

# Overview

**This is the second in a series of regional reports on the MDGs. The first was published in 2003 as *Promoting the Millennium Development Goals in Asia and Pacific: Meeting the Challenges of Poverty Reduction*. As well as assessing the progress across the region it looked at the kind of pro-poor policies that would be needed to achieve the goals and also at the prospects for creating global partnerships.**

This report builds on the previous report in a number of ways. In the first chapter, it takes advantage of far more data than were available previously to present a much fuller picture on the state of progress. In the second chapter it adds to the earlier analysis of national options by considering this time not just changes in policies but changes in national institutions that can accelerate progress towards the MDGs, particularly for the delivery of services. Finally, in the third chapter, it looks more closely at one of the most potent forms of international cooperation – between the countries in the region.

## Tracking progress

Asia and the Pacific is one of the world's most dynamic regions, so it should come as no surprise that the report finds this region has made rapid progress towards many of the MDGs. But not all the developing countries in Asia and the Pacific are making sufficient progress; indeed none are currently on track to meet all the goals by 2015. This report looks in detail at which countries are on and off track. For each target, the report places each country in one of four categories.

- – *Early achiever* – Has already met the target
- ▶ – *On track* – Expected to hit the target by 2015

- – *Off track – Slow* – Expected to hit the target, but after 2015
- ◀ – *Off track – Regressing* – Slipping backwards, or stagnating

### *Goal 1 – Eradicate extreme poverty and hunger*

On the poverty target, the Asian and Pacific region has made dramatic progress. Between 1990 and 2001 in the 23 countries offering sufficient data (out of a total of 55) the proportion of people living on less than \$1 per day fell from 31 to 20 per cent. Despite population growth, the absolute number of poor people also fell – from 931 to 679 million. A slightly different picture emerges, however, when considering the results of national poverty data: for the 13 countries for which data are available the poverty rate also fell, though less dramatically – from 21.3 to 19.4 per cent. On either basis, Asia and the Pacific's overall poverty reduction will inevitably be swayed by the achievements of China and India – and both are well on track, as are 17 other countries. The countries having the most difficulty appear to be Armenia, Bangladesh, the Lao People's Democratic Republic and Mongolia.

The second target under this goal is to halve the proportion of people who suffer from hunger. For 27 countries, the proportion of people consuming less

than the minimum dietary energy requirement fell between the early 1990s and 2001, but only slightly – from 18.7 to 15.1 per cent. The worst situation is in Tajikistan with 61 per cent of the population hungry, followed by the Democratic People’s Republic of Korea with 36 per cent. Another important indicator is child malnutrition which is disturbingly high in a number of countries: 48 per cent of children are undernourished in Nepal, Afghanistan and Bangladesh, for example, and 47 per cent in India.

#### *Goal 2 – Achieve universal primary education*

Here progress has been good. Most countries in the region have primary enrolment ratios above 80 per cent, and many above 90 per cent. Of the 33 countries with sufficient data available to estimate a trend, 8 have already achieved the target, and 11 others are on track to do so. However, dropout rates can also be high. In Papua New Guinea, for example, around half of children drop out before grade five and in India, the Lao People’s Democratic Republic and Myanmar more than one third do so.

Another measure of success is the primary completion rate, which for the region as a whole between 1998 and 2001 rose from 89 to 93 per cent – though this gives an over-optimistic picture since the number of graduates is swollen by over-age children.

#### *Goal 3 – Promote gender equality and empower women*

Progress on eliminating gender disparity in education has been good, but progress in participation and empowerment needs to be accelerated. The target under this goal focuses on eliminating gender disparity at all levels of education. At the primary level, of the 38 countries or territories with data available, 26 have already achieved the target and 5 are on track to do so. Bangladesh and China have made particularly rapid progress. Of the 5 countries that are regressing, the most serious situations are in Afghanistan, where between 1990 and 1999 the ratio between girls’ and boys’ primary enrolment fell dramatically, from 0.55 to 0.08, though the situation has probably since improved, and in Pakistan, where the proportion has stalled at 0.74.

