

# Los Objetivos de más allá de Desarrollo Del Milenio los promedios





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# Millennium Development Goals (MDGs) in Latin America: Beyond the Averages

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The Millennium Declaration was signed by 191 chiefs of state during the Millennium Summit of 2000. It represents an international consensus on clearly defined development objectives that include multiple dimensions of well-being. This declaration represents a unique opportunity for better coordination among the different actors in the development community both at the national and international level. It has already been subscribed to by all the governments in the United Nations, by the multilateral organizations, by the regional banks, by the bilateral agencies of development cooperation and by important segments of civil society. Within each country, governments have reconfirmed their commitment to include the objectives contained in the Millenium Declaration into their own national development plans and poverty reduction strategies. Governments have also used the objectives as a departure point for dialogue with ever widening circles in civil society.

In reality, the objectives outlined by the Millenium Declaration are not new but represent a synthesis of the multiple agreements which had been reached in various international summits and conferences held during the 1990s. Specific objectives in regards to education, health, gender equity, environmental protection and the like were determined at these meetings. The Millenium Declaration simply gathered them into a common banner and fixed concrete objectives whose fulfillment must be attained by the year 2015. Thus, the objectives represent an opportunity to advance in key development areas in a manner that is both integral and well coordinated. They offer the opportunity to create a consensus on the utilization of development resources to achieve tangible objectives in the medium term.

The Millenium Development Goals (MDGs) are the tangible expression of the objectives set forth by the Millenium Declaration. As defined in the international agenda, these include: poverty reduction in terms of income and hunger, universal primary education, gender equity, reduction of child mortality, reduction of HIV/AIDS contagion rates, protection of the environment, and the expansion of access to clean water and sanitary services. Furthermore, MDGs aspires to improve the international

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alliance for development through the assignment of greater resources for development aid, the reduction of external debt and the improvement of access to international markets.

By helping to establish a clear relationship among general objectives, tangible goals and tracking indicators, MDGs have made an invaluable contribution to the discussion on development priorities. They give the development agenda a degree of specificity which is usually lacking in development proposals, which betray a common problem with objectives that are too general – in the reduction of poverty and inequality, or the betterment of education and public health, for instance – to represent effective commitments to guide the investment of resources.

The MDGs permit the establishment of tangible quantitative commitments that include a well-defined timeline and explicit tracking indicators to determine rate of progress. For example, Objective No. 1 proposes to eradicate extreme poverty and hunger, a vision of the future that gives priority to the efforts to eliminate the most extreme forms of exclusion. This general objective contains two more specific goals:

Goal 1. Between 1990 and 2015, reduce by half the proportion of people earning less than one dollar per day,

Goal 2. Between 1990 and 2015, reduce by half the proportion of people who suffer from hunger.

These two goals represent a concrete commitment with well-defined numerical and temporal boundaries. Specific tracking indicators have likewise been defined to monitor the progress towards their achievement.<sup>2</sup> This is the major contribution that the MDGs have made to the international discussion on development: they have forced the establishment of concrete commitments that go beyond declarations of good intentions.

The first question that arises in the Latin America context is the following: to what degree are the MDGs relevant to the development conditions present in these countries? In other words, given that the region has a medium level of development, to what degree do these elementary objectives addressing extreme poverty, hunger, primary education, among others, represent real development challenges to the different countries? The charts in Annex B provide the relative positions of various Latin American countries with respect to the indicators adopted globally. The data corresponds to the last available period. These charts demonstrate that Latin America is a heterogeneous region with several countries facing severe challenges to reach even these minimal indicators of well-being. Let us revise some of the indicators.

