

GOAL  
6

## THE 'HEALTH GOAL'

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

#### Target 7 Have halted by 2015 and begun to reverse the spread of HIV/AIDS and other diseases

*Indicators* HIV prevalence among pregnant women ages 15–24

*Condom use rate of the contraceptive prevalence rate*

*Condom use at last high-risk sex*

*Percentage of 15 to 24 year-olds with comprehensive correct knowledge of HIV/AIDS*

*Ratio of school attendance of orphans to school attendance of non-orphans ages 10–14*

#### Target 8 Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases

*Indicators* Prevalence and death rates associated with malaria

*Proportion of population in malaria-risk areas using effective malaria prevention and treatment measures*

*Prevalence and death rates associated with tuberculosis*

*Proportion of tuberculosis cases detected and cured under directly observed treatment, short course (DOTS)*

### The 'gender lens' reveals the links between macro policies and health

Like gender equality, health is central to the achievement of the MDGs not only as the subject of Goals 4, 5, and 6 but as a contributor to the achievement of other goals. Bringing a gendered perspective to addressing HIV/AIDS, malaria and tuberculosis can help to unpack these interlinkages and underline the need to develop multi-pronged policy responses to ensure the achievement of targets under Goal 6.

- **Women now constitute the majority of people with HIV/AIDS.** Women's vulnerability to the virus is primarily a consequence of their subordinate status and powerlessness to negotiate safe sex or to resist violence and other violations of sexual and reproductive rights. This is compounded by their lack of access to information and knowledge on how to protect themselves from becoming infected.
- **Women bear the major share of the consequences of HIV/AIDS, even when they are not themselves affected.** They carry the load of caring for affected individuals and coping with income shocks, as well as dealing with shame and stigma, and consequent exclusion from access to resources and opportunities. Lack of inheritance rights can leave women destitute if they lose a father or husband to the disease.

- **Undermining of capabilities and productive power** are consequences of HIV/AIDS, tuberculosis and malaria, as well as chronic ailments such as anaemia and untreated gynaecological infections. These, as much as HIV/AIDS, malaria and tuberculosis all result in increased risks of maternal mortality, and have serious consequences for newborns.
- **Far more women die of TB than of HIV/AIDS in some countries.** The general neglect of women's health, the stigma attached to the disease, the costs of treatment and the absence of female doctors are all barriers to accessing treatment – in fact, statistics show that more men are diagnosed than women. Women in their productive years are most affected, and the impacts are felt by their families in terms of increased poverty.
- **Resources and research on women's health are directed overwhelmingly at reproductive and maternal health,** ignoring the health costs of nutritional insufficiency, overwork and lack of care - all direct consequences of gender inequality and which lower women's resistance and make them more vulnerable to almost all diseases.
- The ongoing reform of the health sector in many countries involves the **introduction of user charges for primary health services.** The impact is disproportionately felt by women and girls, for whom this is an additional barrier to access.

*'... the AIDS epidemic cannot be understood, nor can effective responses be developed, without taking into account the fundamental ways that gender influences the spread of the disease, its impact and the success of prevention efforts...decisive success against the epidemic will require attacking gender inequities themselves'*

*From Combating AIDS in the Developing World  
UN Millennium Task Force on HIV/AIDS, Malaria and TB and  
Access to Essential Medicines Working Group on HIV/AIDS, 2005*

## How gendered is reporting on health?

It is heartening to note that more than half of the 78 reports reviewed present sex-disaggregated data on HIV/AIDS. Sex disaggregated data on TB and malaria is available in far fewer reports – only six countries have presented disaggregated data on TB. Two countries have disaggregated data on malaria.

However, despite the stated emphasis on a gendered approach to the HIV/AIDS epidemic advocated by all the actors involved, only 31 reports identify women's greater vulnerability to infection as a concern, or discuss the impact of the epidemic from a gendered perspective.

