

IMPLICATION OF MILLENNIUM DEVELOPMENT GOALS IN ETHIOPIA A LONGITUDINAL APPROACH

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Abstract

Ethiopia was one of the 189 member states that adopted the Millennium Declaration in 2000 and committed itself to the achievement of the Millennium Development Goals. This paper assesses the implication of Millennium Development Goals adopted by the country and the challenges faced to accomplish the targets. The implication Millennium Development Goals in Ethiopia reveals that (1) the poverty has declined to 29% in 2010 from 44% during 2000. (2) During 2010 the Gross Enrolment Rate for primary school reached 95.9% and Net Enrolment Rate stood at 89.3%. (3) To achieve gender equality Government has incorporated gender issues in different national policies including health, education and training, HIV/AIDS, population and others. (4) Health Sector Development Programme reveals that a reduction of mortality rates among children under-five from 166/1,000 in 2000 to 88/1,000 in 2011 and the infant mortality rate from 97 to 59 per 1000 live births. Neonatal mortality rate reduced from 49 per 1000 in 2000 to 37 in the year 2011. (5) The maternal mortality rate has also declined to 676/100,000 in 2011 from 871/100,000 live births in 2001. (6) HIV prevalence in 2011 was estimated to be 1.5% with 1.1 million people living with HIV/AIDS which is far below than 2000 year. (7) To achieve environmental sustainability, various proclamations, including the Environment Impact Assessment Proclamation, Pollution Control Proclamation, Industrial Waste Handling and others have been formulated. (8) To capture global partnership, share of ODA and exports to GDP, and bilateral and multilateral flows as a share of GDP can be used to monitor progress of increased economic integration and international cooperation. Despite the impressive growth record, low levels of income and productivity in the agricultural sector, limited implementation capacity, unemployment and a narrow modern industrial sector base are the major challenges. Besides, the growth efforts have also been threatened by the twin challenges of inflation and balance of payments. The various impacts of climate change will have a dampening effect on Ethiopia's economic growth rates and adversely affect the prospects for achieving MDG targets. With adequate support from the international community to address the challenges, the country is on a positive and promising track to meeting the MDGs by 2015.

Introduction

The world has been struggling for global approaches to development since 1970s, when several economic shocks clearly revealed the limits of economic development. The foundations for a global perspective were laid by Millennium Declaration. The Millennium Declaration with its Millennium Development Goals (MDGs) is the most recent global answer to the immense challenges of the new millennium. For the first time in history, a diverse range of players across the globe has agreed on a common platform of priorities for addressing the many faces of

extreme poverty, hunger, unemployment, diseases, lack of shelter, gender inequality and environmental decline, urgent need to address poverty around the world and the opportunity provided by the MDGs have made them the rallying cry of global partnership and the cornerstone of international and regional development policy. The MDGs are measurable targets attached to a timeframe for making a difference in the lives of billions of people.

It is a culmination of several consultations that have been made since the mid 1990s on several international forums regarding global poverty and human deprivation. At the occasion of the Millennium Summit, in September 2000, 147 heads of state and government and 191 nations adopted the Millennium Declaration. The declaration has mainstreamed a set of inter-connected and mutually reinforcing development goals and targets in to a global agenda. The Millennium Declaration centers on democracy, peace, human rights and poverty reduction, among other primary development challenges and eight major goals referred to as the MDGs. There are eighteen specific targets set across the eight goals and more than 45 indicators to monitor these targets.

Localizing MDGs at Country Level

Ethiopia was one of the 189 member states that adopted the Millennium Declaration in 2000 and in doing so committed itself to the achievement of the MDGs. The main development objective of the Ethiopian Government is poverty eradication, hence development policies and strategies are geared towards this end. By spending more than 60 percent of its total expenditure on poverty oriented sectors, such as agriculture, education, health, water and road development to bring pro-poor economic growth and ultimate objective of achieving MDGs.

