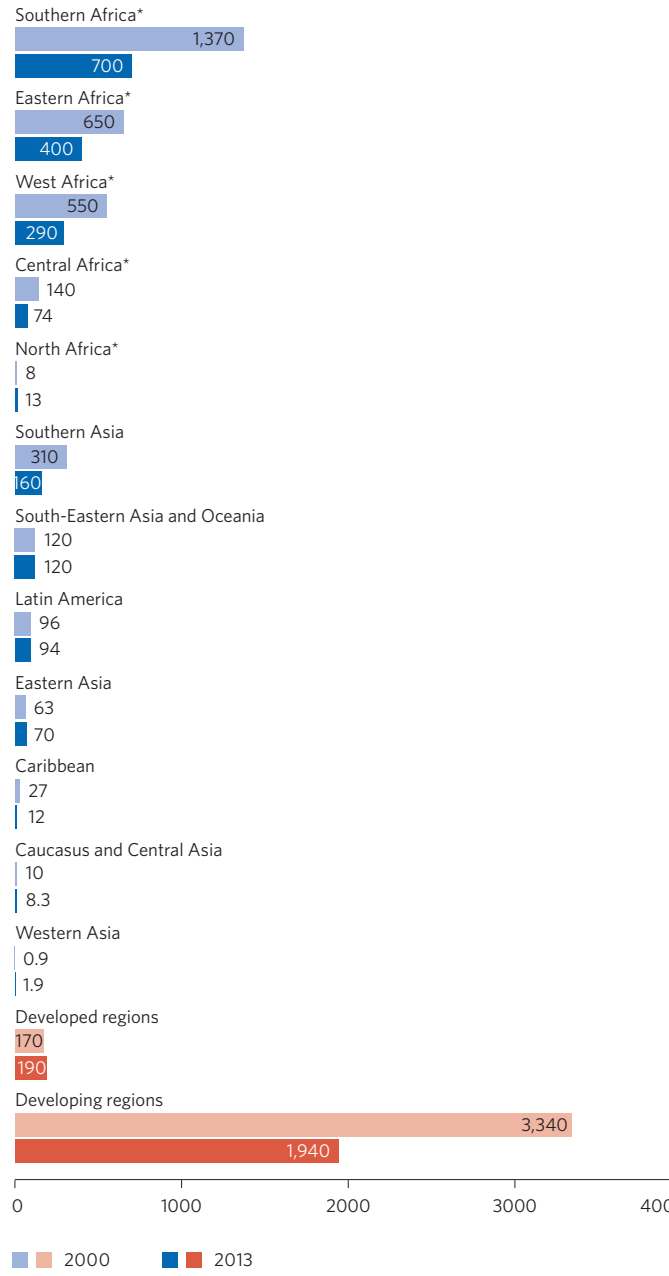
- New HIV infections fell by approximately 40 per cent between 2000 and 2013, from an estimated 3.5 million cases to 2.1 million.
- By June 2014, 13.6 million people living with HIV were receiving antiretroviral therapy globally, an increase from just 800,000 in 2003.
- In sub-Saharan Africa still less than 40 per cent of youth aged 15 to 24 years had comprehensive correct knowledge of HIV in 2014.
- Thanks to the expansion of anti-malaria interventions, over 6.2 million malaria deaths have been averted between 2000 and 2015, primarily of children under five years of age in sub-Saharan Africa.
- Tuberculosis prevention, diagnosis and treatment saved an estimated 37 million lives from 2000 to 2013.

TARGET 6.A

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

The number of people newly infected with HIV continues to decline in many regions of the world

Estimated number of new HIV infections, 2000 and 2013 (thousands)



* The composition of the subregions of Africa is shown on page 71.

Globally, new HIV (human immunodeficiency virus) infections declined by about 40 per cent between 2000 and 2013, falling from an estimated 3.5 million new infections to 2.1 million. Among countries with sufficient data, 10 countries had a decline of more than 75 per cent in new HIV infections between 2000 and 2013, and another 27 countries had a decline of more than 50 per cent.

More than 75 per cent of the new infections in 2013 occurred in 15 countries. Sub-Saharan Africa remains the region most severely affected by the HIV epidemic, with 1.5 million new infections in 2013. Of these, almost half occurred in only three countries: Nigeria, South Africa and Uganda. However, it is encouraging that South Africa, the country with the largest number of people living with HIV, recorded the largest decline in the absolute number of new infections, with 98,000 fewer new infections in 2013 than in 2010. In addition, the number of new infections among young people aged 15 to 24 in the region has declined by 45 per cent between 2000 and 2013.

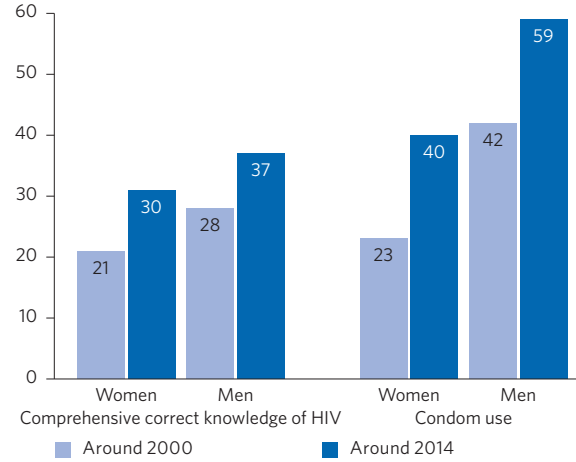
New HIV infections fell most rapidly in the Caribbean—a decline of 56 per cent—followed by Southern Asia and Southern Africa, both with a decrease of 49 per cent. In contrast, Latin America and South-Eastern Asia showed either a slow decline or stagnation in the number of new infections. In Eastern Asia, North Africa and Western Asia estimates suggest an increase.

AIDS-related deaths also showed a downward trend in 2013, with an estimated 1.5 million people dying of AIDS-related illnesses. This represents a 35 per cent decline since the peak of 2.4 million deaths, recorded in 2005. In just three years, from 2010 to 2013, deaths from AIDS-related illnesses fell by 19 per cent. AIDS-related deaths, however, have not decreased among adolescents aged 10 to 19. This could be due to lack of access to testing and treatment for this age group. AIDS remains the number one killer of adolescents in sub-Saharan Africa.

Globally, an estimated 35 million people were still living with HIV in 2013. This number is rising as more people live longer due to increased use of antiretroviral therapy (ART) and as the number of new HIV infections remains high. Worldwide, an estimated 0.8 per cent of adults aged 15 to 49 were living with HIV in 2013, although the burden of the epidemic continues to vary considerably across regions and countries.

Knowledge of HIV and HIV prevention remains low among young people

Proportion of women and men aged 15–24 in sub-Saharan Africa with comprehensive correct knowledge of HIV transmission and reporting condom use at last higher-risk sex,* around 2000 and 2014 (percentage)



* Higher-risk sex refers to sex with a non-marital, non-cohabiting partner.

Note: The values in the chart represent the regional aggregate for those sub-Saharan African countries that have survey data in both periods—around 2000 and around 2014. 'Around 2000' data refer to a survey conducted during 1996–2006. 'Around 2014' data refer to a survey conducted during 2007–2014.

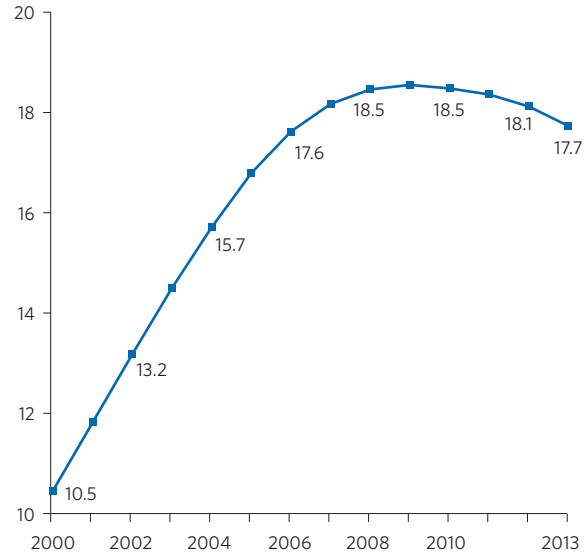
Since 2000, there has been moderate progress in HIV prevention efforts targeting young people aged 15 to 24. However, risky sexual behaviour and insufficient knowledge about HIV remain at high levels among youth in many countries.

In sub-Saharan African countries with available data, only 30 per cent of young women and 37 per cent of young men had comprehensive correct knowledge of HIV in 2014. This represents an increase of less than 10 percentage points since 2000 for both groups. Data indicate modest progress between 2000 and 2014 in condom use with higher-risk sex among the same populations. The 19 percentage-point gap in condom use between young women and young men highlights the inadequacy of prevention efforts in addressing the unique vulnerability of young women.

Furthermore, disparities in the level of comprehensive correct knowledge about HIV among women and men aged 15 to 24 persist by income and location. The disparity in knowledge between those living in the poorest and those in the richest households is 17 per cent versus 35 per cent for young women, and 25 per cent versus 48 per cent for young men. Similarly, the disparity in knowledge between those living in rural and urban areas is 23 per cent versus 36 per cent for young women and 32 per cent versus 46 per cent for young men.

The number of children orphaned by AIDS is beginning to fall, but millions still need protection and care

Estimated number of AIDS-related orphans worldwide, 2000–2013 (millions)



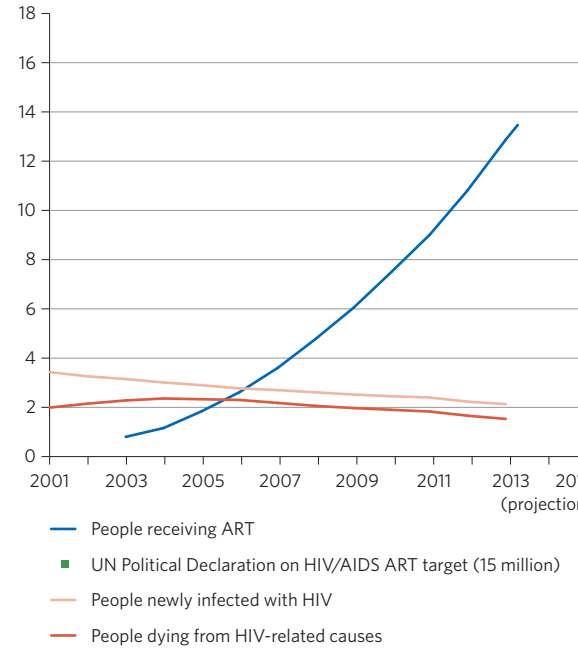
In 2013, approximately 17.7 million children worldwide under age 18 had lost one or both parents due to AIDS-related causes. The number rose from 10.5 million in 2000 to a peak of 18.5 million in 2009 and has been falling gradually in recent years. Investment in economic support and social protection will be needed for years to come to mitigate the impact of HIV on these children. An encouraging sign is that almost equal numbers of orphaned and non-orphaned children aged 10 to 14 are attending school, which can be an important source of protection and stability for vulnerable children. The school attendance ratio between orphaned and non-orphaned children increased from 0.80 around 2000 to 0.96 around 2014.

TARGET 6.B

Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it

A massive global expansion of access to antiretroviral therapy has averted millions of deaths

Number of people receiving antiretroviral therapy, 2003–2015, number of deaths from AIDS-related causes and number of people newly infected with HIV, 2001–2013 (millions)



Access to antiretroviral therapy has continued to increase at a remarkable pace. By June 2014, 13.6 million people living with HIV were receiving ART globally. Of those, 12.1 million were living in the developing regions, a massive increase from just 375,000 in 2003. In 2013 alone, the number of people receiving ART rose by 1.9 million in the developing regions. This was 20 per cent more than in 2012 and the largest annual increase ever.

The world remains on track to have 15 million people receiving ART by 2015, a target set out in the United Nations General Assembly Special Session on HIV and AIDS in 2011. This accomplishment shows the political resolve of leaders, the power of community mobilization, the commitment of health care workers and managers, and the results of technical innovation and domestic and international funding that continue to fuel the global scaling-up of ART.

