

## The ABCs of the MDGs

### About the Millennium Development Goals

At the U.N. Millennium Summit in 2000, world leaders agreed to address extreme poverty and the challenges of development worldwide by 2015. By 2001, the effort had been refined to eight broad **Millennium Development Goals** (MDGs). The MDGs are not new, but a consolidation of development objectives that government leaders endorsed at international conferences and summits throughout the 1990s.

- They are based on partnership between developed and developing countries.
- Each goal is associated with specific *targets* that can be measured with particular named *indicators*. These are limited and well-defined so as to focus national and international priority-setting and enable effective monitoring of progress.

### The Heart of the MDGs

**Goal #5 – Improve Maternal Health** is often called the heart of the MDGs, because if it fails, the others will too.

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

- **Indicator 16:** Maternal mortality ratio
- **Indicator 17:** Proportion of births attended by skilled health personnel

- In October 2006 the U.N. General Assembly noted the Secretary-General's recommendation to include under Goal #5 the following new **Target: Achieve, by 2015, universal access to reproductive health.**
- Proposed new **indicators** for measuring progress to this target are being considered at the United Nations. They are:
  - Adolescent birth rate;
  - Antenatal care coverage;
  - Unmet need for family planning; and
  - Contraceptive prevalence rate.
- The changes in sexual and reproductive health care policy and practice required to reach Goal #5 directly underpin Goals #3 through #8 and indirectly determine the achievement of Goals #1 and #2.

### The Other MDGs

Maternal and child health care is critical to each MDG. National plans must provide for:

- Access to comprehensive reproductive health services;
- Universal education in sexual and reproductive health care; and
- Care by skilled nurses, midwives or doctors during pregnancy and childbirth, including emergency services, as well as care for mothers and newborns after delivery. Movement toward all the MDGs will then become easier.

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Invest in women – it pays



## **The Eight Millennium Development Goals**

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

Smaller families and wider birth intervals from reproductive health care, including contraceptive use, allow families to invest more in each child's nutrition and health. When a woman is too ill, anaemic or hungry to work, her household economic situation deteriorates and poverty increases; her children are less likely to attend school. A woman's death in childbirth deprives her family and community of her contributions.

### **Goal #2: Achieve universal primary education.**

Every year of education for girls and women improves their families' health and nutrition and raises their economic output. Families with fewer children can afford to invest more in their education, making it more likely that girls will be sent to and stay in school.

### **Goal #3: Promote gender equality and empower women.**

Women who can plan the timing and number of their births and count on safe motherhood will have greater opportunities for work, education and civil involvement. Discrimination and violence against girls and women not only abuse their human rights, but also rob society of critical energy, economic production and creative talent.

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

Care for the health of mothers is inseparable from the health of newborns. Those whose mothers die are three to 10 times more likely to die within two years than those whose mothers survive. Young girls married off at puberty bear children at risk: babies born to girls under 15 are five times as likely to die as those born to women in their 20s.

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

Improving maternal health – by cutting maternal mortality by three-quarters by 2015 and guaranteeing universal access to reproductive health – is often called the heart of the MDGs, because if it fails, the other MDGs will too. Investment in reproductive health care, education, emergency obstetric services and skilled care at delivery will enable women to deliver – not just the next generation but also paychecks and productivity -- everything development advocates work to achieve.

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

Comprehensive sexual and reproductive health care includes preventing and treating HIV/AIDS and other sexually transmitted infections. Antenatal and post-natal care facilities can bring mothers and their families into the health care system, encouraging diagnosis and treatment of many other illnesses for many more people.

### **Goal #7: Ensure environmental sustainability.**

Helping women avoid unintended pregnancies and to stay healthy and economically productive through pregnancy and motherhood helps stabilize rural areas, slows urban migration and balances natural resource use with the needs of the population.

### **Goal #8: Develop a global partnership for development.**

Healthy and economically productive women can be half of every country's engine for growth and development. Affordable prices for drugs, global economic stability and a secure supply of commodities would greatly advance reproductive health programmes, and are especially needed in developing countries.