



TECHNICAL EDUCATION AND SKILLS DEVELOPMENT AUTHORITY

LABOR MARKET INTELLIGENCE REPORT

THE MILLENNIUM DEVELOPMENT GOALS (MDGs): ARE WE UP TO THE TASKS?

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I. BACKGROUND

In September 2000, member states of the United Nations (UN) gathered at the UN Headquarters in New York, USA for the Millennium Summit to affirm commitments towards reducing poverty and the worst forms of human deprivation. In this summit, world leaders representing 189 member states of the United Nations agreed to help citizens in the world's poorest countries to achieve a better life by the year 2015. The framework for this progress is outlined in the [Millennium Development Goals](#) (MDGs). This summit was focused on various global issues, such as poverty, [AIDS](#), and how to share the benefits of globalization more fairly. The Summit adopted the UN Millennium Declaration which embodies specific targets and milestones in eliminating extreme poverty worldwide. The Declaration emphasizes the thrusts towards development and poverty eradication through peace and security, values and human rights, democracy and good governance. A total of 189 countries, including the Philippines committed themselves to making the right to development a reality for everyone.

To help track progress in the attainment of the 8 goals and 18 targets of the Millennium Development Goals (MDG) over the period 1990 to 2015, experts from the United Nations Secretariat and International Monetary Fund (IMF), Organisation of Economic Cooperation and Development (OECD) and the World Bank identified and selected a set of time-bound and measurable indicators. Data series on the 48 MDG indicators are compiled to provide the basis for the preparation of progress reports by member states of the United Nations (UN) on the implementation of the UN Millennium Declaration.

For most nations to achieve the MDGs, they must get not only additional financial resources from both domestic and external sources, but should also formulate policies and set up an institutional environment that will ensure that the resources are used efficiently and effectively.

II. SPECIFICALLY, WHAT ARE THE MDGs?

MDG stands for Millennium Development Goals – a set of time-bound and measurable goals and targets for combating poverty, hunger, diseases, illiteracy, environmental degradation and discrimination against women. It consists of 8 goals, 18 targets and 48 indicators, covering the period 1990 to 2015.

The MDGs were developed out of the eight chapters of the Millennium Declaration, signed in September 2000. There are eight goals with 21 targets, and a series of measurable indicators for each target.

The attainment of the MDGs can be measured through a set of indicators defined by the UN that will be able to assess progress over the period 1990 to 2015.

The UN aims that by 2015, the following goals have been achieved.



III. HOW THE WORLD IS FARING RELATIVE TO THE MDGs?

MDG Bright Spots

The 2012 Millennium Development Goals Report cited that with still three years to go before the set deadline, broad progress on the MDGs have achieved significant results. Through the concerted efforts of the governments, the United Nations family, the private sector and the civil society, significant achievements were recorded ahead of the prescribed timeline.

- *Extreme poverty is falling in every region*

MDG monitoring pointed out that the number of people living in extreme poverty and poverty rates fell in every developing region – including the Sub-Saharan Africa. The proportion of people living on less than US\$1.25 a day fell from 47 percent in 1990 to 24 percent in 2008. This is equivalent to a reduction from over 2 billion to less than 1.4 billion people. Preliminary estimates of 2010 figures would point to even brighter prospects. It indicates that the global poverty rate of US\$1.25 fell to less than the 1990 rate. This being the case, the target of halving the poverty rate was already achieved way ahead of the deadline.

- *The target of halving the proportion of people without access to improved sources of water has been already met*

Figures in 2010 already confirmed that this target has been already achieved. The proportion of people using an improved water source rose from 76 percent to 89 percent in 2010. This means that for the period 1990 to 2010, over two billion people were able to gain access to improved drinking water sources, such as protected wells and piped sources.

- *Improvements in the lives of 200 million slum dwellers exceeded the slum target*

The share of urban residents in the developing world living in slums declined from 39 percent in 2000 to 33 percent in 2012. More than 200 million gained access to either improved water sources, improved sanitation facilities, or durable or less crowded housing. This significantly exceeded the target of improving the lives of at least 100 million slum dwellers.

- *The world already achieved parity in primary education between girls and boys*

Statistics showed that many more of the world's children are enrolled in school at the primary level especially since 2000. Girls actually benefited the most as the ratio between the enrolment rate of girls and that of boys grew from 91 in 1999 to 97 in 2010 for all developing regions. The gender parity index value of 97 falls within the plus-or-minus 3-point margin of 100 percent, the accepted measure of parity.