Since 1995, ART has averted 7.6 million deaths globally, including 4.8 million deaths in sub-Saharan Africa. While this is good news, only an estimated 36 per cent of the 31.5 million people living with HIV in developing regions were receiving ART in 2013, with coverage varying significantly across regions. For example, sub-Saharan Africa had both the largest share of people living with HIV and the largest increase in the number of people receiving ART. Yet despite this progress, the region is also home to 78 per cent of the people living with HIV in developing regions who are not receiving ART.

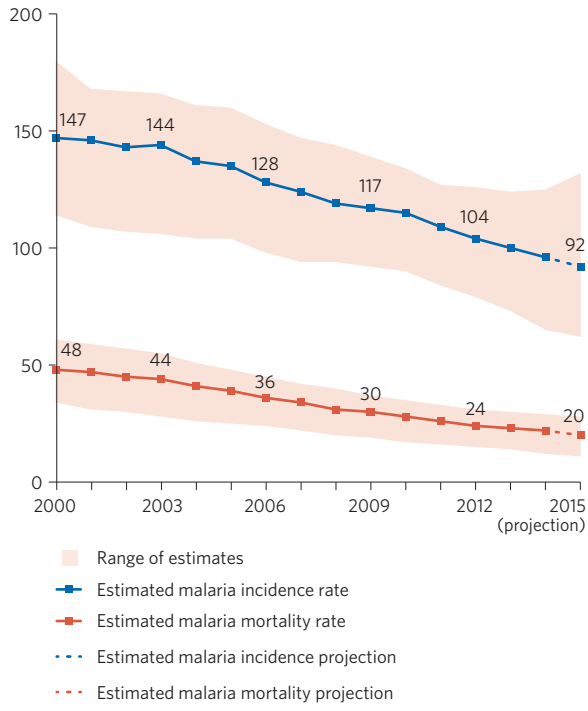
The overall number of people receiving ART masks important disparities in access across populations. Expanded programmes are necessary to adequately reach all groups of the population, including children and adolescents, as well as high-risk groups such as sex workers, people who inject drugs and men who have sex with men.

TARGET 6.C

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

Increased global attention to the devastating effects of malaria has produced significant results

Estimated change in malaria incidence rate (cases per 1,000 population at risk) and malaria mortality rate (deaths per 100,000 persons at risk), 2000–2015



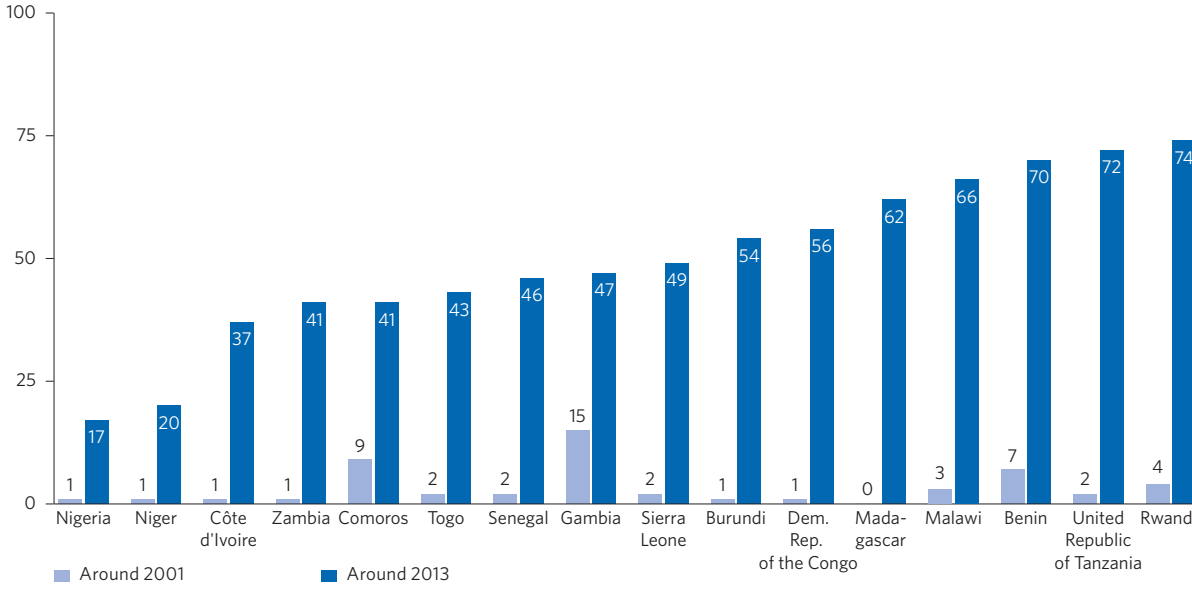
Between 2000 and 2015, the global malaria incidence rate has fallen by an estimated 37 per cent, and the global malaria mortality rate has decreased by 58 per cent. As a result, the global MDG malaria target has been achieved. Increased worldwide attention and substantial expansion of anti-malaria efforts have helped avert over 6.2 million malaria deaths during this period, primarily in children under five years of age in sub-Saharan Africa. The estimated 69 per cent reduction in malaria mortality in the under-five age group in this region also helped improve child survival rates, directly contributing to MDG4, the reduction of child mortality by two-thirds.

As of 2015, 98 malaria-endemic countries have reversed the incidence of malaria nationally compared to 2000. Yet malaria continues to pose a major public health challenge, with an estimated 214 million cases and 472,000 deaths globally in 2015. The disease is still endemic in 97 countries and territories around the world—3.3 billion people are at risk of infection—and it accounts for a large proportion of health spending in low-income countries. Eighty per cent of global malaria deaths occur in just 17 countries, mostly in Africa.

The massive gains over the past 15 years have been due largely to a tenfold increase in international financing for malaria since 2000, along with strengthened political commitment and the availability of new and more effective tools. This has substantially increased access to malaria prevention and treatment interventions. These include long-lasting insecticide-treated mosquito nets, indoor residual spraying, diagnostic testing and artemisinin-based combination therapies.

Access to malaria prevention interventions has expanded dramatically since 2000

Proportion of children under age five sleeping under insecticide-treated mosquito nets for selected countries in sub-Saharan Africa, around 2001 and 2013 (percentage)



Note: 'Around 2001' refers to a survey conducted during 1999–2003. 'Around 2013' refers to a survey conducted during 2012–2014.

Between 2004 and 2014, more than 900 million insecticide-treated nets were delivered to endemic countries in sub-Saharan Africa, significantly increasing household use of mosquito nets. Indoor residual spraying programmes were also expanded significantly across the region, but progress slowed between 2011 and 2013 due to funding constraints.

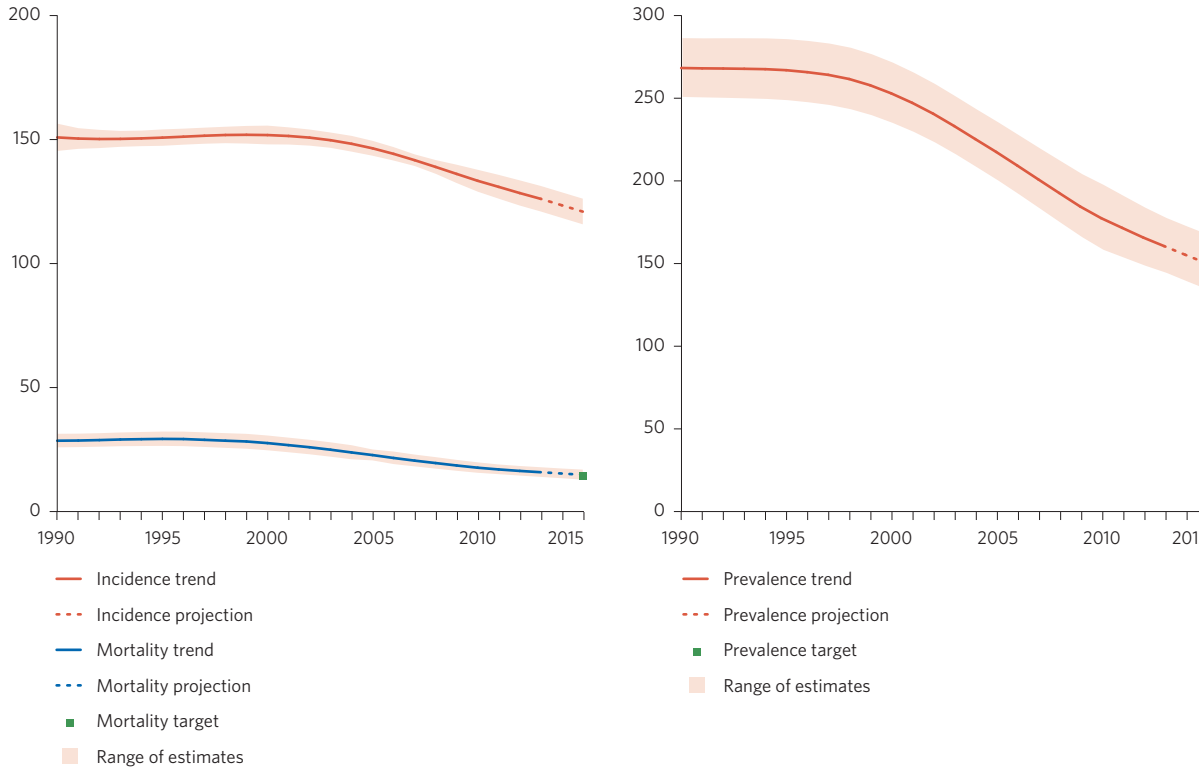
Access to prompt diagnosis has increased appreciably since 2000, contributing to more rational use of antimalarial medicines. Nonetheless, only approximately 20 per cent of children with fever in sub-Saharan Africa receive a malaria diagnostic test, according to household surveys from 2012 to 2014.

Artemisinin-based combination therapies have progressively replaced other antimalarial medicines as the treatment of choice, and they have been critical in preventing deaths. In addition, preventive treatments, such as intermittent preventive therapy in pregnancy to reduce the risk of malaria infection, are highly cost-effective and have the potential to save tens of thousands of lives each year.

The past 15 years have shown how effective public health interventions can be in reducing malaria cases and saving lives. However, the roll-out of some interventions, such as diagnostic testing and treatment, has been slower than expected, and robust efforts will be needed to scale up measures in the post-2015 period. Sustained political commitment, predictable financing and strategic investments in health systems, disease surveillance and new tools are necessary to reduce resurgences and the malaria disease burden in the years ahead.

Through effective prevention, diagnosis and treatment, the burden of tuberculosis has decreased

Tuberculosis incidence, mortality and prevalence rates, 1990–2015 (estimated numbers per 100,000 population)



Note: In both panels, the green box marks the Stop TB target of a 50 per cent reduction by 2015 compared with 1990. Incidence rate refers to new cases per 100,000 population including people who are HIV-positive. Mortality rate refers to deaths due to tuberculosis per 100,000 population excluding people who are HIV-positive.

The tuberculosis (TB) incidence rate has been falling in all regions since 2000, declining by about 1.5 per cent per year on average. This corresponds to an estimated 9 million new cases in 2013. The rate of decline is slow, but based on current trends, all regions are expected to achieve the MDG target of halting the spread and reversing the incidence of TB by 2015. The slow decline is due in part to lack of effective strategies (such as a post-exposure vaccine or treatment for latent TB infection) to prevent the reactivation of disease in the 2 billion-plus people who are estimated to have been infected by *mycobacterium tuberculosis*. This limits the impact of current efforts to control TB incidence.

