



UNITED NATIONS



LEAGUE OF ARAB STATES

THE MILLENNIUM DEVELOPMENT GOALS IN THE ARAB REGION 2007: A YOUTH LENS



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Foreword

The year 2007 marks the midpoint between the adoption of the United Nations Millennium Declaration and its eight Millennium Development Goals (MDGs) and the target date of 2015 for their attainment. Although the Arab region as a whole has made significant strides, progress has been unevenly distributed, and disparities between the different subregions and between individual countries continue to be large. Stronger and more concerted efforts are needed in order to attain the MDGs, not only at the regional, but also at the subregional and country levels. Additional global and regional support is specifically needed for the Arab least developed countries, where extreme poverty is widespread and maternal, child and infant mortality rates remain high. Furthermore, progress towards the attainment of the MDGs in many Arab countries has been severely constrained by ongoing violent conflicts. Therefore, restoring peace and stability in the Arab region is imperative.

The Millennium Development Goals in the Arab Region 2007: A Youth Lens, produced through a collaborative effort of United Nations agencies in the Arab region and the League of Arab States, and coordinated by the Economic and Social Commission for Western Asia, provides a review of current trends and progress in attaining the MDGs in the Arab countries at the regional and subregional levels. In doing so, special emphasis is given to the complexities and magnitude of issues facing young men and women between the ages of 15 and 24 in the Arab world. This group exhibited the largest population increase of all demographic categories, accounting now for more than 20 per cent of the total population. Specifically, this *Report* aims at establishing a policy framework that is youth- and gender-friendly and ensures that young people are not only beneficiaries, but also active agents of development and progress toward the attainment of the MDGs. The *Report* gives particular importance to three pressing issues that affect youth development in the Arab region and their impact on the attainment of the MDGs, namely: employment and education; political, social and cultural participation; and health and environment.

We recommend this *Report* to policymakers and development experts within and outside the Arab region, as well as to the general public, as a monitoring, awareness-raising and advocacy tool for working towards the attainment of the Millennium Development Goals by the year 2015.



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Methodology

Deliberative Approach

The Millennium Development Goals in the Arab Region 2007: A Youth Lens is the result of a participatory and collaborative approach between the United Nations agencies in the Arab region and LAS. The preparation of the Report was coordinated by ESCWA.

The *Report* passed through various stages of a thorough consultation process among representatives of United Nations agencies, regional development experts, representatives of youth organizations and Government officials from the Arab States. In February 2007, the Expert Group Meeting on the Preparation of the MDGs 2007 was held in Amman, during which participants discussed key challenges and strategies to achieve the MDGs in the Arab region and formulated guidelines for this *Report*. The Meeting also included a youth round table with members from several Arab non-governmental organizations (NGOs) and a discussion session between Government officials. In August 2007, ESCWA organized a seminar in Beirut, where representatives of regional United Nations agencies and development experts discussed a preliminary draft and prepared a set of recommendations to be included in the final version of the *Report*. The preliminary draft was also shared with representatives of regional youth organizations, and their comments and feedback were incorporated in the final version of the *Report*.

Technical Note

The *Report* is based on the latest and most comprehensive data available in national MDGs reports and statistics compiled from United Nations organizations, the Organisation for Economic Co-operation and Development (OECD) and the Inter-Parliamentary Union (IPU). Country data are mostly drawn from national statistics provided by Governments to the specialized agencies. For some indicators, however, Government agencies may have more recent data not yet available to the specialized agencies in the region; for others, the data provided by specialized agencies may differ to some degree from data reported by Governments, as international comparability has to be ensured.

In cases where specific country data points for some of the indicators were unavailable, ESCWA consulted the United Nations Statistics Division (UNSD) database on MDGs, ensuring consistency between all sources. Complete data tables were shared with the agencies that contributed to the respective Goal.

Data for the Goals were compiled and provided by or from the following institutions and organizations:

Goal 1: UNDP-SURF

Goal 2: UIS

Goal 3: IPU, UIS and UNSD

Goal 4: UNICEF-MENARO

Goals 5 and 6: WHO-EMRO

Goal 7: ESCWA-SDPD and UNDP-SURF

Goal 8: ESCWA-EAD, ESCWA-ICTD and UNDP-SURF

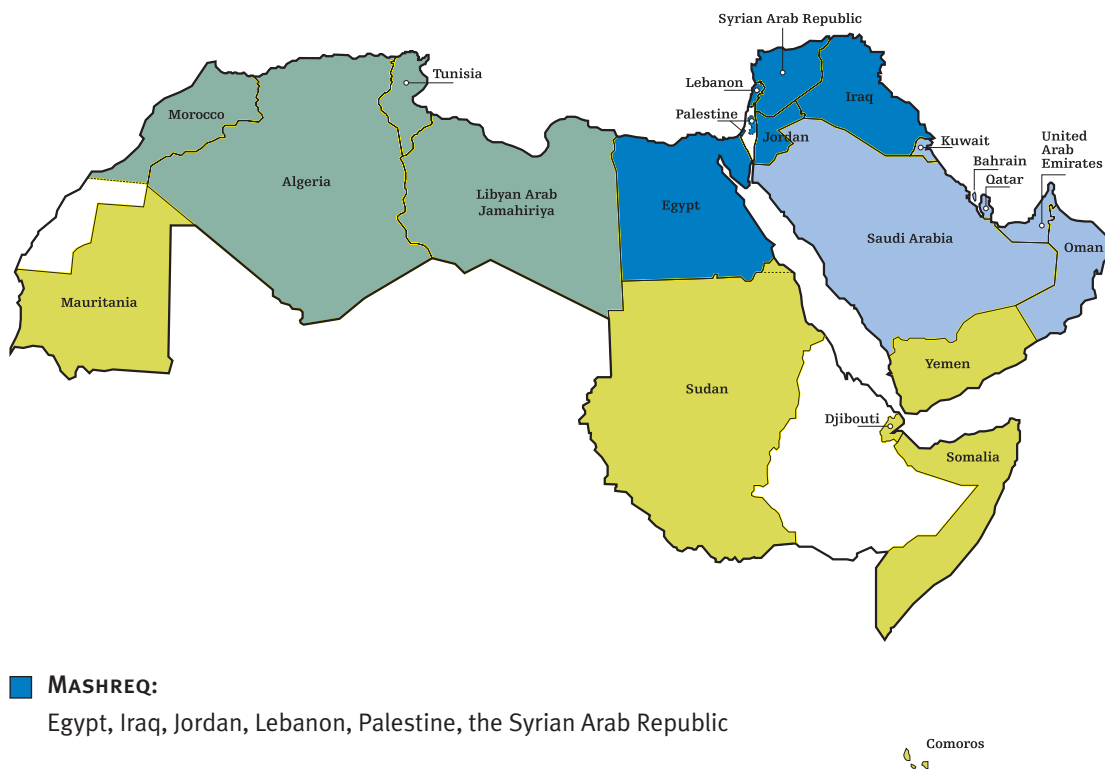
The analyses in this *Report* are mainly based on regional and subregional data. Averages were calculated by weighting the country data submitted by the agencies designated to be primary data providers for the respective indicators.

Country weights for the various indicators were determined by using such adequate population figures as total population, 15- to 24-year-olds, or number of live births. In order to obtain total population statistics, ESCWA consulted United Nations Department of Economic and Social Affairs (UN-DESA) Population Division report *World Population Prospects: The 2006 Revision*.

In several cases, country data referred to years for which the respective population figures were not available. In such cases, either the population data point referring to the closest year, or the arithmetic average of the two closest available population figures, was used to determine the respective country weights. For example, if data for a specific MDG indicator existed for the year 2001 and population data for that year were not available, the 2000 population data point would be used; if MDG data existed for the year 2002 or 2003, the average of the 2000 and 2005 population data point would be used; while if MDG data existed for the year 2004, the 2005 population data point would be used.

Subregional and regional averages were calculated only in cases where at least 50 per cent of the relevant indicator for example population, school-age children and GDP, is represented, or where at least 50 per cent of the countries in the respective region or subregion are represented. In addition, when reporting regional and subregional averages of indicators at different points in time, it was ensured that country samples were identical. The rule, generalized and applied to all eight Goals, was deduced from the United Nations Millennium Indicators Series Metadata, available at: <http://mdgs.un.org/unsd/mdg/Metadata.aspx>.

Subregional Groupings



■ **MASHREQ:**

Egypt, Iraq, Jordan, Lebanon, Palestine, the Syrian Arab Republic

■ **MAGHREB:**

Algeria, the Libyan Arab Jamahiriya, Morocco, Tunisia

■ **GULF COOPERATION COUNCIL (GCC):**

Bahrain, Kuwait, Oman, Qatar, Saudi Arabia, the United Arab Emirates

■ **ARAB LEAST DEVELOPED COUNTRIES (LDCs):**

the Comoros, Djibouti, Mauritania, Somalia, the Sudan, Yemen

The division of countries into regional sub-groupings adopted in this *Report* is based on a combination of per capita income levels, geographical proximity and similarities in economic and social characteristics and conditions.

For comparative reasons, developing regions' averages were included in most tables and figures.

Developing Regions include nine regions and their respective countries, a listing of which is available at: http://mdgs.un.org/unsd/mdg/Resources/Static/Data/MDGRegionCodes_200611.xls.

The designations employed and the presentation of the material in the present publication do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city, or area of its authorities, or concerning the delimitation of its frontiers or boundaries.

