

Second National MDG Progress Summary Report 2009

EXECUTIVE SUMMARY

A. General

Papua New Guinea (PNG) produced its inaugural Millennium Development Goals Report (MDGR) in 2004. It concluded that, although since MDG base year 1990, PNG had made limited progress with regards to some of the MDGs (e.g. MDG 2 and 4); the period 1990-2004 had mainly been one of stagnation. The country was not on track with any of the MDGs. In 2004, MDG 8 had not been localized.

In 2003, the Department of National Planning and Monitoring (DNPM) decided that progress towards achieving the MDGs should not only be measured against the "aspirational" global targets but also against a set of national targets. The department produced a set of "tailored" MDG targets which were incorporated in the Medium Term Development Strategy (MTDS) 2005-2010. These targets were adopted for MDG monitoring. In 2004, it appeared that PNG was also off track with regards to most of these more realistic and achievable national targets.

B. Main findings in the 2nd MDGR

The 2nd MDGR was produced between July and December 2009. The formulation of the 2nd MDGR was coordinated by the DNPM in close collaboration with many line departments, NGOs and institutions. As in 2004, progress has again been measured against the global targets as well as the national targets incorporated in the MTDS 2005-2010. As in 2004, it appears that PNG has not achieved any of the global targets. Measurement in the individual MDG sections below is against the national (MTDS) targets.

MDG 1: Eradicate extreme poverty and hunger

In 2009, measurement is hampered by the fact that, since the Independent Household Survey of 1996, no new information on income and consumption has become available. Monitoring of the poverty component of MDG 1 has therefore been carried out using a "basket" of proxy indices related to education and literacy, labour force participation, longevity, household facilities etc. Based on this data, it was concluded that there has been a marginal decrease in "poverty of opportunity". The decrease is approximately the same as that envisaged in the MTDS.

In the absence of data from an Agricultural Survey, it was also not possible to monitor the hunger component of MDG 1. Indirect measurement, once again based on proxy indices, suggests that the situation since 1990 has remained largely unchanged.

MDG 2: Achieve universal primary education

Although some progress has been made with regards to access, retention and achievement, progress has been disappointing, considering that the educational reforms started already in 1994 and should have been completed in 2004.

MDG 3: Promote gender equality and empowerment of women

Gender disparity in many areas, for instance education and literacy, employment, longevity etc. is not as large as often assumed. However, PNG's gender culture places women in a disadvantaged position. Gender based violence (GBV) in particular is widespread and this is one of the factors that fuels the HIV/AIDS epidemic. This poses an enormous threat for future development and must be considered as a cross-cutting challenge for the achievement of all MDGs. Moreover, PNG's very high level of maternal mortality is another clear indication of lack of empowerment of women.

MDG 4: Reduce child mortality

Early childhood mortality decreased rapidly in the 1970's but started to level off after that. Since 1990, further decrease has been slow. Partly because of almost universal breastfeeding and the immunization activities of the NDOH, the situation is not worse than it is. However, in order to revitalize the stalling mortality transition, much more effort is required. Unless the plan of the NDOH for the introduction of Community Health Posts (CHP) throughout the entire rural sector is implemented successfully, it cannot be expected that early childhood mortality will decrease drastically in the near future.

MDG 5: Improve maternal health

The maternal mortality ratio (MMR), estimated from the 2006 Demographic and Health Survey (DHS) is much higher than that estimated from the 1996 DHS. However, a comparative analysis suggests that the estimate based on the 2006 DHS is probably far more reliable than the one estimated from the 1996 DHS. Moreover, the former estimate does not refer to 2006 but to 1994. This 1994 estimate of 733 maternal deaths per 100,000 live births has been used as the new MDG base figure. Furthermore, once again based on proxy indices that can be considered as determinants of maternal death (e.g. high risk fertility behavior, ANC attendance and supervised delivery), it may be concluded that maternal mortality has, since 1994, decreased marginally. However, in 2009, it remains at a very high level. In order to reduce maternal mortality significantly, it is essential that the NDOH's system of CHP's is introduced throughout the rural sector as soon as possible.

MDG 6: Combat HIV/AIDS, malaria and other diseases

The national (as well as global) targets for MDG 6 remain vague and precise measurement against these targets is therefore not possible. Monitoring of HIV/AIDS is exacerbated by the fact that the database remains very incomplete and defective. However, with the increased number of testing sites, monitoring after 2004 has improved. The available evidence suggests that there is as yet no sign that the HIV/AIDS epidemic has stabilized. The same also applies to several opportunistic diseases that are closely associated with HIV/AIDS, especially TB, pneumonia and malaria.

MDG 7: Ensure environmental sustainability

PNG has signed 46 multilateral environmental agreements (MEA). The most important of these are the UNCCD, UNCBD and UNCCC. A very large number of indicators have been adopted for the monitoring of progress. Most of these have never been measured and may never be measured. Furthermore, monitoring is made very difficult because of the conflicting views with regards to environmental issues, especially in the area of forests

and forestry. Moreover, monitoring that is carried out is fragmented and uncoordinated. It is absolutely essential that the DEC assumes a leading role with regards to the collection, processing, management and analysis of all the data required for the monitoring of MDG 7. The national targets should be revisited and most of them replaced by unambiguous and measurable ones.

MDG 8: Develop a global partnership for development

Although attempts have been made to localize MDG 8, the results so far are disappointing. Most aspects of MDG 8 can still not be monitored effectively. Although some information is available, the management and analysis of this data remains very unsatisfactory. The 2004 MDG Steering Committee recommended to establish a Task Force, chaired by the DNPM and responsible amongst others for the continuous monitoring of MDG 8. This recommendation should be implemented as soon as possible.