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## STATUS OF THE MILLENNIUM DEVELOPMENT GOALS AND THE POST-2015 DEVELOPMENT AGENDA

### Introduction

1. In 2000, the 189 member countries of the United Nations signed the Millennium Declaration, which set eight Millennium Development Goals ([MDGs](#)); these goals were reaffirmed in 2010 at the United Nations Summit on the Millennium Development Goals.
2. These human development goals refer to the eradication of poverty; universal primary education; gender equality; reduction of child mortality; improvement of maternal health; combating HIV/AIDS, malaria, and other diseases; environmental stability; and development of a global partnership for development.
3. The progress and milestones attained toward meeting the MDGs vary from one country to another, within each country, and from one goal to another.
4. This progress report on the health-related MDGs the latest advances made toward meeting the commitments contracted during the [45th Directing Council](#) in 2004, which adopted Resolution [CD45.R3](#) on the MDGs and health targets ([CD45/8](#)); the report of the World Health Assembly ([A63/7](#) and [WHA63.15](#) [2010]); and the Millennium Summit resolution ([A/65/L.1](#) [2010]) as it pertains to the Region of the Americas.
5. The principal lines of debate on the post-2015 Development Agenda are also presented here. Our Region addressed this issue during the 52nd Directing Council of PAHO, based on the commitments contracted at the global level and established in the United Nations Agenda.

### Background

6. Although the Region of the Americas is well on its way to attaining the health-related MDGs, which include drinking water and sanitation as health determinants, these advances have been made at the national level and do not necessarily correspond to the progress made at the subnational level, since there are still areas and municipalities that remain completely outside the achievements of MDGs. That is due to the fact that
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national averages tend to conceal major intra-country and inter-country disparities and that varying paces in progress toward meeting the goals continue to be characteristic of our Region.

7. In 2012, the Economic Commission for Latin America and the Caribbean ([ECLAC](#)) reported that an estimated 167 million Latin Americans live in poverty. Of this total, 66 million people live in conditions of extreme poverty with insufficient income for an adequate diet. As a result, eradication of chronic malnutrition continues to be unmet goal in some countries; chronic malnutrition tends to be concentrated in the interior municipalities and areas of countries (1).

8. With the adoption of Resolution [CD45.R3](#) in 2004, the countries have implemented activities with support from the Organization's different technical areas, emphasizing measurement, quality, and monitoring of the progress made toward meeting the goals.

9. This progress report is based on data provided by the Member States and published annually by PAHO in the framework of the *Regional Core Health Data and Country Profile Initiative* (CD40/19 [1997], [CD45/14](#) [2004] and CD50/INF/6 [2010]).

### **Analysis of the Current Situation**

10. For the purposes of this report, information was considered from two sources: the countries (routine records and country calculations) and estimates from the Economic Commission for Latin America and the Caribbean (ECLAC/CELADE), which oversees the interagency group.

11. The PAHO study is based on data and information available from 1990 to 2013, which covers 92% of the time period allotted for achievement of the MDGs.

12. Some constraints were encountered when using routine system data, due mainly to lack of coverage in indicator numerators and denominators. In such cases country estimates and international organization calculations had to be used, which do not always coincide.

13. PAHO is implementing a strategy to strengthen vital statistics and health statistics ([CD48/9](#) [2008]) with three components: *a*) work with countries to strengthen and improve data generation; *b*) coordinate with international agencies to avoid duplication; and *c*) apply different techniques or hypotheses to calculate indicators.