Abbreviations

ACT	artemisinin-based combination therapy
AED	Academy for Educational Development
AGFUND	Arab Gulf Programme for United Nations Development Organizations
CEDAW	Convention on the Elimination of All Forms of Discrimination against Women
CFCs	chlorofluorocarbons
CIS	Commonwealth of Independent States
CO ₂	carbon dioxide
CRC	Convention on the Rights of the Child
DACUM	Developing A Curriculum
DOTS	Directly Observed Treatment Short course (tuberculosis)
EFTA	European Free Trade Association
ERF	Economic Research Forum
ESCWA	Economic and Social Commission for Western Asia
ESCWA-EAD	Economic Analysis Division
ESCWA-ICTD	Information and Communication Technology Division
ESCWA-SDPD	Sustainable Development and Productivity Division
EU	European Union
FAO	Food and Agriculture Organization of the United Nations
GAFTA	Greater Arab Free Trade Area
GCC	Gulf Cooperation Council
GDP	gross domestic product
GPI	gender parity index
GPRS	general packet radio service
HPI	human poverty index
IBA	important bird area
ICCPR	International Covenant on Civil and Political Rights
ICERD	International Convention on the Elimination of All Forms of Racial Discrimination
ICESCR	International Covenant on Economic, Social and Cultural Rights
ICT	information and communications technology
IEA	International Association for the Evaluation of Educational Achievement
ILO	International Labour Organization
INJAZ	Economic Opportunities for Jordanian Youth
IOMS	Islamic Organization for Medical Sciences
IPPF	International Planned Parenthood Federation
IPU	Inter-Parliamentary Union
ITC	International Trade Centre (UNCTAD/WTO)

ITU	International Telecommunication Union
IUCN	International Union for the Conservation of Nature and Natural Resources
IWRM	integrated water resource management
KAP	knowledge, attitude and practice
LAS	League of Arab States
LDCs	Least Developed Countries
MENA	Middle East and North Africa
MMR	maternal mortality rate
NER	net enrolment rate
NGO	non-governmental organization
OAPEC	Organization of Arab Petroleum Exporting Countries
ODA	official development assistance
ODS	ozone-depleting substances
OECD	Organisation for Economic Co-operation and Development
OHCHR	Office of the United Nations High Commissioner for Human Rights
PAPFAM	Arab Project for Family Health
PC	personal computer
PPP	purchasing power parity
RANAA	Regional Arab Network Against AIDS
SANAD	Self-Employment and National Autonomous Development (Oman)
SMEs	small and medium enterprises
SMS	Short Message Service
SPNL	Society for the Protection of Nature in Lebanon
TB	tuberculosis
TIMSS	Trends in International Mathematics and Science Study
U ₅ MR	under-five mortality rate
UDHR	Universal Declaration of Human Rights
UIS	UNESCO Institute for Statistics
UN-DESA	United Nations Department of Economic and Social Affairs
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNCTAD	United Nations Conference on Trade and Development
UNDP	United Nations Development Programme
UNDP-SURF-AS	Sub-Regional Resource Facility for Arab States
UNEDBAS	UNESCO Regional Office for Education in the Arab States
UNEP	United Nations Environment Programme
UNEP-ROWA	Regional Office for West Asia
UNEP-WCMC	World Conservation Monitoring Centre
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UNICEF-MENARO	Regional Office for the Middle East and North Africa
UNIDO	United Nations Industrial Development Organization

UNIFEM	United Nations Development Fund for Women
UNIFEM ASRO	Arab States Regional Office
UNSD	United Nations Statistics Division
USAID	United States Agency for International Development
VCT	Voluntary Counselling and Testing
VOAY	Voice of Arab Youth
WFP	World Food Programme
WHO	World Health Organization
WHO-EMRO	Regional Office for the Eastern Mediterranean
WTO	World Trade Organization

Executive summary

The year 2007 marks the midpoint between the adoption in 2000 of the Millennium Development Goals (MDGs), under the United Nations Millennium Declaration, and the target date of 2015 for their attainment. Since adopting the eight Goals, the Arab region has achieved progress in many relevant areas, including significant strides in health and education. However, despite the efforts Arab countries have invested in meeting the Goals, there have been setbacks and constraints attributable to a number of factors, including the relatively poor economic performance in the 1990s and at the turn of the new century, inadequate financing of social policies, lack of administrative and managerial competencies, and increasing political tensions and conflicts. The Arab region continues to be characterized by sharp disparities between the different subregions, particularly between the high-income countries of the Gulf Cooperation Council (GCC) and the Arab least developed countries (LDCs). Those disparities are not only large in terms of level of development, but also in terms of progress made towards the attainment of the MDGs. Indeed, while the GCC countries seem to be on track in achieving most MDG targets, Arab LDCs and conflict-ridden Iraq and Palestine lag significantly behind, making it unlikely that they will be able to meet the majority of the targets by 2015. Though national specificities do, for the most part, account for the observed disparities, common issues can be clearly discerned across all Arab countries and within sub-groups of countries.

This *Report* gives special emphasis to the complexities and magnitude of issues facing young men and women aged between 15 and 24 in the Arab world. That age group exhibited the largest population increase of all demographic categories since the 1950s, accounting now for more than 20 per cent of the total population. With such an unprecedented number of young people, Arab Governments should pay particular policy attention to the specific needs and priorities of that demographic group.

Chapter II of this *Report* covers each of the eight Goals, assessing achievements and progress at the regional and subregional level, as well as identifying major obstacles to their attainment. With respect to Goal 1, trends in the proportion of people living below national poverty lines highlight the fact that the Arab region as a whole has not experienced significant progress in reducing income poverty. Based on data for 12 Arab countries, the proportion of population living below the national poverty lines fell only slightly across the region. Data also confirm an enormous increase in poverty in Iraq and Palestine. The malnutrition rate for the region decreased at a slow pace, indicating critical malfunctions in development efforts. The proportion of underweight children under 5 years of age remained relatively high in the year 2000, with no noticeable improvement from the 1990 level and with significant differences in progress among individual countries. Moreover, individual country data indicate wide disparities in the proportion of underweight children. In Yemen, 45.6 per cent of children were underweight in 2003, compared with only 3.3 per cent in Lebanon in 2002. Data also reveal that the number of food-deprived persons rose from approximately 20 million in 1991 to around 23.3 million in 2002. To combat poverty in the region, the focus will need to be on social inclusion, the protection of economic and social rights, intraregional

cooperation and on policies that create jobs. In addition, policies will need to particularly address rural areas, as rural poverty rates in most Arab countries significantly exceed those for urban areas. Political commitment is indispensable for guaranteeing the mobilization and allocation of adequate resources for pro-poor interventions and, ultimately, the protection of all human rights.

Labour markets in most Arab countries are characterized by widespread underemployment and very high rates of youth unemployment, with around 25 per cent of Arab youth unemployed in 2005. The situation is particularly grave for young women, with the unemployment rate for young females estimated at around 34 per cent in 2005. As such, many young Arab people are resorting to migration, leading to a serious brain drain problem in the Maghreb, Mashreq and Arab LDCs. Policy priorities include addressing the quality of education and tailoring the teaching of skills to the demands of the labour market, youth participation in decision-making, and Government efforts to improve domestic labour market institutions and to support the development of the private sector, aiming at improving its capacity to absorb labour.

Concerning Goal 2, the Arab region as a whole has achieved significant progress in access to education despite rapid population growth, which constitutes a main challenge to the provision of basic education. However, as a consequence of the socio-economic differences between the four subregions, progress among Arab countries has been inhomogeneous. This is exemplified by the fact that of the 7.5 million out-of-school children in the region, two thirds live in LDCs. Indeed, while the number of out-of-school children in the Maghreb fell by two thirds between 1999 and 2005 to around one million, Arab LDCs need to increase efforts to achieve universal primary education. Despite significant improvements, about one child in two was out of school in Arab LDCs in 2005. In addition, the youth literacy rate in Arab LDCs improved by only 11 percentage points since 1990, reaching 70 per cent in 2005. In other words, almost one young person out of three in Arab LDCs is illiterate. Moreover, 73 per cent of out-of-school children in Arab LDCs are girls.

The challenges to achieving universal primary education and high levels of literacy in the Arab region are manifold and diverse. They include difficulties in acquiring adequate funding, especially in Arab LDCs; poor management skills in public schools; and a lack of qualified teachers, particularly a shortage in female teachers in rural areas, which translates into lower enrolment rates for girls. Moreover, the lack of a proper incentive system poses a particular challenge. For parents from low-income households, the compounded effect of poverty and of a perceived low rate of return to education renders the opportunity cost of sending a child to school high. Morocco and Yemen have attempted to address those problems, for example through school feeding programmes. Furthermore, improving the quality of the curriculum is an important tool in enhancing the incentives of children to remain in school. The introduction of innovative ideas and a more application-oriented approach, similar to what has been applied in curricular reforms in Tunisia and Morocco, can also have a positive effect on children's desire to learn. Security issues pose a serious threat to the achievement of MDG 2 in the conflict countries, namely, Iraq, Palestine, Somalia and the Sudan. Teachers and students cannot reach school due to destroyed infrastructure and other barriers to freedom of movement, and some may join one of the conflict parties or flee the country.

Concerning Goal 3, the region has recently witnessed a surge in efforts by Governments, non-governmental organizations and civil society organizations to tackle all forms of discrimination against women, and

to invest in women's issues on a large scale. On the education front, Arab women have moved closer to equality, with the gender parity index measured by the girls-to-boys gross enrolment ratio, having substantially increased at all levels of education over the period 1991 to 2005. Indeed, progress towards gender parity has been significant in the Mashreq, Maghreb and GCC countries. However, despite recording the most progress of all subregions in primary education, Arab LDCs still face a major challenge in guaranteeing girls equal access to secondary and tertiary education.

The gains achieved by Arab women in access to education have not yet been translated into greater economic and political participation. The share of women in wage employment in the non-agricultural sector has mostly remained constant in all subregions since 1990. For the region as a whole, it stood at 18.3 per cent in 2004, slightly down from 18.5 per cent in 1990; however, official statistics measuring female participation in labour markets fail to accurately reflect reality as they exclude all forms of non-paid work. The percentage of seats held in national parliaments increased only slightly since 1990, with women's participation in parliament in the Arab region standing at 8.7 per cent in 2007, a figure among the lowest in the world. Policies that aim at eliminating gender disparities must address both employment issues and political participation to ensure that the Arab countries remain on the path towards gender equality in all its dimensions.

