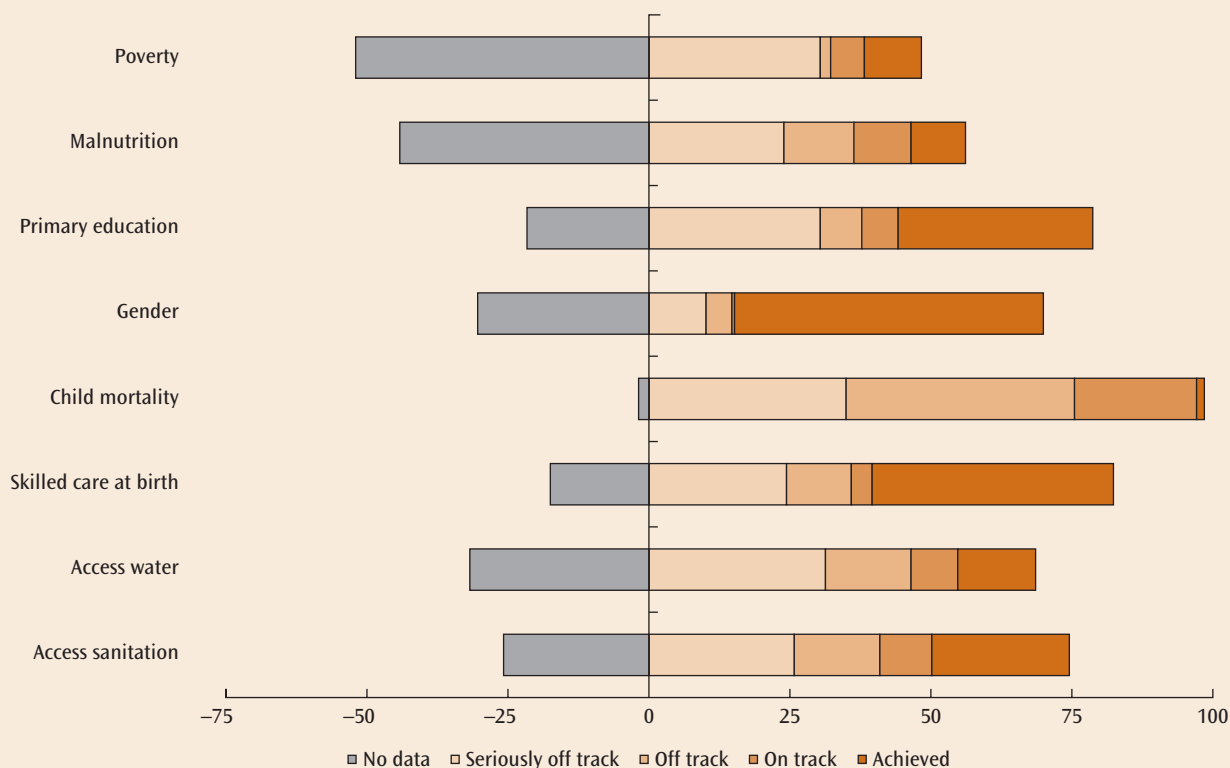


# Millennium Development Goals— Charting Progress

The following figures and commentary provide an overview of the main trends in country and regional progress toward achieving the Millennium Development Goals. Owing to the limitations of both data and space, the coverage here is selective. An overview of performance can be seen from the figure below showing the shares of all developing countries globally that have achieved or are on track to meet the development goals, are off track and seriously off track to meet them, or countries for which there are insufficient data. It is immediately evident that for these targets many countries simply do not have adequate data to measure their performance, partic-

ularly for poverty (over half), malnutrition, gender, and access to improved water. From the available data, those targets for which the greatest progress has been made include gender equality (as measured by gender parity in primary and secondary school enrollment), access to skilled care at birth (a proxy measure for maternal mortality), and reaching 100 percent primary school completion. Those targets lagging most severely include reducing child mortality, halving extreme poverty, and improving child nutrition. The global challenge of meeting the MDGs remains daunting.

## Global Progress toward the MDGs—Select indicators



Source: World Bank staff.

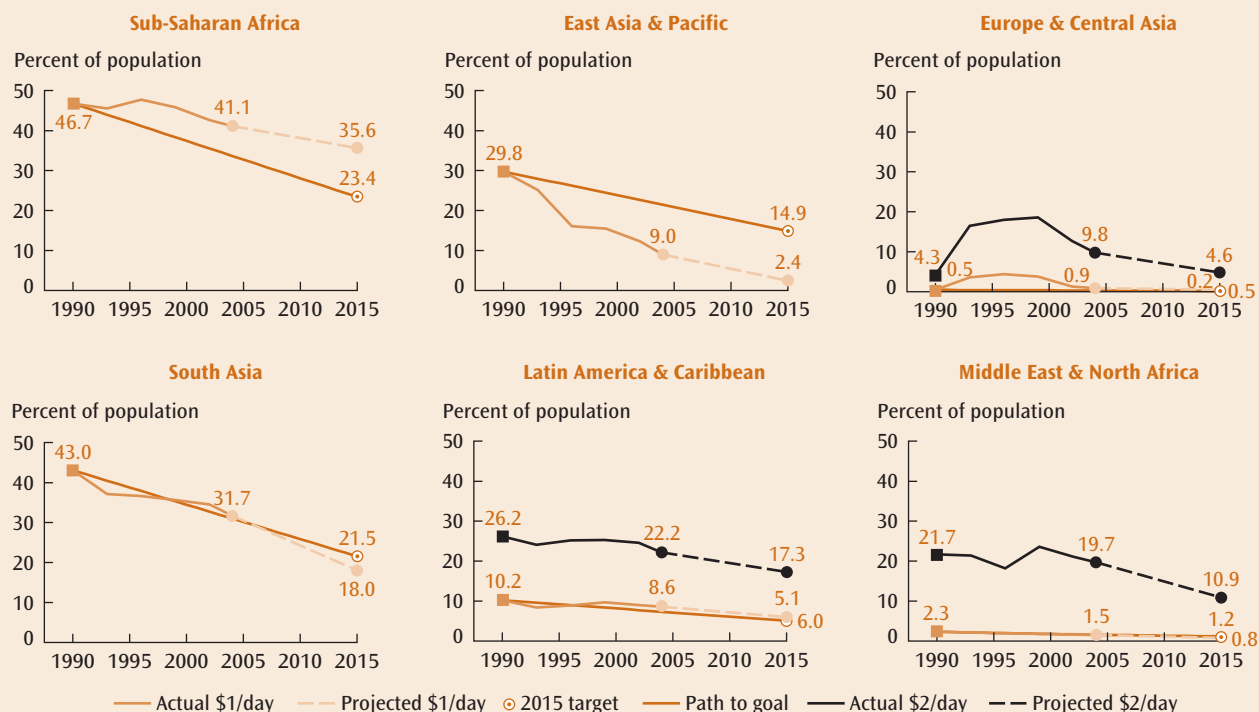
Note: Country on track means that the rate of progress is superior to the required growth rate to achieve the goal. Country off track means that the rate of progress is inferior to the required growth to achieve the goal, and superior to the required growth to achieve the half of the target. Country seriously off track means that the rate of progress is inferior to the required growth to achieve the half of the target.

# Eradicate Extreme Poverty and Hunger

Extreme poverty—the proportion of the population in developing countries living on less than \$1 a day—fell from 29 percent in 1990 to 18 percent in 2004. East Asia and Pacific experienced the most impressive reduction in poverty, and South Asia is now on track, but Sub-Saharan Africa lags behind. Over the same period, the number of people in developing countries grew by 20 percent to more than 5 billion, including 1 billion people in extreme poverty. Global poverty is projected to fall to 12 percent by 2015—a striking success.

Approximately 27 percent of the extreme poor in developing countries live in fragile states. Fragile states have consistently grown more slowly than in other low-income countries. Clearly, this has been, and will likely continue to be, an obstacle to the achievement of MDG1 in those countries. A typical fragile state had made negative progress toward MDG1 by 2005, at which point its poverty rate by the \$1 per day measure was about twice that of a typical nonfragile state.

**MDG 1 FIGURE 1** Share of people living on less than \$1 or \$2 a day in 2004, and projections for 2015



Source: World Bank staff estimates (weighted averages).

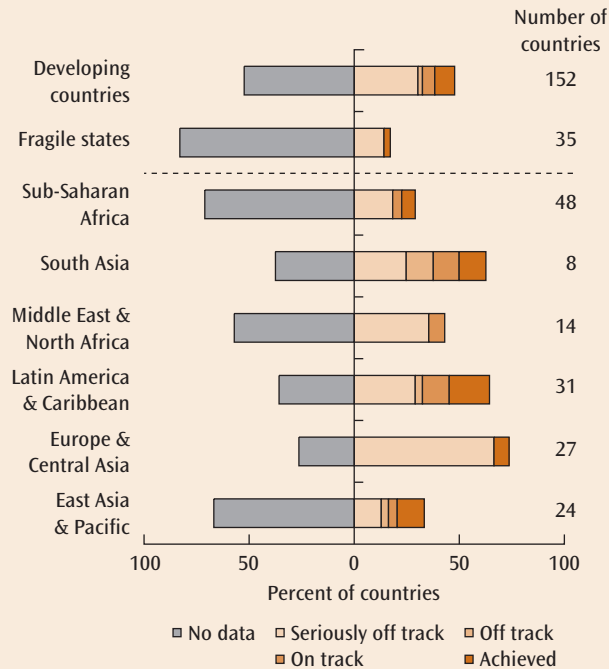
While accelerating growth in India has put South Asia on track to meet its goal, Sub-Saharan Africa lags behind.