Adopting and localizing MDGs to the local context is important because the global MDGs are too general to fit the specific context of a particular country. Placing MDGs at the country level is the contribution of the UN system to the implementation of the Millennium Declaration. In keeping with the monitoring and campaigning on the MDGs at the country level, the Government of Ethiopia and the UN Country Team in Ethiopia have embarked on a process of translating the goals into the local context.

While setting priorities is crucial in any serious development programme, the interconnections that exist among the MDGs and urgency of each in the Ethiopian context support the view that each goal is equally important and relevant for Ethiopia. As Ethiopia is now at a very advanced stage in the implementation of the Sustainable Development Poverty Reduction Programme (SDPRP) placing the MDGs in to the local context would help to provide a longer-term perspective for SDPRP implementation. In terms of targets in SDPRP, targets

related to poverty, hunger, education and health are well articulated and nearly consistent with the MDGs.

According to 2010 MDGs report, however there are some gaps that need to be addressed in the future. There is also interaction among the targets to underscore the fact that addressing some of them involves addressing all the goals. That is each goal though desirable and a stand-alone by its own right, is also related to the others as a matter of consequence. For example, education, health and gender issues have a direct bearing on poverty reduction. The other important aspect is the costing of the MDGs in the Ethiopian context. For the entire MDGs period the estimated total cost of achieving the MDGs targets is around 314.5 Billion Birr (around 40 Billion US Dollars at the current exchange rate) which is beyond the capacity.

According to Ethiopia's 2010 MDGs report there are several areas for further reform that could facilitate the path towards achieving the MDGs. These include highly focused reform in the area of institutions, increased attention to the resource mobilization, particularly domestic revenue and savings and significant flow of external resources through debt relief increased by Overseas Development Assistance (ODA) and efficient disbursement of development assistance. The recent drive by the Government to enhance the efficiency of the civil service by introducing a set of reforms and enacting of tax policies and introduction of new tax administration and the on-going decentralization and empowerment effort could help to set the stage in the areas of rationalisation of government budget, accountability and most of all efficient delivery of basic services that are vital for the smooth functioning of the Ethiopian Economy. In summary, Ethiopia's challenge to meet all the targets set in the MDGs is understandably not each. Yet several reforms on the home front and increased commitment by the international community will make the grip that poverty has had on Ethiopia a tale of the past.

The implication of Targets to the Ethiopian Reality

Goal 1: Eradicate Extreme Poverty and Hunger in Ethiopia: The targets in relation to this aim to reduce the proportion of people whose income is less than one dollar a day and the proportion of people who suffer from hunger between 1990 and 2015. In the context of Ethiopia, to quantify the proportion of people whose income below one dollar a day is an expensive exercise. It requires the launching of periodic household budget surveys in order to monitor and track annual changes in the level and depth of poverty. The first reliable and nationally representative survey was launched in 1995/96 and repeated in 1999/2000. The analysis in this report regarding poverty and hunger is mainly based on these surveys and where necessary, a panel data that covers 3,000 households between 1994 and 1997 has been used so that the trend in poverty with respect to policy changes is made.

The implication is that Ethiopia would have to reduce poverty by a factor of about 4.5 per cent per annum up to 2015 years, taking 2000 as a reference year. This translates in to a decline of poverty from its previous level of 44 percent to 22 percent by 2015. Now the population living below the poverty line has declined to 29% as of 2009/10. The Ethiopia's Safety Net Program in particular stands out as enviable success. Ethiopia has also become second best performing country in Africa next to Algeria in registering remarkable economic growth and creating job opportunities to its youth (MDGs Report, 2011).

The MDGs clearly state that poverty line for which the headcount ratios computed is one dollar a day per person. This kind of global poverty line makes sense in cross country comparisons and monitoring of progress towards achieving the goals. Regarding Ethiopia, poverty rates such as the headcount ratio were computed on the basis of a local poverty line, which is approximately Birr 1095 per person in a year. This is approximately Birr 3 per person per day. From 1985 to 2011, Ethiopia's Gross National Income (GNI) per capita increased by a whopping 92 per cent (Ethiopia MDGs Report, 2011).

