

Millennium Development Goals (MDGs) and The Progress of Bangladesh to the Achievement of Those: An Evaluation

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***Abstract:** A sustainable development of all nations of the world is a prime responsibility of the United Nations (UN). Since inception, UN is trying in this respects. Unfortunately, the poor countries are becoming poorer. Some of the poorer countries are severely overwhelmed by different problems. Consequently, in 2000 UN declared eight goals to be achieved within 2015, known as Millennium Development Goals. Bangladesh is trying to achieve those and in some respects the progresses are satisfactory. The study will represent a picture of progress and effort in this respect.*

Introduction:

MDGs are the vital declaration of the United Nations (UN) which have been given much emphasis from the very inception, i.e., year 2000. The millennium declaration highlights that developed and developing countries will work as partners to achieve the goals by 2015. It envisages a world with lower poverty and hunger, gender equity, lower child mortality, improved maternal health, lower incidence of HIV/AIDS, malaria and tuberculosis, etc. Sustainable environment for the future, and partnership between developed and developing states will also be emphasized. The MDGs provide a framework of targets towards which the countries should move. Bangladesh continues to mainstream MDGs in her national development goals as embodied in successive Poverty Reduction Strategy Papers (PRSP). Incidentally, Bangladesh has consistently put poverty reduction at the forefront of its development strategy. The 'National Strategy for

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Accelerated Poverty Reduction– 1’ (NSAPR-I) FY 2005-07 and NSAPR II (revised) (/ PRSP – I & II) FY 2009-11 envisage some blocks of strategies supplemented by several supporting strategies to achieve accelerated poverty reduction. Some of these strategies emphasize employment generation, human resource development comprising education and health, women’s advancement and rights, children’s advancement and rights, good governance, safe water and sanitation, and environment and climate change. These strategies reflect the development priorities of the government and also coincide with the MDGs.

Over time Bangladesh has sought to achieve MDGs along with other development goals through a set of policies and strategies. It has been observed that the efforts have resulted in progress towards achieving NSAPR = National Strategy for Accelerated Poverty Reduction; HIV = Human Immunodeficiency Virus; AIDS = Acquired Immune Deficiency Syndrome these goals, though the progress is not uniform and speedy for each goal. It is a matter of gratification that Bangladesh has made a strong stride in the achievement of some of the goals of MDGs. Reduction of the child mortality, and gender parity in schooling in primary and secondary levels of education and achievement of compulsory primary education the worth-mentionable leap in the attainment of MDG targets. Bangladesh seems on-the-right-track in achieving the targeted prevalence of poverty.

Objective (s) of the Study:

The study aims at to highlight the goals of MDGs and the progresses achieved till now, and the trend of progress. MDGs are highly ambitious UN plans to achieve accelerated development for the member countries. The implementation period is fifteen years (2001 - 15). So achievement trend needs to be appraised and monitored.

Methodology of the Study:

The study is a desk research. It uses secondary sources of data to evaluate the achievement of MDGs. Data from secondary sources, and tables have been used for analysis and evaluation.

Millennium Development Goals (MDGs):

The elaborated form of MDGs is Millennium Development Goals. MDGs are a set of targets to be achieved by the year 2015 launched at the Millennium Summit in New York in September, 2000, that was adopted by 189 countries. Since then a broad international consensus has grown up that they are a useful yardstick for efforts by the Governments, Donors and NGOs to promote development worldwide.