At the secondary level the situation also seems positive. Across the region, between 1990 and 2001 the ratio of girls to boys at the secondary level increased from 0.73 to 0.87. Of the 36 countries with relevant data, 25 have already achieved the target, and even countries such as Pakistan and Nepal with very low ratios have been making progress so fast that they are on track. For tertiary education there has also been considerable progress. Of the 27 countries with the necessary data, 15 have already achieved the target, while 5 others are

on track; indeed in tertiary education a number of countries have more females than males.

#### *Goal 4 – Reduce child mortality*

Here the picture is mixed. The first target is to reduce the under-5 mortality rate by two thirds. For this indicator the 47 countries with data available divide into two halves. Half have already achieved their targets – and all have child mortality rates below 45 per 1,000 live births. The other half, however, are in a very different position: only 4 are on track to meet the target, 14 are off track, making progress too slowly, while 3 are regressing.

In 2003, the largest number of child deaths was in India, 2.3 million, followed by China, 650,000, and Pakistan, 481,000. Of these countries only China has been making sufficient progress; both India and Pakistan are moving too slowly. The most shocking rate, however, is in Afghanistan with 257 deaths per 1,000 live births: one child in four dies before reaching the age of 5. As child mortality rates come down, the majority of deaths take place in the earliest years, months, and even days, of life. Overall therefore, the pattern for infant mortality is similar to that of the under-5 mortality

#### *Goal 5 – Improve maternal health*

Here too progress has been far too slow. The target is to reduce the maternal mortality ratio by three quarters between 1990 and 2015, but the ratio in the average Asian developing country has only declined from 395 to 342. Even more alarming, of the 42 countries for which data are available, maternal mortality has gone up in 22. Around two thirds of Asian maternal deaths, 164,000, take place in India and Pakistan, both among the regressing countries. The highest maternal mortality rates per 100,000 live births are, however, in Afghanistan (1,900), Nepal (740) and Timor-Leste (660). Each year, across the region around one quarter of a million women die as a result of a normal life cycle event: pregnancy and childbirth. Almost all these deaths could be avoided if mothers had routine obstetric care and access to emergency obstetric care.

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

HIV/AIDS is also an area of great concern. The target is to have halted and begun to reverse the spread of the epidemic by 2015. Overall, however, the region is off track: between 2001 and 2003 the prevalence among those aged 15-49 in the average Asian country rose from 0.39 to 0.45 per cent. As of 2004, the Asia-Pacific region has over 9 million people living with HIV/AIDS and each year half a million people die.

The highest prevalences among adults aged 15-49 are all in South-East Asia: Cambodia, 2.6 per cent; Thailand, 1.5 per cent; and Myanmar, 1.2 per cent – though the first two of these have already achieved their MDG targets, since they have reduced the prevalence. The highest numbers of infected people, however, are to be found in India and the Russian Federation, where the prevalence is rising. China has kept the prevalence fairly stable, so can be considered “on track”.

There are also worries about malaria. Although there are insufficient data to calculate trends, in some countries the disease seems to be making a comeback. The highest prevalences are in the Pacific, notably Solomon Islands, where the disease affects 15 per cent of the population. The largest number of people sick are in Indonesia, with 1.9 million people infected. The largest number of deaths are in India – more than 30,000 each year. The highest death rate, however, is in the Lao People’s Democratic Republic.

Tuberculosis too remains a major concern, though in this case the region is making progress: between 1990 and 2003 the number of people infected declined from 12.8 to 10.3 million and the number of people dying each year fell from 1.1 to 1.0 million. The largest number of people infected in 2003 were in the most populous countries: China, 3.2 million; India, 3.1 million; and Indonesia, 1.5 million. All three are, however, making progress.

#### *Goal 7 – Ensure environmental sustainability*

The first target is to integrate the principles of sustainable development into country policies and programmes. Based on their progress in preparing national sustainable development strategies, of the 55 Asia-Pacific developing countries only 5 are early achievers and 10 are on track. This goal also aims to reverse the loss of environmental resources. Here the picture is also mixed: over the period 1990-2000, in the 48 countries reporting data the proportion of land forested increased in 13, remained unchanged in 17 and decreased in 18. The most rapid rates of deforestation have been in Micronesia, Myanmar, Indonesia and Malaysia.

Another environmental indicator is carbon dioxide emissions. Between 1990 and 2002, average per capita emissions increased across the region from 2.2 to 2.5 tons. Of the 50 countries for which data are available, 30 are regressing, while 20 have become early achievers as a result of deliberate policy, or like many of the Central Asian countries, because of a reduction in industrial output.