During the past seven years progress towards achieving goal 1 as measured by macroeconomic parameters and strong growth average over 11% per annum has been registered. This growth has emanated from the growth of small holder private agriculture, resulting in significant reduction of poverty, particularly in rural areas. Even though the agricultural sector has continued to be the major driver of the economy, the growth contribution of the non-agricultural sectors (particularly the service sector), has also been significant. Together, the agricultural and service sectors have contributed the lion's share of Gross Domestic Product (GDP). During the last seven years, the agriculture (including allied activities) and service sectors have respectively contributed 41% and 46% on average of total GDP. Moreover, this expansion has also been broad based with significant contribution from the manufacturing and construction sectors.

The aforementioned growth within the agriculture sector has emerged from improvement in crop production and productivity; livestock productivity; diversification of agricultural production; agricultural research and extension services; supply of agricultural inputs such as fertilizer and improved seed; expansion of small and medium scale irrigation schemes and the management & utilization of natural resources.

Goal 2: Achieve Universal Primary Education in Ethiopia: Goal 2 is a component of human development and vital to the all-rounded effort of eradicating poverty and hunger in Ethiopia. For its entire history, Ethiopia adopted a free education policy up to the tertiary level. This in itself is an acknowledgement by successive governments and society that education is an

opportunity that should be made equally available to all citizens. Thus, education is a key development goal central to the anti-poverty struggle being waged in Ethiopia.

In this regard, the challenge is not just that of building schools in all parts of the country, but also to ensure that local communities use the schools to full capacity. Given the extreme poverty, and the reliance on child labor for survival, efforts by the Government could be easily frustrated. Thus, the dimension of achieving universal primary education in Ethiopia is challenged from the perspective of coverage, efficiency of government budget and quality of the school systems. Thus, in visualizing the costing and monitoring progress, it is essential to focus on several indicators, not just enrollment rates.

The generic MDGs suggest the following indicators to track progress in achieving this target. Of the three indicators, only one is readily extractable from school records. This is the proportion of pupils starting grade 1 who reach the grade up to 5. The other two are normally computed from census data or household surveys. A country as large and as poor as Ethiopia finds it difficult and expensive to generate the required data.

During 2009/10 the Gross Enrolment Rate (GER) for primary school (grades 1-8) reached 95.9 per cent (93% for female and 98.7% for male). During the same year (2009/10) the Net Enrolment Rate (NER) stood at 89.3 percent (87.9% for male and 86.5% for female). Ethiopia's Productive Safety Net Program stands as an enviable success as its implementation of public works led to the construction of more than 4,400 school classrooms creating enormous access to education to the rural communities.

When one looks at the components of the Human Development Index (HDI), there is clear evidence that significant human development gains are being registered in this country. For example, the report shows that between 1980 and 2011, life expectancy at birth in Ethiopia increased by 15.3 years, whilst expected years of schooling increased by 5.4 years. Ethiopia's HDI value for 2011 is 0.363, which places Ethiopia in the low human development category, and position of the country at 174 out of 187 countries ranked in the report. But the good news is that between the year 2000 and 2011, Ethiopia's HDI registered an overall increase of some 32 percent, representing an annual average increase of about 2.6 per cent since 2000.

Goal 3: Promote Gender Equality and Empower Women: Several studies and available data have shown that women in Ethiopia are disadvantaged due to their sex, most notably in rural areas. Promoting gender equality for Ethiopia is not only in the best interest of the society at large, but also fundamentally that of ensuring the human and democratic rights of women. The Ethiopian constitution sets clear foundation for this because women are less literate, discriminated against in productive activities, engaged in invisible labor services that are not

taken into account in the national gross domestic product (GDP) statistics and are paid less for the same work in the informal market.

