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Special Edition

2015 Millennium Development Goals

rom 20-22 September, President José Ramos-Horta will meet other world leaders at a summit in New York to discuss the Millennium Development Goals (MDGs). These goals represent the hopes and efforts of countries of the world including Timor-Leste to end poverty and improve the lives of billions of people. Governments, civil society, community groups and individuals are committed to achieving the Goals by the target date which is only five years away.

In New York, more than 144 Heads of State and Government will review progress, assess obstacles and gaps, and agree on strategies and actions to meet the eight Goals by 2015.

Background to the MDGs



en years ago in September 2000, 189 world leaders came together at United Nations Headquarters in New York to discuss the state of poverty in the world. Never before had the world had so such wealth and resources, yet over a billion people were living in abject poverty.

Leaders looked at the reasons why this was so and concluded that there were factors common to all nations which led to extreme poverty including low income, hunger, disease, and lack of adequate shelter. The leaders recognized that efforts to improve the situation would require that women should have the same rights and opportunities as men. They also realized that any further development had to be done in a way that did not further degrade the natural environment.

The result of these discussions was the United Nations Millennium Declaration, a commitment by all the nations present to work together to reduce extreme poverty and do so by a series of targets to be achieved by the deadline of 2015. These are now known as the Millennium Development Goals.

The MDGs represent human needs and basic rights that every individual around the world should be able to enjoy—freedom

What are the MDGs?

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To wipe out extreme poverty and hunger



To ensure that all children receive a primary education



To ensure that women have the same rights and opportunities as men



To reduce the number of children who die during childbirth or within the first five years of their lives



To improve the health of mothers and the care they receive after they give birth



To reduce the spread of communicable diseases, including HIV/AIDS, malaria and tuberculosis



To stop the loss of biodiversity and to ensure that countries pursue policies which are environmentally sustainable



To ensure that all nations work to support the development of least developed countries

from extreme poverty and hunger, quality education, productive and decent employment, good health and shelter, the right of women to give birth without risking their lives, and a world where environmental sustainability is a priority and women and men live in equality.

The Millennium Declaration in 2000 was a milestone in international cooperation, inspiring development efforts that have improved the lives of hundreds of millions of people around the world. Ten years later, substantial progress has been made, but many challenges remain.

While Timor-Leste was not an original signatory as the country had not yet gained independence, it has since committed itself to the achieving the Millennium Development Goals

Timor-Leste and the MDGs

t has been eight years since Timor-Leste finally achieved the independence it had fought so hard for since 1975. Burdened with a legacy of post-colonialism followed by 25 years of occupation and recovering from the carnage of 1999, the new nation faced daunting challenges as it formed a government in 2002.

Challenges included the nation's shattered infrastructure and a skills and human resource deficit resulting from the upheaval and displacement that accompanied the transition leading to independence.

The nation had to simultaneously re-build itself, develop government and institutions of state, and provide for a highly dispersed population with limited capacity to manage

the uction and development efforts. And all whilst trying to find ways and means of responsibly using its potential oil and gas wealth for the benefit of the people.

Remarkably, in just eight years, and despite the 2006 crisis which threatened to destabilize the young democracy, the government has continued to build the structures vital to implement its policy and achieve the MDGs.

Achievements to date have been notable, as can be seen in the newly released Timor-Leste MDG Booklet 2010. This sets out how much progress the country has made in each MDG. The MDGs all have indictors which show if that MDG is on target. Inevitably, it is a mixed bag with some MDGs off-track, some on-track and some actually achieved.

There is still much work to be done in many areas, particularly in tackling food insecurity, disease, unemployment and trying to halt the spread of HIV/AIDs which has the potential to spread rapidly.

However, despite these challenges, the MDG Booklet shows that real progress has been made. This include efforts to-

eradicating poverty (MDG 1) by providing state assistance vulnerable groups and actively trying to create jobs, efforts to improve the health sector which has helped to reduce child mortality (MDG 4) and efforts to improve maternal health (MDG 5).



