Millennium Development Goals:

Critical Perspective from Central Asia

Bachelor's Thesis

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I declare that this bachelor thesis focusing on topic "*Millennium Development Goals critical perspective from Central Asia*" was written individually by myself and with use of literature and information from sources I refer to.

Prague 18.May 2012   Signature

Title of bachelor's thesis:

Millennium Development Goals critical perspective from Central Asia

Abstract:

World is diverse and so is the life standard of people in all the countries. Central Asia countries have nearly same history, culture and nature, but different problems in development, environment, health or trade. Since none of these countries reaches level of living desired by The United Nations, Millennium Development Goals are created to help improving development in all the undeveloped countries. Goals of submitted thesis are to evaluate and show Millennium Development Goals in Central Asia region specifically in Kazakhstan, and to critically valorize them based on interviews with actively participating employees of international institutions currently working in Kazakhstan and on survey of non-involved European citizens.

Key words:

Millennium Development Goals, Europe and Central Asia region, Kazakhstan, Critical Perspective, Evaluation of MDGs

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I. Introduction:

The Thesis is to explain the main idea of Millennium Development Goals (MDGs) created by The United Nations (UN) in order to make UN countries (193 Member States) cooperate in global issues. First, MDGs will be described from its very beginning and afterwards we will focus will be on the Central Asia and specifically Kazakhstan.

Every international organization involved in reaching MDGs has its own regional division of states and countries. This is the reason why results of many researches on Central Asia are connected to results of undeveloped European countries. Thus the main research of this work is focused not only on Kazakhstan, but also on ECA region – Europe and Central Asia. This region is the same in for all the data necessary for this paper.

The paper is providing critical perspective of achieving MDGs by 2015. Millennium Development Goals will be presented by since the first idea of creating such project. International organizations and institutions will be examined in order to look into way of their work, importance and successes in area of improving development in undeveloped and poor countries.

In practical part there will be short description of every MDG in Central Asia, its progresses and chances for reaching the goals by 2015. Since the thesis topic is critical perspective, it is presenting experts opinion through interviews with people who work for involved institutions in Kazakhstan and comparing it to opinions of students and non-involved people from Europe. Even though Albert Einstein said: "Few people are capable of expressing with equanimity opinions which differ from the prejudices of their social environment. Most people are even incapable of forming such opinions." this research will be mainly focused on people's opinions on MDGs and its fulfillment in Central Asia and will be divided in two parts of which certain opinions are of people actively participating in reaching MDGs in international sphere and especially in Central Asia, and the other opinions are of non-involved people.

I will observe not only how MDGs in ECA region and especially in Kazakhstan are improving, but also people´s critical perspective of it and of how they generally perceive development status of this region.

II. Millennium Development Goals (MDGs):

According to the latest UN report (UN, 2008) in the world suffer from hunger and malnutrition nearly one billion people, while 1.4 billion people are affected by extreme poverty. Extreme poverty is defined as one dollar a day per human being. Knowing these data makes it really important to find the reasons for existence of „the Wealth of Nations". Scottish economist and philosopher Adam Smith in his publications used this term. "An Inquiry into the Nature and Causes of The Wealth of Nations" is a book called simply The Wealth of Nations and it deals with the origins of richness of certain states. Adam Smith presents a theory of spontaneous order with freedom, competition and labor division as prerequisites for all the members of society. This book had big influence on other writers and scientists such as Karl Marx, John Stuart Mill and others.

2.1 MDGs Facts and numbers:

There are more than one billion people who live with incomes of less than one dollar a day. As written earlier, this is the definition of extreme poverty. Every year, there are three million people, who die of HIV/AIDS, besides that 11 million children die before the fifth year of their life.

2.2 History of MDGs :

Due to not only raising world's problems, but also raising quality of methods and technology the United Nations decided to make the right thing for the development, and hopes that there is a chance for everyone to have certain standard of living. Among the states there is general consensus on how to achieve development. Good fact is, that in the past 25 years there was the greatest reduction in extreme poverty worldwide. Contrasting this fact, there are dozens of poor countries in the same period, even more impoverished.

The United Nations declared a new initiative in 2000. This initiative is called the MDGs - Millennium Development Goals to protect States from global poverty and backwardness The Millennium Development Goals address issues such as reducing extreme poverty by half, the introduction of schooling for all children and stop the spread of infectious diseases such as HIV/AIDS, Malaria and Tuberculosis (TB). All of these targets are supposed to be reached by 2015. This can be achieved only if all the states will review its current approach and radically accelerate and strengthen the practical steps, which is the hardest part – cooperation. As you will

see further, not many people believe that there is a chance to achieve these goals, nor to make as many States work together with no other interests or in a trustful partnership.

MDGs are currently the largest development program in the world, which annually distributes tens of billions of dollars in the form of ODA (Official Development Assistance). There are actually eight clearly timed objectives monitored by appropriate set of indicators. The end of 2015 should meet all the goals, and if possible, it should be met at the global level.

Millennium Development Goals did not come out of nowhere, but they are the last step of earlier ideological development projects. Already the success of the Marshalls Plan (created by Führer in 1996) had given people hope and expectations by creating a ball of optimism for future solution of unsatisfactory economic situation in countries. The solution seemed to be an international assistance, or in MDGs language – Partnership in development between countries. In 1960 the Development Assistance Group (DAG) was established to mediate communication between donor countries and beneficiaries. This organization transformed into Development Assistance Committee, which accepted the concept of official development situation and since 1969 there is Official Development Assistance (ODA) that takes care of „*official transactions in order to promote economic and social development in developing countries,*" *(Fuhrer, 1996: 21).* ODA than became the main organization for combating poverty and even nowadays it has enormous influence in this area and works for.

2.3 Brief description of "Big Six":

All the MDGs are connected with institutions which are responsible for its reaching. There is few very important international organization with a huge impact on worlds trade, health, etc. It is not always easy for these institutions to work with a certain state, because of its politics. Further, I will present you six institutions important for MDGs and its influence. I call it "big six".

List of "Big Six" :
United Nations (UN)
The World Bank (WB)
World Health Organization (WHO)
World Trade Organization (WTO)
Organization for Economic Co-operation and Development (OECD)
International Monetary Fund (IMT)

2.4 World Trade Organization:

The World Trade Organization (WTO) is an organization with a purpose of dealing with trade between nations. WTO has its headquarters in Geneva, Switzerland and brings together 135 countries. Another 34 countries have status of observers. In 1996 WTO managed capital of over 93 million USD and had circa 500 employees.

One of the main functions of this institution is to protect states of conflicts between business partners. An organ for solving these situations is Dispute Settlement Body which allows every country to apply trade sanctions against the state which broke the rules of international trade.

The main MDG target, on which WTO is focusing, is MDG 8 – Building global partnership between states for development. Besides focusing on this goal it also helps with MDG 1 – poverty and hunger problem.

2.5 United Nations:

The United Nations (UN) is an international organization, which officially came into existence on 24th October 1945, when UN entered the force of Charter and the UN Charter had been ratified by a majority of the original 51 Member States. First, there was the UN Charter signing happen on 26th June 1945. UN was found after the World War II as a replacement for the League of Nations. Apparently its main purpose was to stop wars between countries, and to provide a platform for dialogue. The purpose of the United Nations is to make all the nations work for the worlds peace and development, based on the principles of justice, human dignity and the well-being of people. There are multiple subsidiary organizations to carry out its missions. Currently there are 193 Members of the United Nations, including even Vatican City. The UN and its specialized agencies decide on issues on meetings during the years. The name United Nations was given by Franklin D. Roosevelt for allied countries of World War II. UN has five different main areas on which its focused. Peace and Security, Development, Human Rights, Humanitarian Affairs and International Law. And there are six main organs, which we will talk about more in details.

MDGs are actually created by the United Nations and thus, there is no need to explain the connection between those any further.

2.6. The World Bank:

Since inception in 1944, the World Bank has expanded from a single institution to a closely associated group of five development institutions. Our mission evolved from the International Bank for Reconstruction and Development (IBRD) as facilitator of post-war reconstruction and development to the present-day mandate of worldwide poverty alleviation in close coordination with our affiliate, the International Development Association, and other members of the World Bank Group, the Multilateral Guarantee Agency, International Finance Corporation, and the International Centre for the Settlement of Investment Disputes.

World Bank and its responsibilities for MDGs are very far-reaching. Its purpose is to solve the financial part of MDGs in undeveloped countries and to control if it is used for the right thing. This is obviously not a simple task and it includes all the MDGs.

2.7. OECD:

The Organization for Economic Co-operation and Development was founded in September 1961 as an economic organization of 34 countries. It is a part of OEEC – The Organization for European Economic Cooperation which was established in 1947 to run US-financed Marshal Plan for reconstructions after the WWII. ODA says that *"Increasing resources (ODA) is essential to meet the MDGs. For many poor countries will official development assistance for some time an essential source of finance "(OECD, 2005: 34).* Obviously this is one of the things which is criticized by others. Critical issue is that this approach seems to be outdated and is a "copy" of development programs implemented after the Second World War. However, it is quite clear that the ideological inspiration and long-term cooperation of four institutions (IMB, OEDC, WB, UN) significantly contributed to the current form of MDGs.

2.8. International Monetary Fund:

The International Monetary Fund (IMF) is an organization of 188 countries, working to foster global monetary cooperation, secure financial stability, facilitate international trade, promote high employment and sustainable economic growth, and reduce poverty around the world.

The IMF contributes to MDGs through its advice, technical assistance, and lending to countries, as well as its role in mobilizing donor support. Together with the World Bank, it assesses progress toward the MDGs through an annual Global Monitoring Report.

2.9. Themes of MDGs:

There are two main areas how to split MDGs in general. Humanitarian - Social and Economical - Political.

A) Humanitarian-Social : basis of solidarity

"Based on the ethical, social, political and economic imperative of humankind is committed to the objective of eradicating poverty in the world through national actions and vigorous international cooperation, "(UN, 1995: Commitment 2).

