

The Millennium Development Goals Summit 2010

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Sightsavers

In 2000 all world leaders signed up to achieving eight Millennium Development Goals¹ (MDGs) by 2015, but progress on many of these remains seriously off-track. 2010 is a decisive year for international development, with a focus on the United Nations High-level Plenary Meeting on the MDGs – or MDG summit. This summit marks a key opportunity for all governments to demonstrate a continuing dedication to the fight against global poverty. The MDGs are the primary cooperative framework for international development. Most bilateral and multilateral agencies use the MDGs as the basis for allocating their development aid. However, groups or issues not explicitly addressed within the MDGs can be neglected as a result. This briefing sets out the rationale for addressing three important areas that are currently missing in the MDGs:

1. The inclusion of disabled people² in international development
2. The inclusion of disabled children in quality primary education (MDG 2)
3. Specific attention to the neglected tropical diseases (NTDs) in MDG 6

1. The inclusion of disabled people in international development

Key facts

- Disabled people account for 1 in 10, or around 650 million, of the world's population and 1 in 5 of the world's poorest³.
- 80% per cent of disabled people live in developing countries⁴, of which 82% live below the poverty line⁵.
- Approximately 80% of disabled people are unemployed⁶.

In developing countries, disabled people experience disproportionately high rates of poverty. They face exclusion from mainstream social, economic and political life, with limited access to key areas of development, including health, education, food, shelter, and employment. In short, disability affects all eight of the MDGs, and the exclusion of disabled people will seriously undermine efforts to achieve the MDGs.

International momentum is building to include disabled people within development. Most significantly Article 32 of the UN Convention on the Rights of Persons with Disabilities (CRPD) highlights the need for “international development programmes” to be “inclusive of and accessible to persons with disabilities.” Alongside this, in the lead-up to the MDG summit, the UN passed a resolution calling on ‘governments and United Nations bodies and agencies to include disability issues and persons with disabilities in reviewing progress to achieve the Millennium Development Goals⁷’ and the UN Secretary General’s report ‘Keeping the Promise’ lays out an agenda for 2010 – 2015, which explicitly recognises that disabled people are among the most vulnerable and that without specific focus on their inclusion, development programmes will continue to ignore them. →

Action

To ensure that the MDGs reach disabled people, development partners⁸ need to:

- Ratify, domesticate and implement the CRPD, and ensure development partners' support adheres to Article 32
- Ensure data collection and monitoring of the inclusion of disabled people in development programmes is included within mainstream MDG planning processes and country reports
- Support the UN General Assembly Resolution 64/131 in all MDG processes leading up to and beyond the MDG Summit and implement the recommendations of the report of the Secretary General⁹ through the implementation of the World Programme of Action concerning 'Disabled Persons and the CRPD'. Specifically:
 - Ensure that disabled people and disabled people's organisations are included in planning and implementing development policies and programmes
 - Build national capacities for data collection and monitoring of the inclusion of disabled people in development programmes
 - Ensure disabled people and issues affecting them are part of national plans, reports and tools designed to contribute to the full realisation of the MDGs

2. The inclusion of disabled children in quality primary education

Key facts

- One-third of the 72 million children currently out of school are disabled, and 90% of disabled children in developing countries do not go to school¹⁰.
- MDG 2 is the only universal goal and will therefore be impossible to achieve unless disabled children are explicitly brought into the equation.
- World Bank research suggests disability has a more substantial impact on participation in education than gender, rural residence or household economic status¹¹.

Education is a basic human right; this is firmly established in several different international human rights documents that have global endorsement¹². International conventions state that primary education should be free and compulsory for all children without discrimination. This underpins commitment to MDG 2: Universal Primary Education, where there has been good progress. Yet disabled children have been left behind.