Even for extreme poverty as defined by the World Bank,<sup>3</sup> the majority of the countries for which this information exists show that more than 10% of their population derives an income of less than one dollar per day; and in some cases this percentage increases to a fifth or a fourth of the population (Paraguay, Ecuador, El Salvador, Honduras). In the most extreme case given by Nicaragua, more than 80% of the population has an income of less than one dollar per day, according to the Human Development Report

2003 published by the United Nations Development Program. One dollar per day is a strikingly low figure for a region at medium levels of development. Regardless, many countries show a significant portion of their populations not even reaching this minimum standard.

In terms of health, the data is more striking: one in four children in two countries (Honduras and Guatemala) show high levels of malnutrition; in another eight countries the proportion of undernourished children under 5 years of age reaches more than 10%. The mortality rates in children under 5 years of age are high in at least three countries (Guyana, Bolivia and Haiti); although, at the same time, other countries (Chile, Costa Rica and Cuba) show rates closer to the developed world. Maternal mortality rates is difficult to measure and the available estimates contain rather large margins of error, especially in rural areas where access to health services is more restricted.

In relative terms, Latin America has a relatively low incidence of maternal mortality. Even so nine countries show fairly high rates, and two (Bolivia and Haiti) show rates well above the median for developing countries.<sup>4</sup> The mortality rate for mothers is closely related to the medical attention that they receive during pregnancy or at child birth; only 58% of the births in the region are attended by physicians while another 27% are attended by specialized personnel such as nurses and midwives. That means that at least 15% of the births impose conditions of high risk on the mothers. These averages hide the great differences that exist among countries and fail to register the lack of medical attention in rural and marginal areas due to their inadequate administrative records. Even at the level of national averages, though, several countries (Peru, Bolivia, Paraguay, Honduras, El Salvador, Guatemala and Haiti) show that less than 60% of the childbirths receive specialized medical assistance.<sup>5</sup>

The public health systems in the region have been very efficient in reducing preventable diseases like malaria and dengue, and have in several countries achieved almost total eradication. The incidence of death due to malaria among children (between 0 and 4 years of age) in Latin America is among the lowest in the world (1 in every 100,000 children) but several countries still suffer a large number of cases (Brazil, Bolivia, Guatemala, Nicaragua, Honduras, Belize, Ecuador, Suriname and Guyana). For tuberculosis, the problem lies in the lack of adequate information to evaluate its incidence level and progression over time. In Latin America, the death rate caused by tuberculosis is among the lowest in the developing world (9 of every 100,000 inhabitants) and its incidence rate in 2001 was also very low (41 of every 100,000 inhabitants). Nonetheless, eleven countries in the region demonstrate high mortality rates for these diseases with a level of incidence which is probably higher than the one reported in available information.

In Latin America in 2002, there were 600 cases of HIV/IADS per each 100,000 people aged between 15 and 49 years. The problem is more severe in the Caribbean, which shows an incidence level of 2,440 infected people and ranks second in the world after Sub-Saharan Africa. Reducing the spread of the epidemic requires that a great deal of attention and resources be given to health and education. The problem is made more

intractable by the social stigma that the disease still conveys in many countries, a factor which renders more difficult detecting the disease and implementing prevention campaigns. Such difficulties are confirmed when only 36% of the women between 15 and 24 years of age having high-risk sexual relations admit to having used condoms even though 77% of them already possess information about the disease.

The goal to halve the proportion of people not having access to clean water is sure to improve the general health of the population while increasing the value of their property. In Latin America and the Caribbean in 2000, 86% of households had access to clean water, even though there was a great divergence between rural (66%) and urban areas (94%). When the information is presented across all countries, the degree of dispersion is even greater. Urban areas, in general, have greater access to clean sources of water, including some countries that have nearly achieved universal levels. The situation is different in the rural areas where only Barbados demonstrates universal access. In the other countries, the coverage in rural areas is well below that existing in urban areas. Perhaps the most dramatic cases occur in Jamaica, Colombia, Brazil and Haiti where access to clean sources of water has regressed in the last 10 years. In addition, the indicator for home ownership is lagging in basically all the countries in the region except Barbados. Latin America still has a large gap to close in order to fulfill the objective proposed in the Millenium Declaration. Improving the home ownership indicator should greatly assist the reduction of poverty in the region to the extent that it augments the household's capacity to access credit, to stabilize their residence and, thereby, to be able to use the house as an asset in the generation of income.

