The Lao People’s Democratic Republic


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# Acronyms

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<th>Acronym</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>ADB</td>
<td>Asian Development Bank</td>
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<td>AEC</td>
<td>ASEAN Economic Community</td>
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<td>AIDS</td>
<td>acquired immunodeficiency syndrome</td>
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<td>ART</td>
<td>antiretroviral therapy</td>
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<td>ASEAN</td>
<td>Association of South East Asian Nations</td>
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<td>ASLO</td>
<td>Assessment of Student Learning Outcomes</td>
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<td>CDP</td>
<td>Committee for Development Policy</td>
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<td>CHAS</td>
<td>Centre for HIV/AIDS and STI, Ministry of Health</td>
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<td>CMPE</td>
<td>Centre for Malarialogy, Parasitology and Entomology, Ministry of Health</td>
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<td>DESA</td>
<td>Department of Economic and Social Affairs (United Nations)</td>
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<td>ECD</td>
<td>early childhood development</td>
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<td>ECE</td>
<td>early childhood education</td>
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<td>EFA</td>
<td>Education for All</td>
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<td>EGRA</td>
<td>Early Grades Reading Assessment</td>
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<td>GER</td>
<td>gross enrolment ratio</td>
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<td>GNI</td>
<td>gross national income</td>
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<td>HEF</td>
<td>Health Equity Fund</td>
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<td>HIV</td>
<td>human immunodeficiency virus</td>
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<td>ILO</td>
<td>International Labour Organization</td>
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<td>IYCF</td>
<td>infant and young child feeding</td>
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<td>LDC</td>
<td>Least Developed Country</td>
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<td>LECS</td>
<td>Lao Expenditure and Consumption Surveys</td>
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<td>LSIS</td>
<td>Lao Social Indicators Survey</td>
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<td>MDG</td>
<td>Millennium Development Goal</td>
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<td>MMR</td>
<td>maternal mortality ratio</td>
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<td>MNCH</td>
<td>Maternal, Neonatal and Child Health (care)</td>
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<td>NCD</td>
<td>non-communicable disease</td>
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<td>NSEDP</td>
<td>National Socio-Economic Development Plan</td>
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<td>ODA</td>
<td>official development assistance</td>
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<td>PASEC</td>
<td>Program for the Analysis of Education Systems</td>
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<td>PLHIV</td>
<td>people living with HIV</td>
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<td>PMTCT</td>
<td>prevention of mother to child transmission</td>
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<td>PWID</td>
<td>people who inject drugs</td>
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<td>SDG</td>
<td>Sustainable Development Goal</td>
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<td>TVET</td>
<td>technical and vocational education and training</td>
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<td>UIS</td>
<td>UNESCO Institute for Statistics</td>
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<td>UNESCO</td>
<td>United Nations Educational, Scientific and Cultural Organization</td>
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<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<td>UXO</td>
<td>Unexploded ordnance</td>
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Purpose of the Review

The Government of the Lao People’s Democratic Republic (“Lao PDR”) follows up on commitments made to the international community by translating the UN goals and Conventions into national processes of planning and programme implementation. The country’s National Socio-Economic Development Plans (NSEDPS), for example, have adapted the Millennium Development Goals (MDGs) and incorporated these into national priorities and goals. In addition, the most recent Eighth Five-Year NSEDPS (2016-2020) aims at graduating from Least Developed Country (LDC) status. This Review summarizes the achievements and the lessons learnt from the MDG implementation process in Lao PDR, and reflects on strengths and areas in need of improvement. The Review aims to contribute to the dialogue on the post-2015 agenda in Lao PDR.
Overview

Just 11 years after world leaders adopted the MDGs at the United Nations, Lao PDR’s strong economic growth had enabled it to move up the World Bank’s classification of low-income economy to a “lower middle-income” country. The GNI per capita was US$1,600 in 2014 according to the World Bank’s Atlas method. This is higher than the GNI per capita of US$ 1232 used by the United Nations Committee for Development Policy in its March 2015 meeting on the review of Lao PDR’s LDC status. The country’s economic growth is still reliant on natural resources. It is recognized that the economy will need to diversify to become more inclusive, generate greater employment and lead to greater sustainability.