Eight Goals of MDGs:

Since 1990, there has been a shift in the development disclosures that economic growth is not the only way to improve the well being of poor nations, rather human development indices are other means of development framework to reduce poverty and enhance wellbeing of poor people (Fukuda, 2004). The MDGs includes eight core goals to be achieved by 2015. The goals that are engrossed in the Millennium Summit are given beneath (Table # 01)-

Table 01: Eight Goals of MDGs

<i>Goal-1</i>	Eradicate extreme poverty and hunger
<i>Goal-2</i>	Achieve universal primary education
<i>Goal-3</i>	Promote gender equality and empower women
<i>Goal-4</i>	Reduce child mortality
<i>Goal-5</i>	Improve maternal health
<i>Goal-6</i>	Combat HIV/AIDS, malaria and other diseases
<i>Goal-7</i>	Ensure environmental sustainability
<i>Goal-8</i>	Develop a global partnership for development

Targets set up for the goals to be achieved:

Each and every goal is with some specific number of targets. The targets that are taken up for the smooth attainment of the goals are jotted down below-

Table 02: Details of Eight Goals of MDGs

GOALS	TARGETS
Eradicate extreme poverty and hunger	<ul style="list-style-type: none"> • Halve, between 1990 and 2015, the proportion of people below poverty line • Achieve full and productive employment and decent work for all • Halve, between 1990 and 2015, the proportion of people below hard core poverty line
Achieve universal primary education	<ul style="list-style-type: none"> • Ensure that by 2015, children everywhere will be able to complete a full course of primary schooling
Promote gender equality and empower women	<ul style="list-style-type: none"> • Eliminate gender disparity in primary and secondary education preferably by 2005, and in all levels of education no later than 2015
Reduce child mortality	<ul style="list-style-type: none"> • Reduce by two-third, between 1990 and 2015, the mortality rate of children under five years
Improve maternal health	<ul style="list-style-type: none"> • Reduce by two-third, between 1990 and 2015, the maternal mortality ratio • Achieve by 2015, universal access to reproductive health
Combat HIV/AIDS, malaria and other diseases	<ul style="list-style-type: none"> • Have halted by 2015 and begun to reverse the spread of the HIV/AIDS • Have halted by 2015 and begun to reverse the incidence of malaria and other diseases
Ensure environmental sustainability	<ul style="list-style-type: none"> • Integrate the principles of sustainable development into country policies and programs and reverse the loss of environmental resources • Reduce bio-diversity loss by 2010, and a significant reduction in the rate of loss • Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation • By 2010, to have achieved a significant improvement in the lives of at least 100 million slum dwellers
Develop a global partnership for development	<ul style="list-style-type: none"> • Develop further an open, rule-based, predictable, non-discriminatory trading and financial system • Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term • In co-operation with the private sector, make available the benefits of new technologies, especially information and communications.

But it is to point out here that each country is allowed determines the targets for the achievement of the MDG goals and the indicators are taken up as per the suggestions of the experts of that country. Some of the targets or indicators may absorb new incarnation (Table 02).

Progress made in the recent years:

Bangladesh is making true endeavours to achieve the desired targets as per the time schedule. But due to the scarcity of resources and proper financial support, we embrace insignificant success in the path of attainment of MDGs. This report is bestowed with the information of The Millennium Development Goals-Bangladesh Progress Report 2009 and other recent reports published on MDGs.

Progress made with respect to Goal-1:

The first goal of MDGs is about poverty reduction or alleviation. Poverty is a multidimensional concept. So naturally it never subsumes a specific number of indicators. Progress Report-2009 included some indicators which are very crucial for the measurement of poverty incidence. Due to paucity of latest survey reports we have used information available to us. There may have heterogeneity in the information; however considerable improvement is witnessed both from the information given input here and from information going to be conjectured after the reference period.

Table 03: Progress made with respect to Goal-1

<i>Goal-1</i>	<i>Indicators</i>	<i>Base Year</i>	<i>Current Status</i>	<i>Target Destination</i>	<i>Remarks</i>
Eradicate Extreme poverty	Proportion of people below income US \$ 1 per day	58.8%	38.7 (2008)	29.4%	→
	Poverty gap ratio	17.2%	9.0 (2008)	-	→
	Share of poorest quartile in national consumption	6.5		na	-
	Prevalence of underweight children (under 5 years of age)	67%	41.0 (BDHS 2007, UNICEF 2008)	33	↓
	Employment to population ratio (%)	48.5	59.3	For all	↓
	Population below minimum level of dietary energy consumption (%)	28	19.5	14	↓

→: on-track; ↓: Not Achievable; UNICEF: United Nations Children's Fund; BDHS - 2007 = Bangladesh Demographic & Health Survey 2007; na = not available.