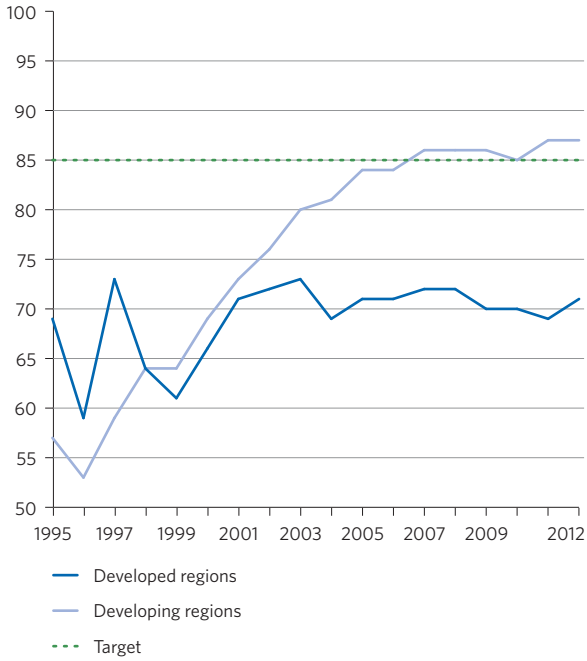
Globally, the TB mortality rate fell by 45 per cent between 1990 and 2013. In 2013, there were 1.1 million deaths from TB among HIV-negative people, and an additional estimated 360,000 deaths among HIV-positive people. At the same time, 11 million people were living with the disease, representing a 41 per cent decline in prevalence since 1990. Of those, 13 per cent were HIV-positive. Current projections suggest the rate of decline in both mortality and prevalence rates is close to reaching the global Stop TB Partnership target of a 50 per cent reduction by 2015 compared with 1990.

Reductions in disease burden follow 20 years (1995–2005) of intensive efforts to implement the DOTS strategy and its successor, the Stop TB Strategy (2006–2015). Between 2000 and 2013, an estimated 37 million lives were saved by TB prevention, diagnosis and treatment interventions.

Also in 2013, 6.1 million people diagnosed with TB were officially reported to public health authorities. Of these, 5.7 million were people newly diagnosed, equivalent to approximately 64 per cent of estimated incident cases, and 400,000 were people already on treatment. China and India accounted for 35 per cent of those notified cases.

In the developing regions, more than 85 per cent of newly diagnosed TB cases have been successfully treated for six consecutive years

Tuberculosis treatment success rate, developed and developing regions, 1995–2012 (percentage)



Note: The green line denotes an 85 per cent success rate target.

Globally, the number of people receiving tuberculosis treatment grew from 2.9 million in 1995 to 5.8 million in 2012, with treatment success improving each year. Among patients newly diagnosed in 2012, 86 per cent were successfully treated globally. The developing regions exceeded for the sixth year in succession the target of 85 per cent, set in 1991. The lower rate of success for treatment in developed regions is primarily due to a failure to report treatment outcomes for all cases.

Strategic efforts on health must be expanded in the post-2015 era

Health is a precondition, an indicator and an outcome of sustainable development. As part of the post-2015 development agenda, robust efforts are needed to sustain gains made to date and integrate additional health issues into a broad health and development agenda. Vigorous efforts are needed to scale up care, intensify services and research, ensure bold policies and supportive systems, and improve prevention. This new health agenda also requires expanding the scope of health efforts to ensure access to services, prevent exclusion and protect people through the extension of universal health coverage. All of these are needed to ensure healthy lives and promote well-being for all people of all ages.

A new Ebola outbreak teaches many lessons for health and development

Over the past 40 years, sporadic outbreaks of Ebola virus disease across equatorial Africa have resulted in a few hundred deaths on average, with the virus primarily confined to rural areas and contained within a few weeks or months. In total between 1976 and 2012, Ebola outbreaks infected about 2,400 people and caused around 1,600 deaths. In December 2013, another outbreak began in rural Guinea, near the border with Sierra Leone and Liberia. Formal identification of the disease followed in March 2014, at which point cases were already occurring in neighbouring countries.

This latest outbreak has been the most severe, largest and longest lasting of any outbreak of the virus since its discovery. It has affected thousands more than all previous outbreaks combined and still continues in some of the affected countries over a year later. As of late May 2015, over 27,000 confirmed, probable and suspected cases and over 11,000 deaths had been reported, according to WHO. UNICEF estimates that more than 5,000 children had been infected and 16,000 children had lost one or both parents or their primary caregiver.

Rapid, intense transmission of the disease has raised risks beyond Africa

Unlike during past outbreaks, in 2014 Ebola spread to urban areas and cities, causing rapid, intense transmission in Guinea, Liberia and Sierra Leone. High transmission of the disease rested on multiple factors, including unfamiliarity with the disease, poor health infrastructure, the rapid spread to urban centres, high population mobility and cultural beliefs and behavioural practices. Additional countries dealt with cases or localized transmission. This was the first time the disease was carried abroad by air travellers, highlighting the potential global risk of the disease. In late 2014, Ebola was declared a public health emergency of international concern.

The outbreak has affected many aspects of development beyond health

Closed schools, threats to past health gains and economic declines are among the many impacts of the Ebola outbreak. According to UNICEF, 5 million children were deprived of education in the three high-transmission countries, where schools were closed for months.

Health facilities and services collapsed under the strain of the crisis, and patients avoided health services for fear of Ebola contagion. Sierra Leone reported a 39 per cent decline in the number of under-five children receiving treatment for malaria between May and September 2014. A report from Liberia indicated that the proportion of women delivering babies with a skilled health care provider declined from 52 per cent in 2013 to only 37 per cent between May and August 2014.

According to the World Bank, the high-transmission countries felt a total fiscal impact of over $500 million in 2014, nearly 5 per cent of their combined gross domestic product (GDP). For 2015, lost output is estimated to be more than 12 per cent of GDP. In addition, the countries have suffered from reduced agricultural production, possible food insecurity, reduced wages and pauses in investment plans by international companies, among other losses.

The Ebola outbreak provides global lessons for stopping future epidemics

The Ebola crisis showed the vulnerability of countries that lack basic health services and the capacity for early detection, comprehensive reporting and a rapid response system for public health outbreaks. For countries without these basic health provisions, shocks created by emerging or re-emerging diseases or other events, such as climate change, can lead to even bigger crises. As the outbreak demonstrated, effective future responses will require country and global preparedness to avoid the reversal of gains in many aspects of development.

Goal 7

Ensure environmental sustainability

Key facts

- Ozone-depleting substances have been virtually eliminated, and the ozone layer is expected to recover by the middle of this century.
- Global emissions of carbon dioxide have increased by over 50 per cent since 1990.
- In 2015, 91 per cent of the global population uses an improved drinking water source, compared to 76 per cent in 1990.
- Since 1990, 2.1 billion people have gained access to improved sanitation, and the proportion of people practising open defecation globally has fallen almost by half.
- The proportion of urban population living in slums in the developing regions fell from 39.4 per cent to 29.7 per cent between 2000 and 2014.

TARGET 7.A

Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources

Deforestation has slowed, but it continues to jeopardize species and the livelihoods of millions of people

About 30 per cent of the land area on the planet is covered by forests. At least 1.6 billion people depend directly on forests for their livelihoods, and they provide additional benefits that are enjoyed by all, such as clean air and water. In addition, forests provide a home to millions of animals and plants as well as catchment for three-fourths of fresh water. They also play an important role in adaptation to and mitigation of climate change. However, forests are under threat from deforestation around the world.

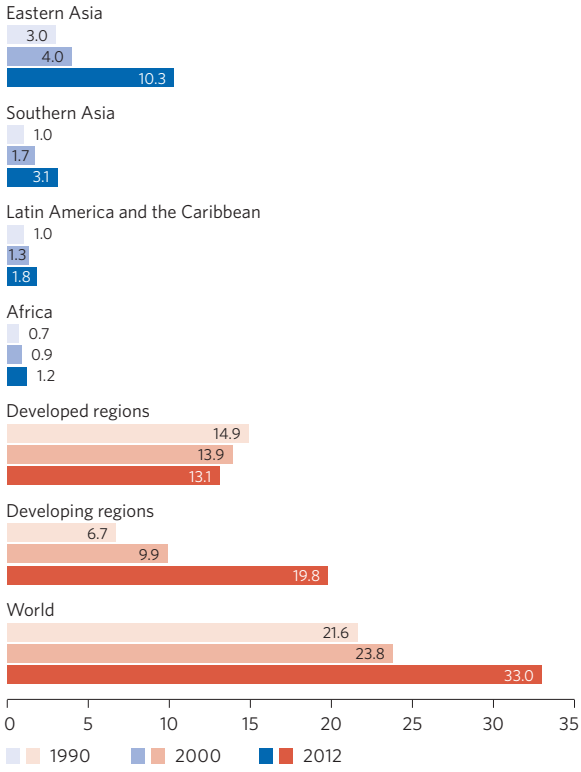
In recent years, the net loss of forest area has slowed, due to both a slight decrease in deforestation and an increase in afforestation, as well as the natural expansion of forests in some countries and regions. Net loss in forest area declined from 8.3 million hectares annually in the 1990s to an estimated 5.2 million hectares (an area about the size of Costa Rica) each year from 2000 to 2010. In spite of this improvement, deforestation remains alarmingly high in many countries.

South America and Africa experienced the largest net losses of forest area in the first decade of the new millennium. Oceania also reported a net loss, largely due to severe drought and forest fires in Australia. Asia, on the other hand, registered a net gain of around 2.2 million hectares annually between 2000 and 2010 following a net loss in the 1990s. This gain, mostly due to large-scale afforestation programmes in China, offsets continued high rates of net loss in many countries in Southern and South-Eastern Asia.

Deforestation, forest degradation and poor forest management release carbon into the atmosphere, contributing to climate change. Since 1990, global forests have lost carbon stored in their biomass in almost all regions, adding to global carbon emissions. The total carbon stock held in forest biomass fell by an estimated 0.5 gigatonnes annually from 2005 to 2010, primarily due to a reduction in global forest area. Stemming these damaging releases of carbon requires sustainable forest management worldwide to limit deforestation and allow forests to maintain their crucial role in ecosystem health.

Global greenhouse gas emissions continue to rise and are now more than 50 per cent higher than their 1990 level

Emissions of carbon dioxide, 1990, 2000 and 2012* (billions of metric tons)



* Data for 2012 are preliminary estimates and the breakdown for some MDG regions is not available. Therefore, the regional estimates do not add up to the total.

A continual rise in greenhouse gas emissions is projected to further warm the planet and cause long-lasting changes in the climate system, threatening severe and irreversible consequences for people and ecosystems. Impacts on natural and human systems are projected to span the globe, with varying effects region to region. They include altered ecosystems and habitats; detrimental impacts on agriculture, potentially leading to food shortages; and more and longer lasting weather extremes and natural disasters, along with numerous risks to society.

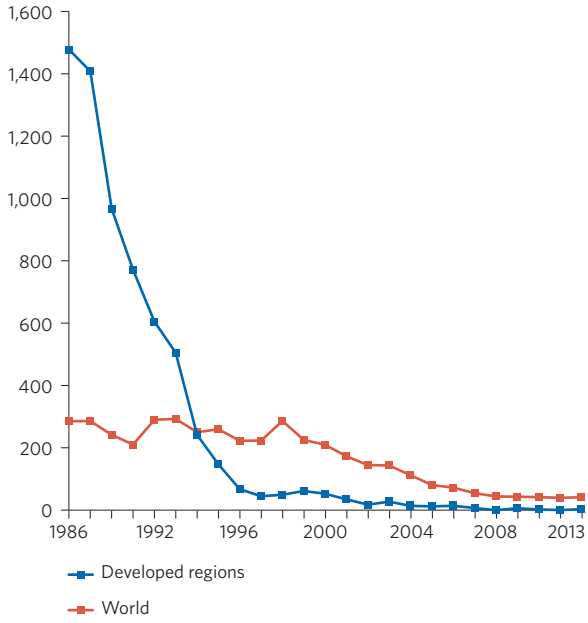
Between 1990 and 2012, global emissions of carbon dioxide increased by over 50 per cent. Data collected over two decades show that the growth in global emissions has accelerated, rising 10 per cent from 1990 to 2000 and 38 per cent from 2000 to 2012, driven mostly by growth in the developing regions.

Average rates of emissions differ considerably between the developed and the developing regions. In 2012, average emissions from the developed regions were about 10 metric tons of carbon dioxide per person per year, compared to about 3 metric tons in the developing regions. Emissions per unit of economic output were slightly higher in the developing regions (0.4 kilograms of carbon dioxide per dollar of economic output) compared to developed regions (0.3 kilograms).

