

# The Millennium Development Goals in Mozambique

## What the Millennium Development Goals?

The Millennium Development Goals (MDGs) priorities evolved out of the UN global conferences of the 1990s, especially the Millennium Summit. The latter held in New York in September 2000, came up with the Millennium Declaration which in addition to the global conference commitments highlighted the issue of Human Rights, Peace and Security and Good Governance.

The MDGs provide minimum conditions for a decent living and can sharpen poverty monitoring and evaluation systems and tools especially at sub-national levels. They represent a global consensus in terms of development thinking, with the view to mobilize national and international efforts for poverty reduction and improvement in several areas of human development.

## The MDGs in Mozambique

The MDGs are not necessarily new. Mozambique is a signatory of the Millennium Declaration and has adopted the MDGs. A lot has been happening in the country from the early days of independence; including programmes such as free education, affordable health schemes, child immunization, malaria control, HIV/AIDS, infrastructure, etc. But as the international community's negotiated set of quantifiable and time-bound targets for reducing poverty, the MDGs should henceforth occupy a central place in development planning and resource allocation in low income developing countries.

These goals are re-orienting development policy towards pro-poor policies, equitable and inclusive growth and enhanced social spending for the poor. Five of the MDGs are social sector oriented, with three of them health-related (HIV/AIDS, maternal and infant mortality). Both government and its partners, including civil society and donors have endorsed and support the MDGs. Government has established clear linkages and synergies between the MDGs, the PARPA\*, the Five Year Plan and Agenda 2025 (the country's long term vision).

## Progress to date

Significant achievements have been recorded in Mozambique, particularly within the context of poverty reduction; with incidence rates dropping from 69 per cent in 1997 to 54 per cent in 2003. PARPA II sets out clearly the government's commitment to reduce the incidence of poverty from 54 per cent in 2003 to 45 per cent by 2009. This path puts the country on track to reach the poverty and hunger MDG.

On the education MDG, Primary school completion rate rose from 15% (1990) to 39% (2003); whereas Primary net enrolment rate (NER) fell from 69% (2003) to 88% in 2006. The assessment indicates that it is unlikely that the goal will be met; and major challenges are related to the lack of teachers, recurrent expenditure, etc.

Disparities continue to be a challenge in Mozambique. Analysis indicates that geographical and gender disparities have increased but, equality between boys and girls in primary education may be attained by 2015. On the health MDGs (child and mother health, the HIV and AIDS and diseases), performance has been good to the child and maternal health with significant reductions in the under five mortality rates (U5MR) decreasing from 235 in 1990 to 152 in 2005 (per 1,000

live births). Maternal Mortality Rate has reduced from 980 per 100,000 in 1995 to 408 in 2003. Figures on HIV prevalence are not satisfactory, the 13 per cent registered in 2002, rose to 16.2 per cent in 2004, although with signs of stabilisation in 2007 (16.0 per cent for 15-49 age groups).

Even with extensive infrastructure programmes, heavily supported by donors, access to water, electricity, road networks and information remains a challenge for the vast Mozambique. This is also exacerbated by the country's vulnerability to climate change related disasters.

The first PARPA with its emphasis on priority poverty reduction programmes laid a firm foundation for the MDGs; and in its framework, extensive MDGs sensitization work was done; as were efforts to mainstream the MDGs into the national development frameworks including in particular the PARPA II, and related instruments such as the Economic and Social Plan (the PES) and sector strategies.

The design of PARPA II provided an opportunity for articulation of more pro-poor policies influenced by the experience of its predecessor, the findings of the 2003 Household Survey, the new government's Five Year Plan with its emphasis on rural development and district focus, the adoption of the second generation of PARPA reforms including enhanced economic liberalization and privatization of public utilities and further mainstreaming of the MDGs. PARPA II is therefore as compliant with the main thrust of the MDGs.

### **MDG reporting and MDG costing**

Two MDG progress reports (2003 and 2005) have been produced and preparation of the third one (2008) has started under the auspices of Government of Mozambique and UN Country Team with technical support from UNDP. As the country's priorities within the PARPA refer to shorter-term; detailed MDG Costing Study, beyond the PARPA, could enrich the shorter term planning instruments. In this regard, government is undertaking an exercise with the support of UNDP to determine what needs to be done to achieve the MDGs and what constraints - including institutional and resource ones, need to be addressed.

This process is commonly known as the MDG Needs Assessment and Costing ? i.e. a detailed inventory of the full range of public policy interventions and investments needed to meet the MDGs and their associated cost as well as the most feasible way(s) of financing the interventions.

\* Portuguese acronym for the country's poverty reduction strategy. PARPA II is set for 2006-2009.