"The first motive is clearly a moral imperative ... humanitarian support for developing countries" (OECD, 1996: 10)

B) Economical-Political basis

"The eradication of poverty ... it is also the basis for global security and prosperity and to improve environment. It is an international public good of the highest importance, which serves all as Benefit, "(OECD, 2001: 16).

III. MDGs Europe and Central Asia (ECA):

3.1. Overview:

The World Bank designed region ECA as it contains the Commonwealth of Independent States (CIS). Area of Central Asia and Central and Eastern Europe consists of 28 countries. It occupies an area of 24 million square kilometers and there are to 500 million people living there. The economic, political and social structures in these countries are very diverse. Kazakhstan goes for example with 6 people per square kilometer and the Russian Federation 9. The highest number of people per square kilometer is Armenia with number of 135. Tajikistan and the Kyrgyz Republic are the most rural countries, with almost two-thirds of the people in rural areas. On the map (Figure 1) bellow you can see the ECA Region.
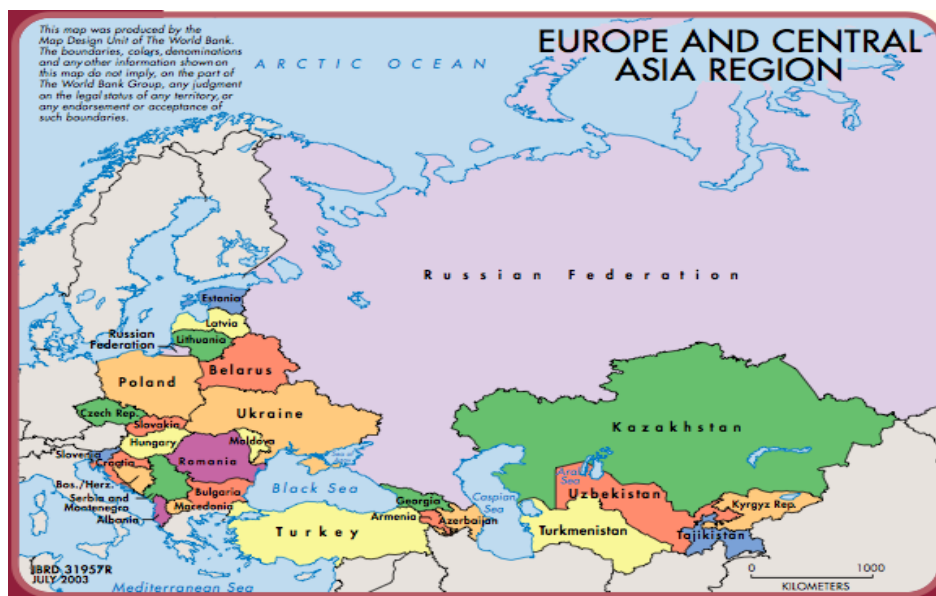
Figure 1 : Europe and Central Asia Region

. Source: The World Bank, http://siteresources.worldbank.org/INTECA/Resources/MDGs.pdf

In figure 2 there is the list of separate MDGs for ECA countries. As the World Bank´s data show for Kazakhstan, MDGs 4,5 and 6 are almost unachievable by 2015. Same results are for Kyrgyz Republic. All of these MDGs are about Health – Children, Mothers and Diseases. The reason for this is not only because of the financial situation in countries, but also because of hygiene in hospitals. UNICEF data show, that HIV/AIDS situation is getting better in these countries, but not enough to combat it completely. Uzbekistan on the other hand is the only CA country, where HIV/AIDS problem is becoming bigger issue and the number of infected people is rising in past 5 years. *

Unicef data which I am not allowed to show in this paper and will be published by the end of the year 2012.

When we look at the Tajikistan results, there is almost no chance of achieving any target of MDGs. The reason is that some MDGs are more relevant than others. The results are to be the same in every country, but the prime situation is always different.

Since I have connections to people working for International Institutions in Kazakhstan, I will focus mostly on this country in this paper.
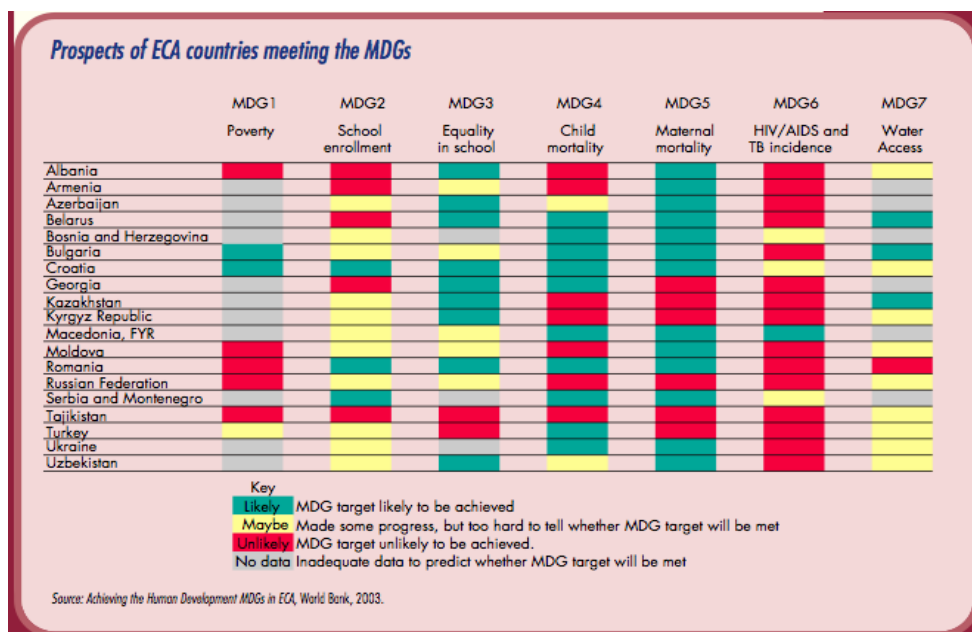
Figure 2: Prospects of ECA countries meeting the MDGs
Source: The World Bank - http://siteresources.worldbank.org/INTECA/Resources/MDGs.pdf

3.2. ESA MDG 1 Eradicate extreme poverty and hunger:

ECA countries except Kyrgyz Republic and Moldova are not in such bad situation from the aspect of MDG 1 in Europe and Central Asia. Bellow, I will explain the situation in Kazakhstan and Kyrgyz Republic, because other data is not available.

Poverty has been measured on the basis of household income or spending. Poverty in ECA region rose faster than in other countries of ECA due to becoming more widespread during the 1990s. GDP fell and the increase in poverty was much larger than expected. But better financing and targeting of social protection has reduced it in a few countries and for example in Kazakhstan there is not so many people living at a dollar a day standard anymore. Kyrgyz, as you can see in the attached figure 3 is almost three times worse in these numbers.
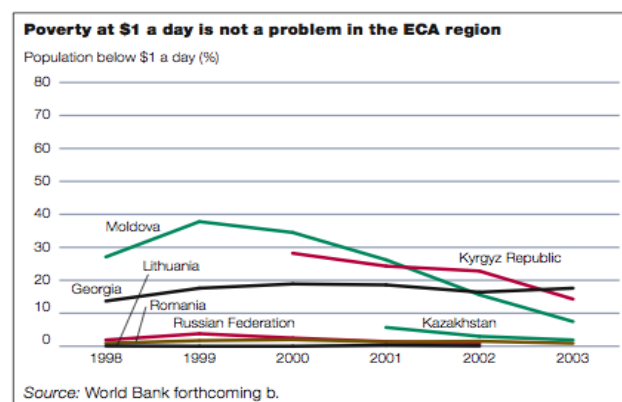
Figure 3: Poverty at $1 a day in the ECA region
Source : The World Bank, ECA MDG-Poverty, 2011

Poverty rates are divided in dollar a day and two dollars a day. In this rate Kyrgyz Republic is getting worse. The poverty situation of Kyrgyz is the worse one in Central Asia. Almost 80% of population there is living in poverty, see figure 4. That is also the reason why it is impossible to meet MDG 1 in this country.
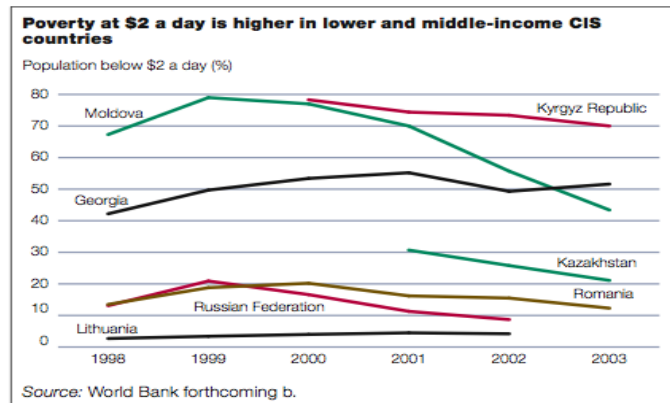
Figure 4: Poverty at $2 a day is higher in lower and middle-income CIS countries

Source: The World Bank, ECA MDG-Poverty, 2011

Kazakhstan:

  Surprisingly Kazakhstan happened to achieve this goal already in 2004. Which doesn´t mean, that poverty is not being an issue anymore in this area. Thus, it was necessary to create MDG1+ which hopes in *halving the proportion of people in rural areas whose income is below the subsistence minimum.*

Source: The United Nations, The United Nations Development Program

  The problem is that even though 80 % of population in Kazakhstan has twice as large income than the definition of poverty show, it is not enough. Rural poverty here is deeper and deeper. Further strategy for reaching MDG1+ target would be to focus on rural areas, migrants, self-employed, disabled people and seniors. This goes hand in hand with necessarily involving NGOs as service providers.