Addressing the unabated rise in greenhouse gas emissions and the resulting likely impacts of climate change remains an urgent, critical challenge for the global community. At the United Nations Framework Convention on Climate Change conference in Paris in December 2015, participants will work to forge an agreement on a protocol, another legal instrument or an agreed outcome with legal force that will apply to all Parties to the Convention. This would provide a framework for strengthening international action to mitigate climate change.

The ozone layer is expected to recover by mid-century, thanks to concerted global efforts to eliminate ozone-depleting substances

Consumption of ozone-depleting substances, 1986–2013 (thousands of metric tons)



The virtual elimination of ozone-depleting substances represents an unequivocal success of an intergovernmental effort. It reflects achievements in both integrating sustainable development principles into national policies and developing global partnerships for development.

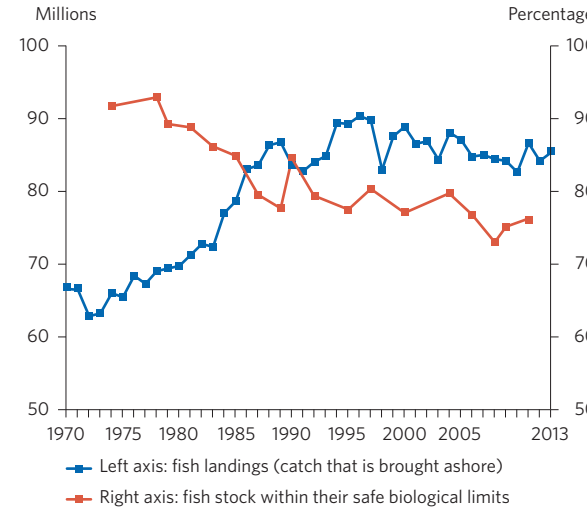
The Montreal Protocol on Substances that Deplete the Ozone Layer, agreed in 1987, has been universally ratified. Under the Protocol, all signatories are required to develop management policies for ozone-depleting substances and licensing systems to control their consumption and production. To date, 197 parties have phased out 98 per cent of all major ozone-depleting substances globally compared to 1990 levels. The remaining substances will be phased out over the next 15 years. As a result, the ozone layer is projected to recover by the middle of this century.

Another potential benefit of this achievement is the prevention of up to 2 million cases of skin cancer annually by 2030. In addition, because many ozone-depleting substances are also potent greenhouse gases, ozone protection efforts have significantly helped to mitigate climate change by averting more than 135 billion tonnes of carbon dioxide equivalent emissions.

One of the foremost remaining challenges is phasing out the last of the ozone-depleting chemicals, hydrochlorofluorocarbons, while avoiding the use of alternatives with high potential for global warming, such as hydrofluorocarbons. Other important continuing issues include prevention of illegal trade in ozone-depleting substances and the sound management of those substances still in use, such as in refrigerators, air conditioners and firefighting equipment. Continuing momentum and funding for the final phase-out is crucial to maintaining this unprecedented international success story.

Overexploitation of marine fisheries is rising, threatening ecosystems and livelihoods

Proportion of fish stocks within their safe biological limits, 1974–2011 (percentage) and fish landings, 1970–2013 (millions of metric tons)



The world's fisheries make significant contributions to global food security, livelihoods and economies. However, depletion of fish stocks below sustainable-yield levels is also a major driver of ecological and evolutionary harm to marine ecosystems. The percentage of overfished stocks that remain within safe biological limits has been falling over time.

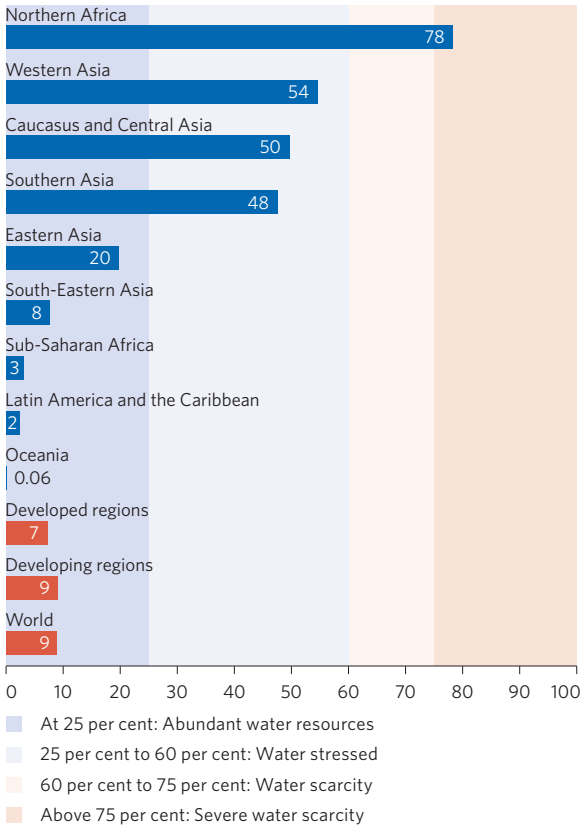
Between 1974 and 2011, the proportion of marine fish stocks within safe biological limits fell 19 percentage points, from 90 per cent in 1974 to 71 per cent. As a result of this 40-year deterioration in the condition of global fisheries, fish stocks are now below the level at which they can produce maximum sustainable yields. This is taking place despite fisheries policy and management actions taken by coastal States and the

international community. On the other hand, numerous successes have been reported in rebuilding overfished stocks, most notably in Europe, North America and Oceania.

Overfishing not only reduces the productivity of fish stocks but also impairs ecosystem functions and biological diversity. Ultimately, this will hinder social and economic development. The total marine catch brought ashore globally has fallen from a peak of 88 million metric tons in 1996 to approximately 82 million metric tons in 2013. This demonstrates the impact of overfishing, among other factors, on fish production. Turning this situation around calls for strong political will and strict management plans to restore the sustainability and productivity of global fisheries.

Water scarcity affects more than 40 per cent of the global population and is projected to rise

Proportion of renewable water resources withdrawn, around 2011 (percentage)



The proportion of water resources a country uses is affected by national water policies and water scarcity. Scarcity can be physical (lack of water of sufficient quality), economic (lack of adequate infrastructure, due to financial, technical or other constraints) or institutional (lack of institutions for a reliable, secure and equitable supply of water). Major sectors that withdraw water include agriculture (irrigation, livestock and aquaculture), industries and municipalities. At present, municipalities account for 12 per cent of total freshwater withdrawal globally and industries for 19 per cent, while agriculture takes up the remaining 69 per cent, mostly through irrigation.

Worldwide, only 9 per cent of renewable freshwater resources are withdrawn for use by agriculture, municipalities and industries. This is below the 25 per cent withdrawal threshold that defines the start of physical water stress, but this global figure masks large differences between regions and within countries. In 2011, 41 countries experienced water stress, up from 36 in 1998. Of these, 10 countries—from the Arabian Peninsula, Northern Africa and Central Asia—withdrew more than 100 per cent of renewable freshwater resources. Once a country reaches a withdrawal level above 100 per cent, it starts depleting its renewable groundwater resources, relying on non-renewable fossil groundwater or non-conventional sources of water, such as desalinated water, wastewater and agricultural drainage water.

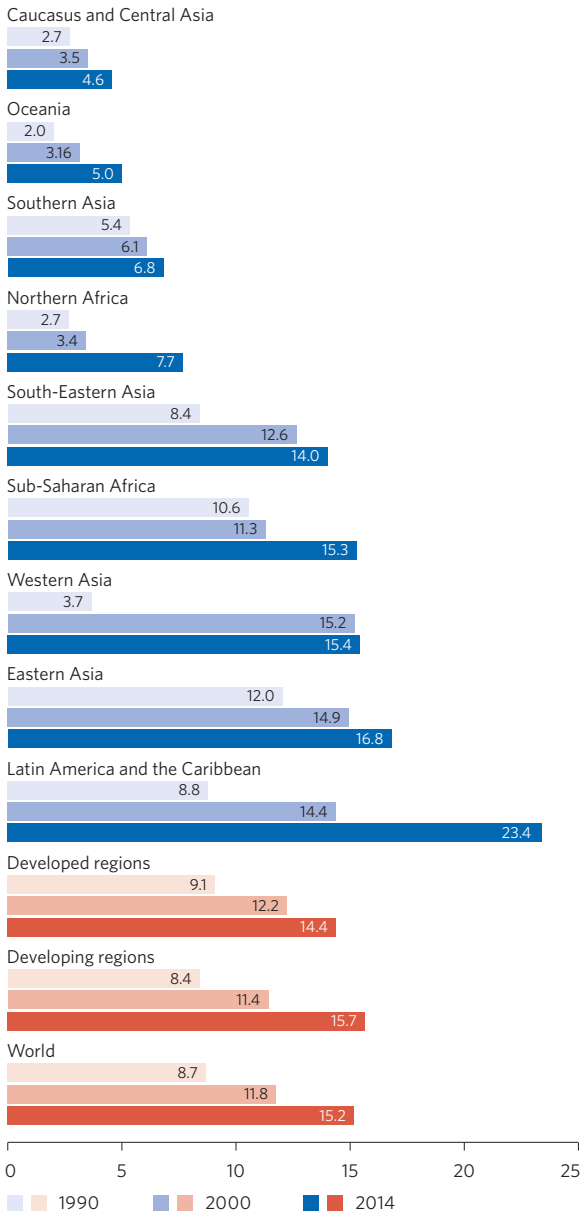
Currently, water scarcity affects more than 40 per cent of people around the world, and it is projected to increase. Water scarcity already affects every continent and hinders the sustainability of natural resources as well as economic and social development.

TARGET 7.B

Reduce biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss

Latin America and the Caribbean, Oceania and Western Asia lead the way in protecting land and marine areas

Terrestrial areas protected, 1990, 2000 and 2014 (percentage)



Terrestrial and marine protected areas help to prevent loss of biodiversity, maintain food security and water supplies, strengthen climate resilience and improve human health and well-being. Protecting these areas aims to conserve and nurture biological diversity, ensuring areas are safeguarded and maintained for future generations.

In 2014, 15.2 per cent of terrestrial and inland water areas and 8.4 per cent of coastal marine areas (up to 200 nautical miles from shore) were protected. Only 0.25 per cent of marine areas beyond national jurisdiction (extending beyond 200 nautical miles) were protected, which highlights the urgent need for action in this area.

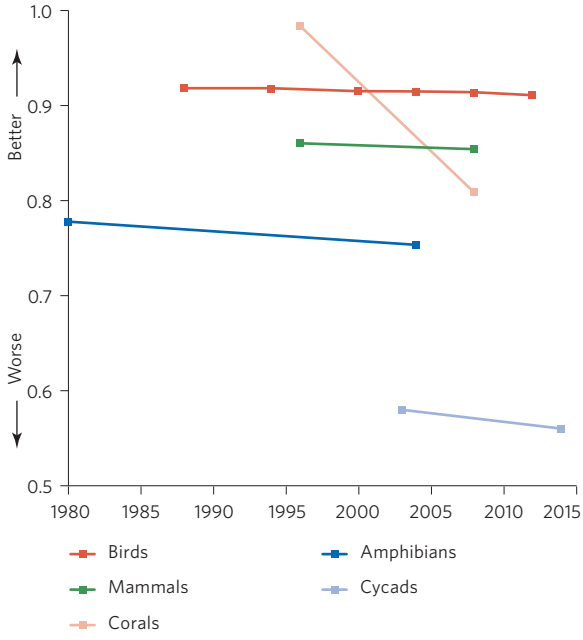
Many regions have substantially increased their terrestrial protected areas since 1990. In Latin America and the Caribbean, coverage of terrestrial protected areas rose from 8.8 per cent to 23.4 per cent between 1990 and 2014. In Western Asia, the terrestrial area under protection has more than quadrupled, from 3.7 per cent in 1990 to 15.4 per cent in 2014.

Some regions of the world have also increased their protected marine areas substantially. In Oceania, there were no coastal or marine protected areas in 1990, but 7.4 per cent of such areas were protected in 2014.

