

## Chapter 13

# Conclusions and Recommendations

Substantial progress towards the achievement of the MDGs has been made by the 46 small states, although missing data preclude effective assessment of vital aspects, including poverty reduction, improvements in environmental quality and the control of disease.<sup>1</sup>

By and large, it appears that the smaller states have performed less well than the benchmark states. Yet in certain key areas, some of the poorest states have made the greatest relative achievements. Further progress is likely to be constrained by uneven levels of resources, technical capacities, already low economic and social development, population size and the vulnerability of many to exogenous environmental and economic events.

Across all the MDGs, the 46 small states achieved 20 per cent of the targets, compared with the 10 benchmark states, which achieved 32 per cent. The small states made progress towards the target values in 36 per cent of cases (i.e. cases of target 'achieved' plus those 'on-track'), compared with 53 per cent progress by the benchmark states. If missing data are excluded, these figures go up to 72 per cent for the small states compared with 78 per cent for the benchmark states. Across the eight MDGs examined, the 46 small states made most progress towards achieving MDG 4 (child health) and least progress on MDG 1 (poverty relief).

Greatest progress has been made on:<sup>2</sup>

- MDG 4 (child health): 86 per cent
- MDG 8 (partnerships): 69 per cent (especially in the field of technical transfer in telecommunications and computing)
- MDG 3 (gender equality): 48 per cent
- MDG 7 (environmental sustainability): 38 per cent
- MDG 2 (improving education): 33 per cent

Least progress has been made in:

- MDG 6 (disease control): 25 per cent
- MDG 5 (maternal health): 23 per cent
- MDG 1 (poverty relief): 18 per cent

The performance of the 46 small states has been compared with the performance of 10 selected benchmark states.<sup>3</sup> In this comparison it was found that:

The 46 small states:

- Achieved fewer of the targets and made less progress;
- Have a lower percentage of indicators off-track; and
- Have a higher percentage of missing data than the 10 benchmark states.

Missing data:

- For the 46 small states there were 44 per cent missing data
- For the 10 benchmark states there were 34 per cent missing data

Performance by MDG:

- The 46 small states generally made less progress than the benchmark states; but
- The 46 small states performed better on reducing child mortality than the benchmark states.

### 13.1 Greening the development process

At international and regional levels some of the difficulties in making progress using the basic MDG system could be overcome if policy-makers divided countries into groups in terms of their stages of economic and social development and examined how far they are pursuing a process of green development (see Table 13.1).

For the purpose of this analysis the small states have been divided into four groups characterised by key indicators of development and natural resources impact.

#### 13.1.1 Group A: High income – unsustainable use of natural resources

*Antigua and Barbuda, The Bahamas, Bahrain, Barbados, Brunei Darussalam, Cyprus, Malta, Singapore, Trinidad and Tobago*

**Table 13.1 Greening development (group median values)**

Indicators	Group A <sup>4</sup>	Group B <sup>5</sup>	Group C <sup>6</sup>	Group D <sup>7</sup>
Income level 2007	High	Upper-middle	Lower-middle	Low
Income per capita per day (US\$ PPP) 2007	78	21	8	3
HDI value 2007	0.902	0.791	0.693	0.489
Life expectancy (years) 2008	77.4	72.6	68.4	61.7
Undernourishment (%) 2005	5	7.5	7	23
IMR 2007	10	16	45	75
CO <sub>2</sub> emissions/cap/year metric tonnes × 10	92	24	9	2
Access to safe water (%)	100	93	84	69
Internet users (%) 2008	51	23	7	3
Ecological footprint (hectares/cap) × 10 2006	40	18	13	8
Happy Planet Index 2006	46	56	57	43
Progress with MDGs (%) 2010	37.3	35.6	35.6	39.3

**Source:** UN Statistics Division, 2010 and 2011.

This group consists of nine small states with a population of 9 million (14 per cent of the total population of the 46 small states) that have passed through demographic, epidemiological and economic development and continue to progress and diversify. These states have a high income per capita, US\$78 per day, a high human development index, an increased life expectancy of 77 years, an infant mortality rate of 10, safe water for all, 50 per cent of the population linked to the internet and only 5 per cent of the population undernourished. The downside, however, is that they are relative high polluters with a heavier ecological footprint than other groups. Moreover, in terms of the efficiency with which they extract welfare from their limited natural resources, their performance is poorer than those states in Groups B and C that have lower per capita income.