East Asia has experienced a sustained period of economic growth, led by China, while Latin America and the Caribbean has stagnated, with modest poverty reduction.

The transition economies of Europe and Central Asia saw poverty rates rise in the 1990s and then fall. There and in the Middle East and North Africa, consumption of \$2 a day may be more relevant.

**TARGET 1:** Halve, between 1990 and 2015, the proportion of people who live on less than \$1 a day.  
**TARGET 2:** Halve, between 1990 and 2015, the proportion of people who suffer from hunger.

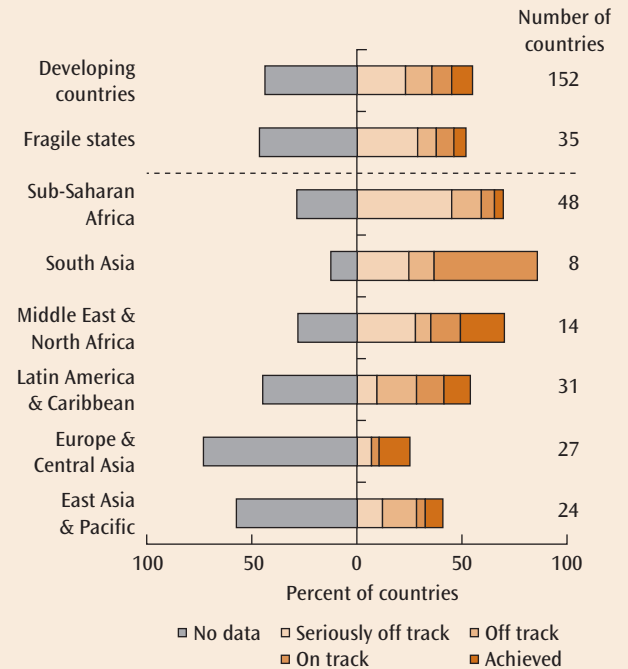
**MDG 1 FIGURE 2** Proportion of countries on track to achieve the poverty reduction target



Source: World Bank staff estimates.

This chart shows the percentage of countries in each region that are on track to achieve the poverty reduction target of the MDGs. Some have already achieved the target. Those shown as on track could reach the target by 2015, if they maintain current progress. But those shown as off track and seriously off track are reducing poverty too slowly. Eighty percent of fragile states lack the data needed to estimate their progress.

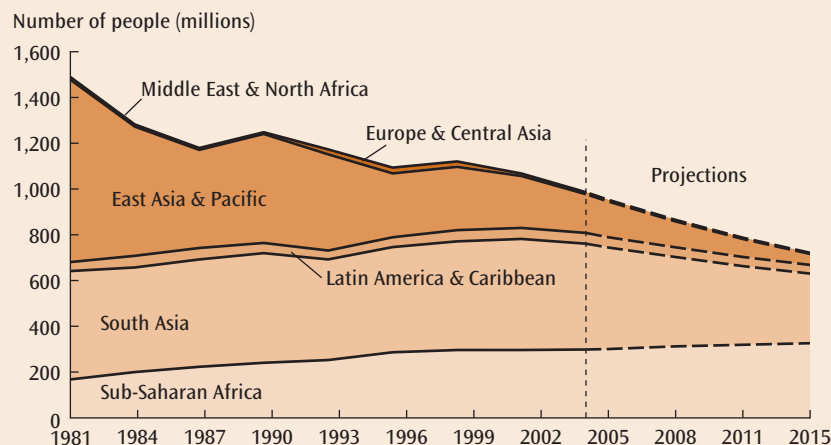
**MDG 1 FIGURE 3** Proportion of countries on track to reduce under-5 malnutrition by half



Source: World Bank staff estimates.

More than half of countries in Sub-Saharan Africa are off track to reach the 2015 target of cutting malnutrition rates by half. Half of the countries in South Asia are on track to reach the target, but they also have the highest rates of malnutrition in the world and will continue to have the largest share of malnourished children, even if the target is achieved. Malnutrition rates in fragile states are similar to those found in other developing countries.

**MDG 1 FIGURE 4** Number of people living on less than \$1.08 a day (millions), 1981–2004



Source: World Bank staff estimates.

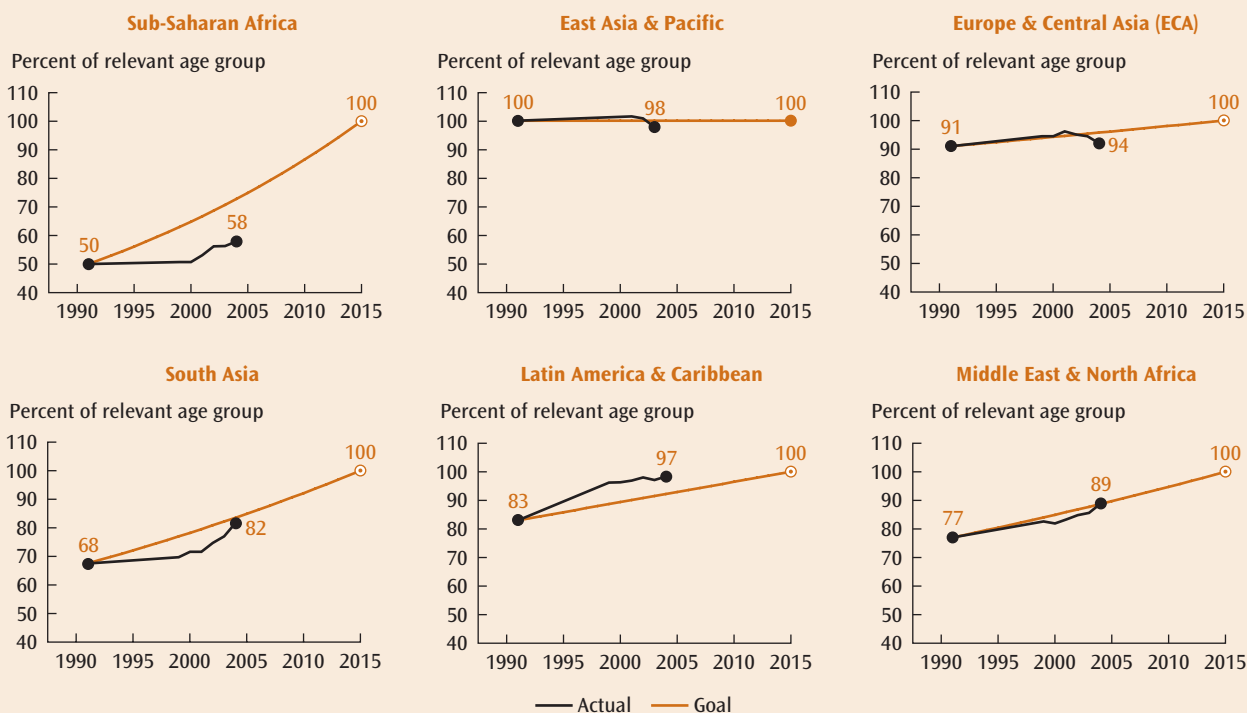
Between 1981 and 2004, the number of people in the world who lived in extreme poverty fell from nearly 1.5 billion to just under 1 billion. Both the Middle East and North Africa and Europe and Central Asia regions had essentially eliminated extreme poverty by 1981, but nearly 800 million poor people lived in East Asia—over half of the global total. By 2004 extraordinary progress had been made to lower poverty incidence in East Asia, lifting nearly 630 million people from extreme poverty in under a quarter of a century, which lowered the region's share of total poverty from 58 percent to just 9 percent. At the same time, poverty fell in South Asia from 52 percent of the population in 1981 to 32 percent in 2004, but absolute numbers have been persistent at around 470 million people. In contrast, in Sub-Saharan Africa poverty incidence hovered around 46 percent between the early 1980s and 1999, and declined to 41 percent in 2004. Despite this better trend, the absolute number of poor is still around 300 million.

# Achieve Universal Primary Education

Globally, the primary completion rate has increased from 63 percent in 1990 to an estimated 83 percent in 2005, and the pace of annual improvement has accelerated significantly since 2000 in the three regions furthest from the goal—North Africa, South Asia, and Sub-Saharan Africa—a sign of the increasing priority given in these regions to universalizing primary education (see figure 2.1). Latin America and the Caribbean, which started from a higher base, has also sustained an exceptionally strong rate of progress. The number of countries that have achieved universal primary completion increased from 37 in 2000 to 52 in 2005, and this includes some low-income countries: Bolivia,

Indonesia, and Kenya. Notwithstanding these very positive trends, the goal of universal primary completion by 2015 will be difficult to reach: 57 of the 152 developing countries (38 percent) for which data are available are considered off track—meaning that they will not reach the goal on current trends (figure 2). Most of the 33 countries that lack data are also likely off track. Among African countries, 65 percent are considered seriously off track, defined as unlikely to reach the goal before 2040. Among fragile states, only 11 percent have achieved universal primary completion or are on track to doing so, and 50 percent are considered seriously off track.

**MDG 2 FIGURE 1 Primary school completion rate**



Source: World Bank staff estimates (weighted averages).