  Considering target two, it has also been achieved and hunger is no longer considered as an urgent issue in Kazakhstan. Reaching one goal never equals stopping developing country, and therefore there is another target which is to halve the proportion of people who have no access to balanced nutrition. Better nutrition is needed especially for children and women of reproductive age. Helping nutrition also co-operates with MDG 4 and MDG 5.

3.3. ECA MDG 2 Achieve universal primary education:

There is always political situation from years ago which influence even country situation nowadays. For ECA it is socialist period. With the transitions of periods even changes in education systems were huge in many countries. Many children were disrupted by factors such as war, civil unrest in countries as Bosnia and Herzegovina (my home country), Azerbaijan, but for us most important Tajikistan. In those of countries educational standard fell rapidly. For Tajikistan reaching MDG goal in this area seems to be likely impossible. According to the World Bank data Tajikistan educational situation like this : "*One child in five might not be attending primary school and that school attendance has not improved in recent years*"

The indicator which is very often used for measuring primary education for MDGs is net enrolment rate, see figure 5. Net enrolment rate, which compares number or percent of school-aged children with number of school-aged children who enrolled in school.
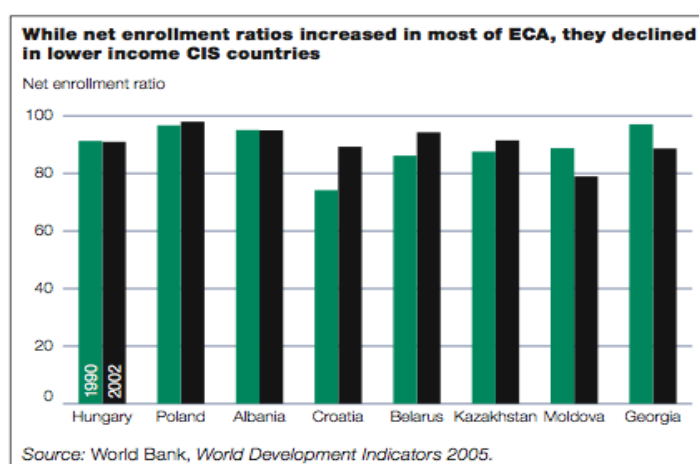
Figure 5: Enrollment ratio in ECA region

Source : The World Bank, ECA MDG-Education, 2011

Kazakhstan:

MDG 2 seems to be achieved already. As we can see on the Figure 5, the number of children enrolled at school is not very lower than the total number of children of that age.

3.4. ECA MDG 3 Promote gender equality and empower women:

This MDG seems to be achievable for all the countries in ECA area. Anyway, women are not equal to man in every aspect. Especially in political participation or higher education. Women in Central Asia have experienced equality for example in the labor market, or schools. But political side shows different numbers of parliamentary representative from which only 12% are women across the whole Central Asia. In European Monetary Union countries it is usually around 35 %.

Ratios which help observing situation of MDG 3 are several different rations of "girls to boys in.." bellow you can see figure 6, which shows gender gap between men and women. Surprisingly the gender gap is greater in for the middle-income countries, than for the lower income countries.
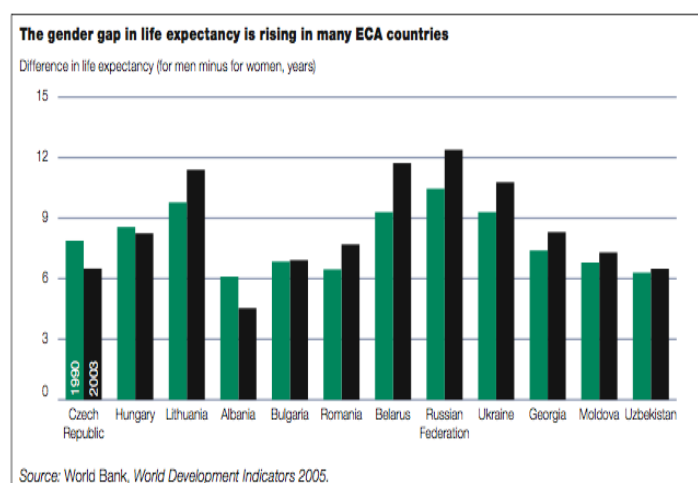
Figure 6: The gender gap in life expectancy in ECA region
Source : The World Bank, ECA MDG-Gender, 2011

Kazakhstan:

When it comes to third MDG in Kazakhstan the target 4 has been reached. Target 4 says : "To eliminate gender disparity in primary and secondary education, preferably by 2005 and at all levels of education no later than 2015". Typically for Kazakhstan it was important to create new target 4+ which was adopted in 2007.

Target 4+ :

- *To ensure adoption and implementation of measures aimed at increasing representation of women in legislative and executive bodies*

- *To ensure legislative and enforcement measures to prevent and eliminate violence against women*
- *To ensure sustainable gender mainstreaming of national planning and budgeting, especially aiming at minimizing the gender wage gap*

Source : http://planipolis.iiep.unesco.org/upload/Kazakhstan/Kazakhstan_MDG_2010_eng.pdf

Target 4+ is apparently focusing on Women's Rights which are to bring women more equal opportunities. An issue remains participation of women in the government and politics. This target should be reached latest by 2015. To create these conditions, there must be an assistance for those of women. This organ will have to control the violence in general for both sides – people who have committed it and persons who it has been committed on. This idea and system should be supported by government.

3.5. ECA MDG 4 Reduce child mortality:

Under-five mortality rate, 1990 and 2009 (Deaths per 1,000 live births)

Region	1990	2009
Sub-Saharan Africa	180	129
Southern Asia	122	69
Oceania	76	59
Caucasus & Central Asia	78	37
South-Eastern Asia	73	36
Western Asia	68	32
Northern Africa	80	26
Latin America & the Caribbean	52	23
Eastern Asia	45	19
Developed regions	15	7
Developing regions	99	66

0   50   100   150   200

■ 1990   ■■ 2009 | 2015 target

Figure 7: Under-five mortality rate 1990-2009

Source : UNECE – Report on MDGs-in-Europe-and-Central-Asia, 2010

When it comes to ECA region in the rate of mortality under-five years old children (see figure 7), it has fallen from 45 to 36 per 1000 children. 1990s was the period when mortality rates for under-five fallen. ECA regions goal is to reach reduction of this rate by two-thirds. Since the rate was 45 per 1000 it is clear that number of 36 is not enough for reaching this target.

When it comes to children in rural areas, there are more at risk of dying, no matter how low child mortality in specific region is. Ratio of rural to urban under-five mortality rate since 2000 to 2008 is in Central Asia at 1,3 rate. Which seems to be the best result among the countries with similar problem of rural areas. Another fact is, that children from poorest household are more likely to die under-five than those of from richest households.

Kazakhstan:

Kazakhstan mortality rate for under-five is slightly unclear, because international estimates are showing increasing number, but country data are showing the opposite. One of the facts, that is not helping reducing child mortality is that for example parental technologies which would be very useful to work with are not used due to misunderstanding of its needs and of its using. Anyway several conclusions on Kazakhstan MDG 4 are made:

- *To introduce regionalization of parental care into obstetric practice and to provide full financing of these services;*
- *To identify financing for the introduction of further sustainable Effective Parental Care programmes into obstetric practice and WHO Integrated Management of Childhood Illness (IMCI) in primary hospitals and primary healthcare facilities;*
- *To undertake research to explore the causes of accidents involving a wide range of ministries (healthcare, education,*
- *road and transport, etc.);*
- *To conduct a study to assess the true frequency and causes of congenital malformation;*
- *To amplify usage of the BABIES matrix for proper management decisions in obstetrics throughout the country.*

Source : http://planipolis.iiep.unesco.org/upload/Kazakhstan/Kazakhstan_MDG_2010_eng.pdf

Big part of responsibility for reaching this goal such as MDG 5 lies on UNICEF, which is preparing reporting for past five years in this area, but unfortunately I am not allowed to present it by the time when UN officially uses UNICEF data for public report.
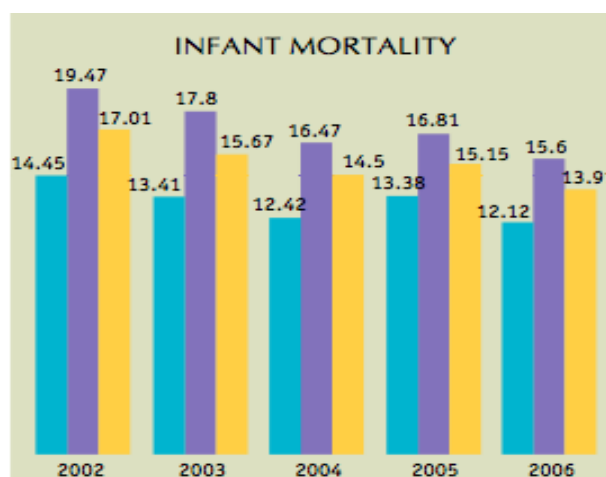
Figure 8: Infant Mortality

Infant mortality ratio in period of 2002 – 2006 in Kazakhstan. Blue – girls, Purple – boys, Yellow – total.

3.6. ECA MDG 5 Improve maternal health:

For maternal health improving there is a target of reducing maternal mortality ratio by three-quarters from 1990-2015. For most of ECA countries this issue is achievable, as usual there are aleo problematic ones like Kazakhstan, Tajikistan or Georgia, there it is almost impossible to achieve MDG 5. To point out the number of mother who die in Kazakhstan, here is the comparison of maternal mortality rate in Kazakhstan and in ECA. Kazakhstan – 210 per 100,000 and ECA 58 deaths per 100,000. Results are provided by WHO and UNICEF.

As it is visible in the figure 9, no matter how similar health background in 2 countries is, improvement in maternal health stands for itself. Central Asia maternal mortality ratio is very diverse for each country but in the end it reaches similar results. The worse period for Kazakhstan was in 1998 with number was highest since 1990-2002. This maternal mortality ratio shows the number of women who die while being pregnant or during childbirth per 100,000.