If the states in Group A continue on their current development pathway, they are likely to experience increasing pollution, congestion and unsustainable pressure on their natural resources. If other countries were to follow the pattern of development of the countries in Group A, the world would need to be two to three times larger to cope with the prospective global consumption of natural resources. Future development in this group should aim to sustain economic and social development with a lighter ecological footprint, seeking ways to reduce pollution, and protect and improve their natural environment resources of biodiversity, land, water, air and marine life. This group has made less progress with the MDGs than Group D, the economically poorest, which may be taken as a measure of the unsustainable path Group A has been pursuing.

### 13.1.2 Group B: Higher-middle income – more sustainable use of natural resources

*Botswana, Cuba, Dominica, Dominican Republic, Fiji, Grenada, Jamaica, Mauritius, Namibia, Palau, St Kitts and Nevis, St Lucia, St Vincent and the Grenadines, Seychelles, Suriname*

This group consists of 15 small states with a population of 31 million (45 per cent of the total population of the 46 small states), which are transitioning through economic and social development and are now characterised by income levels of US\$21 per head per day, and relative to Group A, lower HDI, five years less life expectation, an infant mortality rate 60 per cent higher than Group A, 2 million people without access to safe water, 2 million people undernourished and less than half the population with access to the internet. On the upside, however, Group B has an ecological footprint close to sustainable levels, 60 per cent lower CO<sub>2</sub> pollution than Group A and a higher HPI than Group A.

This group, which includes 12 small island states, has a more sustainable pattern of natural resource usage. It should aim to avoid the development pathway of Group A by adopting policies that protect and enhance natural resources, maintaining low levels of pollution, sustaining its lighter ecological footprint and avoiding patterns of consumption and land use that degrade the quality of services derived from the natural environment. It should focus on improving the health of the people, while maintaining the raised levels of welfare of its population and current low impact patterns of natural resources usage. This group has made less progress with the MDGs than Groups A and D and is equal on this measure with Group C.

### 13.1.3 Group C: Lower-middle income – sustainable use of natural resources

*Belize, Cape Verde, Guyana, Kiribati, Lesotho, Maldives, Marshall Islands, Federated States of Micronesia, Papua New Guinea, Samoa, São Tomé and Príncipe, Solomon Islands, Swaziland, Tonga, Vanuatu*

This group consists of 15 small states with a population of 13 million (19 per cent of the total population of the 46 small states). The group has a median income level of around US\$8 per capita per day, substantially below that of Groups A and B, as well as lower life expectancy and a lower HDI than Groups A and B, and an infant mortality rate four times that of Group A and nearly three times that of Group B. It also has 1.3 million population undernourished, 2 million without safe water and only 7 per cent with internet access. On the upside, however, this group has an entirely sustainable ecological footprint, and a level of CO<sub>2</sub> pollution ten times lower than Group A and nearly three times lower than Group B. Moreover, it has the highest HPI of all four groups.

This group, which includes 12 small states, has a greener environmental profile than the two groups with higher income, but it faces many challenges, not least to provide greater food security, extend safe water supplies and improve human health. To do this, it needs to pursue policies that avoid the development pathway of Group A and sustain human welfare within its current light ecological footprint. This group has made progress on the MDGs that is equal to that of Group B and less than that made by Groups A and D.

### 13.1.4 Group D: Low income and low welfare – most progress with MDGs

*Comoros, The Gambia, Guinea-Bissau, Haiti, Timor-Leste*

Group D consists of five small states with a population of 14 million (22 per cent of the total population of the 46 small states). The group has a low income of US\$3 per head per day, with the lowest HDI and lowest expectation of life of all the groups, with people on average surviving 16 years less than in Group A and 10 years less than in Group B. It has 3 million people undernourished, 4 million without safe water and the lowest level of welfare measured by the HPI of all the groups. The upside is the low ecological impact of the population and the low levels of CO<sub>2</sub> pollution, which are perhaps more a measure of inadequate development than of careful nurturing of the environment. These states need

both economic and technical support to advance beyond their current levels of inadequate progress, and the opportunity should be taken to focus support to promote a greener pathway for future development than has been the case with the richest and most economically developed group.

Paradoxically, however, this group, despite having the least economic resources, has made the most progress with the MDGs. Further support to this group would be worthwhile, while keeping a close eye on retaining the light ecological footprint that characterises its pattern of development.