Other indicators included in the MDGs help to track gender equality, including the degree of women's presence in educational systems, in labor markets and in positions of power. In general, Latin America is one of the regions in the world where women have achieved an ample presence in the educational system nearly reaching equality (94 females for each 100 males in primary school). In some countries (Antigua and Barbuda, Nicaragua, Colombia) girls outnumber boys in primary school. However, these educational achievements have not yet been translated in equality of opportunities in the labor markets. In 2001, only 42% of the salaried, non-farm workers were women, with large differences shown across countries. In some countries nearly half of the labor force in these sectors is female (Colombia, Bahamas, Uruguay, Barbados, Jamaica, Brazil and Honduras). However, in other countries less than 35% is female (Bolivia, Peru, Surinam, Dominican Republic and El Salvador).<sup>6</sup> Unless it can be shown that the low level of participation in the non-farm labor markets is a result of the women's personal choices, the low numbers may be an indication of gender discrimination. In addition, the presence of women in the world of politics remains limited. Only three countries in the region (Cuba, Costa Rica and Argentina) show a female representation in congress above 30%; in other countries their presence is rather marginal.

The information reveals the relatively advanced position that Latin America maintains when compared with other areas of the world; it also confirms the great differences that abound within the region when an important subset of countries lag in several of

the human development dimensions contained in the MDGs. This vision of the entire region must be complemented by a disaggregated analysis within each country. The inequality that characterizes the region implies precisely the existence of great differences in the living conditions and economic opportunities present in each country. One approximation is given by the indicator that measures the proportion of national consumption absorbed by the poorest 20% of the population. Even in those countries with the better figures, this indicator shows consumption rates for this quintile barely reaching 5 and 7%. In countries with the worse figures (Colombia, Paraguay, Brazil, Honduras), the rates do not reach 2%.

The point to be highlighted is that the MDGs, even when defined as minimal parameters of development, are relevant for Latin America to the extent that they permit the identification of areas where the basic dimensions of well-being are lagging.

The second guestion that arises in the discussion is the following: to what extent do MDGs as defined globally reflect the characteristics of and opportunities for development in each particular country? To what extent should they be redefined in order to establish tangible and feasible commitments that take into consideration the unique characteristics of each country? After all, to the extent that the MDGs represent a global agenda for development, the goals and indicators likewise reflect a concern towards reaching *global* objectives. This does not imply, however, that all countries have the same starting point and face the same challenges. For the MDGs to be transformed into operational objectives to mobilize resources in each country, they must be interpreted and adapted to the corresponding national realities. A clear example of such adaptation in the region is given by Objective No. 2, which calls for universal primary education for the year 2015 and establishes three indicators for primary school attendance rate, the rate of children that conclude fifth grade, and the illiteracy rate of youth aged between 15-24 years. The charts of Annex B show that practically all the countries in the region have reached a high primary school attendance and literacy rates. Even as certain important challenges remain to improve these rates, Latin America is generally a region that has invested much resources in primary education. Nowadays, the discussion is centered around the persistence of important gaps in the quality of primary education that exist among the different socio-economic groups and geographical zones. MDGs could be adapted to include more ambitious goals towards universal secondary education and improvements in the quality of education. This adaptation, or nationalization, of the MDGs requires the adoption of a broad national consensus over the development priorities and the amount of resources (financial, human, capacities, etc.) that the government can commit to and is prepared to invest. To be realistic, such commitments require that goals be redefined in quantitative and temporal terms and that the proper indicators be selected to monitor progress.