Global coverage of protected areas has expanded since 1990, and protected areas are projected to reach at least 17 per cent of terrestrial and inland waters and 10 per cent of marine and coastal areas by 2020. However, other aspects of protection also need improvement. These include effective and equitable management and connectivity, and protection of areas important for biodiversity and ecosystem services, especially ecologically representative protected area networks. Monitoring progress in protected areas will be fundamental to assessing progress towards achievement of the post-2015 development agenda and its goals and targets.

Conservation efforts are in a race against time to save animals and plants from extinction

IUCN Red List Index* of species survival for birds, 1988–2012, mammals, 1996–2008, corals, 1996–2008, amphibians, 1980–2004, and cycads, 2003–2014



* The Red List Index, compiled by the International Union for Conservation of Nature and 10 Red List Partner institutions, measures trends in species' risk of extinction based on genuine changes in risk.

Note: A Red List Index value of 1.0 means that all species are categorized as 'Least Concern', and hence none are expected to go extinct in the near future. A value of zero indicates that all species have gone Extinct.

The Red List Index, which measures trends in species' risk of extinction, shows that a substantial proportion of species in all taxonomic groups examined to date are declining overall in population and distribution. This means they are increasingly threatened with extinction. Over the past 50 years, the conservation status of many taxonomic groups has been comprehensively assessed. Considered at risk of extinction are 26 per cent of 5,500 mammals, 13 per cent of 10,400 birds, 41 per cent of 6,000 amphibians, 33 per cent of 845 reef-building corals and 63 per cent of 340 cycads. The extinction risk of coral species is increasing most rapidly, while more cycad species are threatened on average. In those groups for which trends in extinction risk can be quantified, many more species are deteriorating in status than are improving.

Cycads, the first major plant group for which a Red List Index has been produced, are the oldest living plants on earth. Unchanged for millions of years, they are particularly vulnerable to extinction from habitat loss and trade that targets specimens harvested in the wild. Cycads continue to decline across all regions, and nearly two-thirds are documented as threatened with extinction.

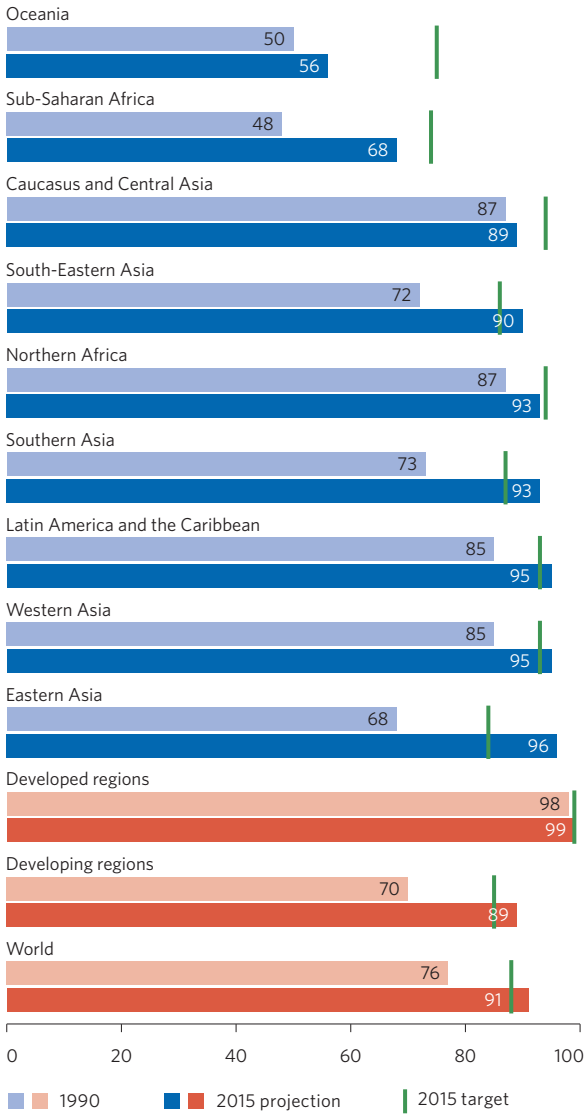
As past experience has shown, species can recover. Concerted conservation interventions can make a vital difference in biodiversity trends. An estimated 16 bird species would have gone extinct between 1994 and 2004 without conservation action, while the trends in extinction risk for mammals, birds and amphibians would be at least one-fifth worse. Such conservation efforts will need to be scaled up to avoid substantial loss of biodiversity in the future. Without these efforts, biodiversity will diminish, with serious consequences for the ecosystem services upon which all people depend.

TARGET 7.C

Halve, by 2015, the proportion of the population without sustainable access to safe drinking water and basic sanitation

The global MDG target for drinking water has been met five years ahead of schedule

Proportion of population using an improved drinking water source, 1990 and 2015 (percentage)



Between 1990 and 2015, the proportion of the global population using an improved drinking water source has increased from 76 per cent to 91 per cent, surpassing the MDG target, which was met in 2010. Of the 2.6 billion people who have gained access since 1990, 1.9 billion use a piped drinking water supply on premises. Over half of the global population (58 per cent) now enjoys this higher level of service. During the same period, the number of people using surface water fell by more than half, from 346 million to 159 million.

Since 1990, the proportion of the population without access to improved drinking water has been cut in half in Eastern Asia, Latin America and the Caribbean, South-Eastern Asia, Southern Asia and Western Asia. Sub-Saharan Africa fell short of the MDG target but still achieved a 20 percentage point increase in the use of improved sources of drinking water. In 2015, it is estimated that 663 million people worldwide still use unimproved drinking water sources, including unprotected wells and springs and surface water. Nearly half of all people using unimproved sources live in sub-Saharan Africa, while one-fifth live in South Asia.

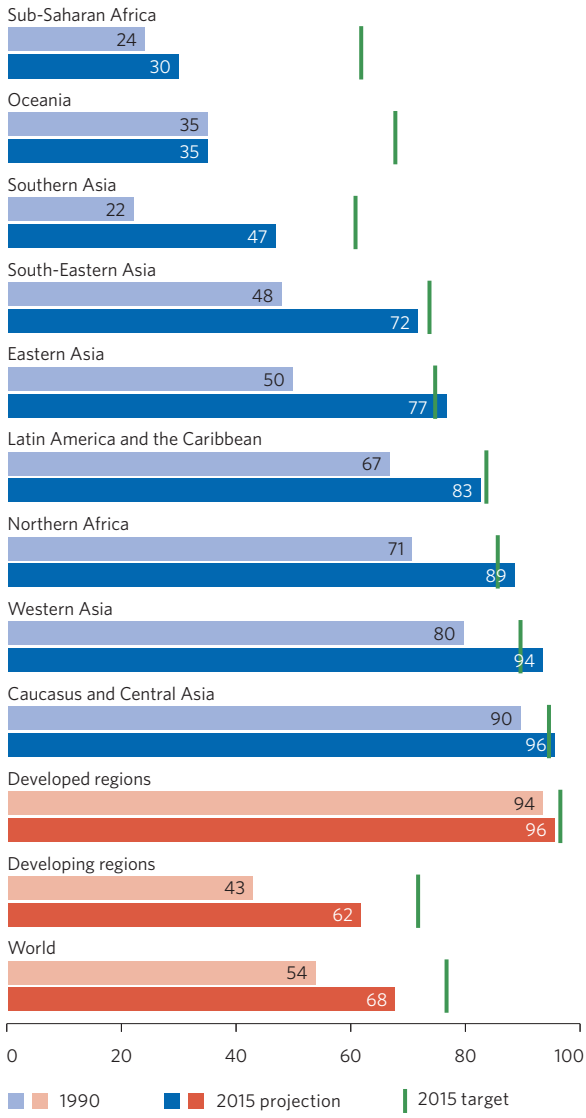
Since 1990, 2.1 billion people have gained access to improved sanitation, but the world has missed the MDG target

Between 1990 and 2015, the proportion of the global population using an improved sanitation facility has increased from 54 per cent to 68 per cent. This means that 2.1 billion people have gained access to improved sanitation since 1990, and the proportion of people practising open defecation globally has fallen almost by half, from 24 per cent to 13 per cent. However, in 2015, 2.4 billion people are still using unimproved sanitation facilities, including 946 million people who are still practising open defecation.

Caucasus and Central Asia, Eastern Asia, Northern Africa and Western Asia have cut in half the proportion of the population without access to improved sanitation. Southern Asia had the lowest baseline coverage in 1990, at 22 per cent, and recorded the largest increase in the proportion using improved sanitation, reaching 47 per cent in 2015.

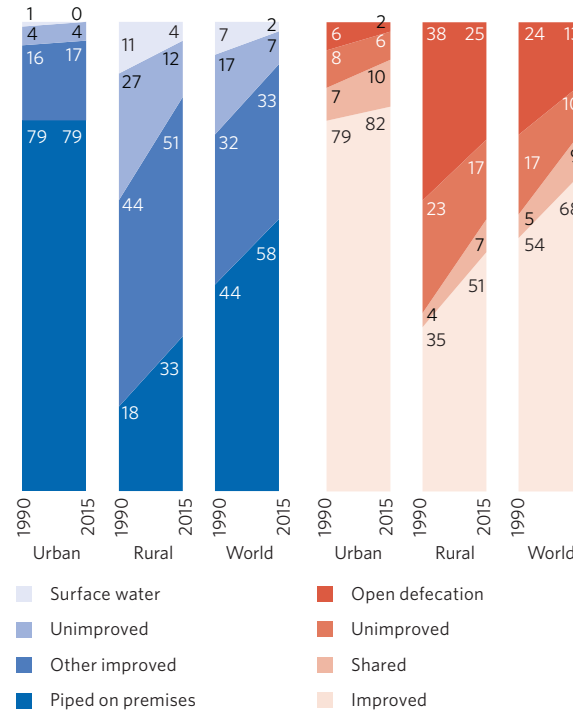
While global progress on these targets varies, 147 countries have met the drinking water target, 95 countries have met the sanitation target and 77 countries have met both.

Proportion of population using an improved sanitation facility, 1990 and 2015 (percentage)



Global rural-urban disparities have decreased but large gaps remain

Proportion of population using improved and unimproved drinking water sources and sanitation facilities, urban, rural and world, 1990 and 2015 projection (percentage)



The proportion of the global rural population without access to improved drinking water has declined by more than half since 1990, from 38 per cent to 16 per cent in 2015. Currently, 96 per cent of urban populations use improved drinking water sources, compared with 84 per cent of rural populations. Similarly, four out of five people living in urban areas have access to piped drinking water compared with just one in three people in rural areas.

Since 1990, the proportion of the global rural population without access to improved sanitation has declined by nearly a quarter, and open defecation rates in rural areas have fallen from 38 per cent to 25 per cent in 2015. Still, nearly half of people living in rural areas do not have improved sanitation facilities, and one in four still practise open defecation. By contrast, only 18 per cent of people in urban areas lack access to improved sanitation.

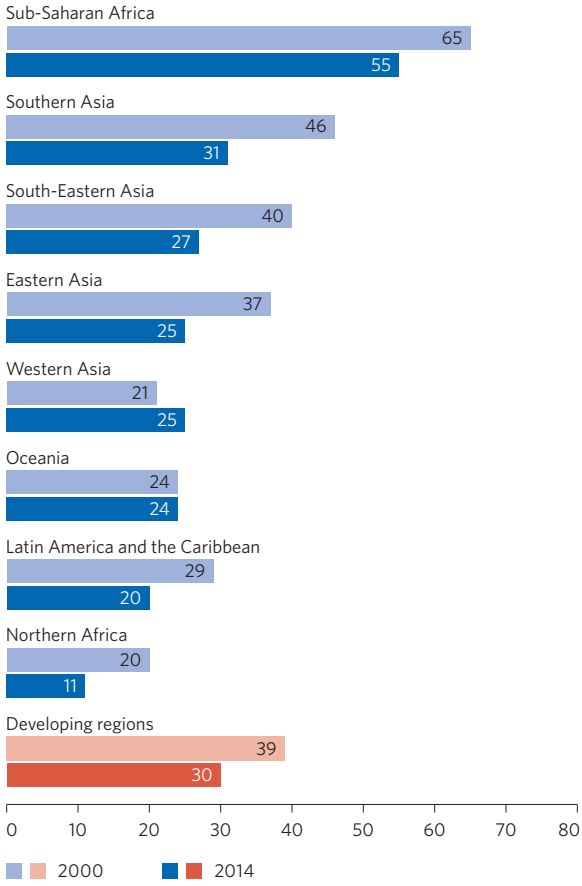
People living in rural areas and those from poor and marginalized groups are less likely to have access to improved water and sanitation facilities and less likely to enjoy piped water on premises. Progressive elimination of inequalities in access and service levels will continue to be an important focus for the post-2015 agenda.