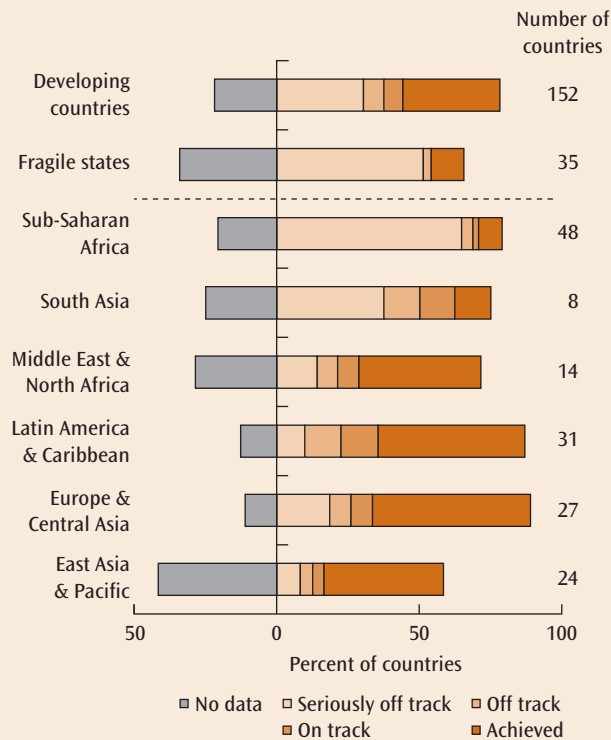
Despite faster progress since 2000, Sub-Saharan Africa remains very far from the goal. In South Asia, populous India's strong progress boosts the regional picture, although some countries remain off track.

East Asia, Latin America and the Caribbean, and Europe and Central Asia are all close to the goal.

Strong progress since 2000 in the Middle East and North Africa has put that region on track to achieve universal primary completion, although the regional average hides some variance across countries.

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

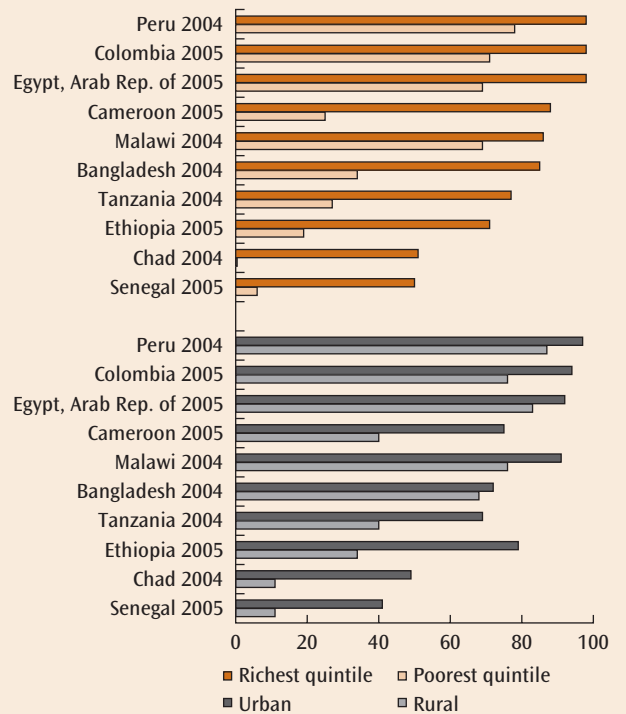
**MDG 2 FIGURE 2** Proportion of countries on track to achieve the primary education target



Source: World Bank staff estimates.

In many developing countries children are able to complete a full course of primary education, but in all regions at least a few countries remain off track and unlikely to reach the primary education target. In Sub-Saharan Africa, the poorest-performing region, 65 percent of countries are seriously off track and only 8 percent are on track. We observe a huge lag for fragile states, of which 50 percent are seriously off track.

**MDG 2 FIGURE 3** Percent of 15- to 19-year-old cohort that has completed primary education by household wealth quintile and location



Source: DHS Surveys.

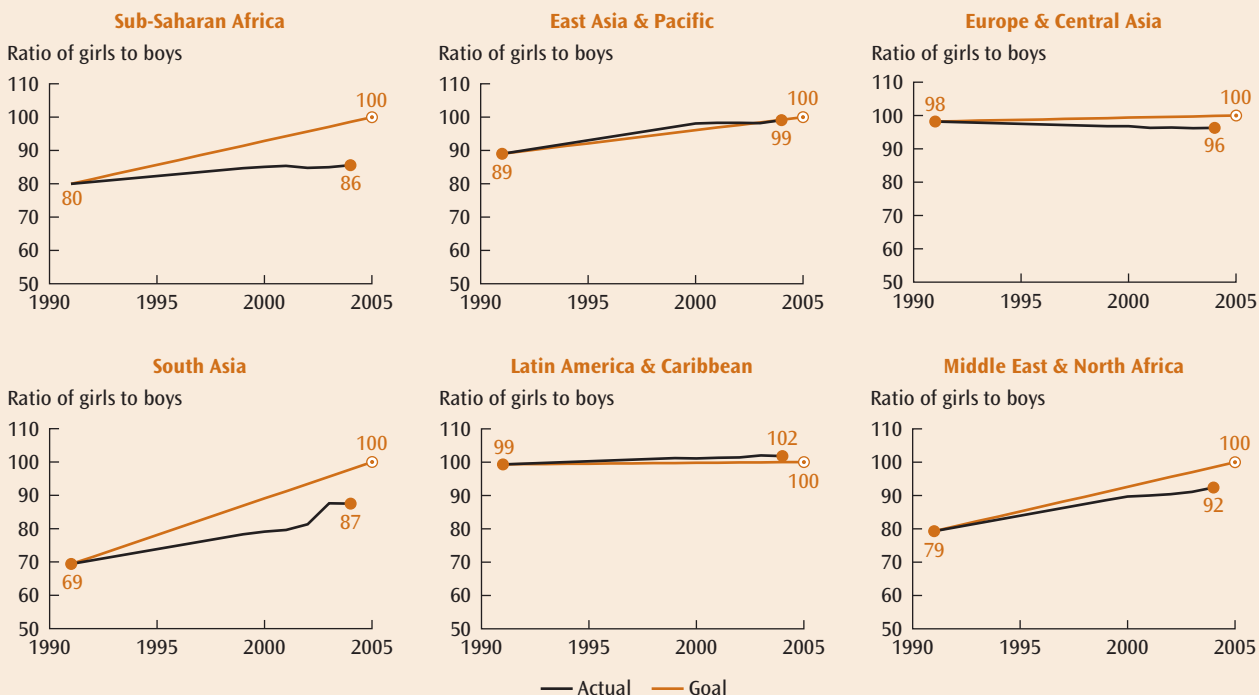
Data from household surveys indicate that the largest gaps in primary completion rates in virtually every developing country are between wealthy and poor populations (figure 3). But gaps between urban and rural populations can also be very large, especially in Africa. Completion rates for girls, which are discussed in the next section, also lag behind those of boys in some countries, but in general—thanks to strong progress on gender equity in education over the past 15 years—these gaps are smaller than those linked to wealth or location. However, while expansion of primary education coverage tends to be pro-poor, pro-rural, and pro-girls in terms of equalizing access and completion, country experience also shows that specific actions to lower direct and opportunity costs or eliminate discrimination are often needed to keep vulnerable children in school, be they orphan, poor, rural, or female.

# Promote Gender Equality and Empower Women

When a country educates its girls, its mortality rates usually fall, fertility rates decline, and the health and education prospects of the next generation improve. Unequal treatment of women—by the state, in the market, and by their community and family—puts them at a disadvantage throughout their lives and stifles the development prospects of their societies. Illiterate and poorly educated mothers are less able to care for their children. Low education levels and responsibilities for household work prevent women from finding productive employment or participating in public decision making. To improve girls' enrollments, the

social and economic obstacles that keep parents from sending their daughters to school must be overcome. For many poor families, the economic value of girls' work at home exceeds the perceived returns to schooling. Improving the accessibility of schools and their quality and affordability is a first step. Globally, 55 percent of countries achieved the first target by 2005. Latin America and Europe and Central Asia can now focus on the second target. But huge improvement is required in Sub-Saharan Africa and South Asia, where only 20 percent and 35 percent, respectively, of countries reached the 2005 target.

**MDG 3 FIGURE 1** Ratio of girls to boys enrolled in primary and secondary education



Source: World Bank staff estimates (weighted averages).

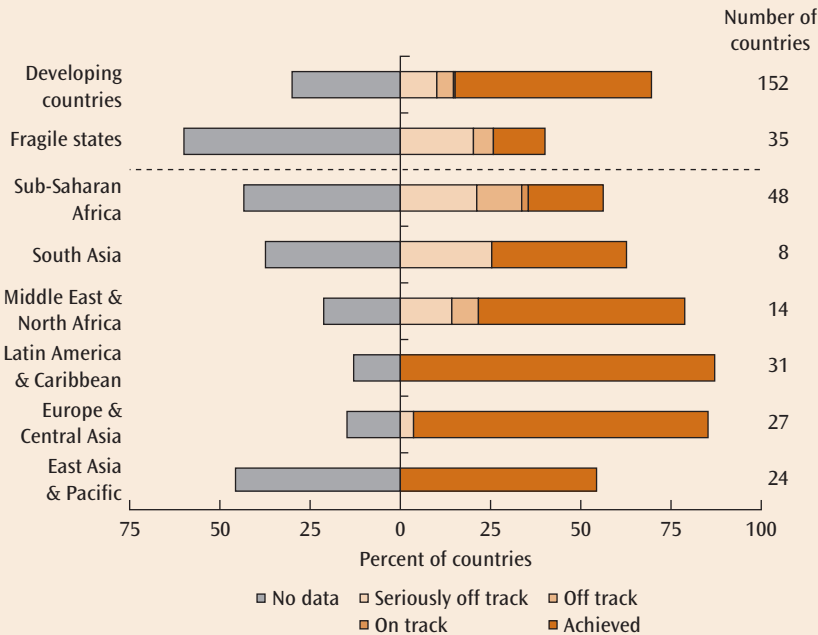
The differences between boys' and girls' schooling are greatest in regions with the lowest primary school completion rates and the lowest average incomes.

East Asia and Pacific has almost achieved the 2005 target. In some Latin American countries, girls' enrollments exceed boys'.