Indeed, there is an interconnected matrix of legal, educational, social, behavioural and economic factors that hinder the inclusion of Arab women in the labour market and impede their participation in political decision-making. On the employment front, policies should address labour and family laws and regulations that discriminate against women and should offer women special conditions. On the political participation front, hurdles are mainly social in nature. Public attitudes frequently express a clear prejudice against women's participation in political life. However, some action may be taken, for example enforcing quota systems, which have proven to bring an influx of women into national parliaments.

With respect to child mortality rates, the focus of Goal 4, the Arab region continues to be characterized by strong disparities across the four subregions and among individual countries. No other region in the world records such wide contrasts in that indicator. Indeed, while the region has made significant progress since 1990, and is not far off track to meet the target of reducing the under-five mortality rate by two thirds over the period 1990 to 2015, more than one child in ten dies before reaching his/her fifth birthday in Arab LDCs. In addition, almost 75 per cent of deaths before the age of 5 in the Arab region occur in the first year of life.

In many Arab countries, there is a need to improve access to basic social services and the quality of care, and to promote the use of health services and care practices, including child feeding, better hygiene, maternal care and nutrition interventions that aim at improving weight gain in pregnancy. Special support is required for extending the coverage of immunization and use of safe water and sanitation by households living in Arab LDCs and countries in conflict. Improving the livelihoods of the poorest population groups and youth access to education will also contribute to lowering mortality rates. Indeed, the ability of young people to plan safe childbearing and to raise healthy children requires not only direct investment in reproductive health services and care, but also educational and communication interventions that tackle

the issue of early marriage, early pregnancy and poor child-spacing, especially through the participation and empowerment of girls, and that address existing inequalities.

Reducing maternal mortality, as stipulated in Goal 5, requires universal access to reproductive health and rights. In the Arab region, the average maternal mortality rate fell by almost 34 per cent between 1990 and 2000 to about 272 per 100,000 live births. As such, the region as a whole is on track in reducing the maternal mortality rate by three quarters from its 1990 level by 2015. The decline in maternal mortality is linked to the significant increase in births attended by a skilled health professional. In fact, births attended by skilled health personnel rose by over 16 percentage points between 1990 and 2000. There are great variations in the maternal death level among countries of the region, ranging from levels below 10 per 100,000 live births in some GCC countries to around 1,600 per 100,000 in Somalia in 2000. The burden of maternal death in the Arab region is primarily carried by Arab LDCs and, to a lesser extent, by Iraq and Morocco. The decrease in maternal mortality in the Arab region can also be attributed to the reduction in adolescent pregnancy. Adolescents aged between 15 and 19 are twice as likely to die during childbirth, and those under 15 are five times as likely to die during childbirth compared with women aged 20 to 29. A major challenge to meeting the educational, informational and clinical needs of female adolescents in the Arab region is the eradication of existing social and cultural biases against young women. Therefore, the needs of pregnant adolescents must be approached from a holistic standpoint, rather than a solely bio-medical perspective. Specific policies that positively impact maternal health include the following priorities: promoting awareness about symptoms and signs of pregnancy and childbirth complications; providing pregnancy tests, counselling, early detection, and psychological and nutritional support; providing antenatal care, including the treatment of malaria and other communicable diseases; and promoting post-partum care, especially for adolescents, and supporting breastfeeding.

Though the prevalence of HIV/AIDS, which is one of the concerns of Goal 6, continues to be relatively low in Arab countries, risks and vulnerability are high as the epidemic is on the rise. Based on data for 10 Arab countries, an estimated 68,000 people were newly infected with HIV in 2006, bringing the estimated number of persons living with the virus to around 460,000. Djibouti and the Sudan have the highest prevalence rates among the general population in the Arab region. Several recent surveys have shown that in the most affected countries the level of knowledge on HIV, especially among the young, and the percentage of people adopting preventive practices are extremely low. Access to antiretroviral therapy is only available for a fraction of people living with HIV in the Arab countries. According to recent World Health Organization (WHO) estimates for 15 Arab countries, only around 6.5 per cent of those in need of antiretroviral therapy actually received treatment. If the spread of HIV is to be halted in the Arab region, a substantial scaling-up of services related to prevention, information and multi-sectoriality must be ensured, coupled with a profound qualitative enhancement of such services.

While malaria has been almost eliminated in the majority of Arab countries, it remains highly endemic in Arab LDCs, where on average 3,313 cases per 100,000 persons were reported in 2005. Djibouti, Somalia, the Sudan and Yemen accounted for 98 per cent of notified cases in the region. Achievement of the MDG target in the subregion, and in the region as a whole, is therefore heavily dependent on progress in those four countries. Factors that have hindered progress in Arab LDCs include: limited coverage of

primary health-care services; poor quality of malaria diagnostic services; lack of mechanisms for delivery of artemisinin-based combination therapy (ACT) at the community level; high cost of new drugs; weak logistic and supply system for timely delivery of drugs; low compliance of the private sector to new treatment guidelines; and presence of counterfeit drugs in the market.

Tuberculosis (TB) remains a significant public health problem, and is probably the leading cause of communicable disease deaths in adults in the Arab region. In 2005, an estimated 240,000 people in the region developed TB and 43,000 died from it, corresponding to incidence and mortality rates of 75 per 100,000 and 13 per 100,000, respectively. The average prevalence rate in the region fell by 27 per cent since 1990 to 107 per 100,000 in 2005. Arab LDCs are most affected; a total of 134,000 people developed the disease in 2005, accounting for almost 56 per cent of all new TB cases in the entire region. In order to hasten the decrease of the TB burden, countries have developed strategic plans in line with the Global Plan to Stop TB 2006-2015. Such plans aim at rapidly scaling up TB care, especially through improving case detection capacities. They also indicate the financial requirements for scheduled activities.

With respect to Goal 7, all Arab countries share, in varying degrees, the major challenge of improving environmental governance and integrating environment resource management into poverty reduction strategies and national development plans. A significant part of the environmental problems the region is facing is related to poor management, weak institutional capacity and insufficient public expenditure on environmental issues. Total emissions of carbon dioxide in the region soared to 1.2 trillion metric tons in 2003, an increase of 81 per cent since 1990, which is partly accounted for by a surge in population of 35 per cent. In addition, per capita carbon dioxide emissions also intensified, contributing to the increase in total emissions.

The region as a whole faces a severe problem concerning water resources. Seven of its countries rank amongst the ten most water-scarce in the world. Most Arab countries receive a large part of their water resources from outside their borders, or share their resources with other countries. By 2004, water demand had already exceeded the actual water resources available in the region by about 46 per cent. For the period 1990 to 2004, the proportion of the population using improved drinking water sources in the Arab region remained constant at around 83 per cent. Since 1990, the subregions have been gradually improving access to sanitation facilities for their populations. However, in 2004, the proportion of the population in Arab LDCs using improved sanitation facilities was still as low as 36 per cent. If Arab countries maintain their sluggish trajectory, an estimated 124 million people in the region will be without access to basic sanitation in 2015, half of them living in Arab LDCs. Moreover, it is estimated that in 2001, around 57 million people in the Arab region lived in urban slums. In Arab LDCs, slum-dwellers represented around 70 per cent of the urban population in 2001. Consequently, it is vital for Governments to develop public policies and adopt multisectoral approaches aimed at improving the provision of adequate housing for low-income groups, and ensuring equal access to social services and basic infrastructure.

For the Arab region, further integration into the global economy and enhanced intraregional trade cooperation, as envisioned in Goal 8, is of particular importance. So far, trade has had less of an impact on the economies of Arab countries than in other countries of the world. Intraregional trade accounts for

only around 11 per cent of total Arab trade, a figure far below that of other world regions. Such sluggish performance can be attributed to a myriad of factors, including the lack of complementarities among Arab economies, non-compliance by many Arab countries to their obligations under trade agreements, the absence of credible dispute settlement mechanisms, high transaction costs, and excessive regulation and legislation. However, most Arab countries have taken serious steps towards liberalizing trade and introducing measures to facilitate integration into the world economy. As of June 2007, 12 Arab countries were members of the World Trade Organization (WTO), while 6 countries were engaged in membership negotiations.

Goal 8 also emphasizes the financial efforts needed to be undertaken by developed countries to promote development in LDCs. Official development assistance (ODA) to Arab countries decreased throughout the 1990s, partly as a result of widespread scepticism concerning the role of foreign aid in development. In fact, between 1990 and 2000, ODA to the Arab region fell by a significant 58.6 per cent. However, since then, it has been on a steady upward trend, in part due to large debt forgiveness grants provided by the Organisation for Economic Co-operation and Development (OECD) Development Assistance Committee members to Iraq in 2004 and 2005. The distribution of ODA among Arab subregions and countries is far from equitable, as geopolitical reasons, economic interests and past colonial ties often prevail over developmental needs when decisions concerning aid allocation are made by major donors. Against that backdrop, it is essential for donors to conform to the Paris Declaration on Aid Effectiveness, endorsed in March 2005, which lays down a practical, action-orientated road map to improving the quality of aid and its impact on development, particularly on MDG attainment.

With very few exceptions, access to information and communications technology in the 22 Arab countries has increased steadily since 1990. However, despite the progress, the region as a whole lags considerably behind the world average in terms of fixed telephone lines, personal computers and Internet users. Moreover, disparities between Arab countries remain very high. The digital divide is most noticeable when comparing the advanced GCC member States with many poorer Arab countries.

This *Report* also addresses the linkages between MDGs and youth priority issues in the Arab region. It highlights political instability, demographical changes, stark subregional disparities and pervasive gender disparities as overarching issues relevant to MDG attainment in the region. It demonstrates how such issues affect particularly the young within the framework of education, employment, political participation, health and environment.

As education and productive employment are among the key elements of youth development in the Arab region, an overview of the access to and the quality of education, as well as its nation-building potential, is provided. In addition, youth unemployment and transition to the workforce are assessed and, consequently, internal and international migration is highlighted, revealing different migration patterns across the various Arab subregions. Moreover, the significance of youth participation in political, social and cultural life, and the restrictions imposed upon the young in most Arab countries are also underlined. Despite distinct differences between the Arab subregions, the exploitation of natural resources, expanding populations and urban growth are common elements and, accordingly, given due attention. Indeed, with

population growth rates close to 3 per cent, albeit declining, unemployment rates rising above 20 per cent and urbanization rates in excess of 60 per cent, demographic pressures will continue to constitute a core development problem and a major challenge to the environment in the future. Finally, the *Report* addresses youth health issues and education, and the role of youth in health promotion. As in most Arab countries, chronic diseases are the leading cause of death, emphasising the need for health education in order to equip young people with the information they need to substantially improve their chances of becoming healthy, productive citizens.