Addressing gender issues in Ethiopia is therefore not only about equity and social justice; it is also about development and poverty reduction. In this regard, the MDGs propose a target of eliminating gender disparity at primary and secondary school levels by 2005 and at all levels of schooling by 2015. This Goal is based on the notion that equality can be attained through equal opportunities, a view consistent with the prevailing thought on equity. This goal is central to address the majority of the Millennium development Goals.

The Government of Ethiopia has declared its commitment to gender equality, equity and the empowerment of women by stipulating the rights of women in its Constitution, by issuing the Women's Policy of Ethiopia and by revising the Family Law and the Criminal Law. In 2005, the Government upgraded the Office of Women's Affairs in the Prime Minister's office to the level of a full Ministry of Women's Affairs (MoWA) with the mandate to ensure that due consideration was given to gender issues across all sectoral policies. Efforts continued to firmly establish gender as a cross-cutting issue through joint planning sessions between sectoral line ministries and MoWA. The Government has also incorporated gender issues in different national policies including health, education and training, HIV/AIDS, population and other sector policies. The formulation of the National Action Plan (NAP) on Gender and Development ensures that gender is fully considered and incorporated in all the annual work plans; and the establishment of a gender focal person in each of the regional bureaus is evidence of the Government's commitment to gender equality. Plan for Accelerated and Sustainable Development to End Poverty (PASDEP) has also recognized in addressing gender issues as one of its eight pillars. To this effect, PASDEP outlines the strategic measures: increasing girl's and women's access to education, improving water supply and sanitation as well as health services and adapting agricultural training to the needs of women.

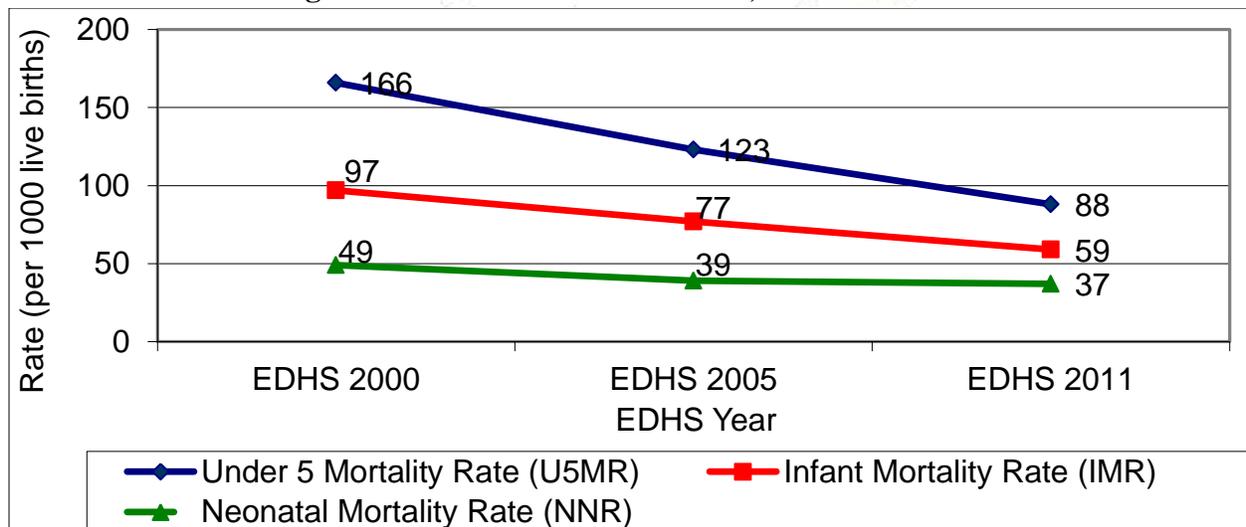
The objective of achieving gender equality is expressed by the ratio of male to female enrollment at different levels of schooling. While this information is indicative of equal opportunities between the sexes, it is not at all conclusive for various reasons. There are cultural, religious and traditional barriers that prevent women from exercising their rights in the Ethiopian context.