Some of the above on-the-track indicators show the fact that Bangladesh is on the hard endeavours to mitigate the poverty curse within the time-bound. It is also evident that some indicators indicate that it is hardly possible to reach the target point within the deadline.

There is indication that Bangladesh is on her way to achieve targeted prevalence of poverty by 2015, However, meeting the target of hunger within the given time frame remains uncertain. Rising inequality is offsetting some of the gains in poverty reduction. There are also pockets of high prevalence of poverty and regional variation in poverty. The unemployment rate has been low, but there is widespread underemployment in the economy (Table 03).

In this regard, the research of 'Unnayan Onneshan' predicts that the country will take another 81 years to **enlightment poverty and 24 years to attain MDG-1 (Titumir Rashid, 2006)**.

The key challenges to future poverty reduction include lack of programme coordination and harmonization, structural constraints, lack of diversity in food crop, chronic under-nutrition in children, small pockets of high poverty; and weakness lies in proper targeting and attaining efficiency.

Future priorities will focus on enhanced agricultural production, crop diversification, comprehensive land management, comprehensive urban policy, improving effectiveness of Social Safety Nets, implementing nutrition and health programmes, pro-poor employment generation, reducing energy shortage, and improving governance.

Progress made with respect to Goal-2:

The 2nd goal of MDGs is achieving universal primary education, i.e., compulsory primary education for all children. Significant amelioration has been made in primary education towards achieving the National Enrolment Rate (NER) target in primary education. However, it will be difficult to meet the targets for the proportion of pupils completing the primary school cycle, as well as to achieve the desired literacy rate of 15-24 year olds by 2015.

But to fulfill this goal, it will require development of basic infrastructure for primary as well as social inclusion to ensure the rights of the marginalized and disadvantaged people of Bangladesh. (Asad, Asadz-za-man, 2009, **Millennium Development Goal and Education: Bangladesh Perspectives**).

Table 04: Progress made with respect to Goal-2

Goal-2	Indicators	Base Year	Current Status	Target Destination	Remarks
Achieve universal primary education	Net Enrolment Rate in primary education	73.7	91.9 (2008) 99.40*	100	→
	Proportion of pupils starting class 1 who reach class 5.	42.2	54.9 (2008)	100	↓
	Adult (15+ years) literacy rates.	36.9	58.3 (2007)	-	↓

The education sector faces significant challenges in achieving the targets which include enrolling the last 10% of the children, ensuring survival rate to grade V, improving quality of primary education, increasing share of education in government budget, and increasing coverage and improving quality of adolescent and adult literacy programmes.

Future priorities will focus, among others, on increasing the share of education in government budget, enhancing the quality of education at all levels, improving school infrastructure, building new child friendly schools and appointing qualified and skilled teachers, introducing one year pre-primary education as an integral part of education, developing national unified curriculum and providing meaningful and quality lifelong learning to adults (Table 04).

*A report of a survey going to be published which is conducted by the Department of Primary Education, The Daily Prothom Alo, 30th April-11; as per the survey, total children = 1,91,39,487, total enrolled = 190,26,000, of the total non-enrolled 12,634 are physically & mentally handicapped, SSNs = Social Safety Nets, NER = Net Enrolment Rate.

Progress made with respect to Goal-3:

The 3rd goal of MDGs is about equality or parity of enrolment in primary and secondary education. Bangladesh has achieved gender parity in primary, and secondary education together with being on track with respect to percentage of women employed in the agriculture sector. With 76 percent boys and 24 percent girls, Bangladesh, however, lags behind achieving gender parity in tertiary education. Non-agricultural wage employment

for women has increased at a slow rate. There has been some progress in the proportion of women elected as Member of Parliament along with increase in the number of reserved seats. Women suffer from a host of socio-cultural vulnerabilities like early marriage, trafficking, dowry, psychological and physical violence, acid throwing and eve-teasing and sexual harassment towards adolescent girls.