The current population is estimated at 6.8 million. Existing projections indicate that the working-age population will grow rapidly while the elderly population will increase slowly for the next decade, thus lowering the dependency ratio. In the medium-term, therefore, Lao PDR is expected to benefit from the continuing growth of young and working population, which will provide a “demographic dividend” to the economy. This demographic dividend will be realized only if new jobs are able to keep pace with the growth of the working-age population and if many more young people are equipped with the appropriate skills and knowledge.

The Lao PDR aims to become eligible for graduation from Least Developed Country (LDC) status by the 2020s. LDC graduation is a six-year graduation process, since the reviews are triennial. The United Nations Committee for Development Policy determines pre-eligibility based on each country’s score and ranking on three criteria: the GNI per capita, the Human Assets Index and the Economic Vulnerability Index. Lao PDR will need to meet pre-eligibility requirements in 2018 in order to achieve LDC graduation by 2024.

The dialogue on national priorities and strategic direction will need to take into account regional economic integration, notably, Lao PDR’s expected entry into the ASEAN Economic Community (AEC) at the end of 2015. To reap the full benefits of its entry into AEC, Lao PDR will need to undertake reforms in sectors such as agriculture, labour and human resource development, as well as improve the regulatory environment for banking, trade and investment.
MDG 1. Eradicate extreme poverty and hunger

Halving poverty

Two years ahead of the target date, Lao PDR had already achieved the MDG target of halving its national poverty rate from 46 percent in 1992/93 to 23 percent by 2012/13. In 2015, national estimates show that the poverty rate has declined even further. Household welfare has also improved in terms of ownership of assets and access to services. The poor on average have become less poor, with a steady reduction in the poverty gap and poverty severity over time. This is a significant achievement.

Rural areas still have a poverty rate 2.9 times higher than that of urban areas. Over the past five years’ period, inequality has gone down slightly in rural areas but has increased in urban areas. Remote upland regions have a higher poverty rate than lowland areas. The districts targeted by the government’s National Growth and Poverty Eradication Strategy achieved significant poverty decline but are still poor, with one-third of the population below the poverty line. Three provinces saw a rise in poverty. More work is needed to identify the reasons behind these trends. Poverty is significantly lower among female-headed households (17 percent in 2012/13) than in male-headed households (24 percent), a phenomenon that also requires more analysis in the Lao PDR context.

Various studies identify education, agricultural produce prices, livelihoods and geographic location as important determinants of poverty patterns. Underlying these are factors such as cultural differences.

Lessons learned for the post-2015 agenda

The Lao PDR’s successful poverty reduction efforts are linked with many factors, among these, road and infrastructure construction in rural areas. The increase of poverty in some areas of the country, as well as the unusually rapid poverty reduction in Phongsaly province (from 51 percent poverty rate in 2003 to 12 percent in 2013) will need further analysis.

The Government of Lao PDR recognizes that the population who are still below the poverty line need special attention. Targeting will, therefore, need to be improved and budget allocations will need to be increased. A coordinated and convergent approach is needed among all sectors. Interventions that have been shown to work include education, literacy and numeracy, livelihoods support, rural infrastructure construction, and enhanced market access. The scope of social protection schemes will need to be widened to include the informal sector and the poor.

Achieving full and productive employment and decent work for all

Lao PDR’s entry into the AEC offers opportunities for increasing decent work and for full and productive employment, but the change needs to be managed well. Expansion is expected in the industrial and services sectors, although agriculture will remain the country’s largest employer. The demand for medium-skilled and high-skilled workers is expected to rise. However, most of the country’s workforce still needs much support in order to meet AEC skill criteria. Lao PDR, therefore, needs to accelerate technical and vocational education and training (TVET), in order to equip workers with the competencies needed in the sectors that will grow with AEC entry.
To date, the economic growth has not managed to generate a sufficient number of decent employment opportunities, since the growth has been largely resource-driven and capital intensive. The agriculture sector, which dominates employment in Lao PDR (70 percent of all employment), needs to improve its productivity, which in 2010 was 4 to 10 times lower than that of the non-agricultural sectors. The country as a whole also needs to increase earnings. The share of vulnerable employment in Lao PDR is still high, with own-account workers and unpaid family workers making up 84 percent of the total labour force. Most agricultural work is under poor working conditions. Since informal employment is widespread, jobs in other sectors may also have similarly poor working conditions.