The *Report* concludes by providing a youth policy framework for the Arab region, which assumes that young men and women are not only beneficiaries, but also active agents of economic, social and political transformation. The framework is based on the dual objective of improving the educational, recreational and employment opportunities for young people, and creating an environment that promotes their participation in public life and decision-making processes. Policy recommendations are customized by taking into consideration the following four dimensions: the average income levels in a country and the distribution of income; the stage of demographic transition, which is relevant in determining the financial implications of mid- and long-term policies; an assessment of the skills, capabilities and opportunities of young men and women in a country; and the extent to which young people are able to actively participate in public life and decision-making processes.

Based on assessments of those four dimensions in the different subregions, a youth policy framework guided by three main objectives can be established. The first objective is creating an enabling macroeconomic and institutional environment as this is a prerequisite to offering young people better opportunities in life. The second objective is expanding knowledge, skills and capacities of young men and women. Educational development in the Arab region is mostly seen as a quantitative exercise that can be addressed by funding more schools, teachers and textbooks. Educational policies should focus on improving the qualifications of teachers and on creating better incentives for them, as well as for students and school administrators. The third objective is promoting and strengthening youth participation in decision-making processes. Young men and women are to be provided with the opportunity to voice opinions, to participate in public decision-making, and to shape community priorities and service delivery.

Future progress towards MDG attainment in the Arab region depends to a large extent on whether Governments succeed in more adequately addressing the needs of young people and in making better use of the potential the “youth bulge” offers. At the same time, the considerable disparities in living conditions between Arab subregions and individual countries, which are highlighted throughout this Report, call for intensified regional and South-South cooperation activities. At the midpoint between the adoption of the Millennium Declaration and the target date for MDG attainment, it is clear that Arab LDCs and countries in conflict need to make much faster progress over the coming years in order to be able to reach the eight Goals and their corresponding targets by the year 2015. That requires not only intensified policy efforts in those countries themselves, but also more generous and effective financial assistance from developed countries and a further strengthening of regional cooperation between Arab countries. At the economic level, the low degree of regional integration represents a significant obstacle for higher and more equitable growth. In addition, intraregional migration contributes significantly to

the brain drain several Maghreb and Mashreq countries and Arab LDCs have been experiencing. Finding sustainable solutions to such issues requires new dialogue and closer partnership. Regional cooperation can also play a major role in accelerating progress towards social and environmental development goals. Sharing best practices and expertise in education and health among Arab countries can contribute to significant improvements in those indicators. With respect to the environmental dimension, sustainable development studies have frequently highlighted the need for more and better coordination of water and energy policies among Arab countries. In addition, common strategies are indispensable to address such transboundary environmental issues as pollution and desertification. Therefore, promoting cooperation and dialogue between Arab countries at the economic, political and social levels should be placed high on the development agenda.

INTRODUCTION

The Millennium Development Goals (MDGs) were set by global leaders during the United Nations Millennium Summit in September 2000. A total of 189 countries around the world adopted the Millennium Declaration, which specifies a set of 8 time-bound and measurable Goals and 18 targets to be achieved by 2015, as well as 48 indicators to measure progress in the different areas. The eight MDGs range from eradicating poverty to promoting women's rights, reducing child and maternal mortality rates and ensuring environmental sustainability. A listing of the Goals and their respective targets and indicators is attached in the annex.

Since adopting the Millennium Declaration, the Arab region has achieved progress in many MDG areas, including making significant strides in health and education. However, despite efforts by the Arab countries, there have been setbacks and constraints attributable to several factors, including the relatively poor economic performance in the 1990s and at the turn of the new century, inadequate financing of social policies, and increasing political tensions and conflicts. The Arab region is characterised by sharp disparities between the different subregions, particularly between the high-income countries of the Gulf Cooperation Council (GCC) and the least developed countries (LDCs). According to UNDP Human Development Report 2006, Kuwait ranked 33rd in the Human Development Index, whereas Djibouti and Yemen ranked 148th and 150th, respectively, out of a total of 177 countries. Disparities are not only large in terms of level of development, but also in terms of progress made

towards the attainment of the MDGs. Indeed, while the GCC countries seem to be on track in achieving most MDG targets, Arab LDCs and conflict-ridden Iraq and Palestine lag significantly behind, making it unlikely that they will be able to meet most targets by 2015. Though national specificities do, for the most part, account for the observed disparities, common issues can be clearly discerned across all Arab countries, or within sub-groups of countries. Given that this Report aims to assess progress towards MDG attainment through a region-specific framework, challenges and success stories will be analysed on a regional, subregional and country basis. However, the scarcity of comprehensive and reliable MDG-related data, statistics and information continues to pose a serious challenge for any analysis in that area, highlighting the need for institutionalizing MDGs and increasing the resources available for monitoring and analysing progress.

The preceding progress report, *The Millennium Development Goals in the Arab Region 2005*, identified major challenges to meeting the Goals which remain relevant in 2007, namely, threats to peace and security; high levels of poverty and mortality rates in Arab LDCs; rampant unemployment, especially among young people across the region; gender disparities in the areas of employment and political participation; and weak institutional capacities to protect human rights and ensure environmental sustainability. In order to anchor this Report in the region, a thematic approach was adopted. Youth, including the specific needs and challenges faced by young people, was chosen

as the region-specific theme to be examined with regards to progress towards the attainment of the MDGs.

The current demographic situation suggests an unprecedented “youth bulge” that is not only unique to the Arab region, but that also significantly impacts progress towards MDG attainment. In 2005, young people between the ages of 15 and 24 formed 18 per cent of the world’s total population, estimated at 1.17 billion, with the vast majority, 86 per cent, living in the developing world. In the Arab region, the total number of young people has doubled since 1980, from 33 million to 66 million, representing 20.6 per cent of the population.

The situation of young people in developing countries today is often characterized by extreme disparities in access to economic and social resources. An estimated 209 million young people, or 18 per cent, live on less than one dollar a day, and an estimated 57 million young men and 96 million young women remain illiterate. In addition to inadequate education, youth in most parts of the developing world face high insecurity in the labour market. In 2003, 88 million young people throughout the world were estimated to be unemployed, corresponding to a youth unemployment rate of 14.4 per cent and a global unemployment rate of nearly 40 per cent. Hundreds of millions more work fewer hours than they would like, while still others work long hours with little gain and no social protection.¹ The problem of youth unemployment and underemployment is particularly grave in the Arab countries,

where around one third of 15- to 24-year-olds lack jobs.

With such an unprecedented number of young people, Governments in the Arab region should pay particular policy attention to the specific needs and priorities of that demographic group. All the countries in the region have freely entered into international legal obligations to ensure the enjoyment of the right to education, work and health for all people living within their territories. In addition to the obligation to take measures for the progressive implementation of those rights, a failure to do so will have negative consequences on society that will persist long into the foreseeable future.

In order to truly see MDGs through a youth lens, it is important to make the Goals context-specific and relate the broader framework of values, principles and legal obligations enshrined in the United Nations conventions and summits on civil, economic, political, social and cultural rights to the particular social, economic and political context of each country and community. Such a human rights-based approach to youth-sensitive development is in line with that adopted by the United Nations Millennium Declaration, which explicitly places both human rights commitment and development goals at the centre of the international agenda for the new millennium.² Indeed, human rights are a requirement for the attainment of the MDGs: promoting and protecting human rights strengthens efforts to meet the Goals and provides a legal framework to hold key actors accountable through such processes

(1) UN-DESA, *World Youth Report 2005: Young people today, and in 2015* (United Nations, New York 2005), available at: <http://www.un.org/esa/socdev/unyin/wyr05.htm>.

(2) Article 25 of resolution 55/2, adopted by the General Assembly, United Nations, New York, 6-8 September 2000.

and institutions as courts, human rights institutions and treaty-monitoring bodies. Each MDG aims to fulfil a particular civil, economic, political, social or cultural right and should be seen as part of a broader structure of international human rights entitlements and obligations.³ All eight Goals are closely related to basic human rights that have been enshrined in a number of international treaties and conventions. Indeed, they are based on the civil, economic, political, social and cultural rights originally set forth in the Universal Declaration of Human Rights (UDHR), articles 22, 24, 25 and 26, and in other human rights instruments. They include the International Covenant on Civil and Political Rights (ICCPR), the International Covenant on Economic, Social and Cultural Rights (ICESCR), and the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), the International Convention on the Elimination of All Forms of Racial Discrimination (ICERD), the Convention on the Rights of the Child (CRC), the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families and the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment.

The Goals are unprecedented in their ambition to galvanize national commitment and catapult a set of broad and global economic, social and environmental priorities on the interna-

tional development agenda. In particular, they have lent political weight to issues of poverty reduction and made Governments accountable for those issues at the global level. The Goals, however, lack the rigour and specificity to serve as a policy framework, particularly when addressing the situation of a selected target group, namely, the young, as is the case in this Report.