By 2008 the results of maternal mortality ratio are better than in year 2000. The UN database says that Central Asia's mortality rate were 70 for 1990, 68 for 2000, and 54 for 2008. It seams to be getting closer to the target, but the target is 24, which suddenly doesn´t seem achievable by 2015.
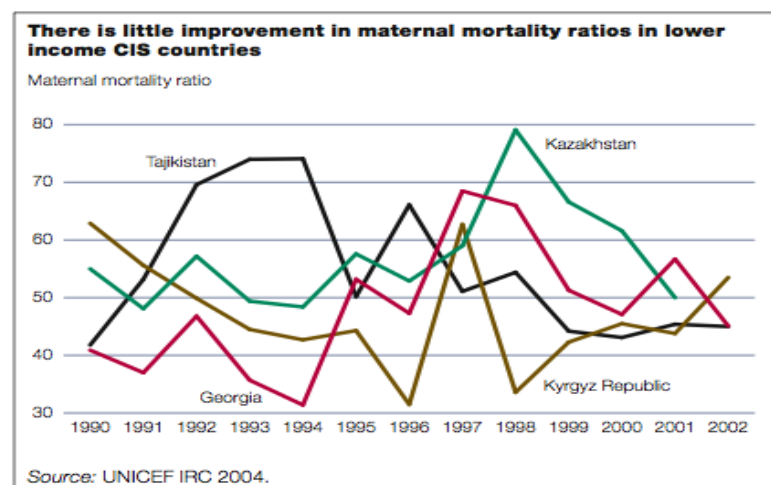
Figure 9: Maternal mortality ratio in lower income CIS countries
Source : The World Bank, ECA MDG-MaternalHealth, 2011

Kazakhstan :

Maternal health in Kazakhstan is pretty low and maternal ratio remains several times higher than it is for states of WHO European Region, see figure 10. For Kazakhstan the ratio says 55 per 100,000 and it is needed to reduce this to 14 deaths by 2015 which is hardly probable to be reached. MMR follows sinusoidal trend, but as the years pass it is harder and harder to attain larger decrease. Influence on future changes depends on implementing of new legislation, on financing and managing of MMR reduction programs, and on healthcare institutional reforms and its acceptance.

Graph 5.1.
Maternal mortality ratios in the Republic of Kazakhstan per 100,000 live births in 2000-2006

2000	2001	2002	2003	2004	2005	2006
60.9	48.6	50.5	42.1	36.9	40.5	45.6

Source: Ministry of Health
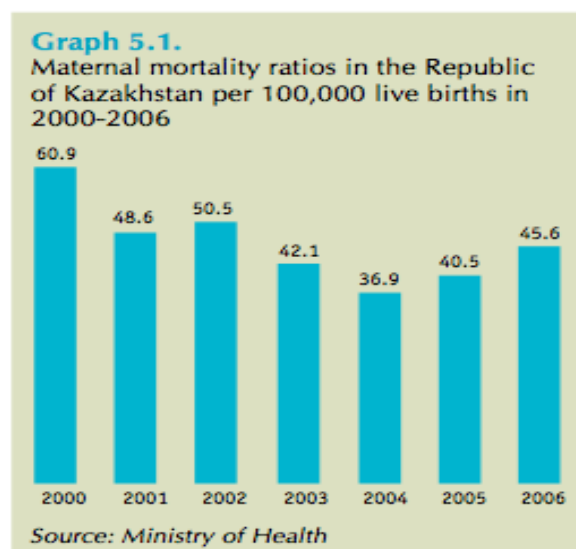
Figure 10: Official statistics data on infant and child mortality ratio, 2002-2006 per 1,000 live births

Source : UNECE, The Agency for Statistics of the Republic of Kazakhstan, MDG in Kazakhstan

The structure of MMR also depends on the age of mothers. Mothers are usually over 40 years old which also causes a problem even if the health situation was better in Kazakhstan, this age is risky. MMR for mothers over 40 is 228,5. Opposite to this fact, there are also mothers aged 15-19 for which MMR is 38,2.

3.7. ECA MDG 6 Combat HIV/AIDS and other diseases:

Unfortunately the world´s region with fastest growing HIV/AIDS epidemic is the ECA region. The number of infected people has risen from 30,000 to 1,4 million from 1995 to 2004. Ukraine and Russia together cover 93% of those of people. Disturbing fact is that over the whole world there are over 42 million people infected. HIV/AIDS infection mainly affects injecting drug users and commercial sex workers. Bad hygiene in hospitals may also be a reason why people get infected. Luckily, recent global researches show, that actions for combating HIV/AIDS could be effective and can almost stop the spread of this disease. Other factors that are influencing transmission of HIV are structural and are divided in long-term and medium term. These factors are: Control of drug trafficking, poverty-reduction policies and programs, improving employment opportunities for young adults, improving controlling of tuberculosis and HIV, curtailing human trafficking and sustained pro-poor economic growth.

Figure 11: HIV/AIDS rates in ECA region

:

Source : The World Bank, ECA MDG-Diseases, 2011

Malaria:

Malaria kills circa 1,1 million people each year. It is quite rare in ECA region, because it is typical for tropical areas. In Tajikistan or Uzbekistan usually the transmitted part of malaria infects people, thus this form of malaria is mostly benign.

Tuberculosis:

Tuberculosis yearly kills circa 2 million. Unfortunately, not like malaria, tuberculosis causes problems in ECA. Kazakhstan, Uzbekistan, Russian Federation, Romania and Ukraine have
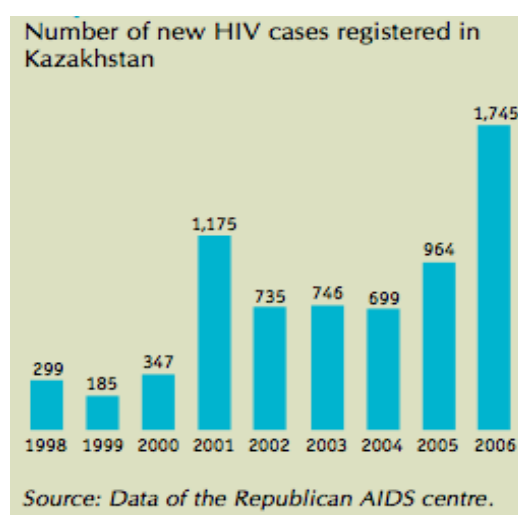
more than 50% of the total number of ECA region infected. In affected countries an implementation of effective control programs for this disease, those of programs would be based on a strategy created by WHO – Directly Observed Treatment Short Course (DOTS). WHO also endorsed an approach called DOTS-Plus. DOTS-Plus uses drugs which are more powerful and mostly are used for resistant tuberculosis patients. Anyway, thanks to these approaches there is an optimistic chance of lowering the number of infected people.

Kazakhstan :

Since 1998 there was a huge increase of HIV infection registered in Kazakhstan, see figure 12. As Republican AIDS Centre´s results show, the number of infected grown nearly five times since 1998. It is similar to other countries affected by this disease – young people need to know more about HIV transmission modes and drug injectors have to be more safe. Progress in this case is not very huge and new targets had to be created even for this MDG :

The strengthening political commitment to HIV and AIDS;

- *Providing access to ARV therapy for all patients in need;*
- *Raising of youth awareness;*
- *Ensuring sustainable prevention programmes for the most vulnerable groups;*
- *Further improvement of the epidemiologic tracking system;*
- *The strengthening of cooperation with NGOs.*

Number of new HIV cases registered in Kazakhstan

Year	Cases
1998	299
1999	185
2000	347
2001	1,175
2002	735
2003	746
2004	699
2005	964
2006	1,745

Source: Data of the Republican AIDS centre.

Figure 12: Number of HIV cases registered in Kazakhstan 1998 – 2006
Source : UNESCO, The Agency for Statistics of the Republic of Kazakhstan

Another target for MDG 6 is : To halt and begin to reverse the incidence of tuberculosis by 2015. As said before, in Kazakhstan TB is serious problem and one of the ways to help its salvation are DOTS and DOTS-Plus approaches. WHO data says that Kazakhstan is one of the countries which leads in terms of registered tuberculosis and it makes it one of 18 countries with priority in the WHO European Region. Moreover, multidrug resistant tuberculosis is in Kazakhstan considered as one of the highest in the world. Obviously it is definitely unachievable to reach MDG 6 in Kazakhstan by 2015.

3.8.ESA MDG 7 Ensure environmental sustainability:

To simplify this goal – reaching sustainable development equals environmental protection plus wise use of resources. For ECA countries MDG 7 is important in case of drinking water safety, which is hard to get in ECA region. The thing that creates confusion above this problem is, that mostly statistics measure water sources, but not safe water sources – and for ECA region water quality is an issue. Besides that, promoting environmental sustainability and week institutional capacity for formulating or implementing policies are also problematic fields. Many very important factors are missing in ECA countries, such as legal basis of management, environmental data collection, cost-effective and incentive-compatible regulatory framework or public information for environmental decision access. For example access to basic sanitation is lately at standard of 93% and the targeted number is 95% by 2015. The figure 13 shows Gap in access to water in urban and rural households for year 2000. Tajikistan, again, has the worse results above ECA countries.
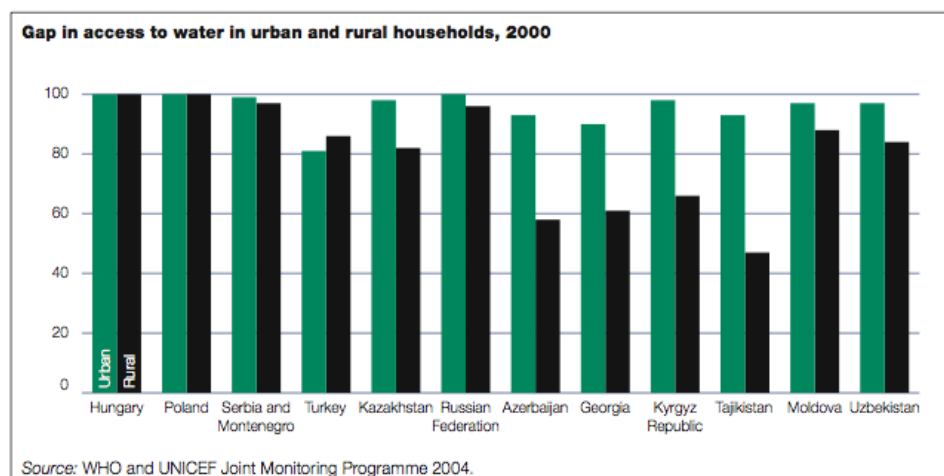
Source : The World Bank, ECA MDG-Environment, 2011

Figure 13: Gap in access to water in urban and rural households, 2000

Kazakhstan:

Environment is very huge concept and it is hard to include all the parts of it in details so the focus will remain on most important one for Kazakhstan which is safe water access. When it comes to regulatory framework, Republic of Kazakhstan has shown some progress. For the future steps it is needed to improve legislation related to resources and nature, accept international conventions, involve international projects – which might give an opinion of probability of achieving this goal, and to optimize bio-diversity management structure.