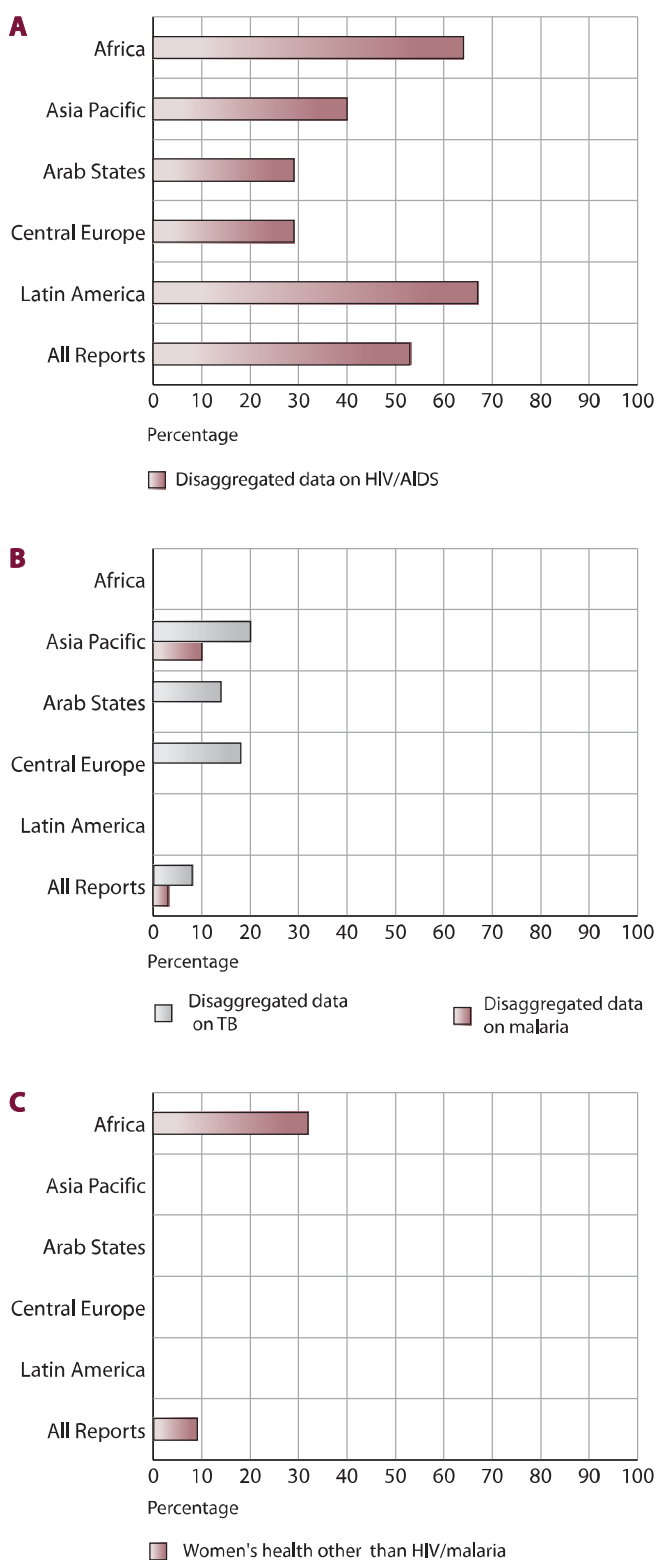
Only three out of the 78 reports reviewed recognise gender inequality and women's subordination as causes of vulnerability to HIV/AIDS. Women's inability to negotiate safe sex is listed as a cause of vulnerability in only three reports. Women's lack of awareness of the need for safe sex and limited access to information on protection from HIV/AIDS is mentioned in only eight reports.

An understanding of the enhanced vulnerabilities of women routinely exposed to unprotected sex (such as sex workers, rape victims and women in regions affected by war and conflict) is reflected to a greater extent and finds mention in 21 out of 78 reports.

According to the report of the Working Group on HIV/AIDS of the UN Millennium Task Force on HIV/AIDS, Malaria, TB and Access to Essential Medicines, violence against women plays a major role in fuelling the pandemic.

### A positive trend - sex disaggregated data

- **On TB** (Afghanistan, Philippines, Lebanon, Czech Republic, Lithuania)
- **On malaria** (Kenya, Indonesia)

Figure 15 **Sex-disaggregated data**

Figures on HIV incidence among pregnant women in the reproductive age group are likely to be underestimations.