A further important target is to halve the proportion of people without sustainable access to safe drinking water and sanitation. For urban water supplies, of the 40 countries offering data, 31 are early achievers or on track and even those that are regressing, nevertheless, had achieved quite high values. The situation in the rural areas is quite different, with coverage typically 10 to 20 percentage points lower. Nevertheless, here too there has been progress: of the 34 countries with data available, 11 are early achievers and 5 are on track, though 18 are off track, of which 11 are regressing. Access to improved sanitation is also far better in urban than rural areas – 73 against 31 per cent.

#### *Indicators and countries of major concern*

This report groups each indicator into one of four clusters, according to the proportion of countries that are having some success with that indicator and also the severity of underachievement. On this basis the indicators of greatest concern would be those related to the national poverty line, rural water supplies, infant and under-5 mortality, malnutrition and primary enrolment. Maternal mortality too should be a priority, since even in the on-track countries the average rate is still unacceptably high. For these indicators, the report also identifies 19 countries that should be of greatest concern.

#### *Subregions and levels of development*

Countries even in the same subregion may have similar characteristics but perform differently on the MDGs. This is evident from looking at the proportion of indicators for which each country is off track. Within these subregions it is also important to consider different categories of countries: least developed countries (LDCs), landlocked developing countries (LLDCs) and small island developing States (SIDS).

- *South and South-West Asia* – This is the poorest performing subregion: the only one in which a majority of its countries, 6 out of 10, are off track for more than one third of the indicators. The slow progress here is largely because this region includes 4 of the LDCs – 3 of which are also landlocked and 1 of which is a small island developing State.
- *North and Central Asia* – This region has a high proportion of LLDCs. Here the countries of greatest concern are Tajikistan, Uzbekistan, Kazakhstan and Armenia. The first two have high and increasing rates of malnutrition. Education standards have also slipped and the virtual collapse of the social sector in some countries has resulted in a general deterioration of health indicators.

- *Pacific* – The majority of these countries are SIDS. Fewer than half have data for the majority of indicators: none offer any information on poverty or hunger and few on education or gender. Papua New Guinea has more information, which indicates that on most indicators it is off track. Many Pacific countries have problems with water supplies and sanitation.
- *South-East Asia* – This includes some of the more prosperous countries in the region – along with some of the LDCs so it is no surprise that success in the MDGs largely reflects this division – with Timor-Leste as the least successful and Singapore the most. Like Myanmar, Timor-Leste also has high infant mortality rates, and along with the Lao People’s Democratic Republic, Indonesia, the Philippines and Viet Nam unacceptably high rates of maternal mortality. This subregion also has severe environmental problems: forest coverage is disappearing and carbon dioxide emissions per head are rising rapidly.
- *East and North-East Asia* – China is on track for – or has already achieved – three quarters of the indicators. Mongolia, however, has struggled with most of the MDGs. For the Democratic People’s Republic of Korea it is difficult to assess progress since data are missing on almost half the indicators.

#### *Gender disparities in MDG achievement*

National data often mask wide disparities between males and females. The MDGs do address education disparities under Goal 3. But there are many other dimensions of gender disparity. For health, for example, one of the clearest indicators is life expectancy. Women have a biological advantage that should on average enable them to live four or five years longer than men. Of the 46 countries in the region with the necessary data, 18 had a life expectancy gap of less than four years. Of these same countries, 10 also show infant mortality rates that are abnormally high for girls. For both indicators some of the most severe problems are in South Asia.

An important measure of women’s empowerment is the extent of their participation in the labour force. Women’s share of employment is lower than men’s in every country. Moreover, women are clearly far less likely than men to be working as managers, or running their own businesses. They are also less likely to be legislators or senior officials and managers. Women also make up only a small proportion of members of national parliaments.

#### *Subnational disparities*

Most countries, particularly the large ones, also display significant subnational disparities. In the Philippines, for example, where the national poverty rate is 16 per cent the regional rates vary from 8 to 63 per cent. Similarly, in Indonesia, while the national child malnutrition rate is 26 per cent the regional rates vary from 18 to 40 per cent. In India too there are often significant differences in MDG achievement between the better-off and poorer states. Poverty rates, for example, ranged from less than 10 per cent in the richest states to well above 40 per cent in the two poorest states, Orissa and Bihar. Country averages may therefore disguise the fact that a number of areas within countries are significantly off track while others are on track. Attempting to help countries to attain their MDG targets in terms of national averages may therefore leave vast numbers of the poor and needy behind.