Kazakhstan is one of the countries which suffers from water deficit and waste management is also problematic. Those two factors are influencing public health extremely. Nowadays 10% of households in this country do not have running water, and what more one quarter of Kazakhs has no access to sewage system at all. The authority responsible for solving water problem in Kazakhstan is Water Resources Committee of the Ministry of Agriculture. They are obliged to improve water supply in rural areas as much as they are obliged to control technical requirements for water supply facilities.

Another part of environmental sustainability is developing the agricultural sector and living standards of the population living in rural areas. Special focus is to be given on education and advocacy activities.

## 3.9. ECA MDG 8 Develop a global partnership for development:

When we simplify this goal, it is created to make wealthier countries help undeveloped countries. Literally it commits them to do so. In this case it helps creating environment where progresses are as rapid and as sustainable as possible. Trading between these countries must be based on a strict a clear rules. Other factors should be included too – generous aid, better financial system or debt relief for countries which are committed to poverty reduction. Development cooperation through global partnership is the pillar for achieving of all the targets of MDG 1 – 7. Logically an evaluation of this MDG has to be based on a global level.

ECA trade system is meeting many problems and definitely is not perspective in areas like economic growth or productivity increasing. What would be helpful from neighbor states is reduction of barriers for importing into ECA countries. The European Union has already created trade agreements with ECA countries, such as bilateral free trade between those of 10 countries and EU and further negotiations on agricultural products are in process.

Kazakhstan:

Kazakhstan keeps trying to develop partnership and cooperation at the international level which includes donor, financial institutions and of course trade. Partnership would not be manageable if private sectors or civil society is not involved. However, civil society partnership is not progressing. On the other hand, the areas of progress are several fields of private sectors which are for example communications and IT technology, investments or finance. Fortunately, regional and international cooperation continues its improvement too.

Even though progress in MDG 8 area in Republic of Kazakhstan is evident (see figure 14), there are remaining areas on which countries should focus more. Those are local level development, marginalization or employment. In past few years unemployment in Kazakhstan has lower, it used to shows alternating trend and therefore it is important to improve control system in this economic sphere.
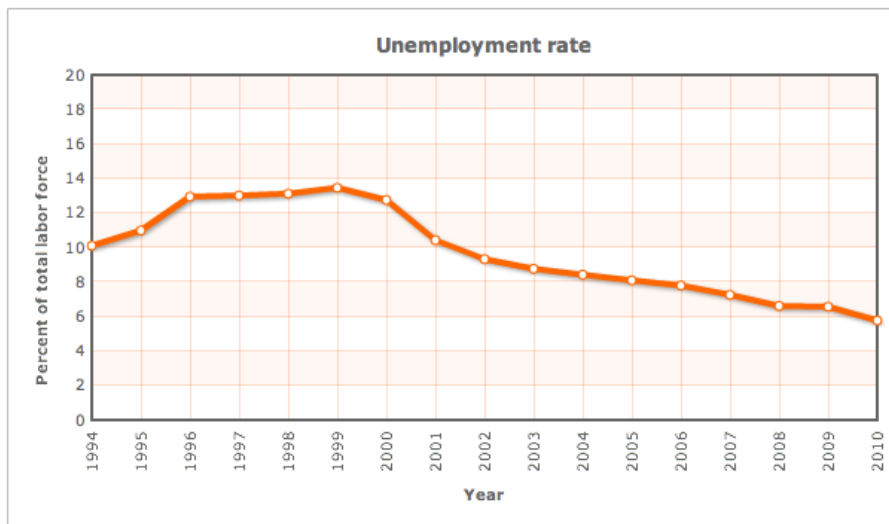
Figure 14: Unemployment rate in Kazakhstan 1994-2010
Source : International Monetary Fund Source: Haver Analytics Latest actual data: 2010

Civic society partnership´s priority should be to enhance existing dialogue and collaboration mechanism. For civil society it is always perspective to involve NGOs and it seems to be promising for this region too.

This was an overview of each MDGs for ECA region and especially in Kazakhstan where the access of information for practical part of this paper was most accessible for me.

IV. Practical Part :

Since I am focusing on critical perspective of Millennium Development Goals in Central Asia with main focus on Kazakhstan, my research was based on peoples opinion on MDGs. I will compare opinions of people who are actively involved in MDGs achieving, such as World Banks Health Advisors for Central Asia, to students and people who know what these goals are, but are not involved. First part are two interviews with WB employees who work in Kazakhstan, where I had a a pleasure to interview them and to add their thought to my thesis. Second part is based on an anonymous survey which was publicly accessible.

Part 4.1. Interviews with The World Bank employees

Opinion on MDGs By James A. Cercone :

James A. Cercone is president and founder of Sanigest International, who spent past twenty years working for the World Bank. I happened to meet him on my Internship in Unicef, Kazakhstan where I had a pleasure to make a short interview on MDGs topic. I transformed his words into a text and I am allowed to publish this paragraph in my paper.

The establishment of the Millennium Development Goals (MDGs) in 2000 was a critical step in the battle against preventable deaths in the developing world. My clearly establishing eight specific areas where progress would be measured world leaders were able to draw significant attention to these preventable diseases and to raise funds to address these issues. Furthermore, the monitoring mechanism that was put in place was an important instrument to track and measure progress towards these goals.

In practice, however, the MDGs have a number of problems that reduces the overall impact of the metric. The main problems according to James A. Cercone´s words are:

- Many of the issues related to reducing poverty require the measurement of changes in inequality, or the differences between rich and poor and their social development outcomes. The MDGs do not measure any changes in equity in the health, education or welfare of the population.

- There are major questions regarding the measurement of the indicators and differences across countries in how they measure the indicators. While this has improved over time, another positive side-effect of the MDGs themselves, it makes it difficult to understand the actual progress made in some of the indicators. For example, many countries in the former Soviet Union measured infant deaths differently than other countries in the world and thus had lower levels of IMR. When they adopted international (WHO) conventions on how to measure IMR their rates increased significantly. In comparison with the targets then, there are serious problems looking at the 2015 goals in comparison with the baseline figure.

- The MDG system created an incentive for countries to 'cheat' on the indicators to artificially improve their MDGs. We find in Kazakhstan, for example, that some maternal deaths are classified under other categories which are not included in the formal definition of maternal mortality. Thus, Kazakhstan is able to report significant progress toward meeting the MDG goal, however, in practice the level may not be decreasing as fast as reported.

- A lot of funds where raised and allocated to dealing with single diseases, such as HIV, when addressing the burden of disease in developing countries needs to develop interventions in health systems strengthening and should focus on chronic diseases which account for a much higher share of all deaths. For example, in Kazakhstan cardiovascular disease accounts for more than 50% of all female mortality, however, the MMR target is only focused on death during pregnancy and leaves out most of the reasons why women die in the country.

- In this same line, not establishing MDGs for chronic diseases is a major omission based on the actual burden of disease in middle-income countries in the developing world.

In summary, the MDGs have been a valuable tool in the field of international development to raise awareness and resources targeted to a few key areas. While many opponents of MDGs may cite that they do not capture important dimensions of development, such as gender differences, they have made an important contribution to targeting policies to address some of the outstanding issues in development. On the negative side, some of the problems highlighted above bring in to question the validity of the reported results and what they mean for reducing inequity in developing countries. Surely, the goals established after the 2015 target date is met will be better developed and address some of the shortcomings mentioned here.

Opinion on MDGs by Nedim Jaganjac:

    Nedim Jaganjac is World Bank's Senior Health Specialist for Central Asia who studied Harvard University in Boston. Thanks to him I had a chance to meet other people from this huge organization. Nedim has always been against MDGs and he doesn't think that this is the best solution for world problems. Bellow you may see Strengths and Weaknesses from his practical point of view.

    MDGs set a nice milestone that could be used for policy dialogue. However, for Europe and Central Asia region it might be difficult to achieve some of the goals as targets are very difficult. For example if we apply the same principle of halving infant mortality by half for countries with high infant mortality going from for example from 100/1000 to 50/1000 is much easier than going from 15/1000 to 7/1000. Processes and issues that need to be achieved are much more difficult in such cases. This may undermine credibility of MDS and sometimes is just not realistic. Similar example is reaching immunization coverage from 95 to 98% compared to from 50% to 70%.

MDGs Strengths:

Global: Sets targets and keeps focus on what is important overall goal.

Kazakhstan: Health indicators for example are worse than in comparison to other countries. Therefore set of intermediary objectives are often confused with overall goals so it is good to have globally accepted priorities.