Goal 4: Reduce Child Mortality: Child mortality is one of the core indicators of human well-being, as measured by life expectancy, and taken as one of the dimensions in the HDI of the United Nations Development Programme (UNDP). A reduction in child mortality significantly increases life expectancy and thus human capital, which is needed for development.

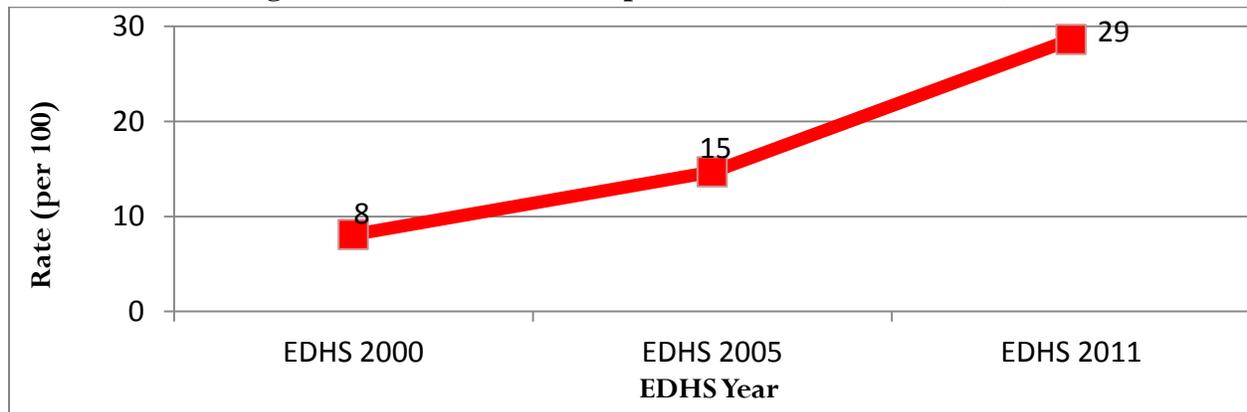
Ethiopia has one of the highest child mortality rates in the world. Reducing child-mortality by two-thirds between 1990 and 2015 is specified in the MDGs. In the context of Ethiopia, the year 2000 should be taken as a base year to harmonize it with Poverty Reduction on Strategy Papers (PRSPs). Malaria (20%), Pneumonia (28%), Diarrhea Diseases (20%) and Newborn conditions (25%) each account for the major causes of child deaths in Ethiopia.

The improvement of children’s health is an essential component of the Health Sector Development Programme (HSDP) that focuses on poverty related health conditions. HSDP which ends in the middle of 2010 envisaged a reduction of the mortality rates of children under-five from 166/1,000 in 2000/01 to 88/1,000 and the infant mortality rate from 97 to 59 per 1000 live births. Neonatal mortality rate reduced from 49 per 1000 in 2000/01 to 37 in the 2011. This prognosis is based on an increased coverage of maternal, newborn and child health, nutrition and WASH related interventions. According to the Human Development Report (2011), Ethiopia stands third next to Liberia and Malawi in cutting infant mortality rate by half over the past ten years. In this regard, Ethiopia is on track to achieve MDG 4.

