

PHILIPPINE PROGRESS ON MDGS: AN UPDATE

Mercedes B. Concepcion, PhD

National Scientist

The Millennium Development Goals (MDGs) are part of the Millennium Declaration by 189 countries, including 147 Heads of State, in September 2000. The goals and targets are inter-related and should be viewed as a whole. Built on the outcomes of the international conferences of the 1990s, the Millennium Declaration marked a strong commitment to the right to development, to the eradication of the many dimensions of poverty, and to gender equality and the empowerment of women. The Declaration mainstreams into the global development agenda eight mutually reinforcing goals, to be achieved by 2015, that are driving national development and international cooperation.



The NAST's Social Sciences Division proposed that the theme of the Academy's 32nd Annual Scientific Meeting on 14-15 July 2010 be: *MDGs and Beyond: Are We Making Progress?*

The following paragraphs excerpted from the Proceedings of the 32nd ASM (NAST, 2010) highlight the country's progress, if any, in meeting the MDGs and recommendations for accelerating progress.

MDG 1: Eradicate Extreme Poverty and Hunger

The targets are to halve, between 1990 and 2015, (a) the proportion of the population

whose income is less than one US dollar a day (now adjusted to one US dollar and twenty-five cents), and (b) the proportion who suffer from hunger. Since 2008, a third target was added, i.e., to achieve a full and productive employment and decent work for all, including women and young people. These targets are supported by nine indicators linked to progress monitoring. The four indicators used by the Government to track efforts pertaining to poverty and hunger are: (1) proportion of population with income below the official poverty threshold; (2) the proportion of population with income below the official food threshold (also referred to as subsistence threshold); (3) prevalence of underweight children under 5 years of age; and (4) proportion of households with per capita intake below 100 percent dietary energy requirement. Based on official data as reported by Balisacan (NAST, 2010), the country is broadly on its way to achieving MDG 1 despite the increase of poverty in 2006. The probability of halving the proportion of the population whose incomes are below the official poverty lines, between 1991 and 2015, is medium or average. So are the two indicators of hunger. The chance of achieving the target is high for the proportion of the population whose incomes are below the food threshold.

In February 2011, the National Statistical Coordination Board (NSCB) reported a refinement in the methodology for estimating poverty as of 2009. The refined methodology did not change the definition of poverty but was meant to better measure the poor and to ensure comparability over space and time. The chance of halving poverty between 1990 and 2015 using the 2009 poverty estimates, declined but remains at medium.



MDG 2: Achieve Universal Primary Education

Under this MDG, the target is to ensure

that by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling. Using the four indicators—net enrolment ratio based on the national growth rate 6-11; net enrolment ratio based on age-specific n; cohort survival rate and completion rate, the likelihood of meeting the targets as reported by Bautista (NAST, 2010) is <u>low</u>. However, against the backdrop of existing policies and programs, it may be possible to come very close to the goal, if not realize it by 2015, provided that the DepEd implements vigorously the Basic Education Reform Agenda (BESRA). The potential of BESRA rests on School-Based Management (SBM) which enables schooland community-level stakeholders to use their empowerment to chart the course and means of their progress towards achieving better education outcomes. Unless BESRA is seen as the most promising guide to quality basic education, a potentially meaningful reform mission that could enable the Philippines to meet the MDG commitments will merely be perceived as burdensome work.

MDG 3: Promote Gender Equality and Empower Women

Eliminating gender disparity in primary and secondary education, preferably by 2005, and

in all levels of education by 2015 is the target of MDG 3. Over the last decade, there has been a marked improvement in the school participation rates of females compared to males across the three levels of education and based on such indicators as simple literacy rate, functional literacy rate, enrollment figures, cohort survival rate, completion rate and number of graduates in higher education.

The gap in women's participation across various professional fields has narrowed as well in recent years. In the 2008 Gender Gap Index Report prepared by the World Economic Forum, the Philippines placed sixth (6th) among 130 countries, the same rank the country had in 2007 and 2006. The Report measures the size of the gender gap in four critical areas of inequality between women and men such as economic participation and opportunity, educational attainment, political empowerment and health and survival. The Philippines, one of two countries in Asia to have closed the gender gap in both education and health is one of only eleven in the world to have done so.

According to Sobritchea (NAST, 2010), the full attainment of MDG 3 will depend on the extent to which the Philippine Government, in collaboration with various stakeholders, will be able to resolve the gender issues that impede the capacity of females to perform their roles and responsibilities to their families and to their communities.





4 goal to reduce childhood mortality from its 1990 level is likely to be reached as evident in the decline of different measures of childhood death such as infant and under-five mortality rates. Nevertheless, closer examination of the data, especially the disaggregation by population groups and provinces, should alert the health sector to avoid complacency. The most recent figures reveal that the rate of reduction of childhood deaths appears to be leveling off. The trend for neonatal deaths has actually leveled off, emphasizing the fact that the care of newborns is very closely related to the care of mothers at or around the period of childbirth. Gross disparities in the rates of childhood deaths among population groups disclose that neonatal, post-neonatal, infant and under-five mortality rates are inversely associated with education and income. Most of these inequities can be accounted for by access to services.