- *Many countries have made significant progress towards universal primary education*

Enrolment rates of children of primary school age increased considerably in sub-Saharan Africa from 58 to 76 percent for the period 1999 and 2010. Countries in this particular region succeeded in the reduction of their relatively high out-of-school rates despite growing primary school age population.

- *Child survival progress is gaining momentum*

Despite growing population worldwide, under-five child mortality declined from more than 12 million in 1990 to 7.6 million in 2010. Sub-Saharan Africa, the region with the highest under-five child deaths, has doubled its average rate of reduction, from 1.2 percent a year during the 1990-2000 period to 2.4 percent for the period 2000-2010.

- *Increased access to treatment for people affected with HIV*

By 2010, around 6.5 million people were receiving treatment for HIV/AIDS in developing regions. The total represented an increase of over 1.4 million people from 2009 data. This is the largest one-year increase ever for this MDG.

- *Achievement of halting and beginning to reverse the spread of tuberculosis is on track*

Incidence rates of tuberculosis have been declining since 2002. Projections would point that the 1990 death rates will be halved by 2015.

- *Global malaria deaths have declined*

The estimated incidence of malaria has decreased globally, by 17 percent since 2000. Malaria-specific mortality rates for the period also declined by 25 percent. Reported malaria cases fell by more than 50 percent from 2000 to 2010 in 43 of the 99 countries with malaria cases.

MDGS Lagging Behind

Slow advances were recorded in a number of MDGs especially with the advent of the global crisis in 2008-2009.

- *Marginal reduction in vulnerable employment over 20 years*

Vulnerable employment which is defined as the share of unpaid family workers and own-account workers in total employment accounted for an estimated 58 percent in 2011. This reflected a decline of merely 9 percentage points from 67 percent two decades ago. Women and youths are more likely to find themselves in such insecure and poorly remunerated positions than the rest of the employed population.

- *2015 Maternal mortality targets way beyond reach*

Despite significant improvements in maternal health and reduction in maternal deaths, progress has been slow. Reductions in adolescent child-bearing and expansion of contraceptive use have been continuing but still at a slower pace.

- *Hunger remains a challenge*

Recent FAO estimates of undernourishment pointed out that around 850 million are suffering from hunger worldwide in the 2006/2008 period which is equivalent to 15.5 percent of global population. This means that despite improvements in income poverty, hunger incidence is still prevalent.

IV. PERFORMANCE OF THE PHILIPPINES IN SUPPORT OF THE MDGS

The Philippines, as one of the signatories in the United Nations Millennium Declaration has come up with ***Philippines Progress Report on the Millennium Development Goals***. The report not only defines where the country is relative to the MDGs, but also outlines the challenges that have to be overcome in order to attain these goals. The report is being prepared by the National Economic and Development Authority (NEDA) through the collaborative efforts of the Multi-sectoral Committee on International Human Development Commitments (MC-IHDC) and the Social Development Committee (SDC).

In further support of the MDGs and to institutionalize the monitoring process on MDG indicators, the National Statistical Coordination Board (NSCB) issued [Resolution #10 series of 2004](#) designating the NSCB as repository of MDG indicators. As such,

NSCB compiled the available statistics from various sources needed in monitoring the country's progress towards the attainment of the MDGs.

Reports would show that the Philippines has been doing well in the following areas: (a) reducing under-five mortality rate and infant mortality rate; (b) reducing both the prevalence rate and the death rate associated with malaria; (c) increasing tuberculosis treatment success rate; (d) increasing the proportion of households with access to safe water supply; and (e) providing equal opportunities for girls in the area of education.

However, the country needs to catch up in three major areas where we are lagging behind: poverty, education and maternal health.

The Philippine Progress Report indicates that a significant proportion of population has remained poor over the past two decades and that poverty incidence among the population even worsened from 30.0 percent in 2003 to 32.9 percent in 2006. There is thus this need to intensify the implementation of effective antipoverty interventions to improve the welfare and income status of the poor and the vulnerable groups.

On education, the current trend in elementary participation, survival and completion rate suggests that the target of universal access to elementary education might not be achieved if we do not address factors that continually affect efforts in keeping the children in school. These factors include poverty, poor health, peace and order and child labor, among others. Moreover, efforts should be focused on boys to achieve gender equality in education.