Figure 1: MDG 4: Trend in U5MR, IMR and NMR

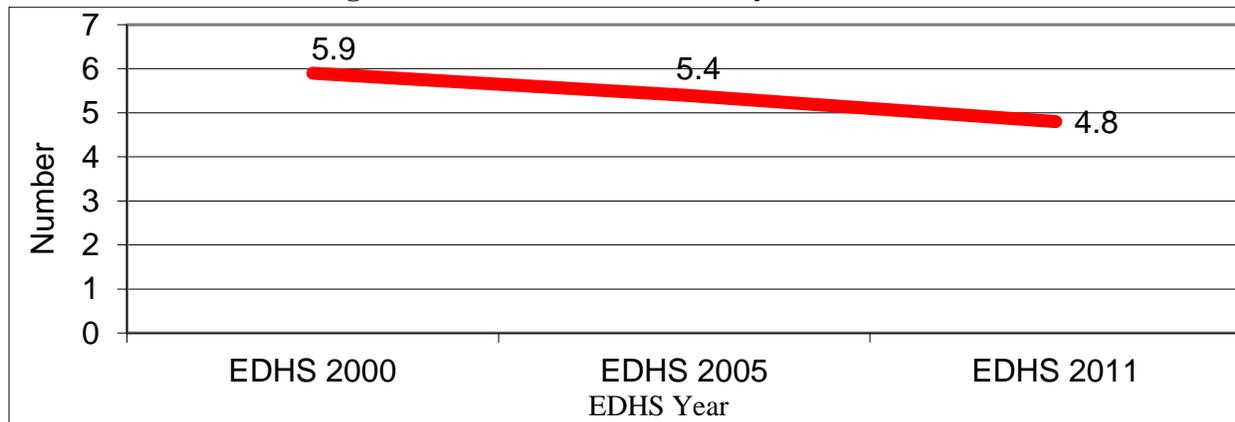


Goal 5: Improve Maternal Health: Maternal health is closely related to Goal 4. Healthy mothers are likely to look after the health of infants and children, thus promoting the health of mothers are imperative to promoting child-care and reducing child mortality. The indicators for this goal are maternal mortality rate and proportion of births attended by skilled health personnel. Reducing maternal mortality ratio by two-thirds, between 1990 and 2015, is proposed in the MDGs.

Figure 2: Trend in Contraceptive Prevalence Rate (CPR)

In the Ethiopian context, generating data and ensuring accurate measurements are perennial problems. However, there have been several methods developed and refined to estimate and project maternal mortality rates over the years. Similarly, data on the proportion of births attended by skilled health personnel is difficult to obtain at this stage. The number of new births in Ethiopia itself is an estimate. The vast majority of people in Ethiopia give birth at home assisted by traditional midwives. Any effort to approximate this information will start by first finding the number of registered births in health services and assuming that the rest take place at home. So, the accuracy of this figure critically depends on how we estimate new births throughout the count.

According to Demographic Health Survey (DHS) 2005, the maternal mortality rate has also declined to 676/100,000 in 2011 from about 871/100,000 live births in 2001/02. The cover for Antenatal Care, Deliveries attended by skilled health personnel and Postnatal Care service, reached 59.4%, 20.3% and 25.1% respectively. In 2010/11 the national contraceptive prevalence rate reached 29% compared to only 8% in 2000. Women are increasingly empowered to use their preferred contraceptive method and over 5.6 million women of reproductive age are using contraception. Similarly the total fertility rate reduced from 5.9 in the year 2000 to 4.8 during 2011. Improvement in maternal mortality is closely correlated with access to and the quality of health facilities and professionals. On that basis, the efforts already taken to date would be fundamental building blocks to help Ethiopia to achieve the goal of reducing maternal mortality by three-quarters by the end of 2015 (Ethiopia: 2011 MDGs report).

Figure 3: Trend in Total Fertility Rate (TFR)

Goal 6: Combat HIV/AIDS, Malaria and Other Diseases: The spread of HIV/AIDS, malaria and other diseases have debilitated the human capital in Ethiopia. Because these diseases, especially HIV/AIDS, generally attacked people in their most productive ages. The estimate that is available today indicates that Ethiopia is one of the countries most heavily affected by HIV/AIDS. If this trend is not reversed, its effect could be even more catastrophic.