This is perhaps one of the great challenges that remain for the formulation of public policies in the region. National development plans do not always include precise goals that are consistent with the amount of available resources. To achieve a higher level of specificity, which necessarily involves commitments, resource investments and

accountability, what is required is the completion of an inclusive and broad consensus overlapping between different administrations to give long-term continuity to the public policies. The MDGs may represent an interesting opportunity to advance in this direction.

The third question that the MDG agenda poses is the following: which is the level of disaggregation needed to monitor the achievement of the development objectives? Are national averages sufficient to evaluate progress towards meeting well-defined development objectives? Evidently, in one of the most unequal regions in the world, an analysis of averages is not enough to properly account for the living conditions and lack of opportunities present in large social groups. Constructing societies that are economically dynamic and socially equitable requires the identification of development priorities which, in turn, arise from a disaggregated evaluation of the gaps existing in the living conditions and in the structure of opportunities for the different groups and regions within each country. The challenges here are significant not only due to the lack of adequate statistical information but also due to the difficulty embedded in the elaboration of a national consensus that recognizes the inherent structural inequalities.

Averages give a false sense of progress for to reach a goal on the average does not imply, necessarily, to improve the living conditions across broad sectors of the population or regions within the country. In fact, social progress often eludes the poor and the disadvantaged. Only disaggregated analysis can gage with greater accuracy the effort that the country must exert in order to provide minimal development opportunities to those who traditionally have been excluded in terms of education, health and living conditions. Disaggregate information aids in identifying where the resources need to be invested in order to close the existing social gaps.

It is not our intention to demonstrate the great inequalities that characterize the region because that would require, among other things, a more extensive analysis on a per country and per indicator basis. With financing from the Department for International Development (DFID) of Great Britain, the Inter-American Development Bank (IADB) in coordination with the United Nations Development Program (UNDP) has developed a methodology to make available disaggregated data that permits identifying the most persistent development gaps in Latin America on the basis of MDGs calculated from regional household surveys. The database denominated EQxIS can be accessed on the internet at: www.iadb.org/xindicators

To illustrate the usefulness of disaggregated information in tracking MDGs, in the following section we analize a few indicators selected from the database EQxIS.

## Evolution of inequality with a few selected indicators

Six indicators for which EQxIS has data are selected to show the persistence of inequality gaps in some countries of the regions and to evaluate their progression through time. The selected indicators represent different aspects of development.

#### Primary school attendance ratio

At the beginning of the 1990s, the primary school attendance ratio in Latin America was already high when compared to other regions. However, important differences existed depending on household income levels. In countries having the most inequality (Brazil, Nicaragua Guatemala and El Salvador), the difference was between 20 and 27 percentage points. In Brazil, children belonging to the households whose incomes were in the highest 20% showed an attendance rate of 91%, while those in the lowest 20% barely reached an attendance ratio of 64%. The only countries where the attendance ratio was fairly uniform across all income levels are the Dominican Republic, Chile and Peru. See Chart 1.

The advances in the region to guarantee universal access to primary education has been fast. In the last year for which information exists (around 2002), several countries were already very close to that goal, with Panama and Mexico reaching an average attendance ratio of roughly 95%. Only in Venezuela and Nicaragua this ratio has not reached the 90% range. The differences accruing due to varying income levels have also diminished fairly quickly with the exception of Guatemala and Nicaragua. In the latter country, even children belonging to high-income households show attendance ratios of 86%. See Chart 2.

When interpreting this data it is important to realize that the income quintiles were constructed at the national level. Most likely, the rural areas are over-represented in the poorest quintiles, while the richest quintiles are probably concentrated in urban areas. Thus, the analysis presented here also reflects the differences between urban and rural areas.

# Vaccination rates against measles

The vaccination rates against measles furnish information regarding the health status of children. Most likely, the children have no been vaccinated do not have access to other basic healthcare in their first years. Although all countries have made significant advances during 1990-2002, the differences by gender and geographical area are large. Even in highly developed urban zones in Argentina in 2001, only those children in the highest income households showed vaccination rates of around 90%. For those children in the 60% households with lowest income, the rates hovered between 70 and 80%. See Chart 3.