### **Rethinking service delivery**

If the countries in Asia and the Pacific are to achieve the MDGs they will undoubtedly need to invest sufficient resources. But just as important they will need to change how they do things. They will need to develop the necessary skills and capacity and ensure that their national and local institutions fit the needs and aspirations of the twenty-first century. Institutions in this sense refer not just to specific organizations, governmental or non-governmental, but also to “rules”, formal and informal, that lead to patterns of behaviour – cultural, economic and social. Governments have a role in reforming their domestic institutions, so that they can better meet their responsibilities – and fulfil their promise in the Millennium Declaration to commit themselves to creating an environment “conducive to development and to the elimination of poverty”.

One of the most direct ways in which Governments can address poverty – and meet the MDGs – is therefore by ensuring adequate basic services, either providing them directly or sustaining a framework for provision through the private sector or civil society.

#### *Making services available*

The first task is to ensure that public services are physically in place. A rights-based approach demands that everyone be covered; in practice, however, there are trade-offs as Governments weigh up how much they are prepared to spend. And even when services are equally close to everyone their location affects some groups more than others – particularly women. Women tend to use health services, for example, on a more continuous basis than men and are also more affected by poor water supplies, because they are the

greatest users and typically have to fetch the family's water. Inadequate sanitation is a serious problem for all, but more so for women and girls, who need more privacy than men.

### *Quality*

Even if facilities are in place the quality may be low – typically with deficiencies in terms of staff or supplies or in standards of supervision or quality control. A regular problem is the difficulty of recruiting staff to work in remote schools or clinics. Rural facilities also often run short of supplies. Another common issue is that services are inappropriate to local needs: children in minority ethnic groups, for example, often have to learn in what might be their second or even third language.

Providing good-quality services that are cost-effective is therefore a challenge. Insisting rigidly on national standards that can only be provided for a limited number of people will penalize those who are left out. It is better therefore to take a more flexible approach that can bring quality basic services within reach of scattered populations, while planning for upgrades over time.

### *Economic barriers*

Many people are unable to access services because they cannot afford them. This is most evident in private sector provision, but even government-provided services that are ostensibly free can turn out to be expensive. Thus, while in most countries primary education is free, parents will find themselves paying many supplementary charges. And patients in a “free” health system may actually have to pay informal fees to nurses or doctors to receive treatment. In addition there are opportunity costs. If people have to travel a long distance, for example, or queue for hours, to use a free service they will lose valuable income-earning opportunities or work time. And poor families will also have to take into account the opportunity cost of sending their children to school.

### *Legal barriers*

Many children in the poorest families do not have birth certificates and find it more difficult to get access to school or to free health services. In East Asia and the Pacific 19 per cent of births are unregistered, while for South Asia the proportion rises to 63 per cent. Households, particularly those of migrants, may also lack other important documents: thus unregistered squatter families who lack building permits or a legal address will find that they cannot be connected to an urban water supply.

### *Sociocultural barriers*

Services in principle are available to all, but certain groups typically get inferior treatment, or are excluded altogether. Women form the largest category. Females even from birth can have less access to health services in countries that show a strong preference for sons. Girls too have historically been less likely to be sent to school. Ethnic minorities also often have less access to services than the rest of the population. And people who have contracted HIV/AIDS can face discrimination when it comes to the use of health or education services. Also likely to be excluded are many of the 200 million people in the region living with disabilities. Other groups whose behaviour is either considered socially unacceptable or is illegal – which could include men who have sex with men, injecting drug users or sex workers – may also face barriers in getting access to services.

### *Political barriers*

Deciding levels of service provision is essentially a process of political negotiation. Governments will decide what they can afford and who will get priority – while citizens will try to claim their rights to services to which they are being denied access. Generally, however, this process of negotiation tends to exclude the poorest citizens living in remote areas; they may not even know what their rights are, still less be in a position to assert them.