In Europe and Central Asia a strong tradition of educating girls needs to be sustained. In Middle East and North Africa more girls are overcoming the strong bias against them.

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

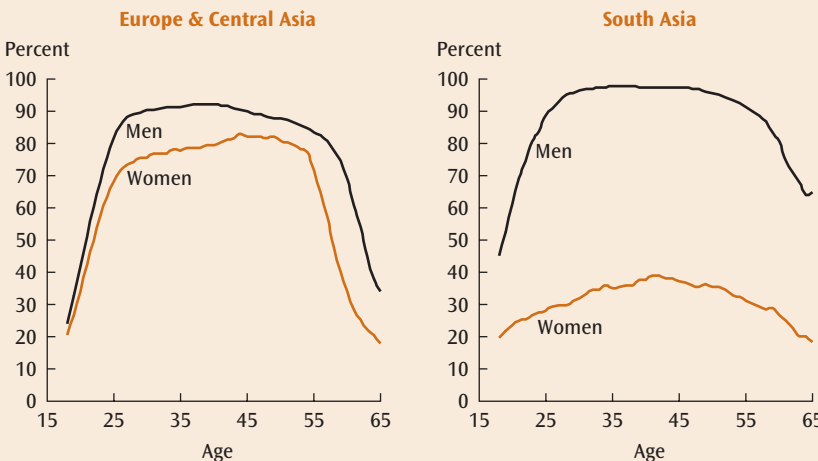
**MDG 3 FIGURE 2** Proportion of countries on track to achieve gender parity in primary and secondary enrollment



Source: World Bank staff estimates.

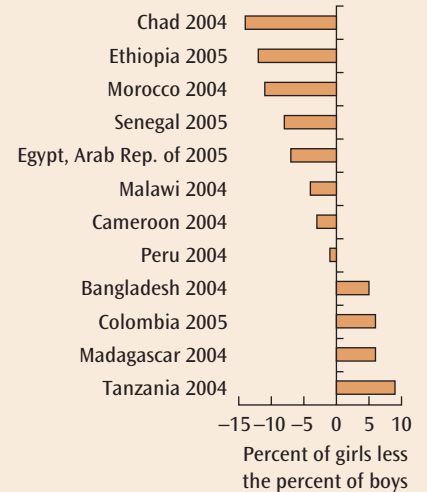
Even in regions that have achieved the target on average, such as Eastern Europe and Central Asia, some countries still fall short. And in South Asia and Sub-Saharan Africa, where large numbers of children are out of school, girls are at a severe disadvantage. Fragile states lag behind in achieving gender parity in enrollment, and more than 50 percent of these countries do not have sufficient data to assess their progress.

**MDG 3 FIGURE 4** Share of men and women participating in the labor force, 1991–2004



Source: Computed using household surveys (1991–2004, unweighted averages).

**MDG 3 FIGURE 3** Gender inequality in primary completion rate: The girl/boy gap



Source: DHS surveys.

Sub-Saharan Africa countries have some of the largest and smallest gender inequality gaps. In Kenya, Madagascar, and Tanzania, girls' completion rates are over 5 percent higher than boys' completion rates, while boys' completion rates are over 10 percent higher in Chad, Ethiopia, Nigeria, and Morocco.

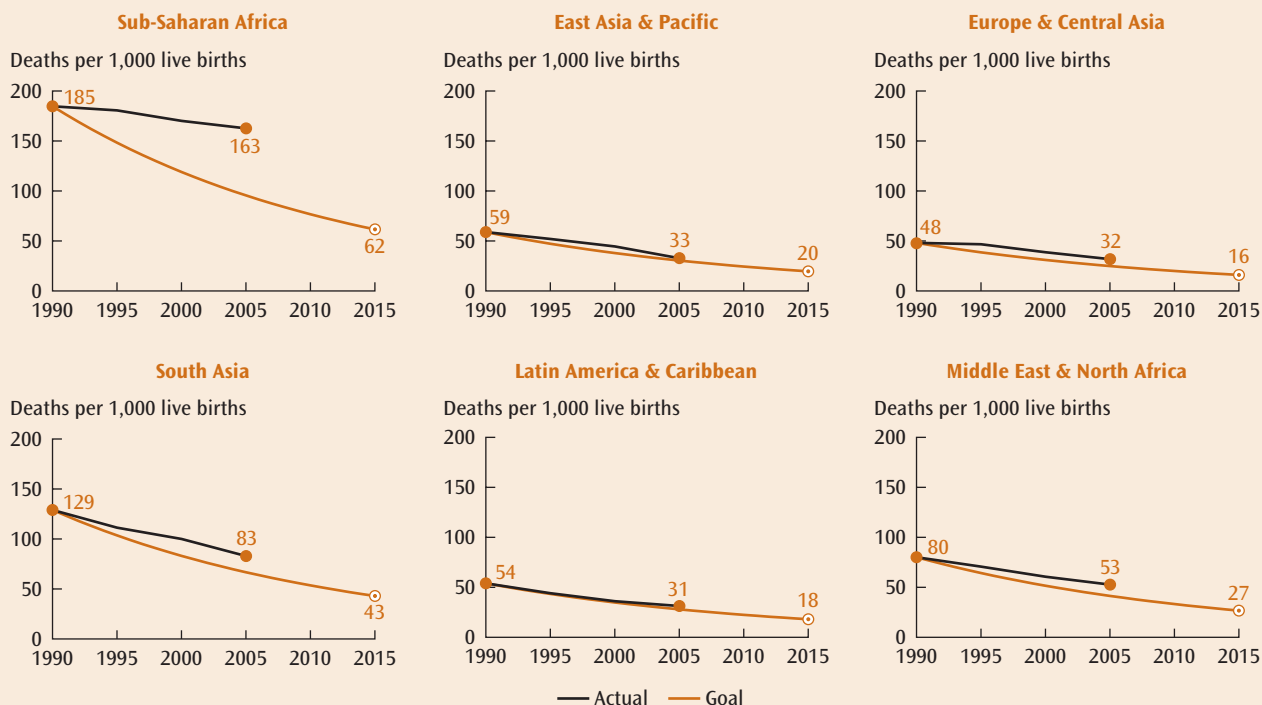
Although the gender gap in school enrollments has declined in most regions, the gender gap in labor force participation remains. Age patterns of labor force participation show that compared to young men, fewer young women make the transition from school to work, and this gender gap tends to persist throughout the life cycle. However, the size of this gap varies considerably across regions. The gender gap is the largest in South Asia and the smallest in Europe and Central Asia.

# Reduce Child Mortality

Every year over 10 million children in developing countries die before the age of five. Most die from causes that are readily preventable or curable with existing interventions—such as acute respiratory infections, diarrhea, measles, and malaria. Rapid improvements prior to 1990 provided hope that mortality rates for infants and children under five could be cut by two-thirds in the ensuing 25 years, but progress slowed almost everywhere in the 1990s. Progress on the child mortality MDG lags behind all other goals. While the majority of countries have reduced child mortality since 1990, progress has been insufficient to reach the MDG target—which requires an

annual decline of 4.3 percent over the entire period. Only two regions, East Asia and Pacific and Latin America and the Caribbean, are close to achieving the MDG target. But even in those two regions, more than half the countries are off track. Progress has been particularly slow in Sub-Saharan Africa, where civil disturbances and the HIV/AIDS epidemic have driven up rates of infant and child mortality. As of 2005, no Sub-Saharan Africa country was on track to achieve the goal, and only 33 out of 147 (22 percent) of developing countries are making enough progress to achieve the goal on current trends.

**MDG 4 FIGURE 1 Under-five mortality rate (deaths per 1,000)**



Source: World Bank staff estimates (weighted averages).

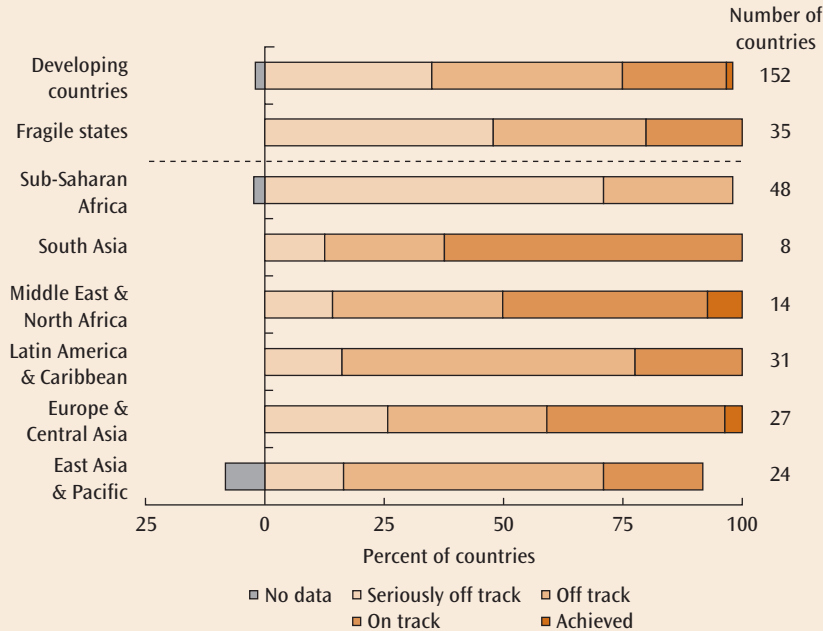
The gap between goal and reality is greatest in Sub-Saharan Africa, but millions of children are also at risk in South Asia.

East Asia and Pacific and Latin America and the Caribbean are nearly on track, but the regional averages disguise wide variations between countries.

More than half the countries in the Middle East and North Africa and Europe and Central Asia regions are off track to reach the target.