TARGET 7.D

By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers

Fewer urban residents are living in slums in almost all regions

Proportion of urban population living in slums, 2000 and 2014 (percentage)



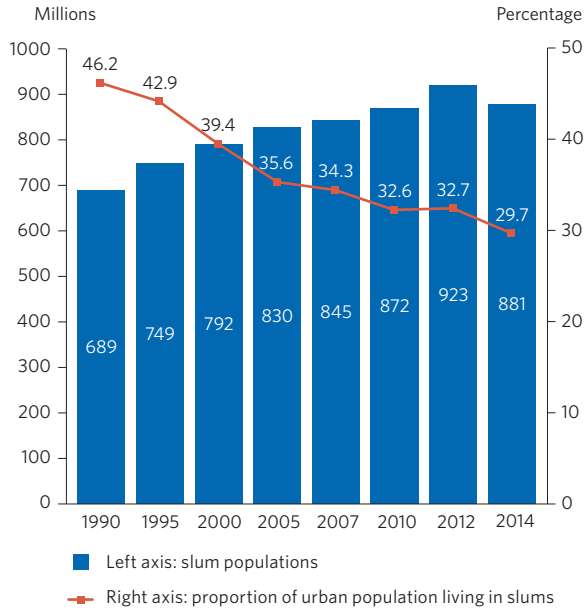
The lives of those living in slums have improved significantly in the last 15 years. Between 2000 and 2014, more than 320 million people gained access to either improved water, improved sanitation, durable housing or less crowded housing conditions, which means that the MDG target was largely surpassed. The proportion of urban population living in slums in the developing regions fell from approximately 39 per cent in 2000 to 30 per cent in 2014. Although the target was met, absolute numbers of urban residents living in slums continue to grow, partly due to accelerating urbanization, population growth and the lack of appropriate land and housing policies. Over 880 million urban residents are estimated to live in slum conditions today, compared to 792 million reported in 2000 and 689 million in 1990.

The proportion of urban population living in slums has fallen significantly in almost all regions. The largest declines have taken place in Eastern Asia, South-Eastern Asia and Southern Asia (at least a 12 percentage point drop). In 2015, the regions with the lowest prevalence of slum conditions are Latin America and the Caribbean and Northern Africa. In Northern Africa the proportion of urban slum population declined almost by half, to 11 per cent in 2014 from 20 per cent in 2000. In Latin America and the Caribbean it fell to 20 per cent in 2014 from 29 per cent in 2000.

Sub-Saharan Africa continues to have the highest prevalence of slum conditions of all regions, estimated at 55 per cent in 2014. However, this represents a decline of almost 10 percentage points in prevalence since 2000. On the other hand, the proportion of the urban population living in slums continues to grow in countries affected by or emerging from conflict. Iraq, for example, experienced an increase of more than 60 per cent between 2000 and 2014.

The proportion of population living in slums in developing world cities is declining, but their numbers remain high

Urban population living in slums (millions) and proportion of urban population living in slums (percentage), developing regions, 1990–2014



Although the MDG target has been reached globally, additional efforts are needed to improve conditions for the growing numbers of slum residents, especially in the many countries that still lag behind. Some lessons can be drawn from successful experiences over the last 15 years. They include bold policy reforms and implementation of equitable planning and economic policies to prevent future slum growth. Evidence collected from 44 countries shows that slum reduction requires a combination of complementary approaches, from raising awareness to increasing funding to provide basic services, along with policy reforms and institutional strengthening.

Environmental sustainability is a core pillar of the post-2015 development agenda

Efforts to ensure global environmental sustainability have shown mixed results throughout the last 15 years. Much work remains for the post-2015 period, particularly given the acute environmental challenges the world is facing, such as climate change, food and water insecurity, and natural disasters.

One theme emerging from the debate on the successor agenda to the MDGs is the importance of true integration of environment into development ambitions. Environmental sustainability is a core pillar of the post-2015 agenda and a prerequisite for lasting socioeconomic development and poverty eradication. Healthy, well-managed and diverse ecosystems and resources can play a strong role in mitigating future environmental challenges and improving livelihoods everywhere. Therefore, it is crucial to ensure that the development agenda for the future reflects the links between socioeconomic and environmental sustainability and protects and reinforces the environmental pillar.

Goal 8

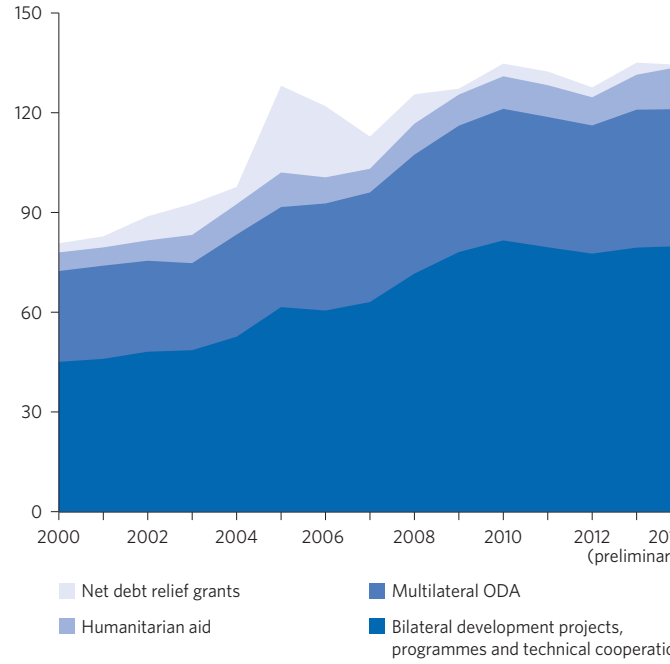
Develop a global partnership for development

Key facts

- Official development assistance from developed countries increased by 66 per cent in real terms between 2000 and 2014.
- In 2014, 79 per cent of imports from developing to developed countries were admitted duty free.
- The proportion of external debt service to export revenue in developing countries fell from 12 per cent in 2000 to 3 per cent in 2013.
- As of 2015, 95 per cent of the world's population is covered by a mobile-cellular signal.
- Only one third of the population in the developing regions use the Internet, compared to 82 per cent in the developed regions.

Official development assistance has plateaued in recent years, after increasing significantly in the first decade of the new millennium

Official development assistance (ODA) from OECD-DAC countries, 2000–2014 (constant 2013 US$ billions)



A decline in aid flows during the last years of the 20th century reversed early in the new millennium. Net official development assistance (ODA) from member countries of the Development Assistance Committee (DAC) of the Organisation for Economic Co-operation and Development (OECD) increased by 66 per cent between 2000 and 2014. However, after reaching an all-time high in 2013, net ODA flows from DAC members totalled $135.2 billion in 2014, marking a slight decline, of 0.5 per cent, in real terms.

ODA in the form of net aid for core bilateral projects and programmes, which represents about 60 per cent of the total, remained virtually unchanged between 2013 and 2014. In contrast, debt relief grants fell by 87 per cent in real terms, from $3.6 billion to $476 million. Humanitarian aid rose by 22 per cent in real terms, from $11 billion to $13 billion.

Total ODA from DAC member countries represented 0.29 per cent of their gross national income (GNI) in 2014. The top five donor countries by volume were the United States, the United Kingdom, Germany, France and Japan. Denmark, Luxembourg, Norway, Sweden and the United Kingdom continued to exceed the United Nations' ODA target of 0.7 per cent of GNI. In 2014, the Group of 7 industrialized countries provided 71 per cent of all the net ODA from DAC members, while European Union countries provided 55 per cent.

Aid has also increased from non-DAC countries. Although precise figures are not yet available for all countries for 2014, preliminary data show that the United Arab Emirates reached the highest ratio of ODA to GNI of any country, at 1.17 per cent. Hungary, Estonia and Turkey increased their aid in real terms with respect to the previous year by 24.4 per cent, 19.2 per cent and 8.2 per cent, respectively.

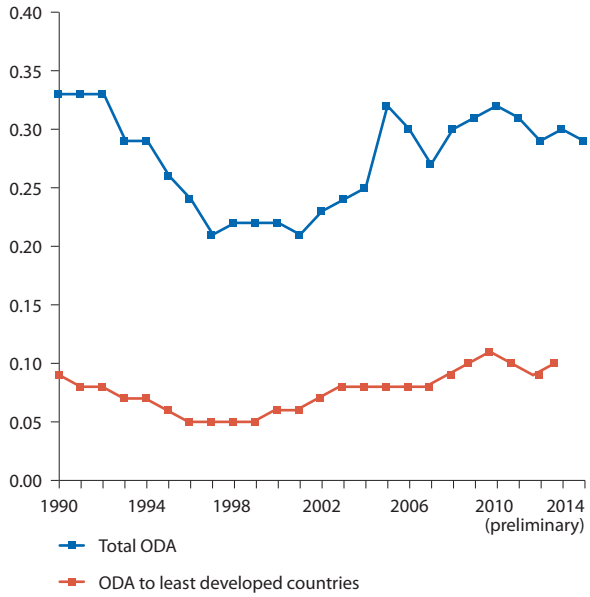
On average, aid focusing on the achievement of the goal of gender equality and women's empowerment in 2012 and 2013 was approximately 26 per cent of all aid that could be allocated by sector.

TARGETS 8.B and 8.C

Address the special needs of the least developed countries, landlocked developing countries and small island developing States

Official development assistance to least developed countries increased significantly over the MDG period

Net official development assistance from OECD-DAC countries as a proportion of donors' gross national income, 1990–2014 (percentage)



In 2014, bilateral aid to least developed countries (LDCs) fell 16 per cent in real terms, reaching $25 billion at constant prices of the previous year. However, much of this decrease can be attributed to a relatively high level of debt relief assistance granted to Myanmar in 2013.

Preliminary data for 2014 show that bilateral ODA to sub-Saharan Africa (where the majority of LDCs are located) decreased by 5 per cent in real terms from the previous year, reaching $25 billion at constant 2013 prices. However, the decrease was only 2 per cent if debt relief is excluded.

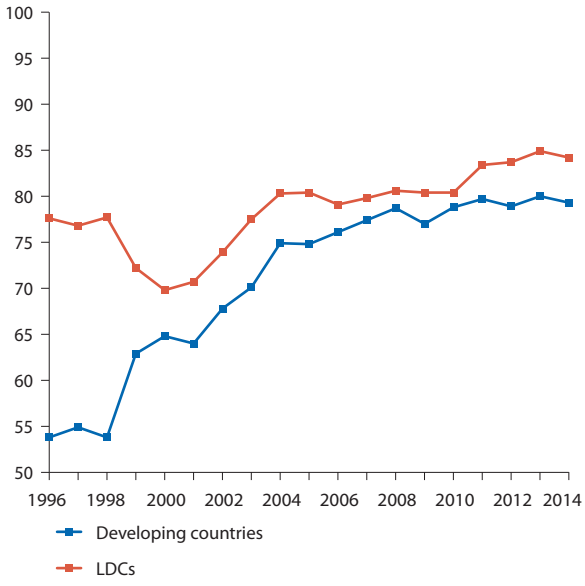
Preliminary results from the 2015 DAC Survey on Donors' Forward Spending Plans project a 2.5 per cent real increase in country programmable aid in 2015. This will come mainly through disbursements by multilateral agencies. Least developed and other low-income countries will benefit most from this increase; their aid levels are expected to grow by 5.7 per cent in real terms. The report also projects that allocations for the least developed countries will continue to increase through 2018. Allocations to lower-middle-income and upper-middle-income countries are expected to remain at current levels.