How can the rights of the poor be fulfilled? One of the most general requirements is a high standard of governance – to ensure that public services are delivered in an efficient, transparent and honest fashion. But a number of institutional changes will be needed to extend services to the whole of the population.

### *Broadening the range of providers*

One change would be to increase the delivery options. In most countries the main provider – particularly of health, education and water supplies – is the Government and where it does indeed provide good service it should continue to do so. Where it cannot do so, however, it should consider involving others, including the private sector and community groups

Private provision is often extensive in health care, but less so in education and in water supplies. But in both cases it is rising. In recent years there have been a series of partial privatizations of water supplies – in addition to the provision by informal water sellers in largely urban settlements. Large-scale public-private partnerships for water supplies have had mixed results for the poor, but it is also possible to create less formal part-

nerships, where the public sector can help to create a demand for services that the private sector can meet. This has been demonstrated in sanitation, for example, which has a soft component in raising awareness for behaviour change and a hard component in the provision of systems.

Many civil society organizations have stepped in, either to fill the gaps or to provide alternative models. A number of Governments have worked in partnerships with NGOs to extend public services. In Bangladesh, for example, the NGO BRAC works with the National TB Programme and in Cambodia, too, there have been successful experiments of contracting health delivery in remote areas to NGOs. In addition, Governments have been able to enter into partnerships with community organizations.

#### *Overcoming economic access barriers*

Most Governments agree that everyone should have access to primary education, basic health care and adequate water and sanitation and that costs to households should not be a barrier. The simplest option is to supply all such services free: for example, most countries do not charge formal fees for primary education. Alternatively, since general subsidies are expensive, Governments can provide subsidies, some of which can be targeted at the poor.

As well as reducing the direct costs, Governments can also try to reduce opportunity costs – particularly the time taken to reach them. The most direct way of doing this is by extending the network of services to bring them closer to communities. But it is also possible to consider mobile services, such as satellite clinics, that might reach distant villages once a month.

#### *Removing legal barriers*

For birth certificates a number of countries have also engaged in registration drives. For other documents, such as those related to property one option is to integrate existing extra-legal agreements into a single formal system. Governments can also review the regulations on service provision to identify those elements – whether laws, regulations, standards or procedures – that tend to exclude the poor.

#### *Making services more appropriate*

Services should also be adapted to local needs. In schools, for example, teachers should carry out most lessons in the local language and also consult with parents on, for example, the most appropriate school timetables and vacation periods. In addition, children and young adults who have missed out on primary education should have the option of attending non-

formal schools. Health systems too can be better adapted to local needs if local people, and particularly women, are closely involved in planning and implementation.

#### *Empowering users*

The best way to ensure that local services are appropriate and effective is to empower the users. This will necessitate new institutions as well as new ways of working within existing organizations. NGOs have often served as catalysts in this process – adopting a rights-based approach as “claim-making” organizations for the poor. Community involvement should also extend to implementation. When there are public works to be carried out, such as the building of new schools, communities should be able to adopt their own approach and choose the contractors. In order to hold the Government accountable they also need more information generally about government performance – disaggregated by sex, region, income and ethnic group. All this will only be possible, however, if communities have the capacity for this degree of supervision and monitoring. They should therefore be able to benefit from education and other capacity-building programmes.

#### *Decentralization and local governance*

Services work best if they are under democratic local control. Many Governments have been carrying out programmes of decentralization that can improve delivery of services to the poor. However, there are also risks that decentralization may actually exacerbate inequality and that services will deteriorate because local people do not have the capacity to manage them. Decentralization therefore needs to be accompanied by a realistic assessment of community dynamics and an effective process of capacity-building as well as resource allocation to subnational levels to match the increased responsibility.

#### *An adaptive approach*

To deliver services to all, Governments should consider an adaptive approach that can extend coverage to all. This will require a series of institutional changes:

1. *Broaden the range of providers* – Governments should identify all the options, public, private and non-governmental, and plan for a combination of service deliverers. In addition to providing, Governments should also concentrate more on facilitating.
2. *Establish standards* – Governments should establish key national standards with adaptations for local conditions.
3. *Plan linkages and upgrades* – Different levels of services should always be interlinked so that users can move from non-formal to formal education, for example.

And there should be a long-term strategy of upgrading – replacing paramedics with fully trained health workers, for example, or replacing rural tap-stands with regular piped water supplies.