From a gendered perspective, this indicator has a built-in sampling bias. Not all pregnant women in developing countries attend maternity clinics. Those who are excluded are likely to be from poor families, marginalised communities or remote rural areas.

In many countries, human rights activists and women's groups have voiced misgivings about the extent to which HIV tests in maternity clinics are voluntary and based on informed consent.

The response of the health system in case of a positive test is equally gendered, and is an area of concern for rights advocates.

### A positive trend - coverage of additional issues

- **STDs and RTIs** (Bolivia)
- **Chagas' disease** (Argentina)
- **Diabetes and hypertension** (Mauritius)
- **Breast cancer** (Jordan)
- **Mental and emotional health** (Bosnia)
- **Cancer** (Croatia, Czech Republic)
- **'Lifestyle' diseases, link with socio-economic status** (Hungary)
- **Cardiovascular diseases** (Czech Republic, Lithuania, Hungary)
- **Suicide data and reasons for suicide** (Lithuania)
- **Crime against women** (Lithuania)

Apart from the direct role of coerced sex inside and outside marriage and in conflict situations, the threat and fear of violence is used for domination and control that underpins women's subordination.

**Unfortunately, recognition of violence against women as a health issue is nearly invisible – it is flagged in only two of the reports reviewed.** Action against violence is one of the seven strategic priorities identified by the Millennium Project Task Force on Education and Gender Equality. The silence on violence in reporting on Goal 6 should therefore be taken to indicate the need for greater advocacy on this issue.

Reporting under Goal 6 also fails to make the connections between the gendered impact of HIV/AIDS and achievement of other Goals. The silence on this issue is particularly unfortunate. Raising it here would have underlined the importance of going beyond a purely health-focused approach to the epidemic to address the need for change in policies in the poverty, education and environment sectors.

In yet another instance of the tendency of countries to stick to 'reporting by the book' against the minimum set of recommended indicators, only seven reports make any mention of health issues other than HIV/AIDS, malaria and TB. Given the serious issues around women's health in most of the countries in question, such a limited focus will have serious consequences if it is the basis for policy-making and resource allocation in the health sector.

### How can reporting on Goal 6 be strengthened?

- **Localising** issues and indicators – identifying and reporting on the most serious and widespread challenges to women's health in the country.
- Collecting and presenting **sex disaggregated data** on all key indicators.
- Presenting sex-disaggregated data on the incidence of **diseases associated with poverty**, such as anaemia, nutritional deficiencies and water-borne infections.
- Identifying the factors that increase **women's vulnerability to ill-health** and making the links with gender inequality and poverty visible.
- Reporting on actions being taken to address **priorities for change** identified by the Global Coalition on Women and AIDS in 2004.
- Making the **'money trail'** visible by reporting on budgetary allocations for targeted programmes on women's health and increasing women's access to health services.

Figure 16 HIV/AIDS and gender inequality

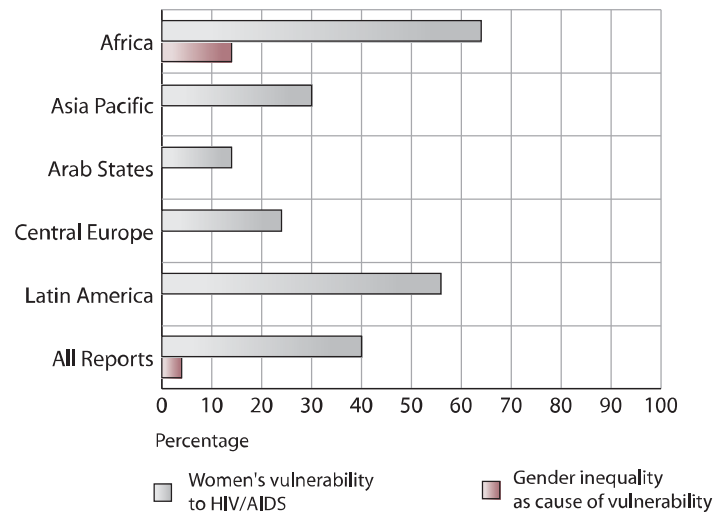
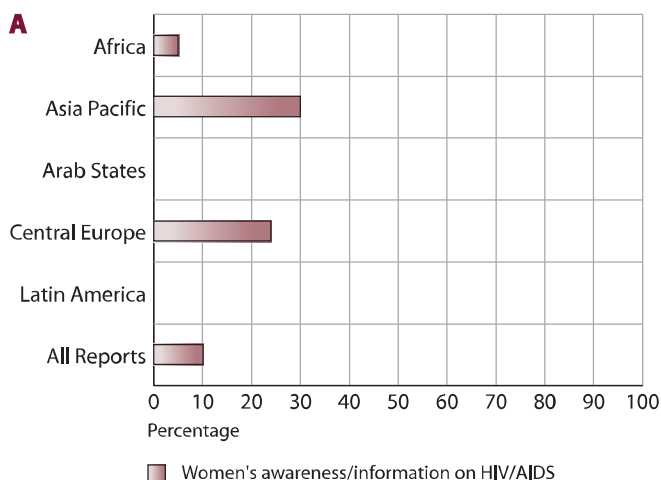