Ethiopia joined the United Nation (UN) General Assembly in issuing the Political Declaration on HIV/AIDS in 2006. The declaration necessitates commitment on the part of governments to move towards the goal of universal access to HIV prevention, treatment, care and support by 2010. Subsequently, Ethiopia's Federal HIV/AIDS Prevention and Control Office (HAPCO) launched an updated planning framework that set targets to achieve universal access. The Millennium AIDS Campaign designed by the federal government has been the centerpiece of efforts to scale-up prevention and treatment programs.

A trend analysis of HIV/AIDS prevalence rates shows that the urban epidemic appears to have leveled off at a high prevalence in the past years while the rural epidemic hasn't shown significant change. Owing to the expansion in the number of health centers, the rate of HIV positive pregnant women who received a complete course of Antenatal Care (ANC) reached 42%. Similarly, HIV prevalence in 2010/11 was estimated to be 1.5% with an estimated 1.1 million people living with HIV/AIDS which is far below than 2000. At the national level, the epidemic has been stable over the past several years. There is an improvement in knowledge of HIV/AIDS and way to prevent it among the people in the country. Ratio of school attendance of orphaned children aged 10-14 to non-orphaned children of the same age increased from 0.6 in 2000 to 0.9 in 2008. More children orphaned by AIDS are now in school and increasing their chance of receiving education, protection and support (UN MDG Report, 2011).

Also tremendous progress in malaria control has been witnessed in Ethiopia. According to World Health Organization (WHO) assessment on impact of anti malarial interventions in Ethiopia during 2008, 48% reduction in morbidity, 54% reduction in hospital admissions, and 55% reduction in mortality which is ideal to note.

WHO estimated that Ethiopia is the 7th high Tuberculosis (TB) burden country in the world and 3rd high TB burden country in Africa. According to 2011 TB Prevalence Survey (all forms) in Ethiopia shows that 277/100,000 population which is lower estimates of WHO = 572 per 100,000. In the same way Prevalence of sputum smear positive (SS+) TB = 108/100000 is also less compared to WHO' estimate = 284/100000. It is found that the treatment success rate = 83% (target = 85%) and treatment cure rate = 68% (target = 85%). Three-pronged approach for malaria control (early diagnosis and effective treatment, vector control and epidemic control) with high coverage and use of ITN has also one of the successes for this goal.

Goal 7: Ensure Environmental Sustainability: Environmental degradation in Ethiopia is closely related to the recurrence of droughts, food insecurity, and declining farm productivity. Currently, the country reports about 15 million people affected by drought. It is now widely accepted that much of the hunger in Ethiopia has to do with the human factor exploiting the environment in an unsustainable manner. Soil depletion, deforestation and absence of irrigation contributed to an alarming decline in the fertility of land, making farming a difficult and risky enterprise.

Sustainable development entails ensuring environmental sustainability to meet the needs of the present generations without compromising the needs of future generations, thereby offering improved quality of life for everyone. Ethiopia has shown bold political will by establishing environment protection agencies at the federal level and in all regional states.

Various proclamations, including the 'Environment Impact Assessment Proclamation', 'Pollution Control Proclamation', 'Industrial Waste Handling' and others have been formulated. 'Various Environment Protection Conventions' have also been ratified by the government. Furthermore the government has also formulated an Environment Protection Policy, Strategy and Program to promote and implement carbon neutral and climate resilient development and economic.

Even then the progress is not up to the expectation due to six reasons; (i) Insufficient focus on national implementation mechanisms and coordination across sectors (ii) Lack of operational objectives and prioritization (iii) Limited understanding of works (iv) Neglect of direct investments in environmental management (v) Lack of operational budgets for environmental management (vi) Capacity constraints and lack of financial resources. To overcome these constraints, country needs to develop effective national frameworks of

implementation. These frameworks need to (a) be outcome based; (b) derive from consultative processes; (c) ensure full integration of environmental strategies with the social and productive sectors; (d) map out needed investments; and (e) link to real budgets.