On health, there is a need to increase investments in improving maternal health as the current rate of decline in maternal mortality ratio indicates that the 2015 target of 52 deaths per 100,000 live births is unlikely to be met. There is also a need to intensify efforts to reduce the HIV and AIDS prevalence.

Below is the MDG Scorecard of Philippine Performance in the MDGs

Statistics at a glance of the Philippines' Progress based on the MDG Indicators as of October 2012

Goals/Targets/Indicators	Baseline	Target	Latest	Probability	
GOAL 1. ERADICATE EXTREME POVERTY AND HUNGER					
target 1.A	Halve, between 1990s and 2015, the proportion of people whose income is less than one dollar a day				
indicator 1.1A	Proportion of population below national poverty threshold **	33.1 1991	16.6 2015	26.5 2009	Medium
indicator 1.2	Poverty gap ratio **	8.6 1991	4.3 2015	2.7 2009	High
indicator 1.3	Share of poorest quintile in national consumption	6.2 1991	increasing	6.2 2009	

Goals/Targets/Indicators	Baseline	Target	Latest	Probability
target 1.B	Achieve full and productive employment and decent work for all, including women and young people			
indicator 1.4	Growth rate of GDP per person employed 1.6 1990	increasing	0.5 2011	
indicator 1.5	Employment-to-population ratio 59.0 1990	increasing	60.1 2011	
indicator 1.6	Proportion of employed population living below the national poverty threshold 20.5 2003	decreasing	22.4 2009	
indicator 1.7	Proportion of own-account and contributing family workers in total employment 51.3 1990	decreasing	41.2 2011	
indicator 1.7a	Proportion of own-account (self-employed) workers in total employment 35.6 1990	decreasing	29.6 2011	
indicator 1.7b	Proportion of contributing (unpaid) family workers in total employment 15.7 1990	decreasing	11.6 2011	
target 1.C	Halve, between 1990 and 2015, the proportion of people who suffer from hunger			
indicator 1.8	Prevalence of underweight children under 5 years of age using Child Growth Standards (CGS) 26.5 1992	13.6 2015	20.2 2011	Medium
indicator 1.9	Percent of household with per capita energy less than 100% adequacy 74.2 1993	37.1 2015	66.9 2008	Low
indicator 1.9a	Proportion of population with mean one-day energy intake less than 100% adequacy		73.3 2008	
indicator 1.9b	Proportion of population below national subsistence (food) threshold ** 16.5 1991	8.25 2015	10.8 2009	High
GOAL 2. ACHIEVE UNIVERSAL PRIMARY EDUCATION				
target 2.A	Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling			
indicator 2.1	Net enrolment ratio in primary education 84.6 1990	100.0 2015	91.21 2011	Medium
indicator 2.2	Proportion of pupils starting grade 1 who reach grade 6 (Cohort Survival Rate) 69.7 1990	100.0 2015	73.76 2011	Low
indicator 2.2a	Primary completion rate 64.2 1990	100.0 2015	70.96 2011	Low
indicator 2.3	Literacy rate of 15 to 24 years old 96.6 1990	100.0 2015	97.8 2008	Low