Figure 17 **Women's vulnerability to HIV/AIDS**



**HIV/AIDS through a gendered lens**

- Women's inability to negotiate safe sex inside and outside marriage (Kenya, Indonesia, Bosnia)
- Need for gender equality (Zambia, Botswana)
- Need for change in sexual behaviour (Botswana)
- Gender inequality and vulnerability of young girls (Burkina Faso)
- Burden of care borne by young girls, link with school drop-out (Kenya)
- Care burdens for women (Burkina Faso)

**Strategic priorities**

- Prevent infections among girls and young women
- Stop violence against women and girls
- Protect women's property and inheritance rights
- Ensure equal access to care and treatment for women and girls
- Support improved community-based care
- Promote access to new prevention options for women (including microbicides)
- Support ongoing efforts for universal education for girls.

*From Combating AIDS in the Developing World UN Millennium Task Force on HIV/AIDS, Malaria and TB and Access to Essential Medicines Working Group on HIV/AIDS, 2005*

**Recognition of violence as a health issue**

- Effect of violence on physical and mental health (Bosnia)
- Action on domestic violence prioritised as a health policy goal (Czech Republic)

## GOAL 7

# THE 'ENVIRONMENT GOAL'

## Goal 7 Ensure environmental sustainability

### Target 9 Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources

**Indicators** *Proportion of land area covered by forest*  
*Ratio of area protected to maintain biological diversity to surface area*  
*Energy use (kilograms of oil equivalent) per \$1 GDP (PPP)*  
*Carbon dioxide emissions per capita and consumption of ozone-depleting chlorofluorocarbons (ODP tons)*  
*Proportion of population using solid fuels*

### Target 10 Halve by 2015 the proportion of people without sustainable access to safe drinking water and sanitation

**Indicators** *Proportion of population with sustainable access to an improved water source, urban and rural*  
*Proportion of population with access to improved sanitation, urban and rural*

### Target 11 By 2020 to have achieved a significant improvement in the lives of at least 100 million slum dwellers

**Indicators** *Proportion of households with access to secure tenure*

## Environmental sustainability is inextricably linked to gender equality

Understanding and taking account of the linkages between environmental sustainability and gender inequality is not only essential to the achievement of Goals 3 and 7, it is essential to reducing poverty.

- **Poor households are dependent for survival on common property resources.** Fallow lands and grazing grounds, forests, water bodies and wetlands are the main sources of food, water, fuel, fodder, building materials and livelihood for the poor. Even comparatively well-off households rely on these resources during lean seasons or in times of crisis. Women are the main users of these resources, and are often custodians of a rich store of traditional knowledge on their sustainable use. Women's access and control of environmental resources is therefore central both to environmental sustainability and poverty reduction.