Case study

Babul Miah

Babul, who is eight, has been blind since birth. He is from a very poor family living in Narshingdhi District, Bangladesh. Even though he only lives a five minute walk from the local school, for years Babul could only dream of attending. Babul was fortunate to be identified by Sightsavers' partner 'Assistance for Blind Children' (ABC) and is now able to attend the Purba Sayed Nagar School. Before Babul enrolled in the school, ABC worked with the teachers so they were able to include and teach children with visual impairments, and they also sensitised Babul's class mates and the wider community. He is pictured here with his best-friend, Shaikat.



Tim McDonnell/Sightsavers

Education of disabled children is essential for poverty alleviation and human development. Exclusion from education is a significant factor in the high levels of poverty often experienced by disabled people and their families. Denying disabled children access to a quality education greatly constrains their opportunities to gain independence and skills. The CRPD reaffirms the right of disabled people to a quality education, specifically their right to inclusive education alongside other children in the communities in which they live.

The Education for All (EFA) Fast Track Initiative (FTI) is the main framework for international support to education. Recent steps have been taken to strengthen the FTI's focus on equity and inclusion, essential if EFA is to reach children who are currently out of school.

Action

Education systems need to include and provide specific support for disabled children, allowing them to gain independence and escape poverty. Development partners should put inclusion at the heart of their education support; ensuring aid tackles the barriers faced by disabled children. Development partners should:

- ensure a reformed FTI meets the needs of all children by actively supporting use of the new Equity and Inclusion Guide within education sector planning and reviews and including specific indicators on disabled children within the FTI indicative framework.
- ensure education plans tackle the causes of marginalization through strategies to promote accessibility and develop an inclusive learning environment, and include adequate funding for these measures in education sector budgets and development assistance.
- ensure international cooperation supports the development of education systems that are accessible to and inclusive of disabled people.
- collect data on access to education by children with disabilities as part of monitoring for MDG 2.

3. Specific attention to the neglected tropical diseases in MDG 6

Key facts

- The neglected tropical diseases are a group of parasitic and bacterial infections¹³ that affect 1.4 billion of the poorest people on the planet.
- Only 0.6% of overseas development assistance for health is allocated to NTDs¹⁴.
- It is estimated that 57 million disability-adjusted life-years (DALYs) are lost every year to NTDs. Recent calculations suggest that this could be even higher¹⁵.

MDG 6 sets out to combat HIV/AIDS, malaria and other major diseases of poverty, yet little attention has been paid to the 'other' diseases. This has led to a range of poverty-related diseases being labeled as the neglected tropical diseases (NTDs). Because of their adverse affects on child development, maternal morbidity and worker productivity, the NTDs have a major impact on poverty and their disease burden is more than double that caused by tuberculosis¹⁶. This negative impact is recognised by the UN Secretary General, who recently stated that the intervention on NTDs is key to progress on the health-related MDGs.

NTDs are a potential success story in development. Public-private partnerships¹⁷ have increased country and international agency commitment and effective intervention strategies can lead to dramatic declines in infection from these debilitating diseases¹⁸. Programmes to treat, control or eliminate NTDs are recognised as some of the most cost-effective in public health.¹⁹

Case study

Community Directed Treatment – Kaduna State, Nigeria

Seven-year-old Helen is measured by a community distributor who is trained to distribute the drugs that prevent onchocerciasis. Community Directed Treatment (CDT) of onchocerciasis is an excellent example of collaboration between communities, NGOs, governments, multilaterals and corporations in the health field. As a result of effective implementation of the model developed, the goal of elimination of onchocerciasis is now within reach. A recent research survey sponsored by UNDP and the WHO showed increased efficiency of programmes tackling other conditions when combined with CDT, including uptake of insecticide-treated bed nets for malaria.