**Lessons learned for the post-2015 agenda**

Recognizing that workers need to be better protected, Lao PDR has adopted an amended Labour Law (the “2013 Labour Law”), which is more in line with international labour standards. Education and training systems in Lao PDR will need more capacity strengthening, given the projected rise in demand for medium-skilled and high-skilled workers. The ongoing work by the Ministry of Labour and Social Welfare to develop national skills standards, testing and certification systems, benchmarked with standards of other ASEAN economies, will need to proceed together with the reform and modernisation of the TVET system, to improve its quality and make it more responsive to labour market needs. At the same time, Lao migrant workers going to other countries will need to be provided with skills recognition. The successful public and private partnerships developed at some TVET institutions need to be scaled up. As an incentive for industries that have the capacity to support Competency Based Training, Lao PDR will also need to provide official recognition of in-service training courses in the private sector.

The Government will need to promote strategies and policies that maximize the benefits of the AEC, such as hard and soft infrastructure investments to increase productivity and incomes, especially in the agricultural, forestry and fisheries sectors. These will need to be accompanied by a move into higher value-addition activities, technology dissemination, education and increased access to capital, market information and trade facilitation. Capacities need to be strengthened to collect, manage and disseminate robust and up-to-date labour market information for improving policy development, and for enhancing productivity and national competitiveness. Lao PDR needs a strong social protection system to mitigate adjustment costs and support workers who may not find employment immediately in emerging sectors. Efforts are required in order to achieve full coverage of employment-based social insurance and universal healthcare coverage by 2020.

**Halving hunger and malnutrition**

Lao PDR has achieved the MDG target of halving the proportion of hungry people. However, it still has a significant level of hunger, as measured by the Global Hunger Index. Around one-fifth of the population consumes less than the minimum dietary energy requirements. Lao PDR is off track on the MDG target of reducing underweight and stunting. Some 44 percent of children under five years of age are stunted, 27 percent are underweight and 6 percent are wasted.

Child undernutrition shows strong inequalities across regions and groups. It is associated with poverty, with communities living in upland areas that are difficult to reach, and with mothers who have little or no education. In such groups, stunting can exceed 60 percent. Even among the richest quintile, however, 20 percent of young children suffer from stunting. The causes of child undernutrition are inadequate food and nutrient intake, linked
to poor feeding and care practices, and infectious diseases. Underlying causes include poor maternal health and nutrition, adolescent pregnancy, low levels of women’s education, food insecurity and poor dietary practices, poor hygiene practices, unsafe water and sanitation and weaknesses in service delivery.

Infant and young child feeding (IYCF) practices are still poor in Lao PDR. The rate of exclusive breastfeeding among infants under the age of 6 months is still low, while the use of baby formula has increased. Complementary feeding for young children does not always provide the required nutrients. Some 89 percent of the population have acceptable food consumption patterns, but around 11 percent of rural households have poor and borderline food consumption. Households with poor and borderline food consumption tend to cultivate less land, rely more on cash crop production as a source of income, have less access to vegetable plots, and have household heads with lower educational attainment, compared to households with acceptable food consumption patterns. Purchasing power and access to markets remain challenges for many poor rural households – yet these are key factors influencing a household’s ability to access a nutritious and diverse diet, particularly for food items that are not produced locally.

**Lessons learned for the post-2015 agenda**

Lao PDR reaffirmed its commitment to fight hunger and undernutrition through the launch of the National Zero Hunger Challenge in May 2015. The country’s Agricultural Development Strategy and the National Nutrition Strategy will provide the framework for achieving the Zero Hunger Challenge.

As shown by Lao PDR’s successes in promoting exclusive breastfeeding, universal salt iodization, Vitamin A supplementation and deworming of young children, the Government of Lao PDR recognizes that the key factors critical to nation-wide implementation and programme effectiveness are political commitment and sustained and sufficient resources. Relatively quick and immediate gains in maternal and child survival and nutrition will need to be achieved through a rapid expansion of additional nutrition-specific interventions such as promotion of IYCF and counselling, micronutrient supplementation of women and children and management of acute malnutrition.