The multidimensionality of the Goals may cover the breadth of poverty reduction and development efforts, but they do not necessarily grasp the depth of those issues. To focus on the Goals alone would be to short-change the complexity and cross-dimensional nature of youth issues. Young people form a distinct group and have their own evolving and dynamic needs and challenges which cannot be tied down to a generic template of development priorities. Issues relevant to the young span legal, social, economic and cultural dimensions, and address their transition to adulthood and recognition as key actors in development strategies. Furthermore, the issues they face as a group include social and economic integration, participation and migration. The MDG framework, confined to specific goals and indicators, is unable to identify youth-specific parameters that articulate those realities and the predicaments young people face. Thus, in order to translate the broader MDG aims for social equity into youth-specific policies and impact, it is important to bear in mind the need to contextualize

(3) MDG 1 relates closely to the right to an adequate standard of living, as enshrined in UDHR, article 25; and ICESCR, article 11, including the right to adequate food, clothing and housing. MDG 2 relates closely to the right to education, as enshrined in several of the core instruments, including UDHR, article 25; ICESCR, articles 13 and 14; CRC, article 18; CEDAW, article 10; and ICERD, article 5 (e) (v). MDG 3 relates closely to the non-discrimination standards enshrined in all human rights treaties, first and foremost CEDAW. MDG 4 relates closely to several rights, including the right to life and the right to health. MDG 5 equally relates to the right to health enshrined in several treaties, including CEDAW, ICESCR, ICERD and CRC. MDG 6 similarly finds a legal framework in UNDH, CEDAW, ICESCR, CRC and ICERD, as does MDG 7, which relates to the right to an adequate standard of living, including adequate food, clothing and housing, and the right to health, as enshrined in several core treaties. MDG 8 calls for developing partnerships, and is also linked to human rights provisions of the United Nations Charter and UDHR, as well as several treaties, including ICESCR and CRC.

the specific and integrative challenges young people face and the policies required to address them. In addition, the MDG framework, in its narrow sense, does not sufficiently capture development objectives related to human rights, good governance, social cohesion and justice. Those objectives are of particular relevance to the youth in the Arab region, where the rate of participation of young men and women in economic, political, social and cultural life is limited, despite the role that integration and social cohesion play in shaping their day-to-day life.

Chapter I of this Report presents the demographic profile of the Arab region, and illustrates that the current youth bulge offers a key opportunity to achieve faster and more equitable economic development. It also briefly dis-

cusses the linkages between youth and MDGs, and provides an overview of the major achievements and challenges the region is currently facing, with particular focus on the role of the young. Chapter II offers a detailed account of the status and progress towards the achievement of the eight Goals. It is done primarily on a subregional level, with occasional reference to individual countries when challenges or achievements are highlighted. Chapter III deals with priority issues pertaining to youth, bringing to light education, employment, migration and human rights issues. Chapter IV presents policy recommendations for the attainment of the MDGs and for the betterment of the situation for Arab young people, so that the region as a whole may benefit from the current youth bulge.

CHAPTER I:

YOUTH, DEVELOPMENT AND THE MILLENNIUM DEVELOPMENT GOALS IN THE ARAB REGION



A.

DEMOGRAPHIC PROFILE AND WINDOW OF OPPORTUNITY



The Arab region has experienced an unparalleled increase in the number of young people. The age group 15-24 numbered around 66 million in 2005, the equivalent of 20.6 per cent of the total population; while in 1980, they numbered 33 million, or 19.5 per cent of the total population. Young people are projected to reach 78 million in 2020, the equivalent of 18.2 per cent of the total population in the Arab region.⁴ The share of youth in the population varies slightly across the subregions. In 2005, the Maghreb and the Mashreq had the largest shares of young people, at 21.7 per cent and 20.9 per cent of total population, respectively. The corresponding share in Arab LDCs was 20.4 per cent; while in the GCC countries, the young constituted 18.1 per cent of the total population.⁵

The current surge in the number of young people in Arab countries is intimately linked to the demographic evolution of the region since the 1980s. The age distribution of the Arab population changed significantly between

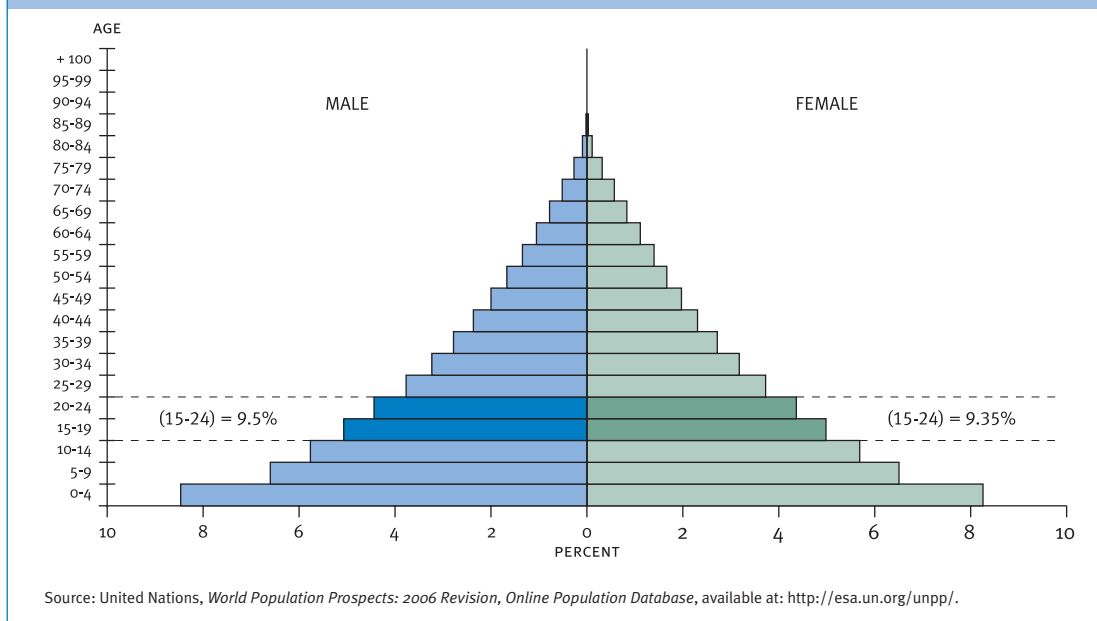
1950 and 2005, as reflected in figures 1.1 and 1.2. In 1950, the age pyramid of the Arab region was characterized by a broad base, reflecting high fertility and death rates. Since then, Arab societies have experienced a rapid decline in infant mortality rates, contributing to a significant increase in life expectancy. Fertility rates in most Arab countries remained at high levels until the early 1980s.⁶ However, the subsequent decline in fertility rates, which has been particularly pronounced in Algeria, the Libyan Arab Jamahiriya and the Syrian Arab Republic, has led to a decrease in the proportion of children under the age of 14 and, in turn, to an increase in the proportion of young people aged 15 to 24. The 2005 age pyramid is thus characterized by a narrower base and a wider youth, as well as a middle age group. That increase, referred to as the youth bulge, combined with fast growth in the overall population, has resulted in the most rapid growth in the number of young people in the region's history.

(4) ESCWA, *Population and Development Report, Second Issue; The Demographic Window: An Opportunity for Development in the Arab Countries* (ESCWA, New York, 2005), available at: www.escwa.org.lb/popin/publications/new/DemographicprofileArabCountries.pdf.

(5) UN-DESA Population Division, *World Population Prospects: The 2006 Revision, Population Database* (United Nations, New York, 2006), available at: <http://esa.un.org/unpp/>.

(6) In Egypt, Lebanon and Tunisia, the transition to lower fertility rates already began in the 1970s.

FIGURE 1.1 Population pyramid, Arab countries, 1950



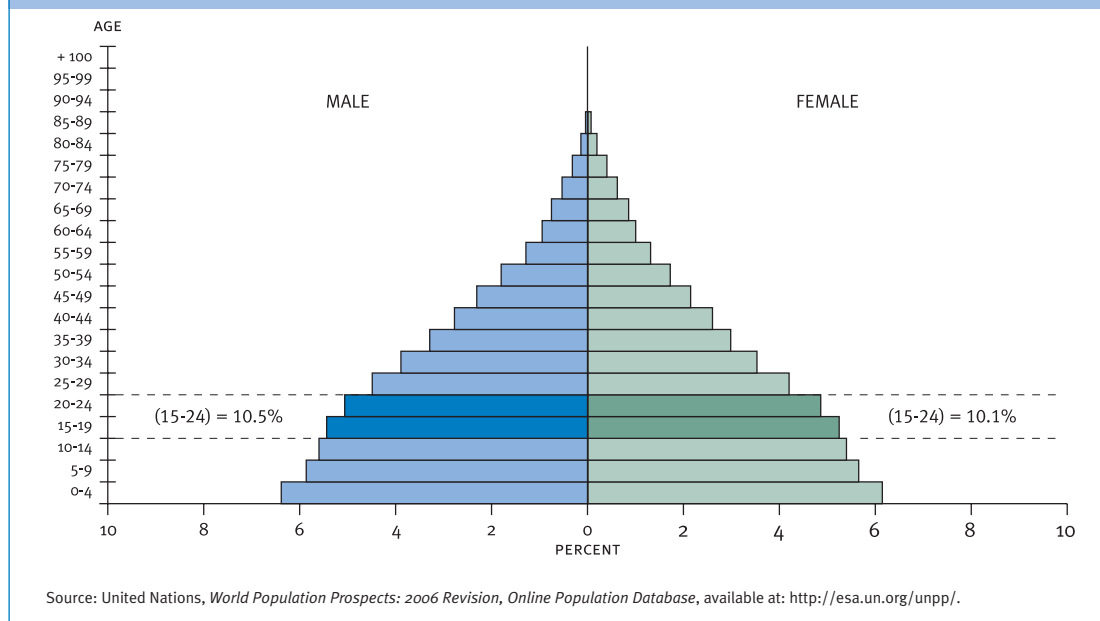
From an economic perspective, large numbers of young men and women might be seen as a challenge on any Government, since it has to provide more educational and other services, in addition to creating decent job opportunities. That can pose fiscal risks, particularly for such already heavily-indebted Arab countries as Lebanon and Jordan. However, the marked increase in the youth population, associated with the youth bulge, offers both a challenge and an opportunity for economic and social development in the short and medium term. That opportunity should materialize provided economic and social policies succeed in unlocking the employment potential.