TARGET 8.A

Develop further an open, rule-based, predictable, non-discriminatory trading and financial system

Imports from developing countries, especially from least developed countries, increasingly receive preferential treatment from developed countries

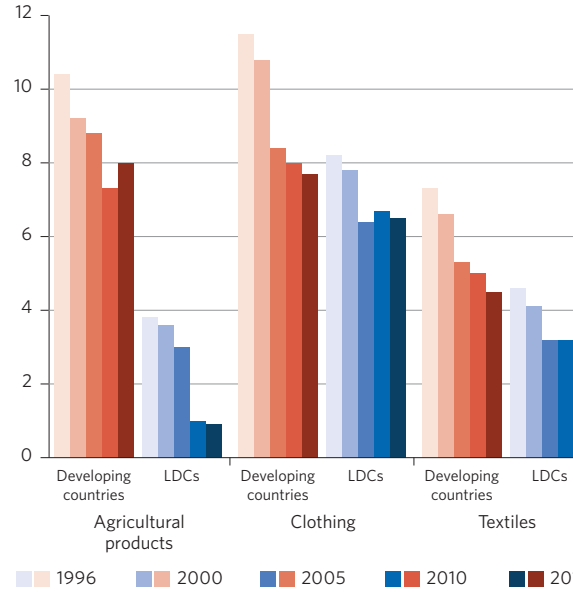
Proportion of developed country imports (excluding oil and arms) from developing countries and LDCs admitted duty free, 1996–2014 (percentage)



The proportion of developed country imports (excluding oil and arms) originating from developing countries that are admitted duty free has significantly increased over the last 15 years. Despite a slight decrease from 2013 to 2014, 84 per cent of imports from LDCs were admitted duty free in 2014, along with 79 per cent of imports from developing countries. The share of exports from LDCs that received preferential treatment (beyond most-favoured-nation status) reached approximately 60 per cent in 2014, up from 53 per cent in 2011.

Agricultural products from LDCs continue to receive the greatest trade preferences

Average tariffs levied by developed countries on key products exported by developing countries and LDCs, selected years (percentage ad valorem)

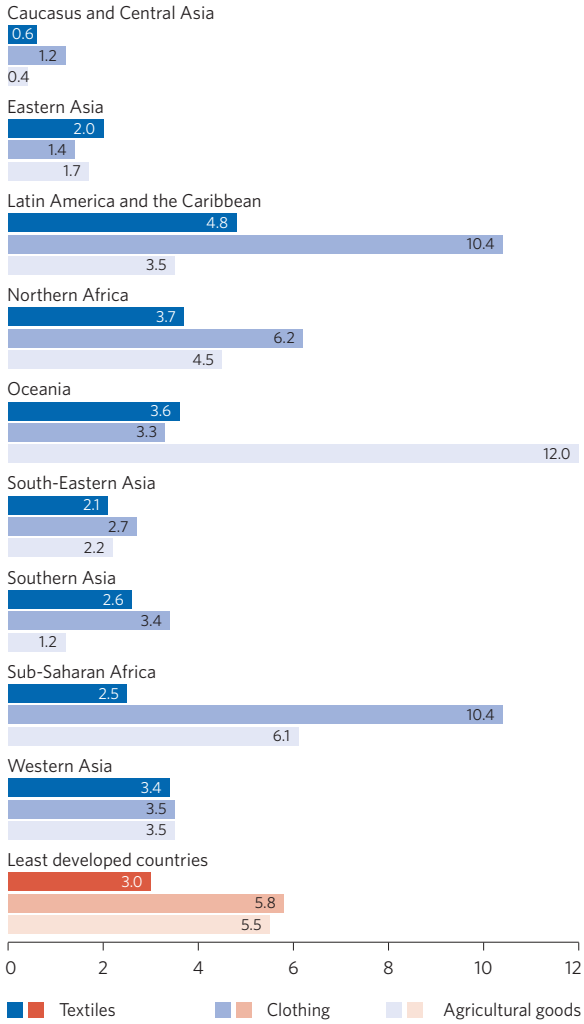


Note: Based on a fixed 1999–2001 export structure.

Within each product category, the average tariffs imposed by developed countries on imports from developing countries declined rapidly between 1996 and 2005. The decline was slower after 2005, and in a few categories, the trend reversed. Agricultural tariffs imposed on LDCs, however, continued their sharply decreasing trend well into 2010 in most developed countries.

The margin of trade preference varies widely across exporting developing regions

Preferential margin by exporting developing region and product category, 2014 (percentage)



There is variation by product and region in the average margin of preference (beyond most-favoured-nation status) granted by developed countries on imports from developing countries. On average, LDCs benefit from a wider margin of preference. For instance, agricultural exports to developed countries originating from developing countries in Oceania and sub-Saharan Africa, where the majority of LDCs are located, receive highly preferential treatment compared to other regions.

However, tariff preferences are not always linked to the development status of the exporting countries. Some result from regional trade agreements, as is the case for Latin America and North Africa. Similarly, although exports from countries in sub-Saharan Africa receive highly preferential treatment in developed countries, the largest LDC exporters of apparel are located in Asia and do not benefit from duty-free access to the United States market.

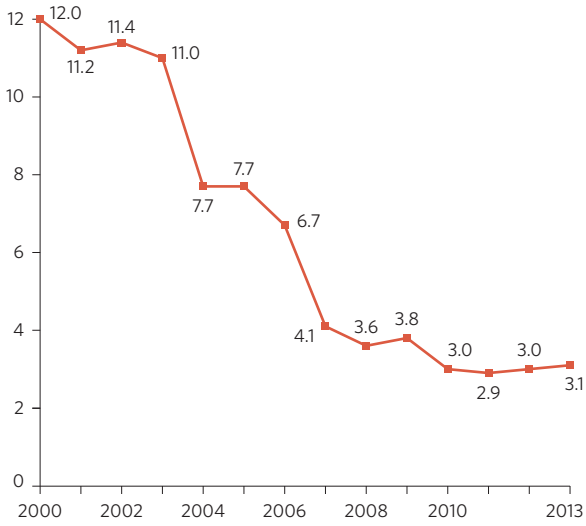
The margin of preference for agricultural exports from LDCs relative to those from developing countries in general reached 7 percentage points in 2014. In contrast, the margin of preference for textiles and clothing was just above 1 percentage point. This largely reflects the exclusion of some Asian exporters from preferential tariff treatment by the United States.

TARGET 8.D

Deal comprehensively with the debt of developing countries

The debt burden of developing countries fell dramatically over the first decade of the new millennium but has stabilized and is expected to rise

External debt service payments as proportion of export revenues, all developing countries, 2000–2013 (percentage)

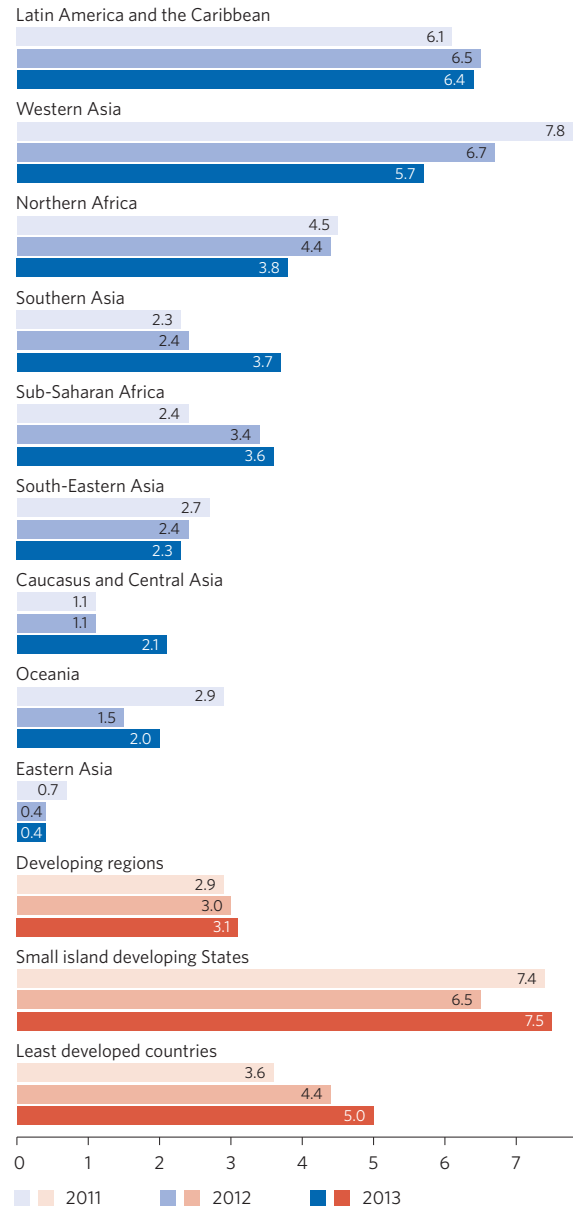


Note: Data cover only the developing countries that report to the World Bank's Debtor Reporting System.

A country's external debt burden affects its creditworthiness and vulnerability to economic shocks. In 2013, the debt burden of developing countries was 3.1 per cent, measured as a proportion of external debt service to export revenue. This was a major improvement over the 2000 figure of 12.0 per cent. The falling burden of debt service resulted from better debt management, expansion of trade and substantial debt relief for the poorest countries. More recently an additional factor has been attractive borrowing conditions in international capital markets.

Debt service as a proportion of exports has recently increased in some regions

Debt service as percentage of exports of goods and services and income from abroad, 2011–2013 (percentage)



Note: Data cover only the developing countries that report to the World Bank's Debtor Reporting System.

Since 2010, several regions' debt ratios have changed little. In the future the debt ratio of developing countries is likely to rise in light of a fragile global outlook, soft commodity prices and a 33 per cent increase in developing countries' combined external debt stock since 2010. In particular, increasing short-term debt levels and debt-servicing burdens indicate growing vulnerability.

In 2013, the debt-service-to-export-revenue ratio jumped 88 per cent from the previous year for the Caucasus and Central Asia. This was mainly due to early repayment by Armenia of a $500 million loan to the Russian Federation while the country's exports remained relatively unchanged. In the small island developing States, debt-service-to-export-revenue ratios increased from 6.5 per cent in 2012 to 7.5 per cent in 2013. This can be largely explained by Grenada's repayment of a $14 million loan in 2013, accounting for almost half of the country's principal repayments that year, which totalled $29.4 million.

Thirty-nine countries are eligible for debt relief under the Heavily Indebted Poor Countries initiative. Of these, 36 countries have reached their 'decision points', meaning they have made sufficient progress in fulfilling conditions for relief, and have had future debt payments reduced by $57.8 billion (in end-2013 net present value terms). Of these 36 countries, 1 is between decision point and completion point, while 35 have fulfilled all conditions and are receiving full debt relief under the Multilateral Debt Relief Initiative.

TARGET 8.E

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

Data on sustainable access to affordable essential drugs are limited, but recent evidence suggests improvement

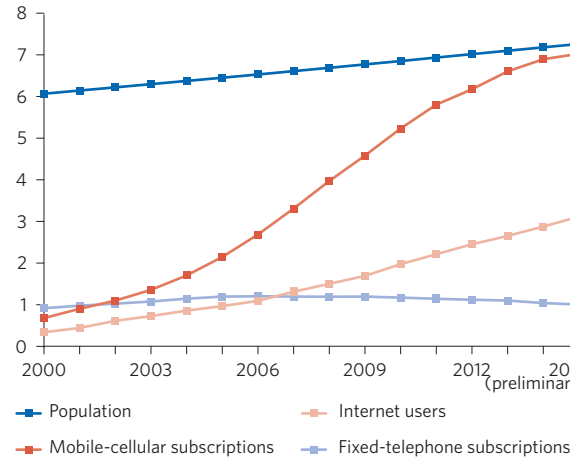
Global and regional data are lacking, but a limited number of surveys undertaken at different times from 2007 to 2014 in low-income and lower-middle-income countries indicate that, on average, generic medicines were available in 58 per cent of public health facilities. By contrast, an average of 67 per cent of private sector facilities had such medicines available. However, availability varies widely across the countries surveyed. Expanding access to essential drugs requires better monitoring of availability of essential drugs and their patient prices in all developing countries.