## 13.2 The MDG system and adaption

Using such structuring and using environmental, social demographic and economic indicators, the MDG framework can be adapted for priority setting, while taking into account the wide variation in marginal and total costs and the results that can be expected from interventions (Roberts 2006). Lists are available of the type of interventions appropriate for each of the targets from the UN and other sources and these are expected to be further developed by the Commonwealth Secretariat and the EU, working with other agencies, such as the Indian Ocean Commission.<sup>8</sup>

Standard costs have been developed from UN studies in the African region which provide an indication of the total resources required for making progress on the MDGs (UN Millennium Project 2005). The range of indicators relevant to SIDS is being extended at country level to include features of their countries which are vital for future sustainable development, many of which are key themes in the 2005 UN Mauritius Strategy for SIDS, which have not yet been incorporated in the basic MDG system. Further work is needed in this area.

The UN data system has begun to present data for SIDS as a defined region. But not all states are included in each indicator and many data are missing. When this process is completed it will be more helpful for policy-makers. It will also be furthered if UN agencies such as WHO, UNEP and UNDP consistently give a special place to SIDS in their programmes and in the composition of advisory bodies and reporting systems, as required under UN mandates following the 2005 UN SIDS Mauritius Conference.

A movement to adapt the MDG system has been progressing, urged on by the UN Expert Group on MDGs and by action at country and regional level. The UN Expert Group has been promoting capacity

building of statistical services and mainstreaming MDG data systems through focal points such as each country's central statistics office.

In some countries closer links are being made between MDG data and national policy and budget systems. This is particularly evident in the more developed SIDS, such as Malta, which is now part of the EU; Mauritius, which is working with a variety of regional organisations;<sup>9</sup> Barbados, which is part of the Caribbean SIDS region;<sup>10</sup> and Singapore.

### 13.3 Technical development and support

This report spotlights specific areas for action to assist small states in overcoming problems connected to sustainable development and the MDGs. These are examined below.

#### 13.3.1 MDG 1: Poverty relief

Undernourishment is a prevalent feature of life in many small states and resolving it remains a persistent problem. Eighteen (39%) of the 46 small states have not reduced the percentage of their population that is undernourished since 1990. However, the effective assessment of progress on poverty relief is adversely affected by a substantial data gap on the majority of the nine indicators in this MDG. The review found that in the 46 small states, 71 per cent of data were missing, indicating an urgent need to build the technical capacity to collect and report poverty statistics in the 46 small states and to re-examine strategies for poverty relief where they have been proved to be ineffective.

#### 13.3.2 MDG 3: Gender equality

The push for equality for woman has seen some success, especially in education and non-agricultural employment. But equality in political representation continues to present challenges for many small states. In six of the small states the index declined, with fewer women holding parliamentary seats in 2008 than in 1990. Among these six the percentage fell from 20 to 13 per cent in Belize; from 6 to 0 per cent in Nauru; from 7 to 0 per cent in Tuvalu; and from 12 to 9 per cent in São Tomé and Príncipe. The highest level of parliamentary seats achieved by women in the latest reports from the 46 small states was in Cuba with 43 per cent, Guyana with 30 per cent, Namibia with 27 per cent, Trinidad and Tobago with 27 per cent and Lesotho with 25 per cent. Latest data show that in six of the 46 small states no women held parliamentary seats: Belize, Federated

States of Micronesia, Nauru, Palau, Solomon Islands and Tuvalu.

The high performance in parliamentary gender equality in certain states shows what can be achieved, despite the decline in representation in some and the zero values in others. This is not so much an issue of finance, but rather of political and social commitment in which progress may be influenced by greater publicity for those states moving towards this target. The variation in performance should also stimulate studies of the impact of gender bias on social development and on progress with other gender related policies.

#### 13.3.3 MDG 5: Maternal health

The risk of a mother dying in childbirth is over 100 times greater in Guinea-Bissau than in Cyprus. In Guinea-Bissau only 38 per cent of births are attended by a skilled health professional, while in Cyprus there is complete coverage. In Guinea-Bissau 600 mothers die in childbirth every year; in Cyprus, however, such deaths are rare. These are the extreme points in performance on these indicators in the 46 small states. The extreme performance in Guinea-Bissau is reflected in its poor relative levels of service provision, service use and other factors for reducing maternal risk such as skilled birth attendance, contraceptive practice, high adolescent birth rate, low antenatal care and undernourishment.