The Government has already committed to improving the multi-sectoral response to nutrition, by establishing the National Nutrition Committee, mobilizing major stakeholders and formulating the Plan of Action for the National Nutrition Strategy. It will be important to translate this political commitment into increased investments in nutrition commodities and integrated health outreach, and into nutrition-specific and nutrition-sensitive interventions that converge on high-risk districts. The “First 1,000 Days” approach, which Lao PDR has already committed to, will need to be scaled up, together with behaviour change interventions. To ensure food security and improve the livelihoods of rural communities, Lao PDR will need to shift from a subsistence to a market-oriented agricultural production, adapted to climate change and focused on smallholder farmers.
MDG 2. Achieve universal primary education

By 2014, Lao PDR had achieved a net enrolment ratio of 98.5 percent, meeting the MDG target related to enrolment. However, survival rate to grade 5 remains low, at around 78 percent and needs to be much higher in order to fully achieve the goal. This is because most children drop out in the first year of school or do not progress to the next grade level. The early years are thus a key bottleneck within the country’s basic education system. Children’s lack of school readiness and limited access to early childhood education and development (ECE, ECD) services constrain primary school completion. The causes for dropping out include incomplete schools, the limited capacity of teachers, the direct and opportunity costs of schooling for families and insufficient funding to support investments in improving the quality of education. Public expenditure on education and sport has grown significantly, but the share of non-salary operating budget is still too small.

In 2014/15, Lao PDR achieved 78.1 percent gross enrolment ratio (GER) for lower secondary education, thus exceeding its national target of 75 percent GER. Upper secondary GER has also increased from below 40 percent in 2012 to 45.8 in 2014/15. Overall, secondary gross enrolment ratio GER has increased from 50.5 percent in 2012/13 to 64.6 percent in 2014/15. Further improvements in secondary enrolment will require improving survival rates in primary education.

School attendance rates at all levels show large differences depending on geographic locality, mother’s education and poverty quintile. The distribution of teachers still needs to be more equitable, since it varies by four times across provinces. Difficulties in attracting and maintaining qualified teachers in remote areas are a major challenge. Weaknesses in teacher competencies and qualifications contribute to poor retention and performance of students.

The Government recognizes that learning outcomes and the quality of teaching and learning in schools need to improve, as shown by several assessments. With a large proportion of children not continuing to secondary education, the Government also expanded non-formal education programmes. A survey in 2011/12 showed that the literacy rate among young people from Lao PDR is still low (around 73 percent), which impedes efforts to expanding productive employment opportunities.

**Lessons learned for the post-2015 agenda**

Primary education has made much progress in terms of access for both girls and boys. The same success needs to be achieved in improving education quality, ensuring a high survival rate and increasing secondary education enrolment and retention.

To address the remaining challenges, more attention will need to be given to the recruitment, retention, deployment and skills upgrading of teachers. School Block Grants will need to be disbursed in a timely manner with an equity funding formula that ensures adequate funding for those schools that need it most. Additionally, the Government and development partners will need to target disadvantaged areas and groups with initiatives known to have a positive impact, such as aligning the school year with the agriculture calendar. Flexible learning or non-formal education programmes will need to be expanded even more, together with bridging programmes into mainstream education. More support will be needed for early childhood development and education for children of pre-primary age, given its importance to retention and other sector results. Financial planning will
need to be improved, in terms of ensuring fiscal sustainability and a sufficient non-salary operating budget. To meet the changing demands of the economy, especially with the country’s entry into the AEC, Lao PDR will need much support in strengthening and expanding the TVET system.
MDG 3. Promote gender equality and empower women

In education, the gender equality gap has narrowed in all three levels of education enrolment, with gender equity nearly achieved for primary education. However, girls still encounter challenges accessing and completing secondary education. Beyond the primary level, families still prioritize boys’ education, especially in rural areas, in remote upland communities, in households where mothers are uneducated, and in households from the poorest quintiles. At tertiary level, the gender equality gap is narrowing at a faster rate than at secondary level. Young people who make it to tertiary level are likely to come from families where young women have equal opportunities to young men to pursue education. However, the gender disparity in young people’s literacy rates have not narrowed much. This is because girls have less opportunity to continue their education after primary school, and so become functionally illiterate. Early marriage of girls is one factor for dropping out of school: One in every five reproductive-aged women had given birth by age 18, while three percent had done so by age 15.

In employment, an equal share of men and women make up the workforce, but women generally occupy the lower rungs of the labour market. Most women work in the informal economy and unpaid work is much more common among women than among men. Among those employed, men are generally better educated than women are. Women are also relatively more excluded from formal sectors and the social protection that this entails. Men account for the majority of civil servants, professionals, technicians and other sectors. Migration for work, whether within or outside the country, entails significant risks for girls and women, especially because of their young age: 63 percent of female migrants are under 16 years of age, compared to 14 percent of male migrants.