Table 05: Progress made with respect to Goal-3

Goal-3	Indicators	Base Year	Current Status	Target Destination	Remarks
Promote gender equality and empower women	Ratio of girls to boys in primary, secondary, tertiary education*	0.83	1.08 (2007)	1.0	→
		0.52	1.08 (2006)	1.0	→
		0.37	0.61	1.0	↓
	Ratio of literate females to males 20 to 24 years old.	42:65	0.61 (2006)	1.0	↓
	Share of women in wage employment in the non-agricultural sector	19.1	14.6 (2005)	50	↓
	Proportion of seats held by women in national parliament	12.7	19.0 (2009)	33	→

Significant challenges exist in the way of achieving MDG-3. These include creating effective and efficient linkage between different relevant ministries for addressing women and development issues, and addressing various socio-cultural factors that underpin their vulnerabilities. The promotion of gender equality and the empowerment of women require fundamental transformation in the distribution of power, opportunities, and outcomes for both men and women. Special emphasis needs to be put on formulation, adoption and implementation of laws and policies, bringing social change to reduce vulnerabilities, encouraging evidence based programming, providing well targeted and efficient social protection, and gender mainstreaming (Table 05).

Progress made with respect to Goal-4:

The 4th goal of MDGs is about reduction of child mortality, which is high in Bangladesh like other developing and ‘Least Developed Countries’ (LDCs). Remarkable decline has taken place in under-five mortality rate and infant mortality rate in Bangladesh since 1990. Measles immunization coverage has increased from 54 percent in 1991 to 83 percent in 2009. There are, however, wide regional differences in all three indicators. Some of the disquieting features are the slow progress of neonatal death and high prevalence of under-nutrition.

In spite of progress on several fronts significant challenges remain in the way of meeting MDGs.

These include proper implementation of policies, improving delivery of healthcare services, limited supply of technical and managerial manpower, limited supply of drugs and commodities, and lack of information for making strategic and policy level decision. Future priorities include establishing an enabling policy environment, developing relevant strategies, increasing immunization coverage, ensuring quality home and quality newborn and child care services, & promoting demand for services (Table 06).

Table 06: Progress made with respect to Goal-4

Goal-4	Indicators	Base Year Position	Current Status	Target Destination	Remarks
Reduce child mortality	Under-5 mortality rate (deaths per thousand live births)	151	67.0/MICS`09 53.84/SVRS`08 65.0/BDHS`07	48.0	→
	Infant mortality rate (deaths per thousand live births)	94	45.0/ MICS`09 41.26/SVRS`08 52.0/BDHS`07	31.3	→
	Proportion of 1-year-old children immunized against measles, percent	54	82.8/BECES`09 83.1/BDHS`09	100	→

*Done with Gender Parity Index (Girls / Boys); MICS`09 = Multiple Indicators Cluster Survey 2009; SVRS`8 = Sample Vital Registration Survey 2008 done by BBS; BECES = Bangladesh EPI Coverage Evaluation Survey 2009.

Progress made with respect to Goal-5:

The 5th goal of MDGs is about reduction of maternal mortality, a severe position like other poor countries. Maternal Mortality Rate (MMR) declined by 40 percent during the 1990-2005 period and remained stable around 350 per 100,000 in the following four years. Wide differences are observed in MMR across regions as well as income classes. The proportion of child birth attended by skilled birth attendants increased substantially, but it is still very low, 1 is to 4 births are attended by SBAs. The Contraceptive Prevalence Rate (CPR) has increased at a complacent rate. The adolescent birth rate has declined from 77 per 1000 births to 60 per 1000 births during the same period. Antenatal care coverage (ANC) (at least four visits) is very low – only one in five women receive the recommended visits. ANC shows wide differences across income classes and regions. About 17 percent married women currently have unmet need for family planning services.