TARGET 8.F

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

Mobile-cellular and Internet penetration rates have grown strongly, but the digital divide between the rich and the poor is growing

Estimated number of mobile-cellular subscriptions, Internet users and fixed-telephone subscriptions, 2000–2015 (billions)



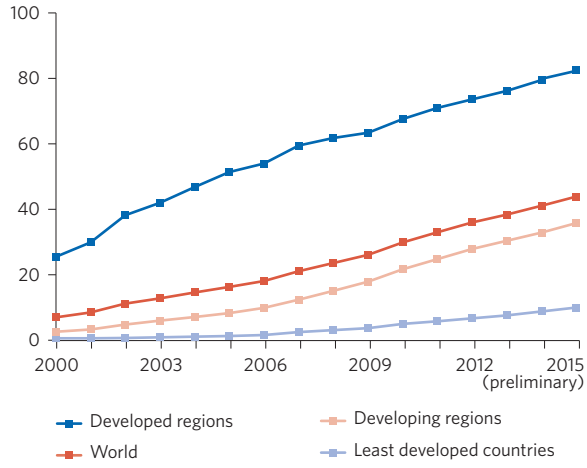
Information and communication technologies (ICTs) have completely transformed the way people live, work and communicate. Their role and importance continue to expand thanks to technological progress, expanding networks, falling prices and growth in applications and content. For instance, the proportion of the population covered by a 2G mobile-cellular network grew from 58 per cent in 2001 to 95 per cent in 2015. The number of mobile-cellular subscriptions has grown almost tenfold in the last 15 years, from 738 million in 2000 to over 7 billion in 2015. Since 2002, the number of mobile-cellular subscriptions has exceeded the number of fixed-telephone subscriptions.

Internet penetration has grown from just over 6 per cent of the world's population in 2000 to 43 per cent in 2015. As a result, 3.2 billion people are linked to a global network of content and applications, including user-generated content and social media. Rapid advances in fixed- and mobile-broadband technologies are continuously improving the type and quality of services available. Mobile broadband has overcome infrastructure challenges, enabling more areas to connect to the Internet. Its penetration rate increased fourfold between 2010 and 2015, reaching 47 per cent.

Smartphones continue to become cheaper and more widespread. Their growing processing power supports the seamless delivery of services to an increasing number of people in every imaginable sector, including banking, retail trade, transport, health and education.

ICT access and use are unequally distributed within and between countries

Number of Internet users per 100 inhabitants, 2000–2015



The digital divide is particularly pronounced with respect to Internet use and quality of access. For instance, just over one third of the population in developing countries uses the Internet, compared to 82 per cent in developed countries. The contrast is even more dramatic in sub-Saharan Africa, where less than 21 per cent of the population uses the Internet, and in LDCs, where the figure is less than 10 per cent.

Internet bandwidth and national backbone capacities are important building blocks for providing affordable high-speed Internet access. They remain a major challenge in many lower-income countries, particularly small island and landlocked developing States. There are also major inequalities across countries in terms of costs of ICT services, availability of ICT skills and availability of relevant and local content.

Also, while the global mobile-cellular penetration rate was 97 per cent in 2015, it reached only 64 per cent in LDCs. An estimated 450 million people living in rural areas still live out of reach of a mobile signal.

Greater funding and innovation are crucial to the implementation of the post-2015 development agenda

As the post-2015 development agenda is being prepared for launching, its breadth and ambition need to be matched by adequate funding and renewed efforts to mobilize innovation, science and technology for sustainable development.

ODA remains critically important for countries with limited capacity to raise public resources domestically. It is important to pay greater attention to the potential of ODA to attract other financial flows, both by blending it with non-concessional public finance and by leveraging private finance and investments. Such market-like instruments may play an important role in financing the post-2015 development agenda.

The changing trade landscape will also demand innovative ways to improve market access and address non-tariff barriers, particularly as trade in services expands. Also, it will be crucial to strengthen the integration of developing countries into the multilateral trade system, as measured by their trade diversification and share in value-added.

Similarly, it will be essential to address the widening digital divide. Only then will the transformative power of ICTs and the data revolution be harnessed to deliver sustainable development for all.

More detailed information and analysis is available from the *MDG Gap Task Force Report 2015*.

The Task Force is an inter-agency initiative that includes more than 30 organizations with specialized competence in the five core domains of the Global Partnership for Development, namely official development assistance, market access (trade), debt sustainability, access to affordable essential medicines and access to new technologies.

A note to the reader

Measuring progress towards the MDGs

Progress towards the eight Millennium Development Goals is measured through 21 targets and 60 official indicators.[1] This report presents an accounting to date of how far the world has come in meeting the goals using data available as of June 2015.[2]

Most of the MDG targets have a deadline of 2015, using 1990 as the baseline against which progress is gauged. Country data are aggregated at the subregional and regional levels to show overall advances over time. The composition of MDG regions and subregions is based on UN geographical divisions, with some modifications necessary to create—to the extent possible—groups of countries for which a meaningful analysis can be carried out. In addition to the MDG regional groupings, the report also shows data for subregions in Africa, based on the classification adopted by the United Nations Economic Commission for Africa.[3] Although the aggregate figures are a convenient way to track progress, the situation of individual countries within a given region may vary significantly from regional averages. Data for individual countries, along with the composition of all regions and subregions, are available at http://mdgs.un.org.

1 The complete list of goals, targets and indicators is available at http://mdgs.un.org.

2 Given the time lag between collecting data and analysing them, few indicators can be compiled for the current year. In this report, 2015 projections are used for most indicators. Other indicators are based on data from earlier years—generally up to 2013 or 2014.

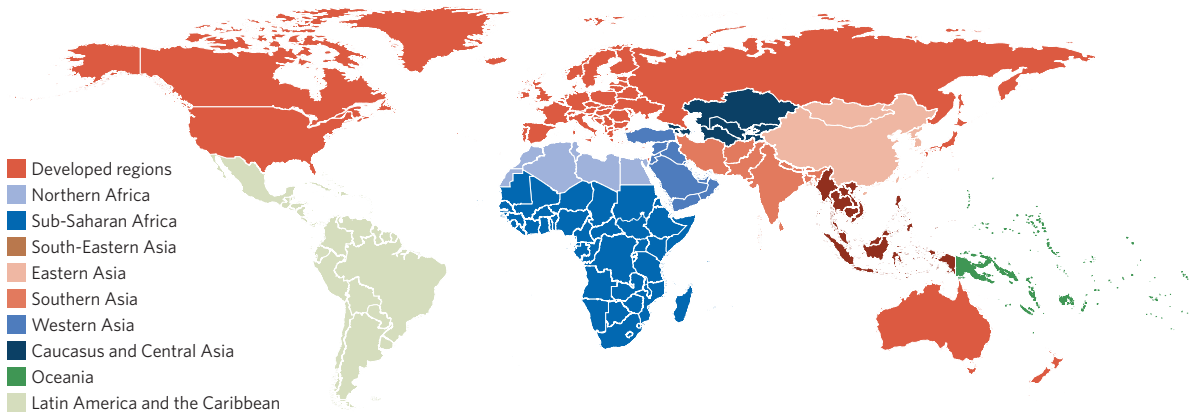
3 The composition of these subregions is shown in the next section 'Regional groupings'.

The basis for this analysis

Regional and subregional figures presented in this report are compiled by members of the United Nations Inter-Agency and Expert Group on MDG Indicators (IAEG). In general, the figures are weighted averages of country data, using the population of reference as a weight. For each indicator, individual agencies were designated as official providers of data and as leaders in developing methodologies for data collection and analysis (see page 72 for a list of contributing organizations).Data are typically drawn from official statistics provided by governments to the international agencies responsible for the indicator. To fill data gaps, data for many of the indicators are supplemented by or derived exclusively from data collected through surveys sponsored and carried out by international agencies.

These include many of the health indicators, which are compiled, for the most part, from Multiple Indicator Cluster Surveys (MICS) and Demographic and Health Surveys (DHS). In some cases, countries may have more recent data that have not yet become available to the relevant specialized agency. In other cases, countries do not produce the data required to compile the indicator, and the responsible international agencies estimate the missing values. Even when national data are available, adjustments are often needed to ensure international comparability. Data from international sources, therefore, often differ from those available within countries. The United Nations Statistics Division maintains the official website of the IAEG and its database (http://mdgs.un.org). In an effort to improve transparency, the country data series in the database are given colour codes to indicate whether the figures are estimated or provided by national agencies; they are also accompanied by metadata with a detailed description of how the indicators are produced and the methodologies used for regional aggregations.

Regional groupings



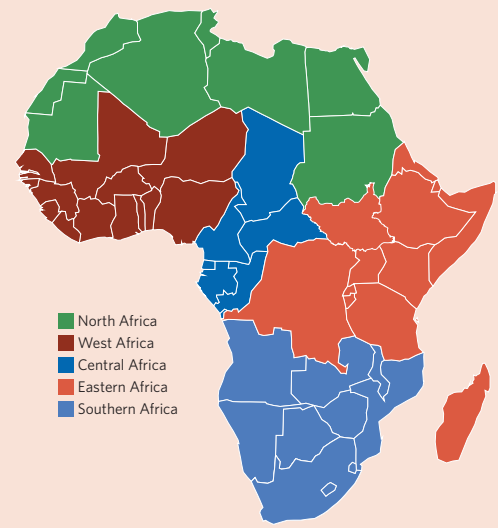
This report presents data on progress towards the Millennium Development Goals for the world as a whole and for various country groupings. These are classified as "developing" regions and "developed" regions.* The developing regions are further broken down into the subregions shown on the map above. These regional groupings are based on United Nations geographical divisions, with some modifications necessary to create, to the extent possible, groups of countries for which a meaningful analysis can be carried out. A complete list of countries included in each region and subregion is available at mdgs.un.org.

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area of its authorities, or concerning the delimitation of its frontiers or boundaries.

* Since there is no established convention for the designation of "developed" and "developing" countries or areas in the United Nations system, this distinction is made for the purposes of statistical analysis only.

African subregions

For some MDG indicators, data are presented separately for smaller subregions in Africa, based on the classification adopted by the United Nations Economic Commission for Africa.



Contributing agencies

Contributions on data and analysis for each target presented under the eight goals were provided by individual agencies as indicated below:

- Goal 1: Eradicate extreme poverty and hunger
  Target 1.A: World Bank and UN-Women
  Target 1.B: ILO
  Target 1.C: FAO and UNICEF
  Additional contribution: UNHCR
- Goal 2: Achieve universal primary education
  Target 2.A: UNESCO
- Goal 3: Promote gender equality and empower women
  Target 3.A: ILO, IPU, UNESCO and UN-Women
- Goal 4: Reduce child mortality
  Target 4.A: UNICEF, United Nations Population Division, World Bank and WHO
- Goal 5: Improve maternal health
  Target 5.A: UNFPA, UNICEF, United Nations Population Division, World Bank and WHO
  Target 5.B: UNFPA, UNICEF and United Nations Population Division
- Goal 6: Combat HIV/AIDS, malaria and other diseases
  Target 6.A: UNAIDS, UNICEF and WHO
  Target 6.B: UNAIDS and WHO
  Target 6.C: UNICEF and WHO
- Goal 7: Ensure environmental sustainability
  Target 7.A: CDIAC, FAO, UNEP and UNFCCC
  Target 7.B: IUCN and UNEP-WCMC
  Target 7.C: UNICEF
  Target 7.D: UN-Habitat
- Goal 8: Develop a global partnership for development
  Target 8.A: ITC, UNCTAD and WTO
  Target 8.B and 8.C: OECD
  Target 8.D: World Bank
  Target 8.E: WHO
  Target 8.F: ITU

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For more information visit the UN Statistics Division Millennium Development Goals website at http://mdgs.un.org.

Visit the UN Millennium Development Goals website at www.un.org/millenniumgoals.

Visit the UN Millennium Campaign Office website at www.endpoverty2015.org.

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Editor: Catharine Way

"2015 is a milestone year. We will complete the Millennium Development Goals. We are forging a bold vision for sustainable development, including a set of sustainable development goals. And we are aiming for a new, universal climate agreement."

— UN Secretary-General BAN Ki-moon

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