MDG 5: Improve Maternal Health Care

Should the current trend continue, the overall maternal mortality ratio (presently estimated at 162 as measured by the 2006

Family Planning Survey), is forecast to decrease to 140 by 2015, 2.7 times the target of 52 (Romualdez, 2010). The contraceptive prevalence rate (CPR) as a measure of access to reproductive health services is projected to increase from the 50.7 percent in 2008 to about 60 percent by 2015—far below the target of 80 percent. Thus, without extraordinary effort in the health sector, attaining MDG 4 is <u>virtually impossible</u>.

The inequalities in outcomes between population groups and among regions seen for child health care are even more dramatic for maternal health indicators. Maternal mortality ratios in economically advantaged large metropolitan areas and among higher income groups approximate those of developed countries while ratios in depressed areas and among the poor generally above the national average of 162, are similar to those of least developed countries.



MDG 6: Combat HIV/AIDS, Malaria and Other Infectious Diseases

HIV/AIDS

Salvaña (2011) revealed that the discovery of protease inhibitors in the 1990s and the use of Highly Active

Antiretroviral Therapy (HAART) led to the decline globally in the number of HIV positive cases and the number of deaths among those so afflicted. Since 1984, 7,684 cases were reported in the Philippines but one-half of these were listed in the last three years. A shift in sexual transmission from heterosexual to homosexual and in the number of men and women aged 15-24 being infected with HIV was noted.

Given the increase in the number of HIV cases seen in the past two years and more so in the first five months of 2010, the likelihood of the target for HIV/AIDS being attained is very low. The local HIV response can be characterized by the low coverage of prevention programs which results in poor knowledge, low condom use among most-at-risk populations and low perception of risk among the youth (Montoya based on Fantone, 2010).

MALARIA

A marked decline in the overall malaria morbidity and mortality occurred in the country suggesting that the Philippines may be able to achieve the MDG 6 target for malaria. The second target of increasing insecticide-treated bednets (ITN) coverage in children under 5 years of age, the country's progress cannot be accurately assessed due to unavailability of baseline coverage rates. Access to accurate diagnosis, appropriate treatment, effective prevention of transmission and health education to improve health-seeking behavior need to be addressed with vigor(Montoya based on Belizario, 2010).

TUBERCULOSIS

There is sufficient evidence that the Philippines can achieve the targets as detection rates have been reached, success rates exceeded and cure rates approaching targets, using WHO indicators (Montoya based on Yu, 2010).

As far as the MDG target on TB-related death rates is concerned, the Philippines will be able to achieve the target as long as WHO baseline indicators are followed. The prevalence based on surveys may be halved by 2015 but there is cause for concern because recent data reveal that the incidence rates target may not be achieved.

Baseline targets for death rates and prevalence rates as currently reported by NSCB need to be realigned to adhere to international standards set by WHO. The government, stakeholders, partners and the National TB Program need to redouble their efforts to achieve the MDG TB targets with the Philippines probably missing the targets due to problems of case reporting, supply chain for diagnostics and drug supply, waning political support for the TB control program and donor fatigue.

MDG 7: Ensure Environmental Sustainability

MDG 7 targets include (1) integrating

the principles of sustainable development into country policies and programs and reverse the loss of environmental resources; (2) halve, by 2015, the proportion without sustainable access to safe drinking water and basic sanitation; and (3) by 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers. The first has been integrated into the Medium-Term Philippine Development Plan (MTPDP) 2004-2010 with "Philippine Agenda 21" as guiding document. However, Alcala and Azanza (NAST, 2010) have reservations on the quality of available data. For the second, while the NSO data suggest that three-fourths of the population have access to safe drinking water and to sanitation facilities, the authors question the definitions used and coverage of the data. Harmonization and synchronization of programs with other efforts has to be undertaken and an audit done on

From 2000 to 2006, about 710,203 urban poor were to be found in the National Capital Region, Regions 1, 4a and 4b, and 5. Data are lacking as to whether the urban poor in these areas have been relocated and given security of tenure, i.e., house and lot, house only or lot only.

these programs for transparency and efficiency.

Climate change has to be mainstreamed in the Philippine Development Agenda especially for the poor whose plight is aggravated by degraded natural and manmade resource bases, giving rise to widespread poverty. The initiatives and achievement of the country in relation to MDG goals and indicators can only be assessed if sufficient and reliable data are available.

For the latest MDG Watch compiled by the NSCB which is tasked with monitoring the country's progress toward meeting the MDG goals, please check their website (http://www.ncsb.gov.ph/mdg).

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National Scientist Mercedes B. Concepcion is the chair of the Social Sciences Division and Vice President of NAST Philippines.

The full copy of MDGs And Beyond: Are We Making Progress? is available at the NAST website or office: (http://www.nast.ph; secretariat@nast.ph).

The National Academy of Science and Technology, Philippines, Level 3 Science Heritage Building, DOST Complex, General Santos Ave., Bicutan, Taguig City 1631, Metro Manila, Philippines.

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