Several challenges stand in the way of achieving MDG-5 which include inadequate coordination between

Table 07: Progress made with respect to Goal-5

Goal-5	Indicators	Base Year	Current Status	Target Destination	Remarks
Improve maternal health	Maternal mortality ratio (deaths per 100,000 live births)	570	194.0 / BMMS`10 351*	143	↓
	Proportion of births attended by skilled health personnel	5	26.54 / BMMS`10	50% by 2010	↓
	Contraceptive prevalence rate	39.7	59.0*		-
	Adolescent birth rate (per 1000)	77	33.0 (BDHS `07)		-
	Antenatal care coverage (at least 01 visit)	27.5	60.3*	100	Will be closed
	Antenatal care coverage (at least 10 visit)	5.5	20.4 (BDHS `07)	100	↓
	Unmet need for family planning	19.4	17.1 (BDHS `07)		-

*The Millennium Development Goals-Bangladesh Progress Report 2009; BDHS 2007 = Bangladesh Demographic & Health Survey 2007, SBA = Skilled Birth Attendants.

Health and family planning care services, improper skill mix and insufficient number of health workforce, sector planning based on insufficient data, inadequate government funding, and underlying socio-cultural factors. Future priorities will focus on ensuring “continuum of care”, improving availability and accessibility to quality MH/RH, reinvigorating family planning programme, strengthening service facility, expanding good practices and human resource development* (Table # 07) .

Progress made with respect to Goal-6:

The 6th goal of MDGs is about prevention of HIV infection, a severe disease threatening human existence in some of the African and Latin American countries. Bangladesh is in a favourable position for achieving the MDG 6 targets. The incidence of HIV is still low in this country, currently less than 0.1 percent. The rates of condom use among different MARP sub-groups have increased significantly. However, a significant proportion of them are not using it at every high risk sexual encounter creating risk of escalation of HIV infection.

Table 08: Progress made with respect to Goal-6

Goal-6	Indicators	Base Year	Current Status	Target Destination	Remarks
Combat HIV/AIDS, malaria and other diseases	HIV prevalence among population (per 01 lac)	0.005	<0.1 (HSS'06)	Halting	→
	Condom use rate, percent		4.5	No target	Low use
	Proportion of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS		15.8	Halting	Low knowledge
	Prevalence of Malaria /per 01 lac	43 (2000)	59	Halting	→
	Death rate associated with Malaria /per 1 lac	0.37 (2000)	0.11		→
	Proportion of children <5 sleeping under insecticide treated bed nets	-	89	Halting	→
	Prevalence of TB per lac population	264 (1990)	225	Halting	→
	Death rate associated with TB per lac population	76 (1990)	45	Halving	→
	Detection rate of TB under DOTS, percent	21 (1994)	73-74 (NTP'09)	Sustain	→
	Cure rate of TB under DOTS, percent	73 (1994)	91-92 (NTP'09)	Sustain	→

DOTS = Directly Observed Treatment Short-Course; TB = Tuberculosis; NTP = National Tuberculosis Control Program 2009; HSS 2006 = HIV Sero-surveillance Survey 2006.

Short and long-term trends show a decline in number of malaria cases and deaths through 2009 as a result of major interventions for malaria control. The rate of multidrug-resistant TB, though increasing, appears still low and does not yet have an important impact on the country's epidemiology.

Notwithstanding the low incidence of these three diseases and the progress made, Bangladesh face some challenges in maintaining the trend. These include inadequate coverage of MARP, limited technical and managerial capacity and inadequate government funding in the government bodies in charge of control of these diseases, and lack of strategic information management.

Future priorities will focus on strengthening coordination in the national response, improving programme management, facilitating scaling up of quality interventions, improving participation of civil society in programme planning/implementation and oversight, and improving access to equity for niche populations (Table # 08).