The 2010 Africa Maternal Health Scorecard<sup>11</sup> and the 2010 Africa Health Financing Scorecard<sup>12</sup> both indicate that African states are slow in achieving three of the MDGs: MDG 4 to reduce child mortality; MDG 5 to improve maternal health; and MDG 6 to combat HIV/AIDS, tuberculosis and malaria. There is an absence of skilled workers at birth, which is the leading cause of maternal death.

There was a call for governments to adopt innovative health financing systems to increase access to health services. The achievements of Cyprus, Malta, Singapore, Mauritius, Antigua and Barbuda, and Barbados in securing low levels of maternal deaths, show what is possible with comprehensive measures focused on this and related goals. This should serve as a stimulus to action and offer models of good practice. Maternal care is a well-established technical field and its principles should be rapidly extended to reduce the unacceptable risk of maternal death in certain small states<sup>13</sup> where the maternal mortality ratio is more than 20 times that of the best performing states.

### 13.3.4 MDG 6: Disease control

A sharper focus is needed on action against tuberculosis to direct resources to those countries in greatest need. Comparative death rates should be used as a guide here. For instance, the report found over 11,000 deaths from tuberculosis in the 46 small states, with an 800-fold variation in the risk of death between the lowest rates in the benchmark states and the highest in the small states.

### 13.3.5 MDG 7: Environmental sustainability

The report found a 30-fold variation in the level of CO<sub>2</sub> emissions across the 46 small states. Some, such as Brunei Darussalam and Singapore, have begun to decouple environmental pollution from the process of economic growth, as is the case with reported levels from the USA, the UK, Iceland and France. More support is needed to promote commitment and technical developments in this field in the small states.

Protecting the natural environment remains a serious issue. Since 1990 some 48,000 square kilometres of forest cover has been lost in the 46 small states. While 870,000 square kilometres of cover remains, most of this is in four (9%) of these states. Nine of the small states<sup>14</sup> have less than 5 per cent of forest cover remaining. Guidelines for planning the physical environment and technical support for implementation should be directed to those states with the lowest levels of forest cover remaining, but political commitment is essential to avoid urban expansion stretching from shore to shore. Urban and road planning that gives consideration to protecting and replanting the natural environment has economic, social and ecological benefits.<sup>15</sup>

Inadequate living conditions is another major issue. In the 46 small states there were over 12 million people without access to safe water and over 22 million without access to safe sanitation. The most serious problems of provision were in Haiti, Papua New Guinea, Cuba, Dominican Republic and Namibia. Extremely high percentages of people living in urban slums were reported in Haiti (93%), the Dominican Republic (70%), Bahrain (69%), Jamaica (61%) and Belize (47%). In Guyana, the urban slum population rose from 5 per cent in 1990 to 34 per cent in 2005, while in Jamaica the index rose from 29 per cent in 1990 to 61 per cent in 2005. Focused support for urban regeneration is needed in these states, using methods of planned development achieved elsewhere.

### 13.3.6 MDG 8: Partnerships

All 46 small states increased provision of mainline and mobile telephones, as well as internet access, compared with the 1990 baseline. However, there remains a wide range in provision. Mainline telephones per capita vary from 0.2 per cent to 59 per cent; mobile phones vary from 1 per cent to 159 per cent; internet access ranges from 0.2 per cent to 75 per cent. Support should focus on those states with the lowest access, as this is a key element in improving economic competitiveness and social participation.

## 13.4 Recommendations

Policy-makers and implementing partners in small and island developing states at both regional and national level require the following types of support to make further progress with the MDGs.

Technical assistance should be required to:

- Provide greater support in the monitoring and pursuit of the MDGs in the smallest states;
- Differentiate the technical and financial investments required, in line with stages of economic and social development;
- Assess priorities, taking into account the environmental impact (ecological footprint) of development, social welfare gains and economic growth;
- Assess the marginal and total costs and benefits of making progress toward specific targets on each indicator and identify priorities;
- Improve systematic documentation of the scientific and technical evidence basis for interventions within an economics framework that includes social and environmental costs and benefits; and
- Integrate the MDG process within planning, investment and governance systems at national and regional levels.

Research and development on 'best practices' and the evidence base for intervention to:

- Develop a more systematic documentation of the scientific and technical evidence base for interventions within an economics framework that includes social and environmental costs and benefits; and

- Establish methods for developing standards of best practice for interventions for the pursuit of MDGs and systems of exchange of technical information and resources.