The fertility transition in the Arab countries, namely, lower fertility rates leading to temporarily larger youth cohorts, has resulted

in an increased share of people of working age, namely, 15- to 64-year olds, that is likely to persist until 2050. That will allow for a decline in the dependency rates in the Arab region, thus offering a “demographic bonus”, which can be conducive to an increase in overall savings and investment.⁷ In other words, a lower dependency rate presents a demographic “window of opportunity” that has the potential of supporting higher rates of economic growth. In order to seize that opportunity, it is vital that a maximum number of working-age people are productively employed. The potential for enhanced growth through a demographic dividend results from two factors. First, the rise in labour supply as a ratio of total population, which may be reinforced by an increase in female participation, can boost the productive potential of a country. Second, a higher share

(7) The dependency rate is defined as the ratio of the economically dependent part of the population (people aged 0-14 and people aged 65 and over) to the productive part (people aged 15-64)

FIGURE 1.2 Population pyramid, Arab countries, 2005



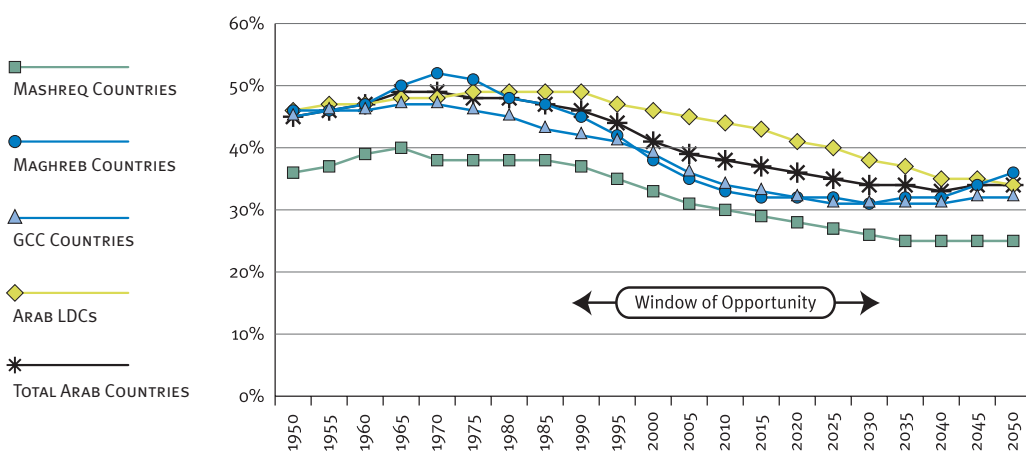
of working-age population implies that more people are in the saving phase of their life cycle. As a result, per capita savings are expected to increase, offering the potential for higher investment activities.⁸

The opportunities associated with the youth bulge will start diminishing as soon as the dependency ratio begins to rise again; that is, when population ageing leads to a strong increase in the number of old, dependent persons. In the Arab region, that window of opportunity opened around 1995, and is expected to close around 2045, roughly at the same time for all Arab countries, as illustrated in figure 1.3. According to demographic projections, the share of youth in the overall Arab population will decline to around 15 per cent by 2015.

Young Arab people have not only become more numerous; on average, they are also better educated and marry at a later age than before. Since the 1980s, school enrolment rates at all educational levels have risen markedly throughout the region for both young men and women. Most importantly, the region as a whole has made strong progress towards reaching the Goal of universal primary education, which acknowledges the basic human right to education. Achievements on the educational front, however, have not translated into significantly higher rates of employment and substantial wage increases, partly owing to shortcomings in the quality of education and a mismatch between educational outcomes and labour market demands. As a result, a large proportion of first-time job seekers encounter severe difficulties in finding employment,

(8) World Bank, *World Development Report 2007: Development and the Next Generation* (World Bank, Washington, D.C., 2007), pp. 34-35, available at: <http://publications.worldbank.org>.

FIGURE 1.3 The demographic “window of opportunity” in Arab countries: The decline in dependency rates



Source: United Nations, *World Population Prospects: 2006 Revision, Online Population Database*, available at: <http://esa.un.org/unpp/>.
 Note: The dependency rate is defined as the ratio of the economically dependent part of the population to the productive part.

leaving one young Arab person in every four unemployed. Moreover, despite significant progress in terms of gender equity in the Arab region, there is still a substantial gap with respect to indicators of youth development, including education, employment and participation in political decision-making processes. The aforementioned, compounded with increasing marginalization, has led a large number of young people to resort to migration, implying that many countries in the region have to deal with the ensuing loss in human capital. Furthermore, a small number of young persons react to lack of opportunities, general exclusion and violations of their rights by turning to violence and extremist activities.

The impact of a large, more educated youth cohort on overall economic and social development in the Arab region will be positive, if decision makers succeed in creating propitious

circumstances and a political environment that is conducive to saving, investment, innovation and employment generation. That requires providing young men and women with high-quality education tailored to individual needs, and promoting their social and emotional skills. Investing in the quality of youth upbringing and encouraging young people to engage and participate in the political, social and economic developmental efforts will not only improve the quality of their livelihood today, but will also yield handsome dividends for future generations. On the other hand, failing to invest adequately in the young generation of Arabs will mean not only squandering a precious potential human resource, but also, among other adversities, exposing the economies concerned to increased unemployment and instability. Policies to take advantage of the full potential are demonstrably interactive with the efforts to meet the Goals.

B.

YOUTH AND THE MILLENNIUM DEVELOPMENT GOALS



Young people are core rights-holders, stakeholders and beneficiaries of the progress towards MDG attainment, even more so in the Arab region where they account for a large share of the total population. Their lives will improve significantly as targets related to poverty reduction, universal education, gender equality, and health and environmental sustainability are met. Young people constitute the social group most affected by the lack of adequate education, and they are also strongly affected by poverty and other gaps in development. As outlined above, young people are the key to achieving faster progress towards the MDG targets as they represent the human capital needed to foster development.

All eight Goals address issues that, directly or indirectly, affect the lives of young people. Goal 1, which aims at eradicating extreme poverty and hunger, is significantly related to young people, particularly as poverty manifests itself in health problems, insufficient education and the lack of employment opportunities. In addition, Goal 1 directly addresses the youth in MDG target 3, which aims to “achieve full and productive employment and decent work for all, including women and young people” and is the only specific mention of youth in the MDG

framework. The lack of productive work for young people has a number of highly damaging economic and social consequences, including exacerbating the cycle of poverty and, in some cases, due to a lack of productive outlet, their resorting to extremism and violence. Goal 2, which aims to achieve universal primary education, is in itself addressed to children and youth, and provides the major linkage between MDG 1 and the other Goals. The lack of basic education, for example, further entrenches poverty, as it is the basis for adequate employment, and also thwarts achievements in gender equality, awareness of HIV/AIDS and maternal health. Goal 3, on gender equality and women’s empowerment, acknowledges the fact that young women grow up in a world of unequal opportunities, and that their empowerment is linked to all other MDGs. Among the key rights pertaining to young women are the right to equal access to education and work, to equal political participation, and to reproductive health education. The right to non-discrimination is one of the key provisions of the Universal Declaration of Human Rights and is enshrined in all core human rights treaties. Goals 4, 5 and 6, which are all related to health, implicitly refer to the youth, as that age group accounts

for a large fraction of the people who can benefit most from policies that promote the achievement of those goals. In particular, MDG 4 which addresses child mortality relates to young girls as child mortality is highest among adolescent mothers. MDG 5 seeks to improve maternal health, which includes addressing adolescent pregnancy. The youth should be a major focus of investment to address MDG 6, as the HIV/AIDS epidemic is having a devastating effect on the lives of young people, particularly on young women. Goal 7, on ensuring environmental sustainability, relates to the major environmental issues facing the region. Those revolve around reduced quantities of water available for human consumption, lack of sanitation, land degradation and access to sustainable sources of energy, all of which will have a lasting effect on the young people of today. In the light of increased country and urban-rural migration, living in slums or temporary shelters with low levels of hygienic conditions and services is a significant concern for the youth. Goal 8 has the objective

of establishing a global partnership for development. Specifically, it aims at progress in the areas of trade and market access, development aid, debt relief, availability of essential drugs and access to information and communication technology. Particularly the latter is of primary importance to young people as it can help them increase their skills, capacities and productivity levels and thus enable them to find decent employment.

Adopting a participatory approach in which the young are given appropriate support and opportunities to become a potentially powerful force for the achievement of the Millennium Declaration is likely to ensure their long-term sustainability. Countries are gradually realizing that greater investment in youth education, employment generation and health, as stipulated by the adherence to a human rights-based approach to development, is essential. As a result, international commitment to the right of youth to development and participation has been elevated in recent years.

C.

CHALLENGES AND POTENTIAL



Progress towards MDG attainment is diverse across the various subregions and countries in the Arab region. The GCC countries, with the exception of Saudi Arabia, belong to the group of high development countries, according to the *Human Development Report 2006*⁹, published by UNDP. Despite having made important strides towards meeting most Goals, some challenges remain, particularly in the areas of gender equality and environment. By contrast, Arab LDCs and conflict-plagued Iraq and Palestine are unlikely to meet the majority of the Goals by the year 2015. All middle - to lower - income countries of the Maghreb and Mashreq, except Iraq and Palestine, have recorded significant progress since 1990, with Egypt and Morocco registering the most prominent improvement on many fronts.

Despite noteworthy achievements, the political, social and economic systems of the Arab region have not evolved in a way that effectively meets the changing needs of the rapidly-growing young population. Indeed, Arab countries still do not ensure the full protection of human

rights of the youth, including the right to life, education and health, portrayed by an adequate standard of living; and the right to freedom of expression, association and assembly without discrimination of any kind. The latter refers to racial, sexual, linguistic, religious, political, ideological, national, social or class discrimination that young people in the region are sometimes facing.

Moreover, young people have been adversely affected by weak progress in governance and the political tensions and conflicts that continue to plague several countries of the region, and by the relatively poor economic performance of the 1980s and 1990s. Indeed, Arab economies, with their large, centralized Governments, face difficulties in sustaining competition against the more vibrant economies of South and East Asia and Eastern Europe. There is increased pressure on policymakers to improve the quality of education and to create an environment that is more conducive to investment in order to increase the competitiveness of their economies.¹⁰

(9) UNDP, *Human Development Report 2006*, (UNDP, New York, 2006), available at: <http://hdr.undp.org/en/reports/global/hdr2006/>.