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

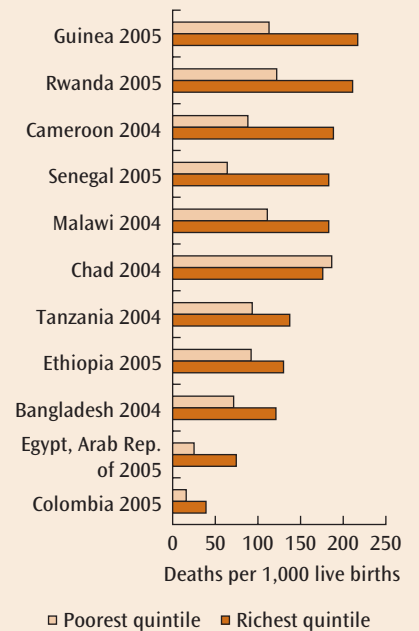
**MDG 4 FIGURE 2** Proportion of countries on track to achieve the child mortality target



Source: World Bank staff estimates.

A concerted effort to improve the measurement of infant and child mortality has filled many gaps in the international data set and reveals that many countries still fall short of achieving the target, even where regional averages have been improving. Based on estimates through 2005, only 33 countries are on track to achieve a two-thirds reduction in the mortality rate. Every country in Sub-Saharan Africa is off track, and in some countries mortality rates have increased since 1990. Some recent surveys have found rapidly falling mortality rates.

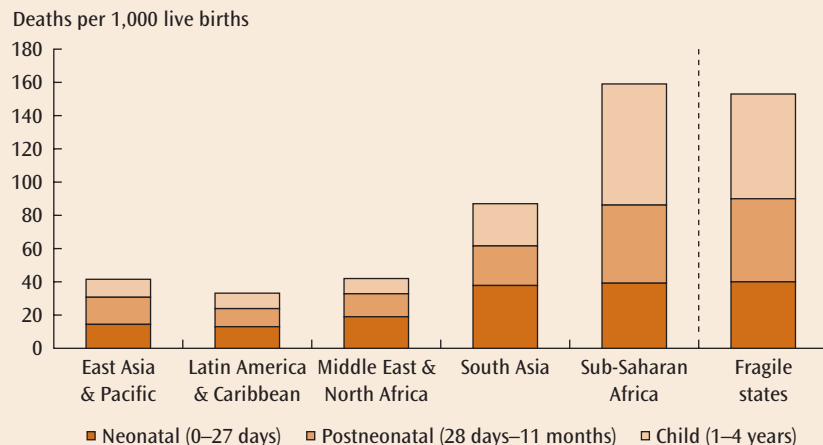
**MDG 4 FIGURE 3** Under-five mortality rate by quintile



Source: DHS surveys.

Except in Chad, under-five child mortality is over 40 percent higher in the poorest quintile than in the richest quintile. The greatest percentage disparity is in Egypt, where the number of deaths per 1,000 live births is nearly 3 times higher for the poor than for the rich.

**MDG 4 FIGURE 4** Composition of under-five mortality in developing regions based on most recent data, 1995–2003



Source: WHO report, 2005 (unweighted averages).

The gap in under-five mortality between Sub-Saharan Africa and other regions is due mostly to higher child mortality (between ages 1–4), yet neonatal and post neonatal mortality are also highest in the Sub-Saharan Africa Region.

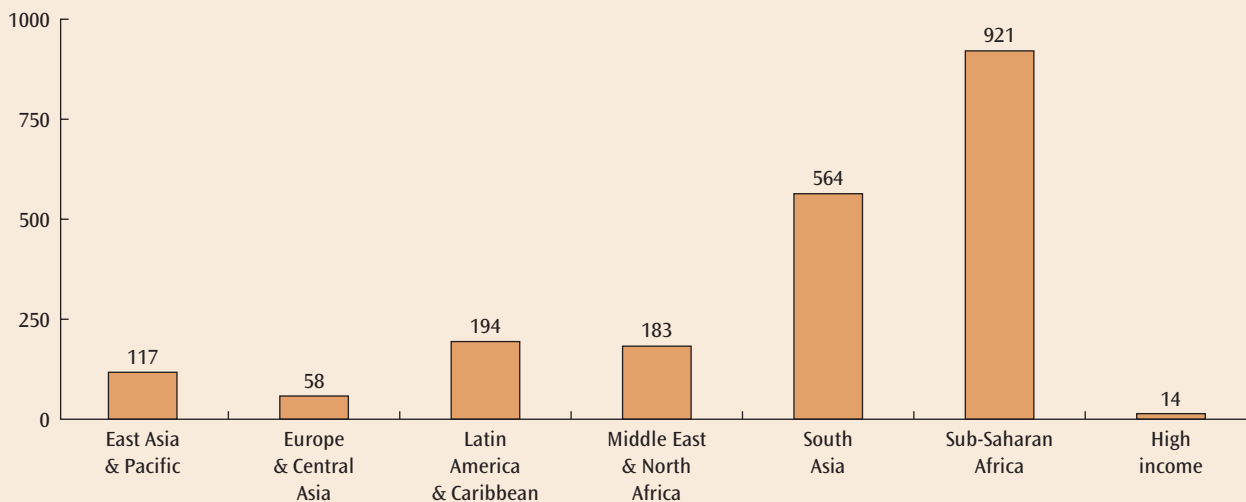
## Improve Maternal Health

Death in childbirth is a rare event in rich countries, where there are typically fewer than 10 maternal deaths for every 100,000 live births. But in the poorest countries of Africa and Asia the ratio may be 100 times higher. Ninety-nine percent of maternal deaths occur in developing countries—around 500,000 annually. The MDG target—to reduce by 75 percent the maternal mortality ratio between 1990 and 2015—remains difficult to measure for almost all developing countries. No current direct estimates of the maternal mortality ratio or trends exist. Because few countries are able to measure maternal mortal-

ity over time, other indicators are often used instead, such as the skilled health personnel who are needed to deal with the complications of childbirth that can claim mothers' lives. Survey evidence shows progress in 27 of 32 countries, but also suggests that this is highly concentrated among richer households. While survey data also show progress in coverage for the poorest quintiles in many countries, differences in access to skilled delivery care between the poorest and richest quintiles in most countries represent larger equity gaps than for any other health service.

**MDG 5 FIGURE 1** Maternal mortality ratios in 2000

Deaths per 100,000 live births

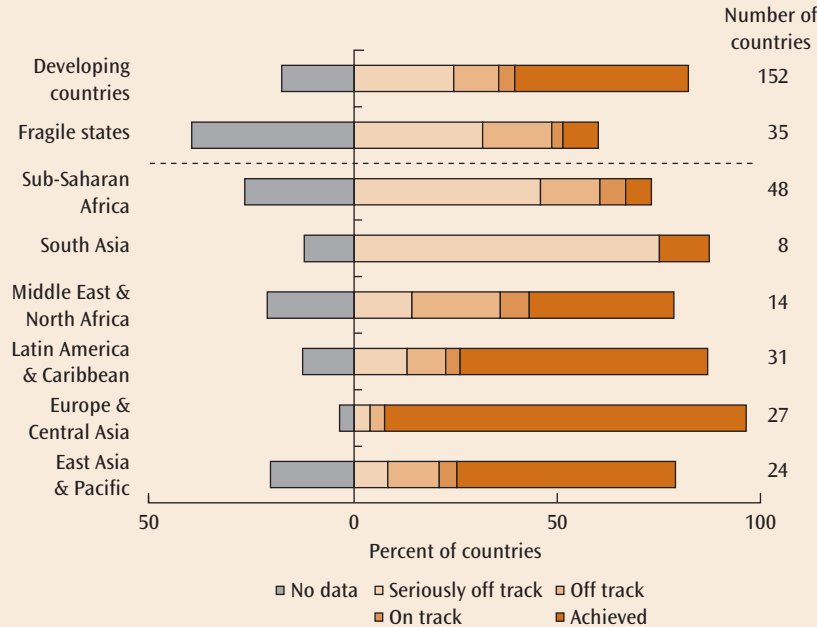


Source: World Bank staff estimates.

Maternal deaths are still unacceptably high in many developing countries of Sub-Saharan Africa and South Asia as a result of high fertility rates and a high risk of dying each time a woman becomes pregnant. Some developing countries in East Asia and Pacific and Latin America and the Caribbean have substantially improved maternal health through better health services, including increased numbers of trained birth attendants and midwives. Still others, in Europe and Central Asia and Middle East and North Africa, have improved maternal health and significantly lowered fertility rates through the use of contraceptives and increased female education.

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

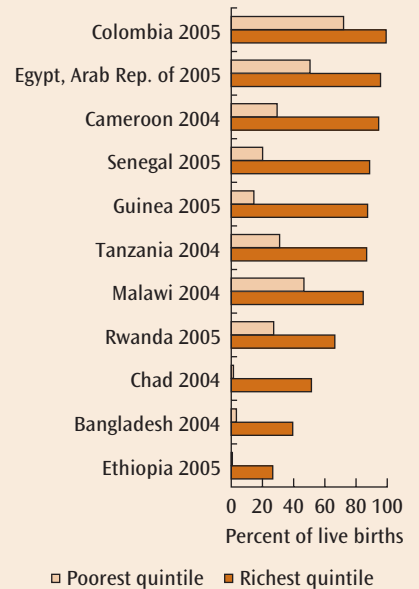
**MDG 5 FIGURE 2** Proportion of countries on track to provide adequate coverage of births by skilled health personnel



Source: World Bank staff estimates.