14. Infant mortality in the Region continues to drop. In 1990, the Latin American and Caribbean (LAC) infant mortality rate was 43 per 1,000 live births, and in 2012, 16 per 1,000, a reduction of 63%. From the start of the progress studies on this indicator, it has been made clear that MDG 4 is analyzed by mortality of children <1 year of age, since in

the Region of the Americas, since this age group accounts for more than 70% of the deaths in children under 5.<sup>1</sup>

15. Maternal mortality in the Region has declined, but to varying degrees from country to country. According to estimates by the interagency group, the percentage change was calculated taking the 1990 figure as a base. In 1990, the maternal mortality rate was 140 per 100,000 live births in LAC and 80 in 2010, a reduction of 41%, with an annual average of -2.6% since 1990. In 2010, there were a total of 9,726 maternal deaths in the Americas. Based on data from 33 countries and territories in the Region, reduced rates can be observed in 25 countries.<sup>2</sup>

16. In countries where maternal mortality rates are falling, strategies contributing to this trend include expanded prenatal care coverage, delivery by skilled birth attendants, and access to and use of contraceptives. In countries where mortality rates are reported to be rising, it is important to step up efforts to reverse this trend. Increased rates could be due to improved monitoring and reporting of events and not necessarily to a real increase in number of deaths. The WHO is responsible for monitoring this indicator.

17. Concerning estimation of the number of new HIV infections for the countries in the Region, a reduction in regional morbidity and mortality has been observed. In 2012, about 6% of the total new HIV infections worldwide—that is, 146,000 cases—were reported in the Region. Of these, 86,000 occurred in Latin America, 48,000 in North America and 12,000 in the Caribbean. The subregion of the Caribbean shows one of the biggest drops in new infections (down 52%) compared with 2001. The number of new infections in Latin America fell 11% in the same period. In addition, the number of children with HIV dropped by 24% in Latin America and 32% in the Caribbean from 2009 to 2011. The UNAIDS is responsible for monitoring compliance with Targets 6A and 6B.

18. Latin America and the Caribbean are close to achieving universal coverage of antiretroviral drugs<sup>3</sup> (80%), since 75% of people in need of these drugs received treatment in 2012. The statistic for children <15 years old is close to 67%. From 2005 to 2011, the percentage of pregnant women receiving antiretroviral drugs to prevent mother-to-child transmission rose from 36% to 70%.

19. For the period 2000-2012, the Region reported a 60% drop in morbidity and 72% drop in mortality from malaria; 18 of the 21 countries with endemic malaria managed to lower their numbers by 2012. Of these, 13 reported reductions of over 75%, and three countries reported reductions of over 50%.

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<sup>1</sup> This analysis used estimations by the inter-agency group and took into consideration that UNICEF is the agency responsible for monitoring and evaluating the indicator: “Levels & Trends in Child Mortality. Report 2013 (Estimates Developed by the UN Inter-agency Group for Child Mortality Estimation.”

<sup>2</sup> The study is based on statistics from the “Maternal Mortality Estimation Inter-Agency Group (MMEIG). Trends in maternal mortality 1990-2010”, coordinated by the World Health Organization and published in 2012.

<sup>3</sup> Pan American Health Organization. Antiretroviral Treatment in the Spotlight: A Public Health Analysis in Latin America and the Caribbean 2013. Washington DC: PAHO, 2013.

20. With respect to tuberculosis, the 35 Member States have reported 79% detection of the cases, according to new WHO estimates for the Region of the Americas for 2012. Nevertheless, multidrug resistance (MDR) and TB/HIV co-infection still pose a challenge, despite of progress made toward their control. For the Region, the annual rate of reduction in TB incidence is 4.2% (1990 to 2012), with a deceleration in the trend due to difficulties in reaching populations vulnerable to the disease, found for the most part in the poor and marginal neighborhoods of large cities. As a result, in 2013, PAHO began application of a working framework for the control of tuberculosis in large cities to improve these populations' access to quality care. Meanwhile, the Region of the Americas has already met and surpassed the targets of a 50% reduction in TB prevalence and mortality rates by 2015.