(10) For a comprehensive overview of the historical evolution of the economic development since 1950, see: Tarik M. Yousef, "Development, growth and policy reform in the Middle East and North Africa since 1950", *The Journal of Economic Perspectives*, summer 2004, vol. 18, No. 3 (Nashville, United States of America, 2004), pp. 91-116.

In fact, economic performance since 1980 has been far from satisfactory. Average gross domestic product (GDP) growth did not exceed 2 per cent and 3 per cent during the periods 1980-1989 and 1990-1999, respectively, approximately matching the population growth rates. Partly as a result of the poor growth record, some Arab countries have fallen behind other developing countries in terms of human development. Most Arab countries have been witnessing growth recovery since 2002 as a result of the hike in oil prices, but the sustainability of that recovery remains the paramount question. A combination of relatively low levels of savings and investments and a bias towards low productivity investment, namely, in housing and real estate, has resulted in a much smaller number of jobs being created than are needed to close the unemployment gap.

A principal reason behind the relatively poor economic performance is weak public governance, which manifests itself in the mostly defective interactions between the citizens and the State, and in the lack of guarantees that ensure the protection of human rights. Economic and social development in the Arab region frequently suffers from corruption, a lack of transparency and accountability, shortcomings in the enforcement of justice, and from the overall weak quality of administration. Those factors reduce the efficient allocation of resources, hamper economic growth, including development assistance, and frequently undermine efforts to increase equity and non-discrimination and of improving educational, health and environmental outcomes. Moreover, with a large youth cohort expected to last until 2050, the traditional political contract in Arab countries is being challenged, as more and more young people feel alienated from the political system of their countries.

Gender imbalances have also hindered economic and social development in the Arab region. In many parts, young females face the challenges of early marriage and childbearing, disruption of education, discrimination in the labour market and deprivation of political rights. Most stem from deeply-rooted, traditional views about gender roles in the family and the society. Even with impressive progress towards achieving gender equality in enrolment levels, women's advancement in education has not resulted in higher participation in the labour force and better representation in the political sphere.

Any role the young generation could potentially play in achieving progress towards MDG attainment is further constrained by the adversity of armed conflict and violence. Five countries in the region are still ridden by armed conflict and internal civil tensions, namely, Iraq, Lebanon, Palestine, Somalia and the Sudan. Those conflicts have induced, and continue to produce, extremely high direct and indirect losses. In 2005, an estimated 31 per cent of the Iraqi population was living in poverty. Similarly, an estimated 50 per cent of Palestinian households live below the poverty line, while a significant proportion of the population in the Sudan is estimated to be living in extreme absolute poverty. School enrolment rates have dropped by over 6 percentage points since 1990 in Iraq, and by over 16 percentage points since 1999 in Palestine, particularly as a result of the Separation Wall and numerous checkpoints and roadblocks. The negative impact of those conflicts extends to neighbouring countries, and to the region as a whole, through the influx of refugees, reduced private investment and pressure on public infrastructure. As a result of weak educational systems and lost employment opportunities, such conflicts have the potential

to provide an attractive outlet for frustrated young people and lead to their recruitment to armed resistance against occupation and injustice, and into extremist factions.

The attainment of the Goals largely depends on the ability of the Arab countries to take advantage of the demographic bonus that lies before them. The extent to which young people succeed in their choices is related to the opportunities they have been presented with, and the assets they have accumulated. The first aspect policymakers need to reconsider

is how poverty and inequity among the young inhibit their access to education, health and employment. Arab countries should consider adopting a new paradigm of development that takes into consideration their individual, national specifications to stimulate economic growth and promote social equity. That implies that the underpinning approach should highlight the unique social and cultural priorities of each country, while making use of the universal wisdom and experience gained from the successes and failures of development policy in other developed and developing countries.

CHAPTER II:

PROGRESS TOWARD ACHIEVING THE MILLENNIUM DEVELOPMENT GOALS IN THE ARAB REGION



A.

GOAL 1: ERADICATE EXTREME POVERTY AND HUNGER



Freedom from extreme poverty and hunger is a key human right. It forms an important component of the synergistic set of factors that determine overall human poverty, and assumes a critical role in cementing social cohesion and harmony, accelerating nation building and strengthening political stability. In acknowledgement of those facts, the first MDG aims at the eradication of extreme poverty and hunger.

Target 1: Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day.

The income poverty line of one dollar a day per person does not adequately reflect the poverty scene in the Arab region, where some countries, namely, in the GCC subregion, are classified as high-income, while many countries in the Mashreq and Maghreb are considered middle-income. In this chapter, the national poverty lines detailed in MDG country reports were used for evaluating poverty. Those better reflect the living conditions and consumption habits of individual countries. This is exemplified by the use of the unsatisfied basic needs method for Iraq and Lebanon, which identifies the percentage of deprived people based on survey results. That method is preferable, as it captures certain dimensions of poverty which cannot be measured through monetary indicators used in the income/consumption

approach. However, it is worth noting that measurement methodologies and poverty lines are not the same across countries, which limits cross-country comparability and, hence, the informative value of regional or subregional aggregates.

The human poverty index

Income poverty figures are generally not available for GCC countries. The human poverty index (HPI), a composite index measuring deprivations at the global level developed and used by UNDP, provides an alternative measure that covers all Arab subregions, thus allowing for comparisons between the GCC countries and the other subregions.

Human Development Report 2006 shows that according to the HPI in Arab countries in 2004, around 23.5 per cent¹¹ of the population is considered deprived, a proportion lower than the 27 per cent recorded in 2002. In GCC countries, it was around 15 per cent, compared to 18 per cent in the Mashreq, 25 per cent in the Maghreb and 34 per cent in Arab LDCs.

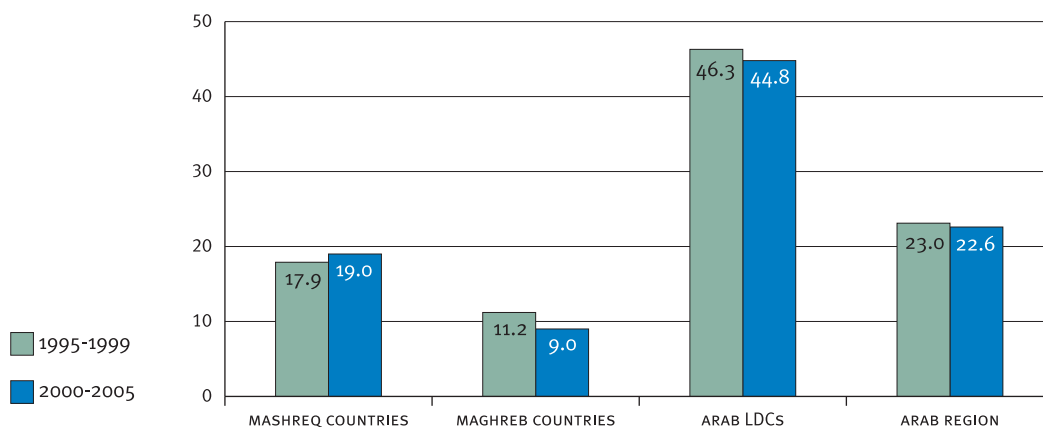
Income poverty: progress tracking

Trends in the proportion of people living below national poverty lines highlight the fact that the Arab region, as a whole, has not experienced significant progress in reducing income poverty. Those trends also reveal that the region is likely to remain tainted by a high poverty rate if Arab LDCs do not improve at a faster rate, and if poverty levels in conflict-

torn Iraq and Palestine are not adequately and effectively addressed. Based on data for 12 Arab countries,¹² the proportion of population living below the national poverty lines fell only slightly across the region, excluding GCC countries, from 23 per cent in the period 1995-1999, to 22.6 per cent in 2000-2005, as illustrated in figure 2.1.1. On the subregional level, the incidence of poverty declined from 11.2 to 9.0 per cent in the Maghreb, and from a high 46.3 to 44.8 per cent in Arab LDCs, while increasing from 17.9 to 19 per cent in the Mashreq.

Data also confirm a striking increase in poverty rates in Iraq and Palestine, where occupation and conflict are root causes of poverty. According to the latest data, approximately half of the Palestinian population and 31 per cent of the Iraqi population are poor.

FIGURE 2.1.1. Incidence of poverty (Percentage)



Source: UNDP - SURF

Note: Data for GCC countries are not available.

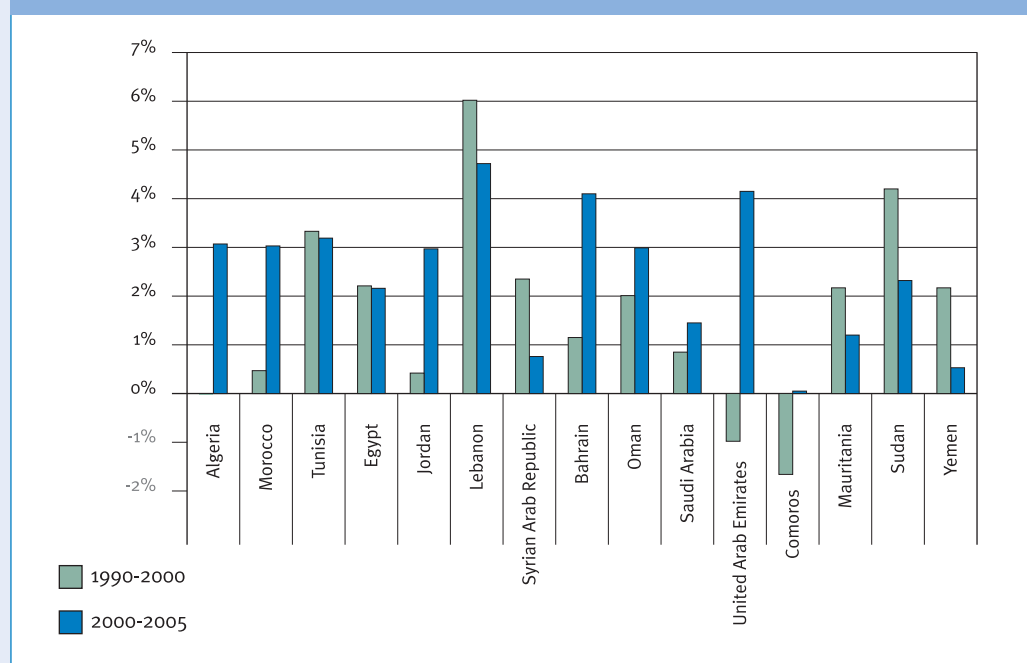
(11) The figure is based on *Human Development Report 2006* and does not include Palestine. Figures for the Libyan Arab Jamahiriya, Oman and Saudi Arabia were added from UNDP, Human Development Report 2005, available at: <http://hdr.undp.org/en/reports/global/hdr2005/>.