- **Women have customarily engaged in survival agriculture on common lands since they do not have access to other land.** Women are therefore disproportionately impacted by environmental degradation, as well as by measures such as restrictions of access to forests, leasing or sale of common lands to private entrepreneurs and conversion of common lands to other uses.
- **The need for daily collection of fuel, fodder and water** is a factor forcing girls to drop out of school in many developing countries, thus contributing to undermining the capabilities of the next generation of women.
- **Women are the primary managers of domestic energy resources.** Collection of fuel takes up a major share of the time of poor women. The non-availability of cheap and clean fuels forces women to rely on wood, dung and biomass fuels, with adverse impacts on their health and the health of their children.
- **Women bear the brunt of natural disasters.** They carry the primary responsibility for enabling the family to deal with and survive the trauma and impoverishment that may follow a crisis. Gender inequality places limits on women's capabilities, reduces their agency and excludes them from decision-making in the aftermath of a disaster. Gender equality is therefore essential for vulnerability reduction.
- **Recent moves towards introducing pricing and cost recovery as measures for water conservation have contributed to women's poverty.** Women, who are responsible for supplying and managing the family's water needs, either deprive themselves of other essential goods and services to pay for water, or walk for miles to get water from unsafe but free sources.
- **Women are disproportionately impacted by the lack of sanitation facilities.** Poor sanitation is a major cause of water-borne diseases, which are directly responsible for most infant deaths in developing countries. In the absence of sanitation close to their homes, women are forced to forego privacy and security and are often rendered vulnerable to infections, harassment and abuse. Lack of separate toilets in schools has been identified as a cause of girls dropping out when they reach puberty.
- **Women in urban settlements have different priorities for services and infrastructure** such as transport, water supply, sanitation and housing. An increasing number of urban households in most developing countries are sustained exclusively or primarily by women's labour. Women's vulnerability to sexual and physical harassment in urban environments constrains their freedom of mobility and limits their work opportunities. The low representation of women in urban governance in many countries contributes to their invisibility in urban planning.

### **Putting women at the centre of environmental policies increases sustainability**

Environmental sustainability, like gender equality, is a cross-cutting issue. Integrating gender equality concerns into environmental policy and planning has been identified as a key priority by the Millennium Project Task Force on Environmental Sustainability. Taking women's needs and priorities into account and involving women in environmental policy-making has multiple benefits in terms of better targeting and increased efficiency of policies and programmes.

Making the links between environmental sustainability and gender equality visible in the national MDG report can contribute to increasing coordination and integration of environmental policies into other

sectoral policies. Moreover, it can enhance public awareness of women's roles and create space for women to directly engage in actions for environmental sustainability at the community level.

The report of the Millennium Task Force on Environmental Sustainability lists these, and underlines their relationship of Goal 7 with other Goals.

**1. Eradicate extreme poverty and hunger**

- *Livelihood strategies and food security of the poor often depend directly on functioning ecosystems and the diversity of goods and ecological services they provide.*
- *Insecure rights of the poor to environmental resources, as well as inadequate access to environmental information, markets, and decision making, limit their capacity to protect the environment and improve their livelihoods and well-being.*

**2. Achieve universal primary education**

- *Time that children, especially girls, spend collecting water and fuelwood can reduce study time.*

**3. Promote gender equality and empower women**

- *Time that women spend collecting water and fuelwood reduces their opportunity for income-generating activities.*
- *Women's often unequal rights and insecure access to land and other natural resources limit opportunities for accessing other productive assets.*

**4. Reduce child mortality**

- *Water and sanitation-related diseases and acute respiratory infections, primarily caused by indoor air pollution, are leading causes of mortality in children under the age of five.*

**5. Improve maternal health**

- *Indoor air pollution and carrying heavy loads during late stages of pregnancy put women's health at risk before childbirth.*

**6. Combat major diseases**

- *Environmental risk factors account for up to one-fifth of the total burden of disease in developing countries.*
- *Preventive environmental health measures are as important, and at times more cost-effective, than health treatment.*

**7. Develop a global partnership for development**

- *Since rich countries consume far more environmental resources and produce more waste than poor countries, many environmental problems (such as climate change, loss of species diversity, and management of global fisheries) must be solved through a global partnership of developed and developing countries.*

*From **Environment and Human Well-being: A Practical Strategy**  
Report of the Task Force on Environmental Sustainability. UN Millennium Project 2005  
The Earth Institute at Columbia University, New York, USA*

## How gendered is reporting on Goal 7?

Given the amount of research and advocacy on gender issues and concerns in environment and urban development in the past decades, it is disturbing to see the almost total invisibility of gender concerns in reporting under Goal 7. **Only eight of 78 reports reviewed make any mention of women as stakeholders in environmental issues.**

This situation is both a reflection of and a contributor to the gap between environmental policies and gender equality concerns. Despite the visible evidence of women's involvement in management of natural resources like water and forests, they are not recognised either as significant actors in conserving and sustaining these resources, or as stakeholders in planning.