MDG's Weaknesses:

Global: One fits all targets are - by definition - not good approach. Therefore it might be good to take into account starting points, implementation issues etc in defining country specific targets within overall framework.

    Kazakhstan: Communication strategy for keeping MDGs as a target is usually reserved for UN Agencies with rather limited ownership of the government. Increase of funding from oil creates less accountability and dependency on foreign aid or objectives set by international community.

Interview Summary :

Both Jerome A. Cercone and Nedim Jaganjac clearly know both positive and negative sides of MDGs reaching process. The fact that goals are unrealistic is also mentioned. Seems like taking it form the first steps of reaching any kind of goals – collecting information – which is often being modified to show better results, or results which would affect the whole system of MDGs in order to f.e. change the areas of financing. Another parts of implementing technologies, workshops and education of involved or affected people is also being slightly problematic.

When it comes to health, there are many practical problems which are not clarified in MDGs achieving system and therefore are not working the way they should, and indicators for Kazakhstan are not exact because of mixture of Central Asian and Kazakh results itself.

First parts of reaching MDGs seems to be easier than every other step. It is always hard to change something at global level, but the fact is, that even when the changes come, it is hard to keep them coming further. When you reach certain milestone of life quality, it is difficult to improve it even more. This also shows another point of view of Why it is impossible to reach Millennium Development Goals and its targets.

4.2. Anonymous Survey:

This survey includes 13 questions related to Millennium Development Goals in general and also in Central Asia. This survey was created on www.qualtrics.com and it was publicly accessible. In the end it had 80 responders and the language used was English. Responders are aged from 15 to 53. First question was asking for age of responder. 79% of responders are students in age category of 19-25, see figure 15.
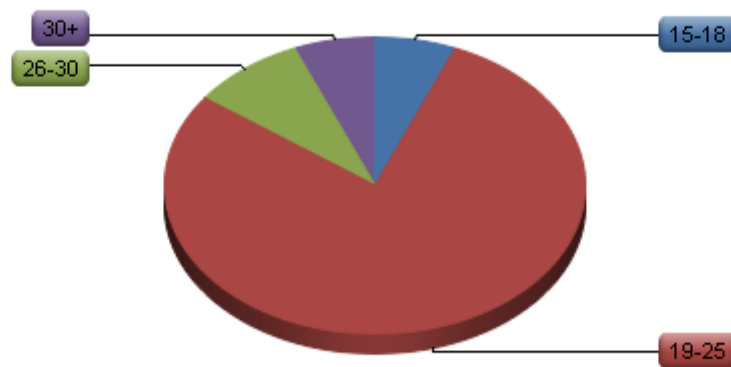
Figure 15: Question 1, age specifics

The second question asks about knowledge of MDGs, see figure 16. Surprisingly 69% of responders have no idea what MDGs are. 21% knows and 8% have heard of it. Survey may have ended for people who chose an answer NO. If they wanted, they could have continued with survey anyway – for example for question 4, there is no real importance of knowing MDGs when responders know about world problems.
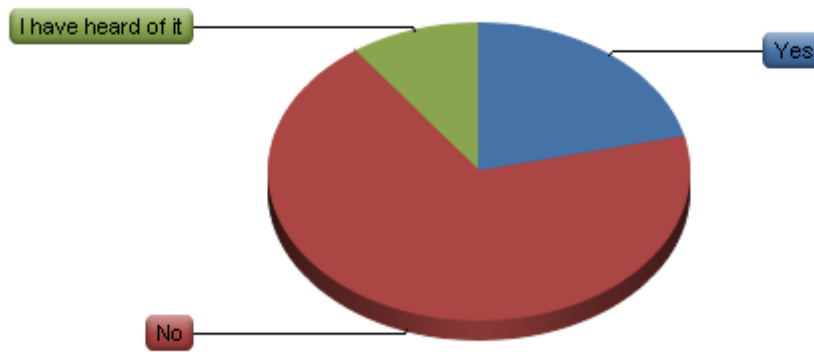
Figure 16: Question 2; Awareness of MDGs

The third question is focusing on source of whey they got informed about MDGs since different types of media may show different aspects of it and may affect in both good and bad ways people's opinion, see figure 17. The 58% answered : School / University and most of these student added an information that their field of studies are International Relations or Business Administration at University of Economics in Prague, few of responders are Law students at Charles University in Prague. 7 people answered Other and added where they have heard it from. Usually they responded with words FRIEND and INTERNET, and one of them answered Model United Nations.
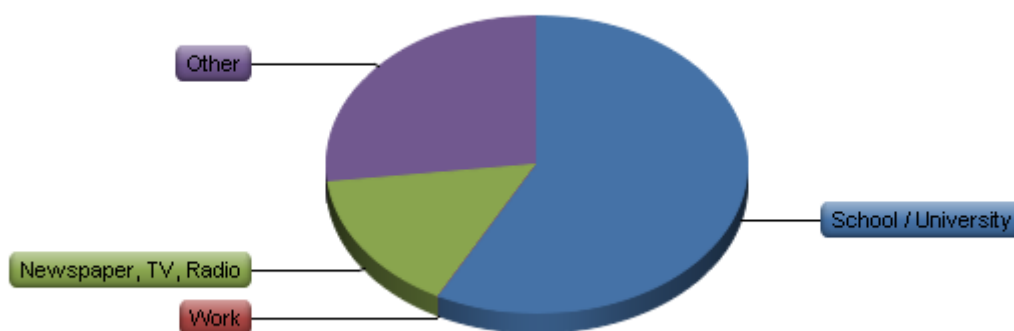
Figure 17: Question 3, Information source

In the fourth question there are all the MDGs listed and responders were to rate it based on importance of its reaching. First to be solved to Last to be solved. Here answers were very diverse, but usually First MDG to be solved is MDG 1 in peoples opinion and last one to be solved is most commonly MDG 8, even though one respondent chose exactly the opposite and finds MDG 8 as the one which should be solved in a first place. The diverse of responses if visible in the figure 18 bellow.
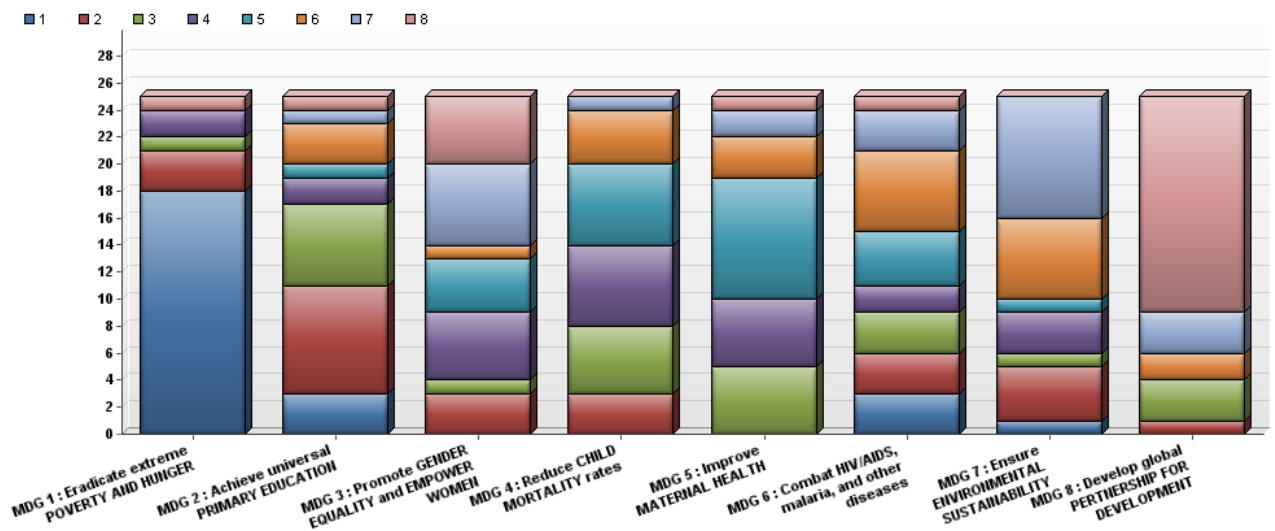

Figure 18: Question 4, Importance of reaching MDGs

The fifth question asked of probability of reaching MDGs by 2015 in general. Yes / No and explanation. Eighteen of responders said NO, but reasons why were diverse. Several responders think that MDGs are completely unrealistic goals, others blame politics and even WHO that this organization doesn´t even want to reach it. But mostly results show, that people do not believe in possibility of getting rid of poverty. Even though most of them support MDGs idea, they don´t believe in its reaching. 21 responders on this question were aged 19-25 and out of 21 responders 19 said NO and 2 of them said "party". From all the responders only 1 chose YES as an answer, but typically with no explanation.

The sixth question asks about support of MDGs. Actually all the responders support MDGs goals, but there are few of them who do not support MDGs, but only its goals. To be more specific – 4 people. The rest supports MDGs.