4. *Devise relevant regulations* – The regulatory framework should be relevant, realistic and responsive to local conditions, while being sufficiently dynamic to adapt to ever-changing realities.
5. *Keep learning* – Governments should constantly gather the necessary data and experience, and disseminate and use them at all levels – local, national and international.
6. *Empower users* – Users have to be able hold Governments and service providers to account. Service provision thus needs to be much more open and transparent, with appropriate channels for public consultation and involvement.

## **Working together – opportunities for regional cooperation**

Most institutional changes to promote the MDGs will need to take place at the national level. Nevertheless there are also opportunities, particularly in the Asia-Pacific context, for concerted international action not just at the global level but also at the regional level – through South-South cooperation in the pursuit of what might be termed “international public goods”, such as open trading systems and clean air. By analogy countries can also work together to eliminate “international public bads” such as pollution, communicable diseases or trafficking in persons.

### *1. Institutional change to gain more resources*

Countries that are off track on many MDG indicators often lack the necessary finance for augmenting growth and providing the poor with greater opportunities to escape poverty. Greater global and regional cooperation can increase the resources at their disposal in a number of ways: by expanding trade, increasing foreign direct investment and giving official development assistance.

Increasingly, the developing countries of Asia and the Pacific have been intensifying trade between themselves. But they could expand this still further if they dismantled trade barriers. Surprisingly, a number of countries in the region apply higher tariffs to goods coming from the developing countries in Asia and the Pacific than they do to imports from the rest of the world. Also, rather than making bilateral agreements they should put more effort into implementing the existing subregional ones. The least developed coun-

tries could boost trade by collectively agreeing to lower their import duties on capital and intermediate goods. Better transport infrastructure would also help, so countries should work more closely together on projects such as the Asian Highway.

Much international trade within the region is linked with FDI. While FDI is generally welcome, the recipients can maximize the benefits by ensuring better terms. For mining and other natural resource investments, for example, the least developed countries should agree on measures of site restoration, as well as negotiating complementary investments such as rural electrification that will benefit local communities.

Some of the middle-income and even lower-income countries in the region also transfer funds to the least developed countries in the form of ODA. India, China and Thailand are the leading donors to a number of LDCs in the region, and since they give most of their aid for infrastructure, hydroelectricity, health, education and agriculture – they can make a positive contribution to the MDGs.

Clearly, intraregional ODA has considerable potential for boosting the MDGs still further. Corresponding to the declarations of the OECD donors, all countries in the region should now aim to increase their ODA for the landlocked and low-income countries of the region to 0.7 per cent of GDP – and regularly publish information on such assistance.

### *2. Encouraging Asian monetary cooperation*

The Asian financial crisis of 1997-1999 was a serious setback for the MDGs. Millions were thrown into the ranks of the poor overnight and Governments found themselves unable to provide basic services for the poor. Countries should therefore consider how they can cooperate to prevent a future crisis of this scale. For this purpose they could create alternatives to assistance from the International Monetary Fund through regional monetary cooperation. The region has built up reserves of around \$3 trillion – offering the opportunity to create such facilities. And given the growing scale of intraregional trade, the time is now ripe for such cooperation; China in particular would have a great interest in preventing another monetary meltdown. A number of initiatives have already prepared the ground for regional monetary cooperation.

As well as using the accumulated reserves to ensure monetary stability, it should also be possible to use some of these funds for productive investment, particularly in the region's infrastructure.

### *3. Regularizing labour migration*

Nowadays many more of the region's migrant workers are going not to the Middle East but to the faster-growing countries in Asia and the Pacific – where they help to meet rising demand for unskilled and semi-skilled labour. Labour migration has many potential benefits for the MDGs – helping to increase growth and thus reduce poverty in both source and destination countries. The migrants' families benefit directly through substantial remittances that they can use not just for day-to-day survival, but for investing in the health and education of their children.

Given the scale of migration and the flows of remittances, and the likelihood that they will persist for some years to come, the challenge for Governments is to make best use of them – maximizing the benefits for both source and destination countries while minimizing the risks for migrants and their families, through better regional cooperation on laws and institutions that improve social protection for migrants. One of the most important steps would be to make realistic assessments of the needs for migrant labour and ensure that this demand is met through legal channels.