Lao PDR has one of the highest proportions of women in national parliaments (25 percent). However, the proportion of women in other decision-making institutions is still low (5 percent in 2012).

**Lessons learned for the post-2015 agenda**

Overall, Lao PDR has done well in promoting gender equality. The implementation and monitoring of national gender equality laws, policies and instruments will need to be strengthened, together with national capacity for generating and using data disaggregated by sex. One way to prevent early marriage for girls would be to enforce the existing family law, which does not allow marriage before the age of consent. The post 2015 agenda will need to address these and other issues, such as violence against women.

The review of all MDG areas shows that women and girls in rural areas, in certain ethnic cultures, and among migrant workers are often the most marginalized. Special efforts must be made to reach such vulnerable girls and women and understand the differences within each group. Consequently, stakeholders working in other sectors should integrate and mainstream gender issues into their programmes. Institutional capacities in the Women’s Parliamentary Caucus, the National Commission for the Advancement of Women and the Lao Women’s Union need to be strengthened. Higher levels of resources are needed.
MDG 4. Reduce child mortality

Projections show that Lao PDR will probably meet its national target in reducing under-five mortality to 70 per thousand live births by 2015. However, Lao PDR still needs to achieve the international targets of reducing under-five and infant mortality to one-third of 1990 levels by 2015, which would be around 57 and 38 per thousand live births respectively.\textsuperscript{41} Achieving international targets will require large investments to increase interventions significantly in the poorer and remote areas, to achieve more rapid progress in reducing child mortality and maternal mortality in these areas. Most of the child deaths in Lao PDR are preventable or treatable with high-impact cost-effective interventions, but coverage and quality of maternal and child health care services in Lao PDR are still low.\textsuperscript{42}

Lessons learned for the post-2015 agenda

Efforts to reduce child mortality further will require improving the existing health services coverage and ensuring the sustainability of preventive and promotive maternal and child health interventions, such as immunization, micronutrient supplementation and mass deworming. To this end, integrated health outreach services should be strengthened as the main strategy for reaching the most vulnerable groups. All these will require higher level of investments in health.

The Government of Lao PDR has already initiated Health Equity Fund (HEF) schemes and the rollout of Free Delivery of Maternal, Neonatal and Child Health Care (Free MNCH), but financial barriers still impede access to health services. Improving health sector financing will require increasing and securing sufficient domestic resources for health, removing financial barriers through national programmes for HEF schemes and Free MNCH, and moving towards Universal Health Coverage.\textsuperscript{43}

The Government has committed to strengthening the health system through a focus on five priorities of the Health Sector Reform Framework.\textsuperscript{44} These are (i) strengthening human resource capacity, (ii) improving health sector financing, (iii) improving the governance, organization and management of the health system, (iv) improving health service delivery and hospital management and (v) improving the overall monitoring and evaluation framework and the Health Information System. The last includes the introduction of a compulsory civil registration and vital statistics system, especially for birth and death statistics. The quality and deployment of health staff needs special attention. This will involve prioritizing the deployment of skilled health workers in rural and remote areas, strengthening the capacity of health professions education and training, and addressing specific skill gaps remaining due to mismatches between training programs and demand by provincial health services.
MDG 5. Improve Maternal Health

Lao PDR has achieved the first target of MDG 5 by reducing its maternal mortality ratio (MMR) by 75 percent. However, the MMR is still high (around 220 per 100,000 in 2013). The high MMR is explained by the low coverage and inadequate quality of services. Less than half the births are assisted by trained health personnel (42 percent in 2011/12) and the facility-based delivery rate is still too low (38 percent). Service quality and referral systems, including for emergency obstetric care, need improvement. Disparities in service coverage are pronounced. Among women from the poorest quintile households, only 11 percent of deliveries were assisted by trained health personnel.

Access to reproductive health has improved but the second target of MDG 5 on universal access to reproductive health has not yet been achieved. Modern contraceptive usage has increased from 13 percent in 1990 to 42 percent in 2011/12. Unmarried adolescents, in particular, have difficulty in accessing contraceptives and the adolescent birth rate in Lao PDR remains high, at 94 births per 1000 girls of ages between 15 and 19 years. Disparity patterns in contraceptive use are shaped by location, beliefs and education. In principle, contraceptives are widely available, but stock-outs indicate the need to improve health system logistics and management.