Progress made with respect to Goal-7:

The 7th goal of MDGs is about environmental sustainability. Bangladesh is likely to meet quantitative targets for just three of the above indicators; namely, CO₂ emissions, consumption of ozone depleting substances and the proportion of the population using an improved drinking water source.

Table 09: Progress made with respect to Goal-7

Goal-7	Indicators	Base Year	Current Status	Target Destination	Remarks
Ensure environmental sustainability	Proportion of land area covered by forests (tree coverage, percentage)	9.0	19.2	20.0	→
	CO ₂ emissions, metric tons per capita	0.14	0.30		Low Emission
	Consumption of O ₃ depleting CFCs in metric tons	195	155	0	→
	Proportion of terrestrial and marine areas protected, percent	1.64	1.68 (2007)	5.0	↓
	Proportion of species threatened with extinction				Data insufficient
	Proportion of population using an improved drinking sources, percent	89.0	97.8 / MICS'09 98.23 / SVRS'08 97 / BDHS'07	100	→
	Proportion of population using an improved sanitation facility, percent	39.2 (2006)	80.4 / MICS'09	100	→
	Proportion of urban population living in slums, percent		7.8 (2001)		Data insufficient

CO₂ = Carbon-di-Oxide; O₃ = Ozone gas; * DPs = Development Partners;

Despite substantial efforts made by GoB, DPs* and NGOs (such as the Sustainable Environment Management Programme) towards the targets of MDG-7, further challenges remain. Some of the important challenges are: absence of comprehensive mechanisms for the production and distribution of quality planting materials and efficient use of forest resources, lack of facilitating technology, institutional support and dedicated financing to reduce greenhouse gas emissions, lack of proper regulation that addresses the present gaps in fisheries sector development, poorly planned development programmes, upstream withdrawal of water, lack of policies and strategies to ensure conjunctive use of water resources, and developing water efficient agricultural practices.

A concerted effort by government, donors and civil society organizations will be needed to achieve MDG 7. The interventions will include, among others, formulating a development vision entailing environment, climate change, and sustainable development, implementation of Bangladesh Climate Change Strategy and Action Plan, and National Capacity Development Plan, and mainstreaming of poverty-environment-climate change in local and national development frameworks (Table # 09).

Progress made with respect to Goal-8:

The 8th goal of MDGs is about developing a global partnership for development. Now Bangladesh is not a debt-oriented country rather it is an export-oriented country (*Sobhan, Rehman; 1990*). So we expect little debt, instead we want market for our exportable items. But assistance for our development is a must. Although the share of Official Development Assistance (ODA) in national income has been declining steadily and disbursements of ODA have consistently been below commitments, ODA allocations to pro MDG sectors have witnessed an upswing since the mid 2000s.

Table 10: Progress made with respect to Goal-8

Goal-8	Indicators (Revised)	Base Year	Current Status	Target Destination	Remarks
Develop a global partnership for development	Net ODA received by Bangladesh/million	1240	96.1 (⁰⁷⁻⁰⁸)		
	Net ODA received by Bangladesh as percentage of OECD/ DAC donors' GNI	5.7	0.2 (2006)		
	Proportion of total bilateral sector-allocable ODA to basic social services/percent		42 (2005)		
	Proportion of bilateral ODA of OECD/ DAC donors' that is untied		82 (2005)		
	Average tariffs imposed by developed countries on agricultural products, textiles and clothing from developing countries/percent.		12-16 (2007)	5.0	
	Debt services as a percentage of exports of goods & services/percent	20.9	7.9 (2007)		→
	Telephone lines per 100 population	0.2	0.92 (2008)		Low users
	Cellular subscribers per 100 population		30.8 (2008)		
Internet users per 100 population	0.0	3.4 (2008)		Low users	

The government is committed to operationalising its Public-Private Partnership (PPP) framework to attract Foreign Direct Investment (FDI) for financing development and infrastructure. It is to note here that it is not on the operation still now.

Despite the phenomenal performance of exports and remittances, further engagement with the international community to improve access to international markets is necessary to realize their potentialities in enriching indicators 1-7.