### *4. Creating an Asia-Pacific grain security system*

National Governments have the primary responsibility for the food security that is essential for keeping hunger at bay. Nevertheless, countries in the region can also cooperate for this purpose. They can, for example, make investments in and share information on technology and marketing – with joint ventures to boost productivity to usher in a “second green revolution” in the Asian and Pacific region. They should also be able to cooperate on quality control, including protocols for GM foods. In addition, they can remove various forms of protection and segmentation so as to permit farmers both to sell on their local markets and to export. And they can also improve roads and other transport infrastructure to allow for the more efficient distribution of grains around the region.

One major new initiative would be to establish an Asia-Pacific International Grain Bank (APIGB). Initial financing for the Bank could come from the accumulated foreign currency reserves. Countries could then either purchase grains from the Bank, or borrow for later repayment in comparable grains or in hard currency. APIGB could also incorporate some of the elements of a grain market, with a credit system and spot and futures transactions.

In addition the countries of the region could establish early warning systems to notify each other of risks to food security from natural and man-made disasters, for example, or of likely volatility in international grain markets.

### *5. Tackling the HIV/AIDS pandemic and other diseases*

Many countries have been surprisingly slow to address the HIV/AIDS pandemic. In addition to stepping up action at the national level they can also supplement these efforts through cooperation via regional institutions – declaring HIV/AIDS a regional emergency and mandating an emergency response, and developing regional compacts to ensure the provision of drugs and other materials for both prevention and treatment.

Another option would be to create an intergovernmental collaboration mechanism to fight HIV/AIDS to mobilize funds for the lower-income and least developed countries. At the same time countries should be able to collaborate on the control of other diseases, both infectious and non-communicable – by establishing standards, setting up early warning systems, and building more effective regional systems for surveillance and communications.

### *6. Aiming for green growth*

In order to reduce poverty and meet the needs of current and future populations, the countries of the region will need to pursue even greater economic growth. The challenge now is to achieve this growth, while limiting the use of natural resources and cutting pollution, and generally keeping within the region's ecological carrying capacity. This will mean moving on from the conventional paradigm of “grow first and clean up later” to a new paradigm of “green growth” that harmonizes economic growth with environmental sustainability.

At the regional level the possibilities include creating a policy consultation forum and a knowledge hub. Countries can also implement the existing initiative for a network on green growth, while making full use of existing subregional bodies to develop and implement regional and subregional strategies to create synergies between the environment and the economy.

### *7. Improving governance*

One of the reasons why service delivery and MDG attainment are poor is that resources are dissipated through corruption. Governments need to root out corruption primarily at the national level but they can do so more effectively if they cooperate across borders. One possibility would be an Asia-Pacific convention on the elimination of corruption. This could cover agreements on law enforcement and the sharing of information – as well as on extraditing and prosecuting offenders and seizing their assets.

The countries of Asia and the Pacific will also be able to move more rapidly towards the MDGs if they can make better use of information and communication technol-

ogy (ICT) to promote e-governance. At present they differ greatly in their capacity: some are world leaders in ICT and have already advanced towards e-governance; others have yet to start. This suggests many areas of opportunity. Countries, such as India and the Republic of Korea, with abundant software skills and those, such as China, with hardware capabilities can help other countries in the region to advance more rapidly and realistically towards e-governance.

#### *8. Strengthening cooperation between regional institutions*

While Governments working closely together can increase their possibilities of attaining the MDGs, there is also an important catalytic role for the regional-level institutions. The United Nations agencies, regional development agencies such as ADB and regional trade, economic and subregional cooperation groups and institutions such as ASEAN, SAARC and GMS need to increase their cooperation on MDG-related issues.

The regional partnership between ESCAP, UNDP and ADB for attaining the MDGs is an example – and this report is one output.

### **A future within reach**

The MDGs have helped many countries to galvanize their development efforts – offering a space in which all sections of society can come together to debate national and regional priorities. But they will only finally serve their purpose if they focus attention on the remaining gaps, and on the changes needed to meet the rights of everyone – especially the poorest and most vulnerable. 2015 is only 10 years away.

Advocacy for greater resources is already under way, through the Millennium Project, for example. But these resources need to be complemented with appropriate institutional changes to ensure that all these goals are within reach.