This figure shows the proportion of countries in each region that provide skilled health personnel for 90 percent of births or could do so by 2015 based on current trends. Countries that are off track may be able to achieve 75 percent coverage by 2015, while seriously off-track countries will not reach even that level unless they make rapid progress in the next decade. More fragile states are seriously off track compared to other developing countries.

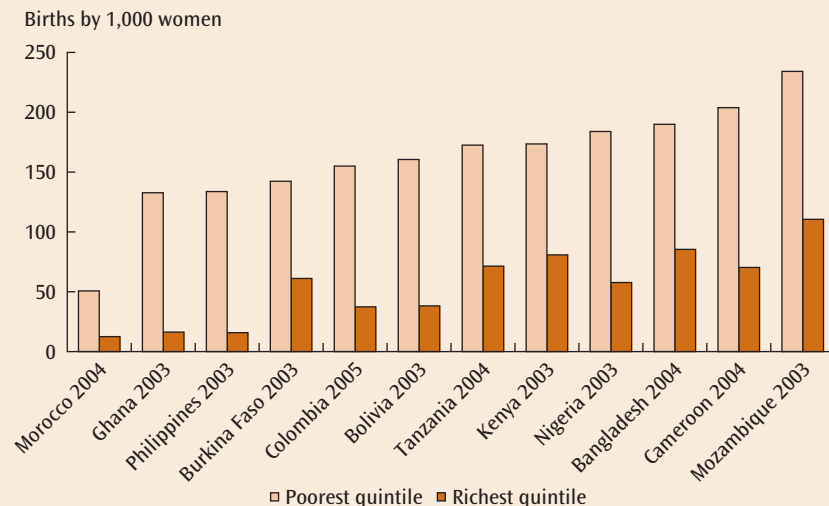
**MDG 5 FIGURE 3** Access to delivery by medically trained personnel by household wealth quintile



Source: DHS surveys.

In countries with the lowest access to a medically trained personnel for delivery, women in the richest quintile are six times more likely to have access than women in the poorest quintile. In most developing countries, the greater the access, the lower the inequality; however, inequality is still high in Bolivia, Cameroon, and Morocco.

**MDG 5 FIGURE 4** Adolescent (15–19) fertility rate by household wealth quintile



Source: DHS surveys.

Pregnancy at a young age puts the mother and child at higher risk of serious health consequences. In developing countries, maternal mortality in girls under 18 years of age is estimated to be two to five times higher than in women between 18 and 25. Adolescent fertility rates are higher among poorer people, often substantially so. Poor young women typically have less access to reproductive health services, but the choice to have children very early also reflects low-income girls' lack of access to schooling and limited economic prospects.

## Combat HIV/AIDS, Malaria, and Other Diseases

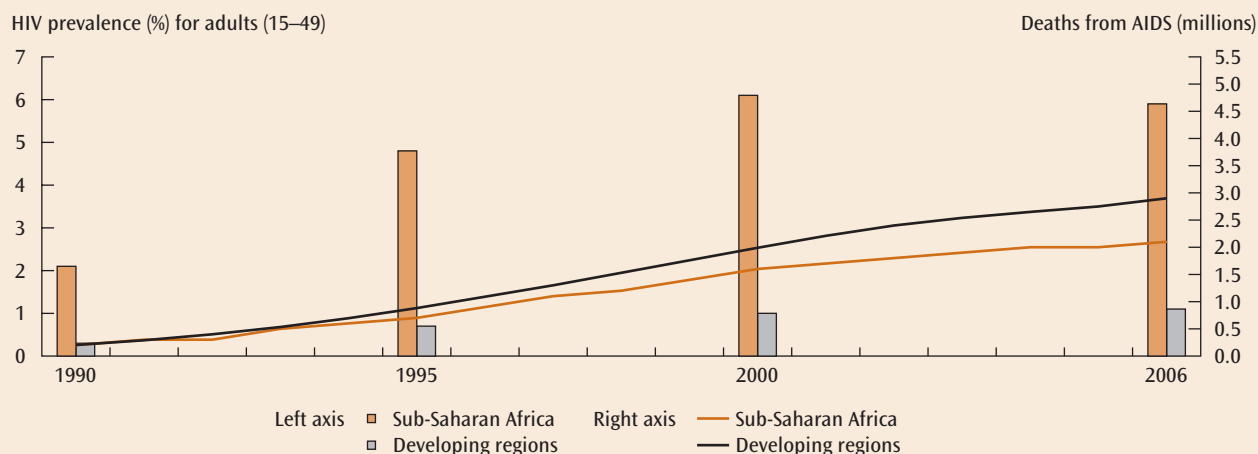
Epidemic diseases exact a huge toll in human suffering and lost opportunities for development. Poverty, armed conflict, and natural disasters contribute to the spread of disease—and recovery, in turn, is often endangered by disease. In Africa, AIDS has reversed decades of improvements in life expectancy and left millions of children orphaned. By end-2006 an estimated 39.5 million people globally were living with HIV, up 2.4 million since 2004, and an estimated three million people had died from AIDS. While the spread of AIDS has slowed in parts of Sub-Saharan Africa, it remains the center of the epidemic; home to just over 10 percent of the world’s people, 64 percent of all HIV-positive people, and 90 percent of all HIV-positive children. About 60 percent of HIV-positive adults in Africa are women.

The largest recent increases in the number of people with HIV have been in Eastern Europe, and Central and East Asia (21 percent higher in 2006 than in 2004). Recent experience in combating the spread of AIDS has demonstrated three important messages: reversing its spread is possible, treatment is effective

in the developing world, and prevention remains a crucial challenge. More effective, evidence-based approaches to prevention are required—drawn from careful evaluation of what works in different contexts and the continued tailoring of responses to the changing epidemic.

Increasing the awareness of the impact of malaria and tuberculosis on human development has been matched with a commitment to fight these diseases, and fight them more effectively. There are an estimated 300–500 million new cases of malaria each year, leading to more than 1 million deaths. Nearly all the cases and more than 95 percent of the deaths occur in Sub-Saharan Africa. Tuberculosis (TB) strikes 9 million people each year and kills 2 million. But there has been clear progress in reducing TB prevalence and deaths in recent years. The only region where TB incidence is still growing is Africa, because of the emergence of drug-resistant strains and the greatly reduced resistance to TB among people with HIV.

**MDG 6 FIGURE 1 HIV prevalence and deaths in the developing world, 1990–2006**

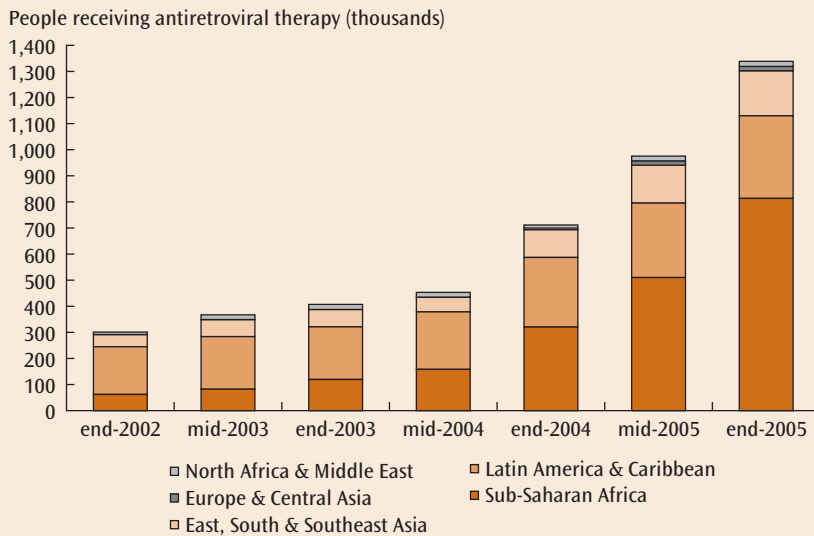


Source: UNAIDS/WHO, November 2006.

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

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

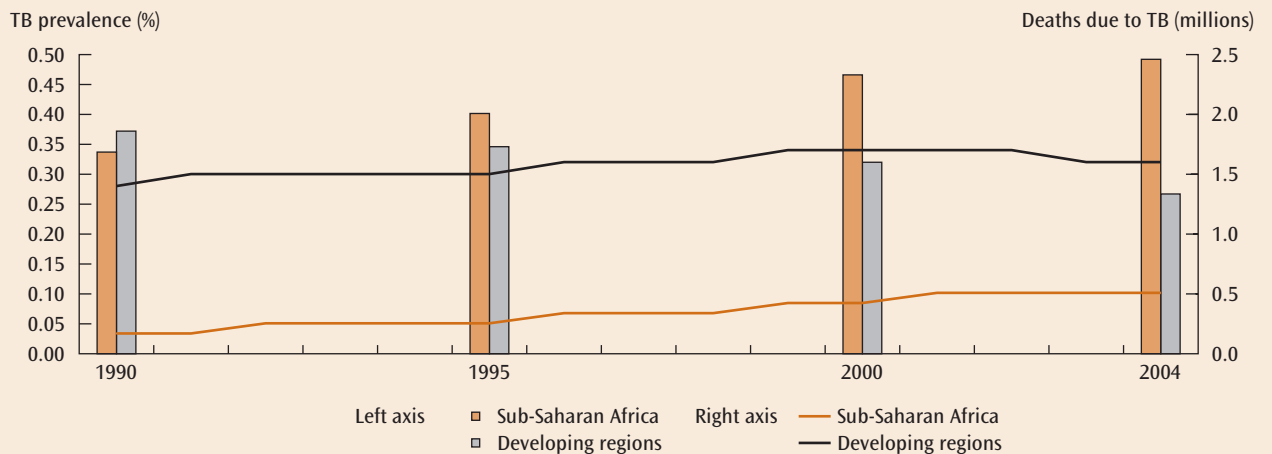
**MDG 6 FIGURE 2** Number of people receiving antiretroviral therapy by region



Impressive progress has been made in extending antiretroviral coverage in Sub-Saharan Africa, where the number of people receiving antiretroviral treatment has more than doubled since 2004. While the number of people receiving antiretroviral therapy (ART) in East, South, and Southeast Asia has increased rapidly, progress in Europe and Central Asia and in North Africa and the Middle East has been less dramatic. Nonetheless, antiretroviral treatment in the developing world still reaches just 24 percent of those who need it.