Lessons learned for the post-2015 agenda

Lao PDR has done well in achieving the first target of MDG 5. To further reduce maternal mortality and morbidity, the interventions related to increased investments in health and health sector reform will be necessary. Within the health sector reform framework, special attention needs to be given to improving the reach and quality of health care education, improving the quality of health care provided, increasing access to well-equipped and well-stocked facilities and ensuring effective referral systems. Interventions beyond the health sector are also necessary for tackling the challenge of high maternal mortality and morbidity. Female and male education, behaviour change interventions, roads and transport to health facilities, and harmful cultural traditions all need to be addressed. Social assistance measures should not only remove financial barriers to health care and facility delivery, but should also be adequate in protecting women from overwork during pregnancy. A national multi-sectoral youth policy is needed to inform and educate youth on adolescent pregnancies, early marriage and other issues, and explicitly address the access to contraceptives for unmarried youth.
MDG 6. Combat HIV/AIDS, Malaria and Other Diseases

Accelerating the HIV/AIDS response

Over the past 15 years, Lao PDR has managed to keep HIV prevalence generally low, below 0.5 percent for the general population and below 5 percent for key populations at higher risk. However, Lao PDR cannot afford to be complacent, as HIV incidence has increased, while HIV prevalence is increasing in sub-groups of key populations.\textsuperscript{50} Difficulties in reaching the key populations at higher risk, notably men having sex with men and people who inject drugs, hamper prevention efforts. The reasons include cultural taboos, the illegality of drug use and sex work, the mobility of populations and the lack of information on drug users and the clients of sex workers. Stigma and discrimination against people living with HIV (PLHIV) are still high, largely due to limited understanding about HIV transmission. The overall knowledge on HIV remains low, especially among women.\textsuperscript{51} Condom use rates are reported to be high in commercial sex, but are lower in casual sex.\textsuperscript{52}

HIV testing and counselling services have improved, but reaching key populations at higher risk remains a challenge. Insufficient demand is an issue, since most people are unaware that HIV testing should be done even if they are feeling well. The intake for antiretroviral treatment (ART) is low, since the majority of PLHIV do not understand the risks of delaying early treatment. Of the three global targets for scaling up HIV treatment beyond 2015, 57 percent of the estimated PLHIV in Lao PDR know their HIV status, 60.6 percent of PLHIV who know their status are receiving ART, while 96 percent of those on ART have suppressed viral load.\textsuperscript{53} However, these statistics are based on projections of the estimated numbers of PLHIV.

Lessons learned for the post-2015 agenda

Prevention of mother to child transmission (PMTCT) is expanding through integration with antenatal care services. However, progress in PMTCT will require a much higher coverage of antenatal care services, a stronger capacity of service providers and a higher level of financial resources. Similarly, the long-term solution of integrating HIV treatment into health services and integrating care for PLHIV into social welfare services will require the strengthening of the health system and social system. Currently, the Government is still developing a social system with professional social workers, but this is not yet fully operational.

Reaching key populations at risk will require expanding and sustaining networks of peer educators, which itself is difficult. Furthermore, sex work and drug use are illegal in Lao PDR, making it more difficult to reach the key populations at risk and to implement harm reduction approaches. Much higher allocations from the national budget are required for HIV response, since currently most of the HIV interventions are funded from external sources. Moreover, resources will need to be mobilized from private investors in large infrastructure development projects (mining, dam and road construction) that employ thousands of mobile workers.

Combatting malaria, tuberculosis and other diseases

Malaria cases and deaths declined steadily from 2000 until 2011 but started rising again from 2012, due to malaria outbreaks in the south of the country, including drug-resistant malaria.\textsuperscript{54} Malaria diagnosis and treatment is on track with over 90 percent of cases with confirmed malaria being treated, however, bednet coverage needs to be increased.\textsuperscript{55} Tuberculosis (TB) prevalence, although declining, is much higher than previously estimated.\textsuperscript{56} The national survey\textsuperscript{57} findings show the scale of challenges faced by the national TB programme: The findings show
that many TB cases remain undiagnosed and untreated, since only around one-third of all estimated TB cases are detected. On the other hand, the TB treatment success rate is high.58

Other communicable diseases, together with the use of counterfeit drugs and rising antimicrobial resistance in Lao PDR, pose a serious threat to global public health. Lao PDR is also seeing a rise in non-communicable diseases (NCDs) which now account for some 48 percent of total deaths. Injuries, especially those due to road accidents, have increased in frequency and severity, accounting for 9 percent of total deaths.59