In Ecuador, the vaccination rates remained about the same between 1994 and 2003, with great differences registered between rural and urban zones, and among households of varying income levels: while the vaccination rate was 92% for the children in higher income households, it barely reached 83% for those in lower income levels. See Chart 4.

The dispersion in Paraguay is rather large. In 2001, the vaccination rates were clearly correlated to income levels. In the rural zones, the vaccination rates were very low – barely reaching 50%, particularly among low-income households. See Chart 5. In the last case analyzed, Jamaica showed poor vaccination rates across the board with the best results reaching 70%. See Chart 6.

# Rate of childbirths assisted by qualified personnel

As it might be expected, this indicator shows great differences among women in rural and urban areas. In all countries, this rate is much higher for the urban zones. Ecuador (1994) and Nicaragua (1998) generally have high rates. In Ecuador, while the rate of childbirth assistance for women in the richest quintile was 90%, it was 60% for women in the lowest income quintile. In Peru (2002) and Paraguay (2001) the differences between rural and urban areas was dramatic and, in the case of Paraguay, they were clearly correlated to the income levels. See Charts 7 to 10.

Finally, Bolivia showed an important increase of this rate between 1992 and 2002, primarily among the women belonging to the highest 40% in income levels whose assistance level almost reached 100%. Progress in urban areas is in sharp contrast with childbirth assistance in rural areas. In 2002, less than 10% or poor women in rural areas has access to such assistance. Even women in the highest-income levels had access to such services in 80% of births. See Chart 11.

#### Rate of access to improved water sources

This indicator registered the greatest advances in Latin America for the lowest income quintiles. These quintiles are derived from the national averages in such a way that the rural population predominates in the lower quintiles while the urban population is concentrated in the higher ones. Charts 12 and 13 show that the disparity in access rates is determined by the urbanization level of each country.

In 1990, the access rates for the poorest quintiles ranged from 16% in Paraguay to 84% in Chile and Costa Rica. For the richest quintile, the rate was 84% in Paraguay and 100% in Panama and Brazil. Any further improvement in the access rates had to favor those families in the lower quintiles. Accordingly, by 2002, the access rates for the poorest quintiles had improved to 45% in Paraguay and to 93% in Chile and Costa Rica.

Although much progress has been made in closing the access gaps significant inequalities persist in some countries. The most extreme cases are Peru and Paraguay where only 45% of the poorest families have access to clean water sources. The differences in Nicaragua, Honduras, Panama, El Salvador, Guatemala and Ecuador are also significant.

### Rate of access to improved sanitation facilities

This MDG indicator shows some of the largest inequalities in Latin America with larger differences existing than those present in the access to improved water sources. In the early 1990s, coverage for the lowest income quintile did not reach 10%. Such was the case in Honduras, El Salvador, Guatemala and Paraguay (See Chart 14). On the other hand, other countries had reached access rates in excess of 90% for the richer quintiles concentrated in urban zones (Venezuela, Costa Rica, Chile, Mexico, Colombia and Panama).

In Guatemala and El Salvador, the rate of access only reached 12% among the lowest income quintile, although countries like Chile, Costa Rica, Mexico, Venezuela and Colombia practically had complete coverage for the highest quintile. See Chart 15.

# Percentage of women in non-agricultural wage employment

This percentage has improved in virtually all countries in the region. Charts 16 and 17 demonstrate that such advance is due in part to the rising opportunities that women in the lower income quintiles have seen. The data follows closely the incorporation of these women into domestic work which is characterized by low salaries, lack of benefits and no job security. Once this type of work is excluded, see Charts 18 and 19, the progress is more limited. On the other hand, women with better educational levels have been able to enter successfully into the labor force. They now represent nearly half of the salaried labor force in the non-agricultural sectors (Colombia, Jamaica, Panama and Brazil).