Source: WHO and UNAIDS report, 2006.

**MDG 6 FIGURE 3** Tuberculosis prevalence and number of TB deaths, 1990–2005



Source: UN statistics.

Many developing countries have successfully reduced TB's prevalence since 1990. Sub-Saharan Africa is the only region where TB prevalence continues to increase; TB-related deaths reached 600,000 in 2004.

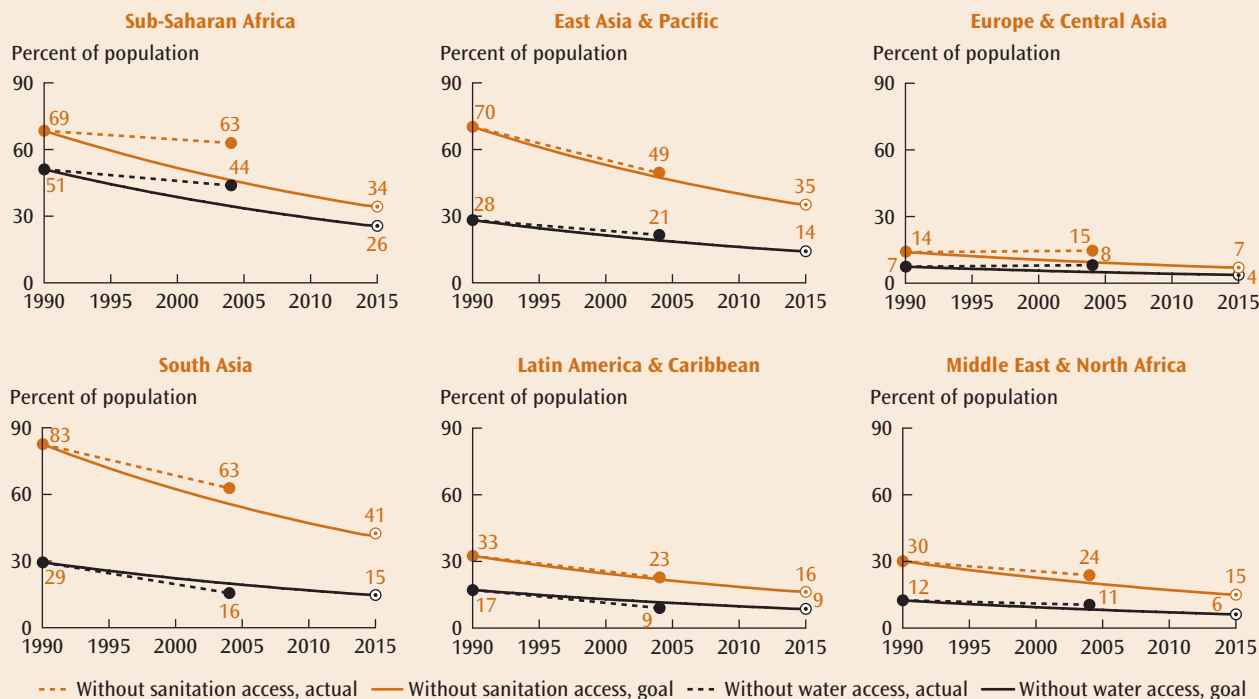
# Ensure Environmental Sustainability

Sustainable development can be ensured only by protecting the environment and using resources wisely. Less than 20 percent of developing countries are on track or have achieved the 2015 target to increase access to water, and less than 35 percent have increased access to sanitation, but Sub-Saharan African countries are lagging behind other regions. And in the fragile states, the proportion of countries on track to achieve the target for increased access to water and sanitation is 6 percent and 15 percent, respectively.

Around the world, land is being degraded and carbon dioxide (CO<sub>2</sub>) emissions are driving changes in global climate. Climate change is a grave threat to

the developing world and a major obstacle to continued poverty reduction across many dimensions. First, developing regions are at a geographic disadvantage: they are already warmer, on average, than developed regions, and they suffer from high rainfall variability. Second, developing countries—in particular the poorest—are heavily dependent on agriculture, the most climate-sensitive of all economic sectors, and they suffer from inadequate health provision and low quality public services. Third, low incomes and vulnerabilities make adaptation to climate change particularly difficult. Global emissions of CO<sub>2</sub> rose by 4 billion metric tons between 1990 and 2003.

**MDG 7 FIGURE 1** Population without access to an improved water source or sanitation facilities



Source: World Bank staff estimates (weighted averages).

In Sub-Saharan Africa, 300 million people lack access to improved water sources, and 450 million lack adequate sanitation services. South Asia has made excellent progress in providing water, but progress has been slower in providing sanitation.

In East Asia, rapid urbanization is posing a challenge for the provision of water and other public utilities. Latin America and the Caribbean, the most urban developing region, has made slow progress in providing sanitation.

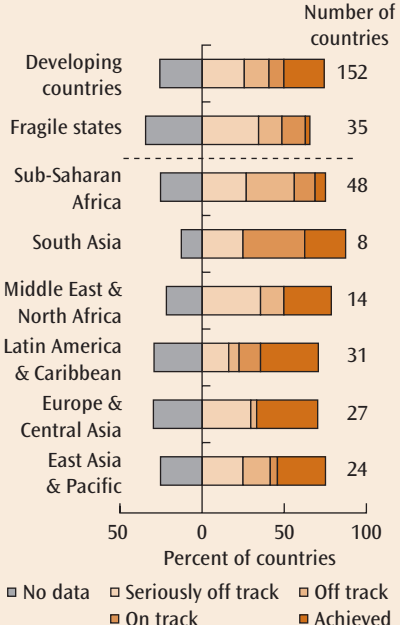
Many countries in Europe and Central Asia lacked reliable benchmarks for measuring improved access to water and sanitation in the early 1990s. In the Middle East and North Africa, Egypt, Morocco, and Tunisia have made the fastest progress.

**TARGET 9:** Integrate the principles of sustainable development into country policies and programs and reverse the loss of environmental resources.

**TARGET 10:** Halve by 2015 the proportion of people without sustainable access to safe drinking water and basic sanitation.

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

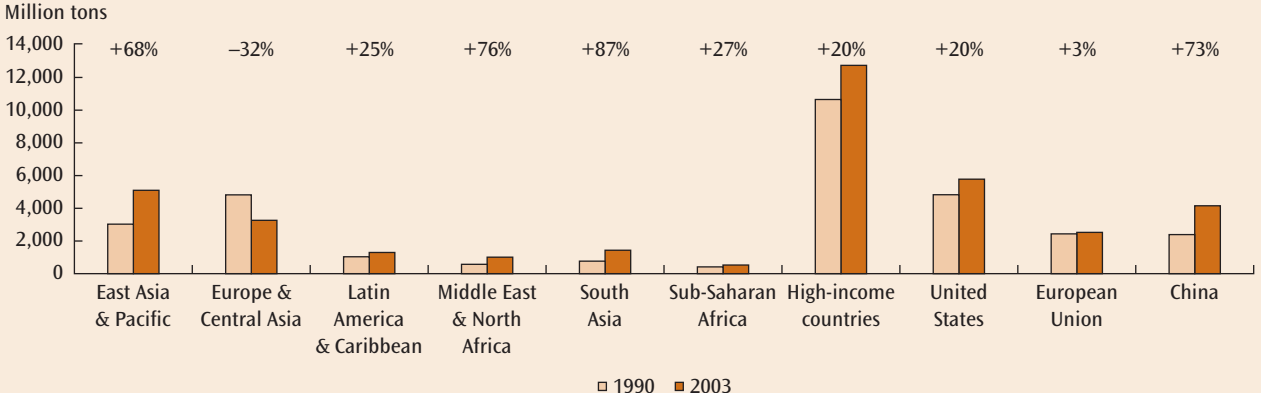
**MDG 7 FIGURE 2** Proportion of countries on track to achieve the target for access to improved water



Source: World Bank staff estimates.

Lack of clean water is the main reason that diseases transmitted by feces are so common in developing countries. Water is a daily need that must be met, but in some places people spend many hours to obtain water from sources that are not protected from contamination. Even the modest target of halving the number of people without access to an improved water source will not be met in many countries at the current rate of progress. Only 35 percent of countries are on track to achieve or have achieved the target.

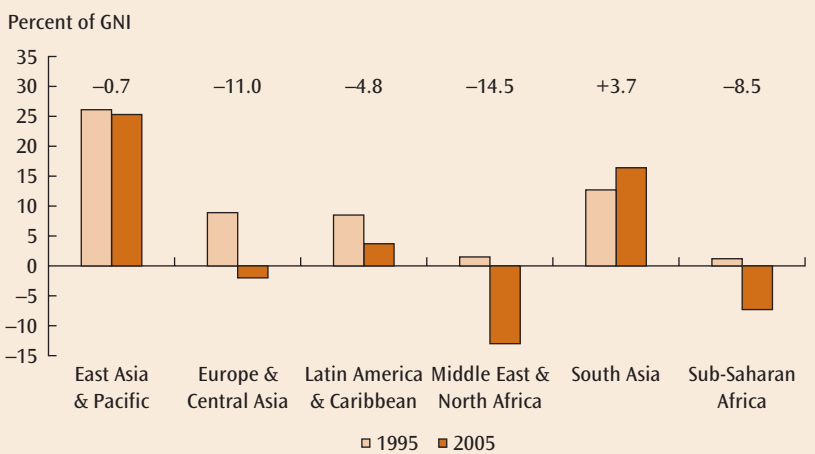
**MDG 7 FIGURE 4** CO<sub>2</sub> emissions, 1990–2003



Source: World Development Indicators. Note: Numbers above bars show percent change from 1990 to 2003.