The seventh questions is focusing on institutions which are involved in MDGs solving and how trustworthy they seem to be. 57% chose The World Bank as an organization which they trust most. 22% don´t believe any organization and 13% finds International Monetary Fund as most trustworthy. World Bank even provides the most reports on this topic and it might have had an impact (see figure 19).
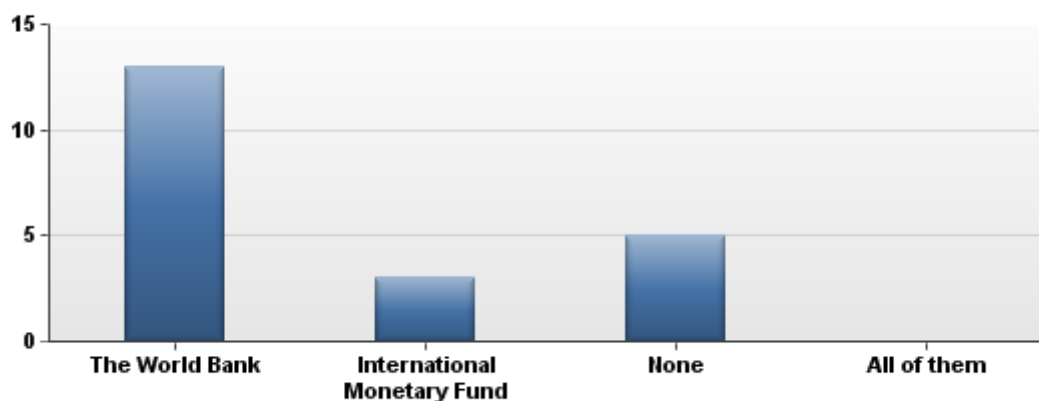
Figure 19: Question 7, Involved institutions

The eight question which organization if most useful? 14 out of 27 answers show UNICEF. 7 shows WHO. Two responders wrote both UNICEF and WHO together. WTO is found most useful by 2 out of 21 responders, another 2 said – "I don´t know", 1 chose UNEP and 1 responder wrote The Red Cross. Most responds were only one-word, but there are 2 answers with an explanation : "UNICEF, but only because they have the best PR" and second one "WTO, if they manage to push through liberalization of the world trade (notably by eliminating subsidies in agriculture) it will help millions of people to get rid of poverty" This opinion is very interesting, but unfortunately there is no chance of further discussion.

The ninth question – simply, if goals are unachievable, why? As already showed earlier, generally people do not believe politicians, this question is another prove for it. 64% of people blame politics for not reaching MDGs. The 20% blame idea itself and 16% (see figure 20) - 4 responders – wrote other reasons.

Here are the answers :

- "Failure in world politics and values of the modern world."
- "First must be improved the education of the population - min. 1 generation before

anything will change."

-        "Failure in politics of countries where MDGs are reached, because they don´t help poorer countries... in my opinion."

-        "Gender equality encounters cultural constraints."

Someone blames wealthier countries, another one values. However, second answer may be true, even though it seems to be wrapped. For me it says "MDGs will not be achieved until MDG 2 is achieved" and pushes us to run in a circle.
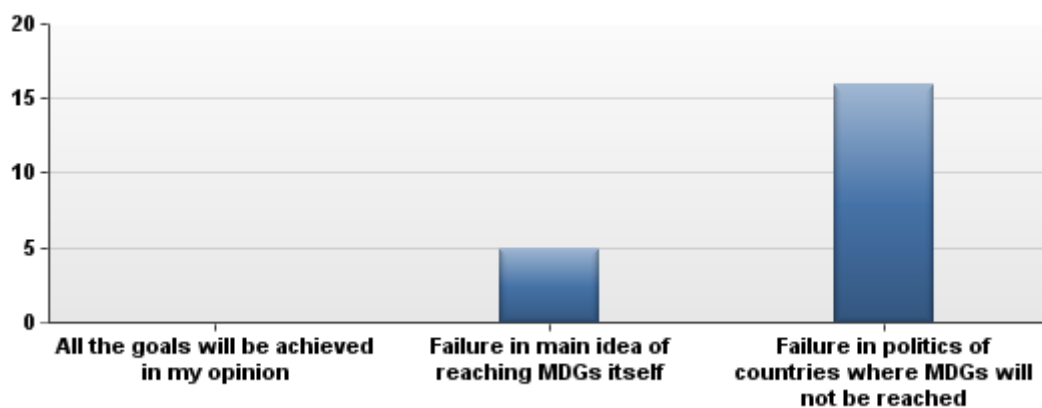
Figure 20: Question 9, Failure in achieving MDGs

The tenth question is simple –chance of reaching MDGs in Central Asia YES/NO? The 72% chose answer YES and 28% chose the opposite one (see figure 21). In eyes of Central Europeans – Central Asia usually doesn´t seem to be as undeveloped as we described in the beginning of this work. I think it is because of ignorance of this regions development status, which will be seen in next question.
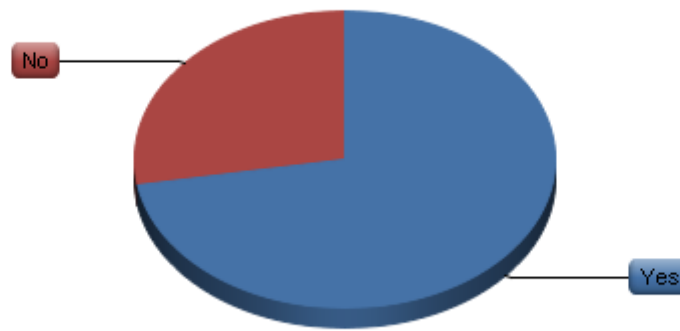
Figure 21: Question 10, Faith in achieving MDGs

The eleventh question – ranking Central Asia's development status, see figure 22. In this questions responders ranked 1-5 development in Central Asia 1-Good/Not bad 5-Very bad. 3% of people chose answer 1 and the same percent chose 5. Answer 2 and 4 were both chose by 13% of responders and mostly – 68% - answer choice 3 was chosen. This means, that there are certain important development which have to be improved, but on the other hand, there are others which are reaching standards of development countries.
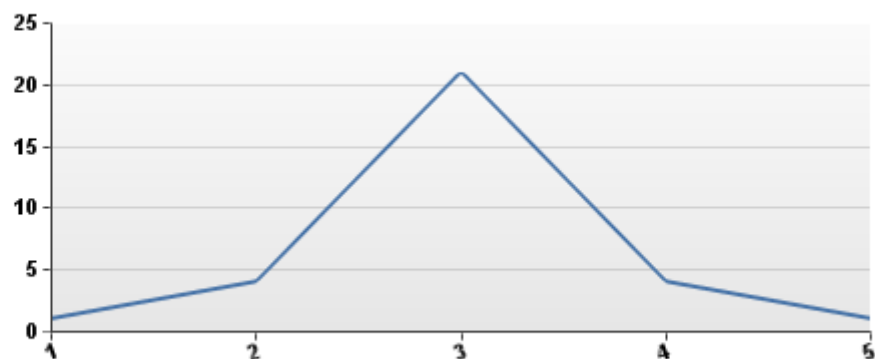
Figure 22: Question 11, Central Asia Development status - ranking

The twelfth question asks which CA country need help the most? 40% said Tajikistan – which I agree with. Other 3 countries – Uzbekistan, Kazakhstan and Kyrgyzstan were all chose in 20% of responds. One person who chose Uzbekistan explained it on an HIV/AIDS problem, that other countries reduced number of infected, but unfortunately not Uzbekistan. Two people who chose

Tajikistan wrote also comments. One says – because of HIV, other one says – because of gender equality and education.
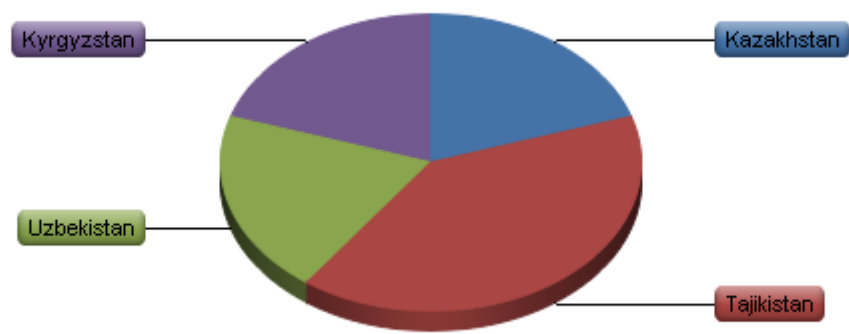
Figure 23: Question 12, Country preferences

The thirteen question is asking if responders are involved in any way in MDGs or if they are planning to do so in future. The 54% hopes to be involved in reaching of MDGs goals in future, 8% already are involved – by several donations and voluntary programs, and 38% are not involved and are not even planning to be involved, see figure 24.
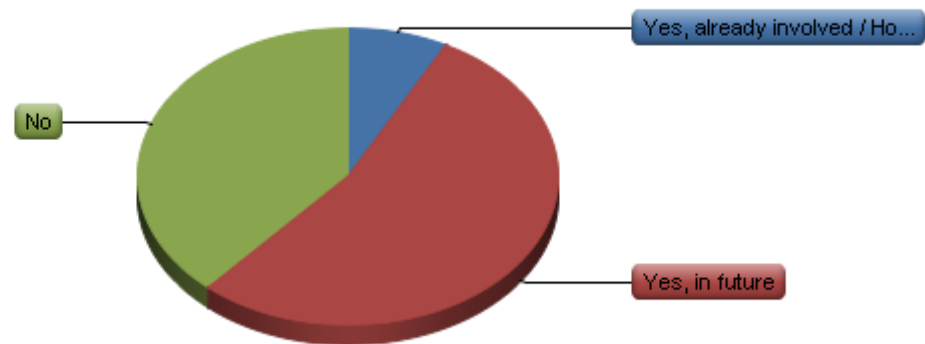
Figure 24: Question 13, Contribution to the achieving of MDGs

Survey summary:

In this survey we may see that opinions on MDGs are very diverse but they meet in one place – MDGs goals. Goals of MDGs are important for the whole population and people seem to be interested in helping it. The thing is, that not only they don´t know how, but also they do not know about processes of reaching MDGs, about how international organizations work on it or work in general and then they find them untrustworthy. The only organizations which is very trusted is UNICEF and as one responder said – it is because people know at least about some of acts and even small percentage of knowledge of project which organization works on is enough for many to get peoples trust. Responses also diverse, because most of Central Europeans in general may have read, or heard of situation in Central Asia, but they do not know certain numbers or changes in past few year and that makes it hard to explain why, for example, they think, that Tajikistan is most undeveloped countries of these four countries included in survey.