The concessions offered by the Doha Declaration on Trade Related Intellectual Property (TRIP) Rights and Public Health have opened the door for the development of a thriving domestic and export oriented pharmaceutical sector (Table # 10) .

UN Award for attainment of MDGs:

Six countries received the UN Millennium Development Goal awards for their significant achievements towards attainment of the goals. Three of these countries are from Asia and the rests are from Africa. Bangladesh is one of the three Asian countries which secured the outstanding prestigious award for Goal-4, i.e., for reducing child mortality. The Prime Minister of Bangladesh received this award at a colourful function at New York's Astoria Hotel on Sunday (19 September 2010) (Table # 11).

Table 11: Remarkable Progress of MDGs by different countries

Name of country	Progress made for MDGs
<i>Bangladesh</i>	<i>MDG-4</i>
Nepal	MDG-5
Cambodia	MDG-6
Sierra Leone	MDG-6
Liberia	MDG-3
Rwanda	MDG-4 & 5

Conclusion:

Out of the 52 MDG targets within 8 goals, Bangladesh is on track of 19 of them; 14 of those ones need attention Bangladesh has been making earnest efforts to achieve all the MDGs by 2015 as committed. On other 11 the progress is not satisfactory. As the key challenges standing in the way of achieving the goals, vary across the goals, so different levels of progress has been achieved in different goals, such as:

- (i) some goals have been achieved or are nearly to be achieved;

- (ii) progress is on track in case of some goals; they can be achieved with present level of efforts; and
- (iii) some goals can be achieved with enhanced effort. (Understanding that any complacency may lead to retrogression the government will continue to undertake measures and address the key challenges to achieve the goals.)

Government interventions can be divided into several broad categories in terms of their impact on goals achievement:

1. Some of the interventions which have proven positive, will be continued in their present form, e.g., girls stipend at the primary and secondary levels for achieving gender equality in education should be continued.
2. Some of the interventions have positive impact but there is scope for enhancing their impact through reforms, i.e., 100 day employment guarantee scheme for employment generation for the poor can be improved through better targeting.
3. In some cases new interventions are needed to accelerate the rate of progress toward the goals.

The achievement of MDGs is threatened by the post-declaration changes in the international socio-economic and political arena. To make the MDGs an achievement, the countries need to address many internal and external challenges including unequal partnership with donors, absence of good governance, slow pace of economic development, uneven growth in rural and urban areas, food insecurity, and absence of participation of poor people (Sultana, 2009).

The policy framework and the programmes and projects required for achieving the MDGs need to be implemented. Weak capacity of government and corruption undermine all efforts for attainment of MDGs. So Government will have to ensure transferability in all the projects and development works. All the stakeholders should be attentive to ensure transparency and efficiency in their respective efforts.

Greater participation of civil society (NGOs, CBOs, self help groups, vulnerable groups, etc.) in programme planning/implementation and oversight may potentially enhance more efficient and equitable decision.

Meeting the Goals will require a substantial reorientation of development policies to focus on various aspects of growth including those associated with the implementation process, i.e., civil service. Thus Bangladesh needs to recognize the benefits from modern

aspects of governance, service deliveries and management to harness the explosion in new knowledge technologies (Alam, Manzoor, Dr. Sept-2006).

Government has to strengthen its monitoring and evaluation system. IMED has to be supplemented by monitoring and evaluation of inputs, outputs, outcomes and impacts of programmes / projects to track movement towards goals.

Some of the reasons for poor quality of various services provided by governmental agencies, which makes attainment of MDGs difficult, is lack of demand for quality services. It is important that people learn to demand for better services. This can be achieved through mobilization and awareness creation of users at the community level by NGOs and CSOs.

Given Bangladesh's LDC status and the urgency of attaining the MDGs, Bangladesh should strengthen current initiatives for donor coordination and aid effectiveness. The government will seek increasing amount of official external resources to facilitate attainment of MDGs.

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