Focus on documentation by UN agencies in line with Mauritius Strategy Implementation<sup>16</sup> to:

- Promote comprehensive international documentation of MDG and related data from SIDS and the extension of this into the programmes and publications of UN agencies (e.g. UNEP, WHO, UNICEF and UNDP, as well as the Commonwealth);
- Support UN system agencies working with SIDS countries to develop credible methodologies and accurate datasets on MDG goals; and
- Build mainstream commitment and capacity at national level, with regional support where necessary, within central national statistics offices, linking the process of data collection and dissemination of analyses to economic and social policy and to medium-term financial budget systems.

Further development of UN and national data and indicator systems to meet the requirements of the MSI to:

- Extend the MDG framework for 46 small states and SIDS to cover priority areas in the Barbados Programme of Action and the Mauritius Strategy for Implementation; and
- Establish methods for developing standards of best practice for interventions for the pursuit of the MDGs and systems of exchange of technical information and resources.

## Notes

1 See Table A1.7 of Annex 1.

2 This analysis includes missing data.

3 Brazil, China, France, Iceland, India, New Zealand, Russia, South Africa, UK and USA.

4 Group A: Antigua and Barbuda, The Bahamas, Bahrain, Barbados, Brunei Darussalam, Cyprus, Malta, Singapore and Trinidad and Tobago.

5 Group B: Botswana, Cuba, Dominica, Dominican Republic, Fiji, Grenada, Jamaica, Mauritius, Namibia, Palau, St Kitts and Nevis, St Lucia, St Vincent and the Grenadines, Seychelles and Suriname.

6 Group C: Belize, Cape Verde, Guyana, Kiribati, Lesotho, Maldives, Marshall Islands, Federated States of Micronesia, Papua New Guinea, Samoa, São Tomé and Príncipe, Solomon Islands, Swaziland, Tonga and Vanuatu.

7 Group D: Comoros, The Gambia, Guinea-Bissau, Haiti and Timor-Leste. (Two other small states, Nauru and Tuvalu, have not been classified within the groups because of missing data.)

8 UN MDG Handbook (2005), available at <http://mdgs.un.org>

9 Ganoo, M (2008), *MDGs: The Mauritius Experience*. Available at: [mdgs.un.org/.../MAURITIUS%20-%20Country%20experience.ppt](http://mdgs.un.org/.../MAURITIUS%20-%20Country%20experience.ppt)

10 Binger, A (2008), *Vulnerability of Caribbean SIDS, High Level Roundtable on International Co-operation for Sustainable development in Small Island Developing States*, emphasises the importance for SIDS of data on renewable energy production, waste management and food security, which are not embraced in the basic MDG system. Available at: [www.un.org/esa/sustdev/sids/2008\\_roundtable/presentation/session1\\_binger.pdf](http://www.un.org/esa/sustdev/sids/2008_roundtable/presentation/session1_binger.pdf)

11 Detailed assessments are provided in this report, but it is prefaced by caution on the availability of data, stating: 'Tracking progress on MDG achievement is an immense challenge due to a lack of sufficient, reliable, and updated data. There are also inconsistencies between national and global tracking efforts that make it difficult to compare progress across countries and regions but commendable efforts have been made'. Available at: [www.africapprogresspanel.org/index.php/download\\_file/view/1254/](http://www.africapprogresspanel.org/index.php/download_file/view/1254/)

12 The review found that 'Globally countries with higher government per capita investment in health – in addition to separate higher per capita investment on social determinants such as clean water, sanitation and environment, nutrition, gender equity in health; pharmaceutical capacity and better access to medicines; and higher numbers of health workers equitably distributed geographically – utilise health resources more efficiently and have overall higher life expectancy'. Available at: [www.who.int/pmnch/media/press\\_materials/pr/2011/health\\_financing\\_scorecard.pdf](http://www.who.int/pmnch/media/press_materials/pr/2011/health_financing_scorecard.pdf)

13 Guinea-Bissau (MMR 1,100); The Gambia (MMR 690); Haiti (MMR 670); Comoros (MMR 400); Timor-Leste (MMR 380); Cape Verde (MMR 210).

14 Data are missing for two countries: Marshall Islands and Nauru.

15 See: [www.sustainablecitiesinstitute.org/view/page.basic/class/feature.class/Lesson\\_Benefits\\_Urb\\_Forest\\_Trees](http://www.sustainablecitiesinstitute.org/view/page.basic/class/feature.class/Lesson_Benefits_Urb_Forest_Trees)

16 Mauritius Strategy for Implementation: the UN General Assembly commitment to the delivery of the 2005 UN SIDS Mauritius Strategy.