Goals/Targets/Indicators		Baseline	Target	Latest	Probability
indicator 2.3a	Ratio of literate females to males of 15-24 year-old	1.0 1990	1.0 2015	1.0 2008	High
GOAL 3. PROMOTE GENDER EQUALITY AND EMPOWER WOMEN					
target 3.A	Eliminate gender disparity in primary and secondary education preferably by 2005 and to all levels of education no later than 2015				
indicator 3.1a	Ratio of girls to boys in primary education	1.0 1996	1.0 2015	1.1 2011	High
indicator 3.1a.1	Ratio of girls to boys in elementary participation rates	1.0 1996	1.0 2015	1.0 2011	High
indicator 3.1b	Ratio of girls to boys in secondary education	1.1 1996	1.0 2015	1.0 2011	High
indicator 3.1b.1	Ratio of girls to boys in secondary participation rates	1.2 1996	1.0 2015	1.2 2011	Low
indicator 3.1c	Ratio of girls to boys in tertiary education	1.3 1993	1.0 2015	1.2 2010	Low
indicator 3.2	Share of women in wage employment in the non-agricultural sector	40.1 1990	50.0 2015	41.9 2009	High
indicator 3.3	Proportion of seats held by women in national parliament	11.3 1992	50.0 2015	21.4 2010	Low
GOAL 4. REDUCE CHILD MORTALITY					
target 4.A	Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate				
indicator 4.1	Under-five mortality rate	80.0 1990	26.7 2015	30 2011	High
indicator 4.2	Infant mortality rate	57.0 1990	19.0 2015	22 2011	High
indicator 4.3	Proportion of 1 year-old children immunized against measles	77.9 1990	100.0 2015	90.6 2009	Medium
GOAL 5. IMPROVE MATERNAL HEALTH					
target 5.A	Reduce by three-quarters, between 1990 and 2015, the maternal mortality ratio				
indicator 5.1	Maternal mortality (based on 7-12 PMDF*** range)	121-207 1990	30.3-51.8 2015	95-163 2010	Low
indicator 5.2	Proportion of births attended by skilled health personnel	58.8 1990	100.0 2015	74.3 2009	Low
target 5.B	Achieve, by 2015, universal access to reproductive health				
indicator 5.3	Contraceptive prevalence rate	40.0 1993	100.0 2015	48.9 2011	Low
indicator 5.5a	Antenatal care coverage (at least one visit)	91.2 1993	increasing	96.5 2011	
indicator 5.5b	Antenatal care coverage (at least	52.1	increasing	78	

Goals/Targets/Indicators		Baseline	Target	Latest	Probability
	four visits)	1993		2011	
indicator 5.6	Unmet need for family planning	26.2 1993	decreasing	19.3 2011	
GOAL 6. COMBAT HIV/AIDS, MALARIA AND OTHER DISEASES					
target 6.C	Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases				
indicator 6.6a	Prevalence associated with malaria	118.7 1990	0.0 2015	13.3 2008	High
indicator 6.6b	Death rate associated with malaria	1.4 1990	0.0 2015	0.2 2006	High
indicator 6.8a	Prevalence associated with tuberculosis	246.0 1990	0.0 2015	273.1 2008	Low
indicator 6.8b	Death rate associated with tuberculosis	39.1 1990	0.0 2015	29.7 2006	Low
indicator 6.9a	Proportion of tuberculosis cases detected under directly observed treatment short course (DOTS)	53.0 2001	70.0 2015	72.0 2008	High
indicator 6.9b	Proportion of tuberculosis cases cured under directly observed treatment short course (DOTS)	73.0 2001	85.0 2015	79.0 2008	High
GOAL 7. ENSURE ENVIRONMENTAL SUSTAINABILITY					
target 7.A	Integrate the principles of sustainable development into country policies & programmes to reverse the loss of environmental resources				
indicator 7.1	Proportion of land area covered by forest	20.5 1990	increasing	23.9 2003	
indicator 7.2	Consumption of ozone-depleting CFCs (ODP tons)	2981 1990	decreasing	236 2009	
target 7.B	Reduce biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss				
indicator 7.5a	Ratio of area protected to maintain biological diversity to surface area	8.5 1990	increasing	13.5 2010	
indicator 7.6a	Number of species threatened with extinction	183 1992	decreasing	209 2011	
target 7.C	Halve, by 2015, the proportion of population without sustainable access to safe drinking water and improved sanitation				
indicator 7.7	Proportion of families with access to safe water supply	73.0 1990	86.5 2015	84.8 2010	High
indicator 7.8	Proportion of families with sanitary toilet facility	67.6 1990	83.8 2015	92.5 2010	High
target 7.D	By 2020, have achieved significant improvement in the lives of at least 100 million slum dwellers				
indicator 7.9	Proportion of families with access to	91.0	increasing	90.8	

Goals/Targets/Indicators		Baseline	Target	Latest	Probability
	secure tenure	1990		2010	
GOAL 8. DEVELOP A GLOBAL PARTNERSHIP FOR DEVELOPMENT					
target 8.D	Deal comprehensively with the debt problems of developing countries thru national & international measures in order to make debt sustainable in the long term				
indicator 8.12	Debt service as a percentage of exports of goods and services	27.2 1990	decreasing	11.2 2010	
target 8.F	In cooperation with the private sector, make available the benefits of new technologies, especially information and communications				
indicator 8.14	Telephone lines subscribers per 100 population	1.5 1990	increasing	3.7 2011	
indicator 8.15	Cellular phone subscribers per 100 population	0.1 1991	increasing	95.2 2011	

* based on the comparison of actual (from baseline to latest data) and required (from baseline to target year) rates of progress

** Estimates were based on the refined methodology on estimating official poverty statistics as approved by the NSCB Executive Board on 1 February 2011.