Goal 8: Develop A Global Partnership for Development: This includes addressing the needs of specially disadvantaged countries, like Ethiopia, which is landlocked and also a Least Developing Country (LDC). This goal comprises seven targets that outline the responsibilities of the international community and the country itself. It encompasses bilateral and multilateral cooperation in areas of market access, development aid and special interventions to enhance the health and productivity of people living in poor countries. Also included are youth employment, foreign direct investment (FDI), access to pharmaceuticals, introduction of new technologies and information and communication technologies (ICTs).

During past years, Ethiopia has been spent mainly in laying the foundation for a new political system and ensures good governance. To monitor progress in the area of Goal 8, there are a number of indicators suggested that can be adapted to the Ethiopian reality. To capture global partnership, indicators such as per capita ODA flow, share of ODA to GDP, size of foreign trade, and FDI flow are suggested. From the perspective of Ethiopia, share of ODA to GDP, share of exports to GDP, and bilateral and multilateral flows as a share of GDP can be used to monitor progress with respect to increased economic integration and international cooperation. Improvements to ameliorate the adverse effects of land lockedness can be monitored by observing the cost of transport with respect to international trade.

Although Ethiopia is making great progress in increasing domestic revenue, a substantial amount of Ethiopia's national budget is financed from external sources. Moreover, a recent Development Assistance Group (DAG) report stresses the need for scaling up external financing and aid to reach the MDGs. DAG (2007) indicates that humanitarian and food aid constitutes a large share of external assistance (30-50% of total aid).

Conclusion

The Millennium Declaration in September 2000 was a milestone in international cooperation, inspiring development efforts that have improved the lives of hundreds of millions of people around the world. This Millennium Declaration with its Millennium Development Goals is the most recent immense challenges of the new millennium and measurable targets attached to timeframe for making a difference in the lives of billions of people in between 2000 – 2015.

The international community has increasingly come to realize that poverty reduction can only be successful if MDGs are implemented on the local, national, regional and global level. The Goals represents human needs and basic rights that every individual around the world should be able to enjoys freedom from extreme poverty and hunger, quality education, productive and decent employment, good health and shelter, the right of women to give birth without risking their lives; and environmental sustainability.

Ethiopia has shown an extraordinary level of commitment to eradicate poverty and has gained significant development gains. The economic growth in the last decade and the progress towards the MDGs has been remarkable. The economy grew at an average growth rate of 11% which is well above the 7% growth rate estimate required to achieve the goal of poverty reduction by the year 2015. The government has also made an enormous progress in the provision of social services such as education, health and infrastructure by spending a large share of its budget in the pro-poor sector. In line with the objective of poverty eradication and bringing about social development, the Government of Ethiopia has invested in both physical and human capital formation which could be considered as best practice to address the challenges of achieving the MDGs. This shows that MDGs are therefore well placed in the national development context of the country. This could be taken as the best practice from which other countries may learn. This effort has also resulted in the excellent stride made to meet the MDGs. Furthermore, with adequate support from the international community to address the challenges noted in Millennium Declaration, the country is on a positive and promising track to meeting the MDGs by 2015.

The global financial and economic slowdown and climate change are seen as threats that may hinder progress and reverse the development gains registered. Since the 1990s, reducing pervasive poverty and ensuring human development in Ethiopia have been the objectives of the Ethiopian government. This vision is explicitly incorporated in various government development policy documents. It is easy to see the central role of MDGs in informing such government policy documents, and several national and sectoral policy documents are very much aligned with the MDGs. The country's medium term development plans such as the Plan for Accelerated and Sustained Development to End Poverty (PASDEP - 2005/06-2009/10) and its successor Growth and Transformation Plan (2010/11-2014/15) are MDG based development plans that were conceived to be implemented in the medium term.

Generally the prospects for achieving the MDGs are promising if the current effort continues and policy makers and development partners to combine efforts to address the potential challenges in the coming three years which can be achieve through alignment of international support with MDGs based development strategies in the area of Technical advice, Financing, Capacity building, Documenting and Sharing Best Practice of countries etc.

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