Carbon dioxide (CO<sub>2</sub>) is a greenhouse gas that contributes to global climate change. Global emissions of CO<sub>2</sub> from burning fossil fuels and manufacturing cement rose by 4 billion metric tons between 1990 and 2003. Most of the increase in these emissions came from high-income countries (2.09 billion metric tons) and East Asia and the Pacific (2.07 billion metric tons). South Asia and the Middle East and North Africa have regions with the largest percentage increase in emissions, followed by East Asia and the Pacific. Conversely, owing to the economic recession and restructuring of the 1990s, the transition economies of Europe and Central Asia emitted less CO<sub>2</sub> in 2003 than in 1990.

**MDG 7 FIGURE 3** Adjusted net saving



Source: World Development Indicators. Note: Numbers above bars show percent change from 1995 to 2005.

Are countries saving enough for future growth? Adjusted net saving measures the rate of saving in an economy after taking into account investments in human capital, depreciation of produced capital, depletion of natural resources, and damage caused by pollution. A negative saving rate implies that current levels of welfare and growth may be threatened by resource depletion. The Middle East and North Africa, Sub-Saharan Africa, and Eastern Europe and Central Asia had negative saving rates in 2005 when depletion of natural resources was taken into account. The largest decline in saving between 1995 and 2005 occurred in these three regions, while the largest gain, 3.7 percent of GNI, was in South Asia.

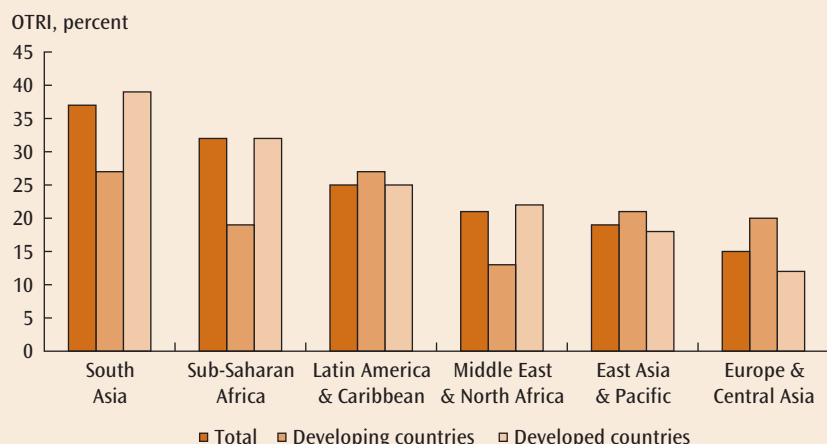
## Fostering Global Partnerships

Important steps toward global partnership were taken at the international meetings in 2001 in Doha, which launched a new “development round” of trade negotiations, and in 2002 at the International Conference on Financing for Development in Monterrey, Mexico, where high-income and developing countries reached consensus on mutual responsibilities for achieving the Millennium Development Goals. The consensus calls for developing countries to improve governance and policies aimed at increasing economic growth and reducing poverty and for high-income countries to provide more and better aid and greater access to their markets.

Total aid rose in recent years through 2005, and declined 5 percent in 2006. But much of the recent increase was due to debt relief, and this may provide less than full additionality as measured by the current flow of new resources for development.

Owing to the steady reduction of tariffs, overall trade restrictiveness has largely declined in recent years. However, the poorest developing countries faced the highest barriers, notably from developed countries. South-South trade faces a high level of protection. Most of this protection is in agriculture.

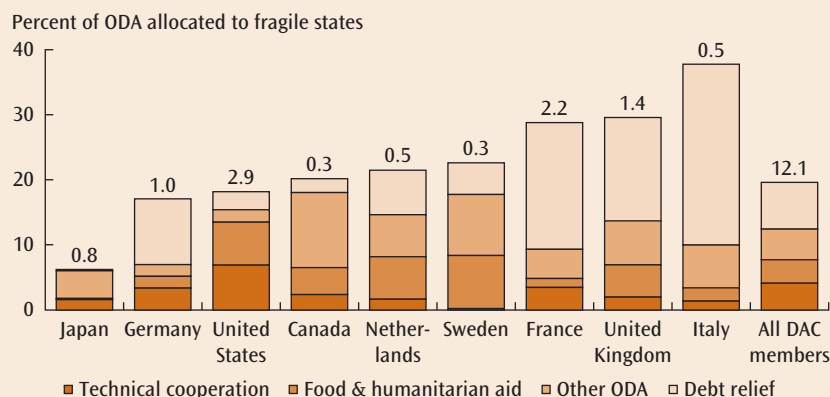
**MDG 8 FIGURE 1 Overall Trade Restrictiveness faced by countries in 2006**



The effect of policies on exporters’ access to markets differs by region. South Asian, Sub-Saharan African, and Latin American and Caribbean countries faced the highest barriers to their exports, since they export mainly agricultural products. For South Asia and Sub-Saharan Africa, restrictions by developed countries are especially high. East Asia and Pacific countries face less restrictions; the same is true for Europe and Central Asia and Middle East and North Africa.

Source: OTRI (World Bank).

**MDG 8 FIGURE 2 Share of total aid toward fragile states**



Donor focus on fragile states is translating into substantial assistance to some of those countries and the group as a whole. On average, DAC countries allocated 20 percent of bilateral aid to fragile states in 2003–05. However, more than half of fragile states received less ODA in 2005 than in 2001. Aid flows were dominated by debt relief; several donors provided over 50 percent of their aid in debt relief. Humanitarian aid also accounted for a substantial share of assistance to fragile states. By contrast, “other ODA,” which traditionally finances development projects and programs, was less than a quarter of aid.

Source: OECD DAC Development Committee Report and DAC database.

Note: Numbers above bars reflect average ODA volumes given to fragile states, 2003–05 (2004 US\$ billions).

**TARGET 12:** Develop further an open, rule-based, predictable, nondiscriminatory trading and financial system.

**TARGET 13:** Address the special needs of the least developed countries.

**TARGET 14:** Address the special needs of landlocked developing countries and small island developing states.

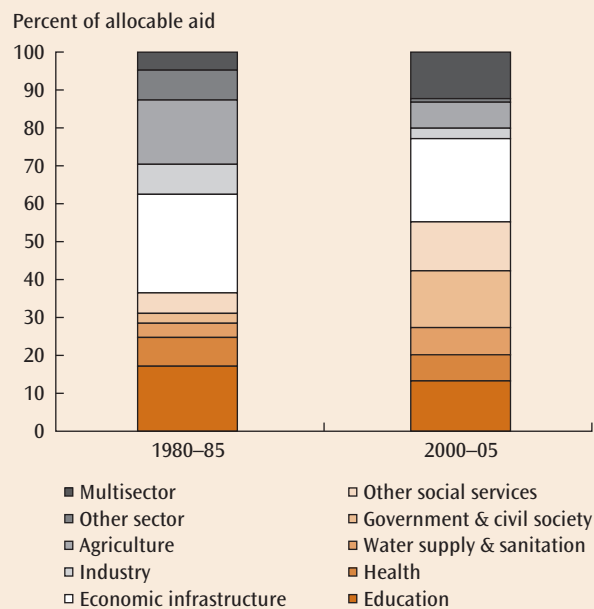
**TARGET 15:** Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term.

**TARGET 16:** In cooperation with developing countries, develop and implement strategies for decent and productive work for youth.

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

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

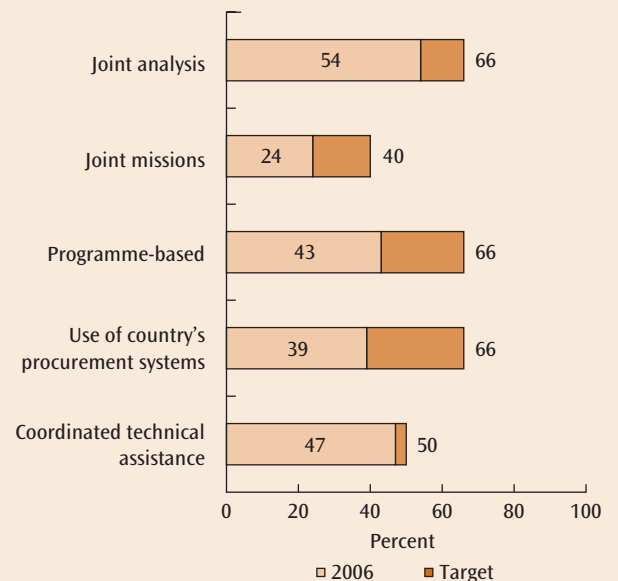
**MDG 8 FIGURE 3** Sectoral allocation of DAC members' bilateral aid



Source: OECD DAC database.

The chart shows the breakdown of bilateral, sector-allocable aid, by social services, economic infrastructure (roads . . .), sector production, and multisector (environment . . .). The share of aid devoted to government and civil society has increased. Also, the shares of aid for agriculture, industry, and economic infrastructure have declined.

**MDG 8 FIGURE 4** Selected indicators on aid harmonization and alignment in 2006



Source: OECD DAC database.

In several areas, donors are coming quite close to reaching the 2010 goals for harmonization and alignment. The largest gap involved the use of country procurement systems, an area slowed by concerns over the quality of financial management.