In this discusion, lack of data on gender driven wage differentials and on labor conditions prevent making a judgment as to what is the quality of jobs offered to women. At any rate, we know that the rising participation of women in the labor force indicates a greater degree of acceptance in non-agricultural, salaried positions for the better educated women. Slower progress has been made by lower educated women once domestic work is excluded.

# Projected trends in MDG indicators is affected by inequality

Having reviewed some indicators in the previous section, the importance of disaggregation to the tracking of progress in the MDGs must be emphasized. With societies as unequal as those in Latin America, evaluating averages is not sufficient to capture the diversity of conditions in the region. Significant progress has certainly been made during the last few years which point towards more equitable conditions in the basic development indicators contained in the MDGs. Still, significant differences persist when the analysis is made incorporating a disaggregation on the basis of gender, income quintiles, urban and rural areas, race and ethnicity. The persistence of large differences in the evolution of MDG indicators also affects the prospective achievement of each goal.

Through a simple exercise, this section seeks to demonstrate that the projections to achieve the millenium goals by the year 2015 could be over-estimating the actual possibilities of fulfillment, particularly in those indicators where the levels of inequality are the highest.

Most projections towards fulfillment of the MDGs are based on linear extrapolations from the rates observed since 1990 to the end point in 2015. One reason which explains the selection of this method is the lack of quality information that would facilitate a better estimation of the progress. This methodology has sent a clear message in the sense that efforts must be intensified if the objectives are to be reached. However, crude extrapolation limits the possibilities of advancement in

societies which contain great inequalities among different population groups. It is a well-known fact that improving social indicators is faster at the initial stages but as we get close to the universal provision of services further progress slows down. It is also well-known that initial conditions of inequality make it more difficult to design strategies to promote pro-poor growth and poverty reduction, thereby slowing down progress in the basic indicators of well-being.

In this section, we are going to use the primary school attendance rate to illustrate the way inequality affects the projection of progress towards the achievement of the MDGs. Based on the progress made in the last few years, most reports conclude that Latin America is on track to reach the objective of universal primary education for all children in the region by the year 2015 (Cepal, 2005; IDB, 2005). Many countries have certainly reached very high rates of school attendance: Chile, Costa Rica, Jamaica, Mexico, Panama, Peru. But in many other countries in the region there are between 10 and 18 percent of children who do not attend primary school.<sup>7</sup> But even in those countries where progress has been slower, linear projections predict that all countries will be able to achieve the MDG goal of universal primary education.

Once disaggregated information is introduced into the analysis, the projections of fulfillment will need to be revised; most likely progress will be slower. Based on simple assumptions in this section we make projections on the probability of achieving universal access to primary education in 2015. When we incorporate income differentials among children the rate of progress in this indicator will also be slowed down and, consequently, the probability of achieving universal primary education will likewise be reduced.

We utilize an *achievement* function developed by Kakwani (1992)<sup>8</sup> to consider the fact that progress occurs more rapidly whenever the attendance rates are lower and slows down whenever the attendance rates reach universality. In the database EQxIS (<a href="www.iadb.org/xindicators">www.iadb.org/xindicators</a>) primary school attendance rates are disaggregated by income quintiles. We then make a projection of the value that this rate will show for the lowest and the highest income quintiles. Results illustrates the fact that the increase of school attendance ratios is faster for low income groups and much lower for high income groups. Linear projections would predict that the attendance ratio for the lowest income children would rapidly overtake the rate for the highest income children.

In the charts shown in Annex C, it is clear that assuming the same pace of increase in the school attendance rates that have existed since the beginning of the 1990s to the last year for which data exists, the school attendance rates for the children in poorer families will fairly soon be higher than for the children in richer families. In these charts we show that, at the pace observed thus far, the school attendance rates would become equal for the poorer and richer children in Colombia by 2004, in Guatemala by 2008, in Honduras by 2003, in Nicaragua by 2014 and in Paraguay by 2006. From that point onwards, the attendance rate of the poorer children would surpass that of the richer ones. These counter-intuitive results are reached when linear projections are made on the basis of growth rates that do not take into consideration the different

starting points for each income quintile.