Over the last decade, even mainstream economists have begun to validate feminist analyses of the interlinkages between gender inequality, poverty and degradation of common property resources. The silence on this issue in the reviewed reports is disappointing. The implications of environmental degradation for girls' education, maternal health and child survival have been completely ignored – instead, practically all the reports approach the issue of environmental sustainability from a technical perspective.

### Gender issues in reporting on Goal 7

- **Need to involve women for sustainable management of water** (Gambia, Kenya, Indonesia)
- **Time spent in fetching water** (Kenya)
- **Safe water linked with reduction in IMR and MMR** (Ethiopia)
- **Discrimination against female-headed households in urban areas** (Uganda)
- **Tenure/land rights for women in municipal housing projects** (Brazil)
- **Women as stakeholders in National Environment Action Plan** (China, Guinea)
- **Access to water supply for male-headed and female-headed households** (Guatemala)

### Strengthening reporting on Goal 7

- Providing **sex-disaggregated data** and information on access to water, sanitation and housing
- Gendered reporting on **regional environmental issues** identified by the Millennium Project Task Force on Environmental Sustainability, all of which have significant implications for women's poverty and gender equality.
- Even where there is no data, **highlighting the connections** between Goal 7 and the other MDGs with qualitative information on key gender issues such as women's access to water and sanitation, urban safety and participation in planning and implementing environmental programmes.
- **Identifying and using alternative data sources** such as reports on urban conditions by UN agencies, civil society organisations and citizen's groups.

### Regional issues have gender dimensions

- **Latin America** - deforestation, pollution, and damage to coastal and marine ecosystems. Direct impact on women's livelihoods.
- **Small island developing states including Caribbean and Pacific islands** - climate change, marine ecosystem health, alien invasive species, and pollution. Direct impact on women's livelihoods.
- **Sub-Saharan Africa** - soil and land degradation, depletion of forests and freshwater resources, and poor indoor air quality. Direct impact on women's health and livelihoods.
- **Middle East and North Africa** - declining per capita water resources, loss of arable land, pollution-related health problems, and weak environmental institutions and legal frameworks. Direct impact on women's health and livelihoods. Increased pressure of unpaid care work. Lack of means to claim entitlements increases vulnerability.
- **South Asia** - freshwater scarcity and pollution, and soil and land degradation. Direct impact on women's health and livelihoods.
- **Central Asia** - land cover change and freshwater degradation. Direct impact on women's livelihoods.
- **East and Southeast Asia** - soil and land degradation, deforestation, and poor urban air quality. Direct impact on women's health and livelihoods.

*From Environment and Human Well-being: A Practical Strategy  
Report of the Task Force on Environmental Sustainability. UN Millennium Project 2005  
The Earth Institute at Columbia University, New York, USA*



## THE 'PARTNERSHIP GOAL'

### Goal 8 Develop a global partnership for development

**Target 12** Develop further an open, rule-based, predictable, non-discriminatory trading and financial system, includes a commitment to good governance, development and poverty reduction both nationally and internationally

**Target 13** Address the special needs of the least developed countries. Includes: tariff and quota-free access for least-developed countries' exports; enhanced programme of debt relief for HIPCs and cancellation of official bilateral debt; and more generous ODA for countries committed to poverty reduction

**Target 14** Address the special needs of landlocked countries and small island developing States

**Target 15** Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term

**Indicators** *Net ODA, total and to least developed countries, as a percentage of OECD/DAC donors' gross national income*

*Proportion of total bilateral, sector-allocable ODA of OECD/DAC donors to basic social services (basic education, primary health care, nutrition, safe water and sanitation)*

*Proportion of bilateral ODA of OECD/DAC donors that is untied ODA received in landlocked countries as proportion of their gross national incomes*