V. Conclusion :

The main objective of this study was to evaluate fulfillment of Millennium Development Goals in Central Asia with main focus on Republic of Kazakhstan and to see perspective of people from Europe and their opinions on the whole topic comparing it to opinions of people who actively participate by working for international institutions.

In the first chapter we have learned the basics of the MDGs and simple genesis of this whole idea of United Nations. Firstly, history and the process of creating these goals is shown. For understanding of this process it is important to know which institutions participate in worlds development improving and in what measure, thus we chose six most influential organizations with most responsibilities for helping undeveloped countries. These six important organizations are United Nations (UN), World Bank (WB), International Monetary Fund (IMT), Organization for Economic Co-operation and Development (OEDC), World Trade Organization (WTO) and World Health Organization (WHO). Every each of these institutions has enormous impact on environment, health and development and thus they influence the whole MDGs progress.

Another part of this paper is overview of all the MDGs in ECA region and specifically in Kazakhstan. Evaluation of MDGs is difficult since for every goal there are more targets. Several targets have already been reached in Kazakhstan. However, new targets had to be created and added. This may even ruin people´s hopes of reaching goals which entire world wishes to reach.

Central Asia region is very diverse in development areas and people do not know about that. In survey which is representing the last part of this work we may see, that people are divided in three groups. First and the largest group of people is group are those who are not interested in environment, development or UN and therefore are not even knowing about MDGs. In the second group are people who are interested or may have heard of these goals, and very small group of people who are actively participating in its solving.

Observing and researching opinions on MDGs from very diverse groups of human beings in the most of situations we got to the same point. Goals of MDGs are very supported and desired goals by population. However, MDGs system is not. Slightest mistake or misunderstanding in any basic procedure or method of reaching MDGs may have enormous impact. Unfortunately, even if everything went perfectly and all the involved people and organization would do their best, the question "Are MDGs achievable by 2015?" remains unanswered.

Attachments :

A1.1. Official list of MDG indicators

All indicators should be disaggregated by sex and urban/rural as far as possible.

Effective 15 January 2008

Millennium Development Goals (MDGs)	
Goals and Targets **(from the Millennium Declaration)**	**Indicators for monitoring progress**
Goal 1: Eradicate extreme poverty and hunger	
Target 1.A: Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day	1.1 Proportion of population below $1 (PPP) per day[i] 1.2 Poverty gap ratio 1.3 Share of poorest quintile in national consumption
Target 1.B: Achieve full and productive employment and decent work for all, including women and young people	1.4 Growth rate of GDP per person employed 1.5 Employment-to-population ratio 1.6 Proportion of employed people living below $1 (PPP) per day 1.7 Proportion of own-account and contributing family workers in total employment
Target 1.C: Halve, between 1990 and 2015, the proportion of people who suffer from hunger	1.8 Prevalence of underweight children under-five years of age 1.9 Proportion of population below minimum level of dietary energy consumption
Goal 2: Achieve universal primary education	
Target 2.A: Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling	2.1 Net enrolment ratio in primary education 2.2 Proportion of pupils starting grade 1 who reach last grade of primary 2.3 Literacy rate of 15-24 year-olds, women and men
Goal 3: Promote gender equality and empower women	
Target 3.A: Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015	3.1 Ratios of girls to boys in primary, secondary and tertiary education 3.2 Share of women in wage employment in the non-agricultural sector 3.3 Proportion of seats held by women in national parliament
Goal 4: Reduce child mortality	
Target 4.A: Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate	4.1 Under-five mortality rate 4.2 Infant mortality rate 4.3 Proportion of 1 year-old children immunised against measles
Goal 5: Improve maternal health	
Target 5.A: Reduce by three quarters, between 1990 and	5.1 Maternal mortality ratio

2015, the maternal mortality ratio	5.2 Proportion of births attended by skilled health personnel
Target 5.B: Achieve, by 2015, universal access to reproductive health	5.3 Contraceptive prevalence rate 5.4 Adolescent birth rate 5.5 Antenatal care coverage (at least one visit and at least four visits) 5.6 Unmet need for family planning

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

Target 6.A: Have halted by 2015 and begun to reverse the spread of HIV/AIDS	6.1 HIV prevalence among population aged 15-24 years 6.2 Condom use at last high-risk sex 6.3 Proportion of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS 6.4 Ratio of school attendance of orphans to school attendance of non-orphans aged 10-14 years
Target 6.B: Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it	6.5 Proportion of population with advanced HIV infection with access to antiretroviral drugs
Target 6.C: Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases	6.6 Incidence and death rates associated with malaria 6.7 Proportion of children under 5 sleeping under insecticide-treated bednets 6.8 Proportion of children under 5 with fever who are treated with appropriate anti-malarial drugs 6.9 Incidence, prevalence and death rates associated with tuberculosis 6.10 Proportion of tuberculosis cases detected and cured under directly observed treatment short course

Goal 7: Ensure environmental sustainability

Target 7.A: Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources	7.1 Proportion of land area covered by forest 7.2 CO_2 emissions, total, per capita and per \$1 GDP (PPP) 7.3 Consumption of ozone-depleting substances 7.4 Proportion of fish stocks within safe biological limits 7.5 Proportion of total water resources used
Target 7.B: Reduce biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss	7.6 Proportion of terrestrial and marine areas protected 7.7 Proportion of species threatened with extinction
Target 7.C: Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation	7.8 Proportion of population using an improved drinking water source 7.9 Proportion of population using an improved sanitation facility
Target 7.D: By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers	7.10 Proportion of urban population living in slums[ii]

Goal 8: Develop a global partnership for development

Target 8.A: Develop further an open, rule-based, predictable, non-discriminatory trading and financial system	*Some of the indicators listed below are monitored separately for the least developed countries (LDCs), Africa, landlocked*

	developing countries and small island developing States.
Includes a commitment to good governance, development and poverty reduction – both nationally and internationally	Official development assistance (ODA) 8.1 Net ODA, total and to the least developed countries, as percentage of OECD/DAC donors' gross national income
Target 8.B: Address the special needs of the least developed countries	8.2 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) 8.3 Proportion of bilateral official development assistance of OECD/DAC donors that is untied
Includes: tariff and quota free access for the least developed countries' exports; enhanced programme of debt relief for heavily indebted poor countries (HIPC) and cancellation of official bilateral debt; and more generous ODA for countries committed to poverty reduction	8.4 ODA received in landlocked developing countries as a proportion of their gross national incomes 8.5 ODA received in small island developing States as a proportion of their gross national incomes Market access 8.6 Proportion of total developed country imports (by value and excluding arms) from developing countries and least developed countries, admitted free of duty
Target 8.C: Address the special needs of landlocked developing countries and small island developing States (through the Programme of Action for the Sustainable Development of Small Island Developing States and the outcome of the twenty-second special session of the General Assembly)	8.7 Average tariffs imposed by developed countries on agricultural products and textiles and clothing from developing countries 8.8 Agricultural support estimate for OECD countries as a percentage of their gross domestic product 8.9 Proportion of ODA provided to help build trade capacity Debt sustainability
Target 8.D: Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term	8.10 Total number of countries that have reached their HIPC decision points and number that have reached their HIPC completion points (cumulative) 8.11 Debt relief committed under HIPC and MDRI Initiatives 8.12 Debt service as a percentage of exports of goods and services
Target 8.E: In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries	8.13 Proportion of population with access to affordable essential drugs on a sustainable basis
Target 8.F: In cooperation with the private sector, make available the benefits of new technologies, especially information and communications	8.14 Fixed telephone lines per 100 inhabitants 8.15 Mobile cellular subscriptions per 100 inhabitants 8.16 Internet users per 100 inhabitants

The Millennium Development Goals and targets come from the Millennium Declaration, signed by 189 countries, including 147 heads of State and Government, in September 2000 (http://www.un.org/millennium/declaration/ares552e.htm) and from further agreement by member states at the 2005 World Summit (Resolution adopted by the General Assembly - A/RES/60/1, http://www.un.org/Docs/journal/asp/ws.asp?m=A/RES/60/1). The goals and targets are interrelated and should be seen as a whole. They represent a partnership between the developed countries and the developing countries "to create an environment – at the national and global levels alike – which is conducive to development and the elimination of poverty"

A1.2 List of abbreviations :

UN	The United Nations
MDGs	Millennium Development Goals
ECA	Europe and Central Asia
CIS	Commonwealth and Independent States
HIV/AIDS	Human immunodeficiency virus / Acquired immune deficiency syndrome
ODA	Official development assistance
DAG	Development assistance group
WB	The World Bank
WHO	World Health Organization
WTO	World Trade Organization
OECD	Organization for Economic Co-operation and Development
IMT	International Monetary Fund
IBRD	International Bank for Reconstruction and Development
CA	Central Asia
NGO	Non-governmental organization
GDP	Gross domestic product
TB	Tuberculosis

A1.3. List of Survey Questions :

1. What is your age?

2. Do you know what are MDGs?

3. Where have you heard of it?

4. Rate MDGs by its importance / Which one should be solved first be solved first? 1 – Most necessary / First to be solved 8 Less necessary / Last to be solved

5. Do you think that MDGs will reach these goals by 2015? Please, shortly explain why.

6. Do you support idea of MDGs in general? If possible, please explain why.

7. Which of the organizations bellow you find more trustworthy? It "none" or "all of them" please explain why

8. Which (involved) organization you consider being the most useful one? (UNICEF, WHO, WTO, UNEP, UNDESA,..)

9. If there are goals which seem to be unachievable by 2015, why?

10. Is there a chance of reaching MDGs in Central Asia? (specifically Kazakhstan, Tajikistan, Uzbekistan or Kyrgyzstan)

11. Rank the development 1 (Not bad) – 5 (Very bad) in Central Asia (considering the rest of the world)

12. Which of the following CA countries need UN help most? Explain why, or in which area?

13. Have you ever considered getting involved in MDGs? For example Donation, becoming UN Citizen Ambassador, via Education For All, or any other program?

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