Lessons learned for the post-2015 agenda

The worsening situation of multi-drug resistance malaria in the Greater Mekong Subregion (GMS)60 threatens regional and global health security and needs to be urgently tackled in cooperation with other governments, private health care providers and private retail outlets selling malaria medicines. The weaknesses in TB control services revealed by the survey will need to be addressed. These include stagnating notification rates, missed opportunities for diagnosis and treatment, weak drug resistance surveillance and the low access to quality TB control services due to the remoteness of communities, costs of transportation and limited medical insurance. Particular efforts are required with regard to TB control in border areas and among the migrant population. The emerging and re-emerging diseases and other health hazards are a warning that efforts to prevent and control infectious diseases and other health security risks cannot be relaxed. Working with partners outside the health sector is required to address life style, communication and discrimination issues related to health, especially in the areas of NCDs, tobacco use and mental health.
Protecting forest, biodiversity and other natural resources

Lao PDR has seen the number of extreme weather events such as droughts and floods increase over the past three decades, with temperature increases on average between 0.1 to 0.3 °C per decade between 1951 and 2000. Climate change models project an increase in intensity and in frequency of extreme events (primarily flooding), with implications on agriculture, food security, infrastructure, and lives. Climate change mitigation will depend mainly on reversing the loss of forests and other land use changes.

In Lao PDR, forest cover has decreased significantly over the past decade and in 2012 accounted for 9.5 million hectares or an estimated 40 percent of the country. The loss of forests has been a key factor driving the change in the country’s status regarding greenhouse gas emission, where it recorded a net sink of CO₂ in 1990 and then a net emission of CO₂ by year 2000. To address deforestation, the government is promoting community participation, payment for ecosystems services and sustainable forest management, which applies Forest Stewardship Council standards to all production forest areas. The Government has also placed about one-fifth of the country’s area under some degree of protection. Despite such measures, more species than ever are threatened with extinction.

Lessons learned for the post-2015 agenda

Over the past five years, Lao PDR has seen improvements in the policy and regulatory framework relating to natural resources and the environment. However, the main challenge is in monitoring and enforcement.

On the positive side, private sector involvement and community benefit-sharing are on the rise. Projects affecting protection forests are now required to contribute funds for natural resource management. For example, hydropower projects are required to contribute one percent of the total value of their annual electricity sale. The government and development partners will need to expand such initiatives together with others, such as ecotourism and payment for environmental services. The country will also need to scale up its participation in the UN-REDD+ programme, which offers positive incentives to reduce emissions from deforestation and forest degradation, and promotes the conservation, management and enhancement of forest stocks.

Ensuring safe water and sanitation

Lao PDR has achieved the MDG target on safe water and sanitation. In 2015, about 76 percent of the population are estimated to have access to improved sources of drinking water. The estimate of coverage by improved sanitation is 71 percent. Both are a three-fold increase from the 1990s. However, the high prevalence of open defecation is still a concern (38 percent in 2011/12 and an estimated 23 percent in 2015). The rural-urban gap has narrowed regarding the access to improved water sources but disparities remain significant across wealth quintiles. The inequities are far greater in sanitation than in water coverage. Studies in Lao PDR show that children living in households with improved water and sanitation are less prone to diarrhoea, stunting and underweight.

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a UN-REDD: The United Nations Collaborative Programme on Reducing Emissions from Deforestation and Forest Degradation in Developing Countries.
Water safety and water quality need increased attention. Surface water is the major source for urban water supply. While Lao PDR still has acceptable water quality in its rivers, this is increasingly threatened by pollution.\textsuperscript{58} Rural water supply draws largely from groundwater.\textsuperscript{69} Arsenic contamination is a significant problem in the south, as in other countries of the Mekong subregion.\textsuperscript{70} Lao PDR has its own Drinking Water Quality Standards, which makes Water Safety Plans mandatory with detailed surveillance and reporting requirements.

\textit{Lessons learned for the post-2015 agenda}

Investment in water, sanitation and hygiene is generally inadequate. Current spending levels are estimated to be about one-quarter of the needs. Sanitation, in particular, requires more attention and investment with dedicated funding from the government and development partners.
MDG 8. Develop a global partnership for development

Lao PDR still relies on official development assistance (ODA) for a significant share of its socio-economic development investments. ODA accounted for about 14 percent of total investment for the fiscal year 2012-13 and 10 percent for 2013-14. The Round Table Process remains an important national forum for meaningful dialogue on strategic development planning and the alignment of Development Partner support with national priorities and goals.