*ODA received in small island developing States as proportion of their gross national incomes*

#### **Market access**

*Proportion of total developed country imports (by value and excluding arms) from developing countries and from the least developed countries, admitted free of duties*

*Average tariffs imposed by developed countries on agricultural products and textiles and clothing from developing countries*

*Agricultural support estimate for OECD countries as a percentage of their gross domestic product. Proportion of ODA provided to help build trade capacity*

#### **Debt sustainability**

*Total number of countries that have reached their HIPC decision points and number that have reached their HIPC completion points (cumulative)*

*Debt relief committed under HIPC Debt Initiative 14*

*Debt service as a percentage of exports of goods and services 18*

**Target 16** In cooperation with developing countries, develop and implement strategies for decent and productive work for youth

*Indicators* Unemployment rate of 15- to 24-year-olds, male and female and total

**Target 17 In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries**

*Indicators* Proportion of population with access to affordable essential drugs on a sustainable basis

**Target 18 In cooperation with the private sector, make available the benefits of new technologies, especially information and communications**

*Indicators* Telephone lines and cellular subscribers per 100 people

Personal computers in use per 100 people

Internet users per 100 people

## Trade and aid are not gender neutral

In the last few years, more and more evidence has been emerging to contest the assumption that trade policies and development aid inflows are gender neutral and always have the same impacts and implications for women and men.

In fact, both trade liberalisation and aid policies have serious implications for gender equality.

- Trade liberalisation involves **reduction or elimination of tariffs** and licensing fees resulting in significant decreases in revenue. Governments usually seek to make up the gap by **increasing taxes, cutting social sector spending** and introducing or increasing **user fees for public services** such as health and transport. The burden of adjustment to these measures is shifted onto women, who have to put more time and energy into unpaid and care work at the expense of their economic productivity, health and well-being.
- International trade agreements may **challenge national legislation** that works to protect the **rights and interests of the domestic labour force**. Many countries have dismantled or diluted protective legislation, or set up **export processing zones** where national legislation does not apply. Women constitute the bulk of the labour force in export processing zones, and are generally **overworked, underpaid** and **vulnerable** to violations of their rights.
- Trade liberalisation and the pressure to keep costs low has fuelled a process of **'informalisation'**, with production processes moving out of factories and into homes through subcontracting, part-time work and home-based work. Women are ready to accept **low quality employment**, with little or no labour protection and social security, because these give them the flexibility they need to fulfil their domestic responsibilities. Often, this is accompanied by an increase in **child labour**, with girls being pulled out of school to take on domestic chores and both girls and boys joining the production process.
- Trade liberalisation in **agriculture** has had enormous impacts on women in many developing countries. The shift to **export-oriented high-input crops** has depleted water resources and increased the load of chemicals and pollutants in the environment, increasing **women's time poverty** and affecting their health. At the same time, the pressure on land has curtailed women's involvement in traditional low-input **'survival agriculture'** which contributes to meeting a major share of the family's food needs, particularly in lean seasons.

- **Development aid**, whether in the form of grants or technical assistance, does not always take into account **gender biases** within development institutions and is not necessarily targeted to addressing women's needs and priorities. Benefits and **opportunities for capacity-building and income enhancement** are therefore not equally accessible to women and men. In some cases, development programmes have actually exacerbated gender inequality.
- Analyses of **global aid flows** reveals that they are skewed in favour of large projects in 'hard' sectors such as infrastructure and industry, with social sector projects at low priority.
- Despite the evidence that debt relief is a far more effective strategy for poverty alleviation than development grants or loans, **debt cancellation initiatives** are moving very slowly. Most highly indebted countries have been forced to make drastic **cuts in social sector spending**, with the inevitable impacts on women's and girls' health, education and well-being.