Helping the most vulnerable and creating jobs



» UNMIT Photo/Antoninho Bernardino

Between 2001 and 2007, poverty in some areas of the nation had almost doubled, particularly in the central and western districts. The 2006 crisis generating widespread instability and the displacement of over 150,000 people from Dili slowed down normal economic activity and increased unemployment.

In 2010, the State has resolved many of the underlying problems of 2006, restoring peace and stability. Public spending has helped target the most vulnerable people. State assistance in the form of pensions and subsidies is now paid to veterans, the disabled, the elderly, to single mothers and to orphans.

The government continues to try to create jobs for the 15,000 young people who enter the job market every year. The task is major given that currently the unemployment rate for people between the ages of 15 and 34 is 90%. Schemes like the Intensive Labour Project have benefitted some 40,000 Timorese since 2007. Other programmes encourage companies to employ Timorese and/or award contracts to local companies for infrastructure projects in rural areas, creating 64,000 jobs. Ninety-one training centres have been registered that provide training for farmers, carpenters, builders, electricians and mechanics in all 13 districts.



Child mortality and maternal health



imor-Leste has surpassed the MDG target for 2015 for both the under-five mortality rate and infant mortality rate set in 2004.

In 2003, for every 1000 children born alive, 125 children would not live until their fifth birthday. The MDG target was to reduce this to 96 per 1000 live births by 2015. In 2009, preliminary data from the Demographic Health Survey showed that the under five mor-

tality had decreased to 64 per 1000 live births, far exceeding the original target.

For the infant mortality rate, the MDG target is 53 per 1000 live births. In 2003, 88 newborn infants out of 1000 were dying after birth. This however decreased to 44 per 1000 live births by 2009.

Improvements in child mortality and maternal health can be attributed to a number of successful initiatives including the National Immunization Campaign which started in 2004, the community health programme SISCa, the placement of foreign doctors to rural health centres, the government's school feeding and maternal and child health programmes and ongoing activities to improve nutritional knowledge.

Skills and training in health vital to achieving MDGs

hen Timor-Leste gained independence in 2002, a major obstacle was a lack of trained professionals to deliver services and train the next generation, especially in the health sector where the dearth of doctors, midwives and other health care professionals severely hampered the ability of the nation to cope with disease, malnutrition,



maternal and child health and rising fertility and mortality rates.

To cope, the government brought in skilled doctors to fill immediate needs and instituted a long-term plan to train Timorese nationals abroad, most notably in Cuba.

Timor-Leste has been sending would-be doctors to Cuba since 2003 to receive medical training. The first graduating class returned in home in early September this year giving the nation 18 newly qualified medical doctors, nine of whom are female. According to the World Health Organization, a further 684 Timorese medical students are still studying in Cuba. By 2014, Timor-Leste hopes to have returned a corps of more than 1,000 doctors who received their training abroad.

But Cuba is only part of the story. Timorese nationals have been sent abroad to Australia, Indonesia, Brazil and Papua New Guinea to complete undergraduate and post-graduate studies in areas ranging from general surgery to gynecology, pediatrics, neurology, anesthesiology, radiology, ophthalmology, clinical pathology, public health, nursing, pharmacy, radiography, midwifery and dentistry.

Literacy key to improving lives



imor-Leste has relatively high levels of illiteracy, particularly in the rural areas. This has made it hard for the government to explain and socialize projects in ways and terms accessible to

the majority of Timorese. Having a literate population will go a long way to help alleviate many of the root causes of poverty.

The government has started a nationwide literacy programme aimed to teach basic reading and writing skills to the estimated 300,000 youths and adults who are illiterate. The three-month programme is being implemented in all districts. Most recently, Oecusse became the first district to declare itself free from illiteracy.

MDG Suco Programme

or the past few years, the government and its partners have been working with communities on several of the MDGs, whether through nutrition improvement programmes or community training to improve water and sanitation. The government plans to formalize its work on the MDGs with the launch in 2011 of the MDG Suco Programme designed to socialize the MDGs at the village level.

Community members will receive information on what the MDGs



are and how to achieve them. The programme will give ownership and funding to local communities to prioritize, plan and implement projects, particularly in the areas of water, sanitation and housing.