21. With respect to sustainable access to safe water in the Region of the Americas, in 2010, it was reported that 96% of the total population had access to improved water sources (99% in urban areas and 86% in rural areas). However, when the LAC region is considered alone, access drops to 94% (98% in urban areas and 81% in rural areas). Of the 86% of households with access to water that arrives by pipes, there is not systematized data on water quality. The rising consumption of bottled water is cause for concern since its financial and environmental costs threaten the global human right to water.

22. The goal of basic sanitation has not been achieved. In the entire Region of the Americas, there is 88% coverage with improved basic sanitation (91% in urban areas and 74% in rural areas). When Latin America and the Caribbean alone are considered, the percentage drops to 80% (84% in urban areas and 60% in rural areas). Some 25 million people in Latin America and the Caribbean still defecate outdoors.

23. The inter-agency group is responsible for measuring these two indicators. Specific responsibility rests with UNICEF and WHO, which, through the WHO/UNICEF Joint Monitoring Programme (JMP) for Water Supply and Sanitation, utilize data from household surveys and censuses, with standardized definitions to ensure comparability over time and between countries.

24. Preparation is already underway of post-2015 indicators on the right to water and sanitation, recently adopted by the United Nations (2).

### **Progress in the Commitments**

25. The following strategic lines for MDG achievement, established in 2011, continued to be pursued: *a)* Review and consolidation of information systems; special attention has been given to improving data production and collection among the Caribbean's English-speaking countries; *b)* Strengthening of systems based on primary health care (PHC), giving priority to the most vulnerable municipalities with the renewed PHC framework; *c)* Reduction of inequity within countries, giving priority to the most vulnerable municipalities and excluded population groups, as a response to the social

determinants of health; and *d*) Public policy-making to ensure the achievements' sustainability and reaffirm "health in all policies."

26. In addition, the following actions continue to be promoted: *a*) joint efforts among countries in the Region; considering that some must speed up activities underway for immediate specific actions in the targets that lag behind, such as the safe motherhood initiative, and progress to achieve water as a universal human right; *b*) continue PAHO's leadership role in monitoring and technical cooperation to improve performance of PHC-based health systems and promote water and sanitation systems; and *c*) strengthening of health information systems to make increasingly valid, reliable and real-time data available through routine systems.

### **Post-2015 Development Agenda**

27. In terms of the post-2015 Development Agenda and health, PAHO, in line with WHO, has held regional consultations with health systems and services managers and other stakeholders not always included in decision-making, such as mayors and indigenous leaders of African descent and civil society representatives.

28. All have agreed on the need to prioritize universal health coverage, understood as the guaranteed right to health through access by all people to quality services they need, considering timeliness, ranges of needs, and including financial protection—so that no individual is impoverished by health care expenses—as the priority objective included on the post-2015 Development Agenda.

29. Based on the results of the 2010 Botswana meeting, it is proposed that progress continue to be pursued toward attainment of the health-related MDGs; to maximize healthy life during all life stages, as general objective; note the increase in non-communicable diseases and promote universal coverage that includes such goals as universal access to all key interventions and the strengthening of health systems. It will be necessary to ensure that each country analyze these results and make the commitment to promote universal access to health for every individual in the Americas (3).

### **Action by the Executive Committee**

30. The Executive committee is requested to take note of this status report and issue its comments and suggestions, so that the work of PAHO on this line of technical cooperation reinforces activities that further promote achievement of the MDG goals and that PAHO participate more directly in the regional consultative processes to prepare the post-2015 Development Agenda.

31. The Member States are requested to intensify their efforts to achieve the MDGs through targeted actions and the intensification of national initiatives to comply with the already approved accelerated plans (CD51.R12[2011], CD48.R10[2009]).

32. The ministries of health in the Region are called upon to participate in the national and regional consultations to advance the strategies of universal health coverage, to guarantee the right to health.

33. It is recommended that the final report on MDG achievement in the Region be submitted in 2015 as well as a continuation strategy for post-2015 at the regional, national and subnational levels in order to continue advancing the targets, goals and indicators that have lagged behind and also the post-2015 Development Agenda.

## References

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