### OECD-DAC analysis of aid in support of gender equality

#### Key findings

- *Two thirds of aid focused on support for gender equality and empowerment of women was in the social sectors, especially basic education and basic health (including population and reproductive health).*
- *About one half of aid to basic education and basic health targeted gender-specific concerns. A tenth of aid in these sectors was for the main purpose of promoting gender equality. Improvements in basic education and basic health are critical to achieving the MDGs.*
- *While several DAC members are implementing a mainstreaming strategy, several others promote gender equality through a relatively small number of activities targeted to women and girls.*
- *While aid for transport, communications and energy infrastructure accounted for a third of bilateral aid, little was reported as focused on gender equality. Nevertheless, well-designed infrastructure projects can bring significant positive benefits for women and girls by improving access to markets, schools and health services or by increasing women's safety.*
- *Aid to agriculture is currently down to a tenth of all aid. Gender equality focused aid to this sector may indicate donors' recognition of the high level of women's participation in food production and agriculture in many countries, particularly in sub-Saharan Africa.*

*From OECD-DAC Creditor Reporting System on Aid Activities: Aid Activities in Support of Gender Equality 1999-2003*

## How gendered is reporting on Goal 8?

It is ironic that Goal 8, which has the most wide-ranging targets and has serious implications for the ability of aid-dependent countries to achieve any of the MDGs, should receive the least attention in terms of gender. **Only eight of the reviewed reports make any mention of gender issues or concerns in reporting under Goal 8.**

Interestingly, MDG reports produced by some of the donor countries underline their commitment and support to gender equality in their own countries as well as in development aid.

### Gender concerns reported under Goal 8

- **Land and housing rights for women** (Brazil)
- **Partnerships with women's groups for gender equality** (Gambia)
- **Unemployment and its consequences for young women** (Panama, Paraguay, Honduras, Syria, Slovakia)
- **Male domination in international agencies** (Bosnia)
- **Stereotypical perceptions of women's roles in peace process** (Bosnia)
- **Resources for gender under HIPC** (Burkina Faso)

### Donor countries and the MDGs

#### Finland

- Highlights the role of gender equality and equal participation of men and women in all spheres as factors contributing to high levels of human development in Finland.
- Gender equality identified as cross-cutting theme in Finnish development aid. Acknowledges that despite this, the number of projects with gender equality as a primary objective is low.
- Focus of aid is on sexual and reproductive health and rights for young people and women.
- Points out that there are data and classification problems related to projects for gender equality.
- Prioritises the development of mechanisms to monitor aid for gender equality.

#### Denmark

- Underlines obligation of donor countries to report on progress.
- Aid is closely aligned to MDGs with a high priority for HIV/AIDS and women's reproductive health.
- Notes that apart from being a human rights objective, gender equality can lead to development benefits in all sectors.
- New aid strategy focuses on women's rights, political participation and gender equality in access to and control of resources.
- Notes that Denmark attempts to ensure that all its financial allocations to different bodies are supportive of Goal 3 and inclusion of gender into all MDGs.

## A gender perspective would add value to reporting on Goal 8

Some countries have taken the view that reporting on Goal 8 should be the responsibility of donor countries rather than of aid recipients. While it is true that developing countries have limited say in allocation of resources by donors, they can nevertheless use the opportunity provided by reporting on Goal 8 to put some non-negotiable principles on the table.

Gendered reporting on the implications of trade and aid measures for gender equality, and information on measures being taken to protect human rights and women's rights will make a strong statement about the political commitment of the national government to human development.

## How can reporting on Goal 8 be strengthened?

- Providing **sex-disaggregated data** on recommended indicators such as youth unemployment, internet use and access to medicines.
- Reporting on the **impacts of trade liberalisation** on key indicators of gender equality, women's access to economic and technical resources, labour force participation rates, patterns of labour market discrimination and access to education, health and other public services.
- Reporting on the **amount of ODA allocated to women-specific projects and projects for women's empowerment.**
- Making the **'money trail'** visible by reporting on the **quantum of development aid** that is allocated to gender equality and empowerment of women.

### Women at the centre of Goal 8 in the Afghanistan MDGR

*'Focusing too narrowly on meeting the MDG targets can defeat the purpose of the exercise. The point is to make a serious and concerted effort towards meeting the Goals. What, however, constitutes 'serious effort'? In the Afghan context, it is plausible to argue that public spending priorities around the needs of poor women would be an excellent indicator. This implies monitoring health and education spending patterns.'*

*From Afghanistan MDGR*