*** Proportion of maternal deaths to total female deaths in the reproductive age groups (PMDF)

Probability of Achieving the Goal:

- *Low ; Pace of Progress is less than 0.5*
- *Medium ; Pace of Progress between 0.5 and 0.9*
- *High ; Pace of Progress is greater than 0.9*

Source: NSCB

V. THE ROLE OF TESDA

TESDA provides support services relative to the attainment of identified MDGs like the **Goal 1: Eradicate Extreme Poverty and Hunger** specifically in achieving full and productive employment and decent work for all, including women and young people. This is in recognition that technical vocational education and training (TVET) is an intervention that is rapid, flexible and short-term that lead people to acquire decent and productive jobs.

Another is that of **Goal 3: Promote Gender Equality** that aims at eliminating gender disparity in primary and secondary education, preferably by 2005, and all levels of education not later than 2015. Thus, programs like gender sensitivity trainings and training women in non-traditional qualifications are some of TESDA's contributions in the achievement of this particular goal.

VI. WAYS FORWARD TOWARDS MEETING THE 2015 CHALLENGE

The Philippine Progress Report on the MDGs cited that in order to ensure that the Philippines moves forward towards the achievement of the MDGs, the following are needed.

Sustained economic growth. The country needs to attract more local and foreign investments to spur economic growth. Thus, physical infrastructure has to be improved; water and power have to be made available at competitive rates, and improving the business climate through easing the policies on doing business.

Better population management. While annual population growth rate has been reduced from 2.3% to 2.04 %, the growth rate is still high. There is a need to support informed family choices for couples to guide them in freely determining the number and spacing of their children.

Greater focus on underserved areas. Spatial disparities in the achievement of the MDGs are large. The national figures showed considerable disparities across regions, provinces, municipalities and barangays. In general, regions in Luzon tend to fare better than those in Visayas and Mindanao. Regions, such as ARMM, Region 8 in Eastern Visayas, and 4-B in MIMAROPA, are lagging behind in many indicators and would need greater attention to catch up with the other regions.

Adequate safety nets. Man-made and natural calamities are very much prevalent in the country. These shocks tend to move non-poor families into poverty, and poor families into greater poverty due to displacements and damages. Adequate and effective safety nets are needed to minimize movements into poverty.

Improved targeting. Economic growth does not necessarily redound to poverty reduction. There is a need for measures to ensure equitable distribution of the benefits of growth. Leakages and exclusion being experienced in programs intended to benefit the poor must be reduced if not eradicated.

Improved peace and security. Peace and security concerns must be addressed. Armed conflicts must be avoided as these presented challenges in promoting economic growth and in the delivery of necessary services in conflict-affected areas.

Improved governance and transparency. Improved governance, greater transparency and accountability will ensure that the available resources are directed towards priority areas and used more efficiently. Regular monitoring and evaluation of government programs will ensure that the expected outcomes are achieved.

Equitable and efficient use of resources. More equitable and efficient use of resources would be required to provide more and better social services. Closer coordination among national government agencies, local government units, private sector and international donor organizations will facilitate complementation of resources and ensure well-targeted and sustained delivery of services.

Greater advocacy and localization. Major strategy to attain the MDGs is intensifying its localization. Greater awareness of the MDGs among local governments will facilitate the incorporation of needed programs in the local development plans and budgets.

Strengthen public-private partnerships. Also, recognizing the significant role of key players in realizing the MDGs, there is a need to strengthen further public-private partnerships. The business sectors through their corporate social responsibilities (CSRs), the NGOs and other civil society organizations (CSOs) to supplement what the government is doing in order to fill the gaps especially in the hard to reach areas.

Although some progress has been made, but there is only three years to go. Really we need to transform the country's current rate into faster progress. The Philippines committed to achieve the MDGs by 2015 and have made a promise to end all forms of human deprivation. With remaining years, the daunting task still is to double or even triple our efforts in instituting change – to keep the 2015 promise.