Kate Holt/Sightsavers

Action

Urgent action must be taken towards NTD control and elimination. To ensure at-risk populations receive the highly cost-effective support and attention they need, development partners should:

- Explicitly incorporate the NTDs within MDG 6 by including indicators on prevalence, incidence and numbers of people treated in target 6c. This will provide a stronger case for donors to provide adequate funds for NTDs and for governments to include NTDs within their health plans and monitoring.
- Support the roll-out of sustainable strategies such as CDTI and the WHO SAFE²⁰ strategy, ensuring that all elements of these programmes, not only mass drug administration, receive adequate support and are linked to initiatives under MDG 7, Target 7c.
- Ensure continued support to NTD drug administration in line with MDG 8, target 18
- Encourage G8 governments which have not contributed significant funds towards NTD control and elimination, to do so in line with 2009 G8 commitments.

Contact us

Sightsavers Policy Briefs are a series of documents which highlight key policy issues relevant to our work in international development. For more information about our work, or to find out about other areas of research and publications, email policy@sightsavers.org

Endnotes

¹ For general information about the MDGs please visit <http://www.undp.org/mdg/basics.shtml>

² In this document, we use the terms accepted in the UK eg “disabled people”. “People with disabilities” is the accepted term internationally eg “The UN Convention on the Rights of Persons with Disabilities”.

³ Elwan A. (1999) *Poverty and Disability: A Survey of the Literature*, World Bank: Washington D.C.

⁴ UN: Some Facts about Persons with Disability, available at <http://www.un.org/disabilities/conventions/facts.shtml>

⁵ ILO (2009) Promoting the Employability and Employment of People with Disabilities through Effective Legislation: Fact Sheet; ILO: Geneva.

⁶ The International Labor Organization (ILO), “Time for Equality in Work” (2003)

⁷ UN, ‘Realizing the Millennium Development Goals for persons with disabilities’ UN Resolution A/C.3/64/L.5/Rev 1, December 2009,

⁸ Development partners is a generic term used to mean state, multilateral and non-state actors involved in development programming, policies and implementation.

⁹ 64/180 ‘Realizing the Millennium Development Goals for Persons with Disabilities’

¹⁰ UNESCO, Children with Disabilities. <http://www.unesco.org/en/inclusive-education/children-with-disabilities>

¹¹ Filmer, D. (2005) Disability, Poverty and Schooling in Developing Countries, World Bank: Washington DC

¹² The Universal Declaration of Human Rights, Article 26

(1948), and the Convention on the Rights of the Child, Article 28 (1989).

¹³ The neglected tropical diseases include three soil-transmitted helminthiasis (ascariasis, hookworm infections, and trichuriasis), lymphatic filariasis, onchocerciasis, dracunculiasis (guinea-worm disease), schistosomiasis, Chagas’ disease, human African trypanosomiasis, leishmaniasis, Buruli ulcer, leprosy, and trachoma.

¹⁴ Liese B, Rosenberg M, Schratz A. Programmes, partnerships, and governance for elimination and control of neglected tropical diseases. *Lancet* 2010; 375: 67–76.

¹⁵ Conteh, L., Engels, T. and Molyneux, D. (2010) ‘Socioeconomic Aspects of Neglected Tropical Diseases’, *The Lancet*, Volume 375, No 9710

¹⁶ Hotez, PJ, Kamath, A. Neglected Tropical Diseases in Sub-Saharan Africa: Review of Their Prevalence, Distribution, and Disease Burden. *PLoS Negl Trop Dis* 3(8): e412. doi:10.1371/journal.pntd.0000412

¹⁷ Public private partnerships include the pharmaceutical industry, academic and research institutions, donors, Non-Governmental Organisations and local communities

¹⁸ “The Living Proof Project “ Progress Against Neglected Tropical Diseases; winning the fight against deadly diseases” <http://www.livingproofproject.org>

¹⁹ D.H. Molyneux, “‘Neglected’ Diseases but Unrecognised Successes—Challenges and Opportunities for Infectious Disease Control,” *Lancet* 364 (2004): 380–383.

²⁰ Surgery, Antibiotics, Face washing, Environmental hygiene.

Sightsavers works in developing countries to combat avoidable blindness and promote equal opportunities for disabled people

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