The Vientiane Declaration on Partnership for Effective Development Cooperation (2016-2025) will be adopted during the November 2015 high level Round Table Meeting. This meeting will renew the commitments from both the government and development partners to ensure more effective development cooperation. This Declaration will also align Lao PDR’s cooperation principles with the global agenda on effective development cooperation, including the 2012 Busan Partnership for Effective Development Co-operation, the 2014 Mexico High Level Meeting Communiqué, the 2015 Addis Ababa Action Agenda and the SDGs.

Lessons learned for the post-2015 agenda

The support by Development Partners to the MDGs (and SDGs in the future) should be coordinated, avoid duplication and be more innovative and results-oriented. Lao PDR will need to identify alternative development financing sources as well, such as South-South cooperation, public-private partnerships and philanthropic organisations.
MDG 9. Reduce the impact of UXO in Lao PDR

Addressing the impact of UXOs remains a challenge.\(^a\) With an estimate of 8.7 million hectares contaminated by UXO, Lao PDR has cleared over 55,000 hectares since 1996. Resources are among the constraints to expanding UXO clearance. On the positive side, the years have seen the number of casualties dropping from 300 casualties in 2008 to 119 casualties in 2010 and 45 casualties in 2014. The Government has adopted a new methodology for locating and clearing bombs that is expected to enhance the effectiveness of UXO clearance operations. The methodology is more results-oriented and future reporting will reflect this focus.

Lessons learned for the post-2015 agenda

The Government is already taking steps to address the capacity weaknesses found in assessments of the UXO sector, such as the need to improve the quality of clearance, the quality of reporting and mine risk education. The National Strategic Plan for the UXO Sector (2011 – 2020) “The Safe Path Forward II” provides the guiding framework.

Long-term strategies will need to strengthen national capacities as well as provide institutional support to the UXO sector, given the scale and scope of the issue, which lies well beyond the national capacity. Another challenge is to integrate the UXO sector better into the overall national development goal – the Eighth NSEDP has made a start in this regard. A victim assistance strategy and programme have been adopted for the period of 2014-2020. This will include the mainstreaming of UXO victim assistance into social services, such as the health, education and social welfare systems and the disability programme, since substantial long-term support and longitudinal tracking systems will be required for UXO survivors.

\(^a\) The term UXO is used generically for both unexploded ordnance and abandoned explosive ordnance.
Conclusions

In conclusion, Lao PDR has made much progress towards several of its national goals. It has already achieved or will achieve in 2015 the MDG targets on poverty and hunger reduction. It has achieved universal access to primary education, and gender equity in primary education. Lao PDR has achieved the international MDG target of reducing its maternal mortality ratio by 75 percent and has achieved its own national target on reducing child mortality. Lao PDR has more than halved the prevalence of all forms of TB from 1990 levels. Lao PDR has achieved the MDG targets on access to safe water and sanitation.

Lao PDR recognizes that much progress still needs to be made. The country is facing challenges in achieving full and productive employment, reducing undernutrition (notably stunting), achieving the completion of primary education and achieving secondary and tertiary education. Lao PDR also needs to achieve gender equity in secondary and tertiary education, as well as improve the role of women in employment and political participation. Maternal mortality is still high, while the international target of reducing under-five and infant mortality to one-third of 1990 levels has not yet been achieved. Tuberculosis prevalence, although declining, is much higher than previously estimated, while the rising incidence of HIV and malaria pose significant challenges. Improving environmental sustainability, reversing forest loss, and clearing UXO contaminated land are other areas where progress has been insufficient and international support is required.

This brief review of Lao PDR's progress and MDG achievements has identified the lessons learned along the way. Lao PDR is already taking corrective action on several fronts to address the areas where the country is facing challenges. The progress made and the lessons learned, together with Lao PDR's political commitment at the highest levels, lay a solid foundation for Lao PDR's development agenda in the post-2015 period, including the goal of graduation from LDC status. As with other international commitments in the past, Lao PDR's advancement towards its own national goals and priorities in the post-2015 period will be aligned with and contribute to the Sustainable Development Goals of the United Nations.
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