To correct this false result, any projection of future achievements must incorporate the inequality that exists among the different population groups. The achievement function that we utilize imposes a restriction on the growth indicator for the poorest income quintile so that it may never assume higher values than those achieved by the highest income quintile. When this is done, there can be a rather significant downward adjustment on the achievement levels for the poorest quintile. As a consequence, the average rate of change for the indicator also decreases. As can be seen in the charts, the attendance rates for children in all the income quintiles tend towards the same point by the year 2015. The difference, however, is that the goal of universal primary education is not necessarily met.

These corrections modify the projection of achieving the various MDG indicators. What this exercise suggests is that all such projections must take into account the great inequality that exists in Latin America among the different population groups. Once the proper adjustments are made, it is probable that the rates of fulfillment in several indicators will need to be lowered from current calculations. Thus, the possibilities of reaching the MDGs in the year 2015, particularly in those countries with the widest gaps in their inequalities, will require an additional effort in terms of budgets and efficiency in the delivery of public services.

#### Final considerations

The main point raised thus far is that the MDGs represent an opportunity to consolidate an agenda of national priorities that include basic human development dimensions to improve the capacity of individuals and their families to meet their basic needs. In this sense, the MDGs also present an opportunity to generate conditions for stable growth with equity and social inclusion. The international consensus generated by the Millennium Declaration represents an opportunity to improve the coordination of policies and programs as well as the allocation of resources around well-defined objectives, with quantitative goals and medium-term tracking indicators.

Latin America as a region has made substantial advances in the basic indicators of well-being at the aggregate level. These achievements must be placed in the proper perspective, however, by disaggregating the results within each country by region and income levels. One of the greatest challenges in the coming years will be the use of disaggregated information in the design of policies and programs and in the allocation of resources to close the gaps. Achieving a national version of the objectives defined by the MDG agenda will lay a more solid foundation for the construction of a national consensus on development that is socially inclusive. Such exercise will not be realized without disaggregated data that makes systematically visible the great inequalities across the population groups in terms of income levels, gender, race/ethnicity, and zone of residence.

Even though the MDG agenda does not exhaust the discussion on development for the region, it does provide a starting point to reach a consensus with clear goals, timelines and tracking indicators.

Carefully tracking disaggregated information highlights the gaps that have been perpetuated in the development history of Latin America. Incorporating such data into the discussion of public policies opens a different departure point for identifying priorities and assigning resources. It will point the way towards building inclusive societies where progress is measured not only by aggregate results but also by its contribution to reducing inequality in the essential dimensions of human development.

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<sup>2</sup> Annex A lists the MDGs as they were defined on a global basis.

<sup>3</sup> The World Bank has proposed a poverty line of 1 dollar per day to measure extreme poverty. This poverty line corresponds to the value of a basic food basket in poor Asian countries, It was adopted in the poverty report that was published in 1990 by the World Bank. To facilitate international comparisons, the value is adjusted for purchasing power parity (PPP). Today, the poverty line of 1 dollar per day corresponds to 1.08 PPP dollars.

<sup>4</sup> Data from the Human Development Report 2003. UNDP

- <sup>5</sup> This information may be found in the charts with the MDG indicators in Annex B.
- <sup>6</sup> This indicator does not show the differences in occupation that may exist between men and women nor the differences in salaries that may exist between the genders. Both of these are also important factors for completely evaluating the conditions of female insertion into the labor force.
- <sup>7</sup> This indicator does not necessarily imply the fulfillment of the MDG goal because it does not register the primary school drop out rates; it only measures school attendance rates.