(12) To monitor development in income poverty since 1990 at the regional and subregional level, data for 12 Arab countries have been compiled for three periods: 1990-1994, 1995-1999 and 2000-2005.

Box 2.1.1. GDP per capita growth in the Arab region

Growth in GDP per capita is an essential means of improving the welfare of people and of lowering the incidence of poverty in a country. Since 1990, the Arab region, which is characterized by very large and persistent disparities in income levels, experienced only modest growth in per capita terms, as illustrated in figure 2.1.2. Using purchasing power parity (PPP) rates and based on data for 15 out of 22 countries, average annual growth of real GDP per capita over the period 1990-2005 was 1.8 per cent for the region as a whole. Of particular concern is the fact that several of the low-income countries in the region did not succeed in significantly raising income per capita levels between 1990 and 2005. In the Comoros, GDP per capita decreased by 15.2 per cent during the said period. Yemen remains the Arab country with by far the lowest GDP per capita measured in PPP terms. In 2005, average annual GDP per capita was US\$ 798, corresponding to a mere 3 per cent of the per capita income level in the United Arab Emirates. In Yemen, growth performance has been rather weak since 1990 ; owing to very high rates of population growth, GDP per capita increased only at an annual rate of 1.6 per cent. Per capita growth in Mauritania and Morocco has also been largely disappointing during the period 1990-2005, though Morocco has recorded substantially higher growth since 2000. On the positive side, some Arab countries, namely, Algeria, Lebanon, Oman and the Sudan, were able to raise average per capita income levels by more than 40 per cent between 1990 and 2005.

FIGURE 2.1.2. Average annual GDP growth per capita in Arab countries (PPP, percentage)



Sources: World Bank, *World Development Indicators 2006*; United Nations, *World Population Prospects: 2006 Revision, Online Population Database*, available at: <http://esa.un.org/unpp/>; ESCWA calculations.

Note: Due to lack of complete data, the following countries are excluded: Djibouti, Iraq, Kuwait, the Libyan Arab Jamahiriya, Palestine, Qatar and Somalia.

Achieve full and productive employment and decent work for all, including women and young people.¹³

Labour markets in most Arab countries are characterized by widespread underemployment, very high rates of youth unemployment and a low employment-to-population ratio. In 2005, youth unemployment was estimated at 25 per cent, a rate three times that of adults. The situation is particularly grave for young women, whereby the unemployment rate for females aged 15 to 24 was estimated at around 34 per cent in 2005, and the participation rate in economic activity was significantly lower at less than 30 per cent,¹⁴ which renders women the bulk of the region's unpaid labour. The discrepancies at the subregional and country levels are significant. Both total and youth unemployment rates in the GCC countries are much lower than in most other Arab countries. Labour market conditions are particularly difficult in the countries beset by conflict and in Arab LDCs. Despite a lack of official data, there is indication of high unemployment and underemployment rates in Arab LDCs. In Iraq, the total unemployment rate in 2004 was estimated at around 27 per cent.¹⁵ According to official figures, the unemployment rate for Palestine in 2006 was 29.8 per cent. Occupation and conflict most severely impact opportunities for youth. In Gaza, for example,

one young person in two between 15 and 29 years of age is unemployed. In the Maghreb, the unemployment rate for Algeria in 2004 stood at 20 per cent, while for Tunisia it was 15 per cent. In the Mashreq, unemployment in Egypt was estimated at 11 per cent in 2003, and in Jordan at 14.4 per cent in 2006.

Given the high number of new entrants expected over the coming years, the pressure on labour markets in the region will continue to increase. Real GDP growth in the Arab region averaged around 6 per cent per year during the period 2003-2006. However, the impact on total and youth unemployment rates has so far been very limited, mostly resulting from a lack of efficient and well-functioning labour markets and institutions.

In contrast to the unemployment situation in most OECD countries, Arab countries have a noticeable concentration of unemployment among high-school graduates. In addition to the low pace of job creation for young entrants, they face several other difficulties. Young employees are often confronted with unfair working conditions. That is particularly true for females, due to a pervasive lack of legal

(13) The revised MDG monitoring framework, as recommended by the United Nations Inter-agency and Expert Group on MDG Indicators, has been adopted here. The framework stipulates a new MDG target on productive employment within MDG 1, with particular emphasis on women and youth, replacing MDG target 16 on youth employment in MDG 8 under the old framework. The shift is attributed to the many linkages between poverty and unemployment, as labour power in its concrete form is the main and, in most cases, only income-earning asset the poor have for making a living. Since the new framework has been adopted during the final stages of this Report, specific information on the newly established indicators could not be included.

(14) Nader Kabbani and Ekta Kothari, "Youth employment in the MENA region: a situational assessment", discussion paper No. 0534, *Social Protection*, World Bank (September 2005), available at: <http://siteresources.worldbank.org/SOCIALPROTECTION/Resources/SP-Discussion-papers/Labor-Market-DP/0534web.pdf>.

(15) While no updated official figures for Iraq are available, it is likely that unemployment rates have increased substantially since 2004 owing to the intensification of the conflict.

protection from abuse and sexual harassment in the workplace. Negative attitudes towards employment of young females are manifested in wage discrimination and lack of such facilities as decent transport for night shifts and nurseries for young working mothers, in addition to legislation and practices that restrict their choice of careers. Such factors are not only examples of deterrents to female employment, but are violations of human rights at all levels and should be addressed in law, policies and practice.

First-time job seekers lack work experience, which makes them less attractive to employers. Oftentimes, the quality of their education and relevance to the labour market are not sufficient to offset the lack of experience. At the same time, their job and wage aspirations frequently do not match the realities of very competitive domestic labour markets.

Many young Arabs resort to migration, either within the region to the oil-rich GCC countries, or to Europe and North America, suggesting a serious brain drain problem for Arab labour markets. The United Nations Population Fund (UNFPA) estimates that 55,000 migrants from Northern Africa move to Europe every year, and since the mid-1980s, a significant number of highly-skilled professionals from Morocco and Algeria immigrated to Europe.¹⁶ In addition, the Arab region itself has received large numbers of migrants. According to UNFPA, 1 in 10 international migrants across the globe lived in the Arab region in 2005. The total number of migrants in the Arab region in 2005 was nearly 20 million, representing 7.3 per



cent of the region's population, an increase of 7 million since 1990. The GCC countries host 6 in every 10 migrants in the region, with Saudi Arabia and the United Arab Emirates hosting 6.4 million and 3.2 million, respectively.

Youth employment deserves special focus in the Arab region, not only because that age cohort suffers disproportionately from unemployment, but also because it provides the bulk of first-time job seekers to the labour market. A rewarding and decent job provides the young with an instrumental foundation for a good start in adult life, and also for breaking out of the cycle of poverty. Through decent work opportunities, young people can earn income, accumulate work experience, form useful and income-earning skills, avoid deviant behaviour, build a family, carve themselves a niche within the fabric of society and achieve self-esteem. In short, employment opens windows of hope for young people to realize and exercise their legitimate human rights and aspirations in life.

(16) UNFPA, State of World Population 2006, "Migration by region: the Arab States", journalists' press kit, available at: http://www.unfpa.org/swp/2006/presskit/docs/factsheet_middle-east.doc.

Target 2: Halve, between 1990 and 2015, the proportion of people who suffer from hunger.

Malnutrition in children under 5 years of age

Malnutrition in children is a summary measure of failures or successes on many fronts. Malnutrition rates are affected by income poverty. They are also strongly influenced by accessibility and quality of health services; parental education, particularly of mothers; accessibility to, and quality of safe water and sanitation; and by health awareness and hygiene practices of the populace.

The slow decrease in malnutrition rates indicate critical malfunctions in the region's development efforts. The proportion of underweight children under 5 years of age remained relatively high in 2000, at 12.7 per cent, with no noticeable improvement from the 1990 level of 13.2 per cent. That is a result of the slow pace of progress in the economic and social determinants of the indicator, namely, modest growth performance of the region as a whole; relatively high female illiteracy rate, particularly in Arab LDCs; low access of the poor and underprivileged to primary health-care services; lack or shortage of efficient social policies and targeted interventions; comprehensive sanctions imposed on Iraq; and conflicts in Palestine, Somalia and the Sudan.

The Arab subregions and individual countries exhibited vast differences in reducing the proportion of underweight children under 5 years of age. In the Mashreq, the proportion of underweight children declined gradually from 10.8 to 9.1 per cent, while it declined from 8.4 to 7.5 per cent in the Maghreb between 1990

and 2000. Arab LDCs continued to suffer from the highest malnutrition rate in the region, at 27.4 per cent in 2000, albeit down from 37.6 per cent in 1995.

Moreover, individual country data indicate wide disparities. While the proportion of underweight children was 45.6 per cent in Yemen in 2003, accounting for almost half the under-five population in the country, it was as low as 3.3 per cent in Lebanon in 2002.

Food deprivation

In 1991, food deprivation was a disconcerting threat to the overall enjoyment of economic and social rights in the region, and remained so in year 2000. Individuals living on less than the minimum level of dietary energy consumption accounted for 8.8 per cent of the Arab population in 1991, and 8.6 per cent in 2002, as illustrated in figure 2.1.3. According to those rates, the number of food-deprived persons rose from approximately 20 million in 1991, to around 23.3 million in 2002, implying that MDG target 2 is unlikely to be met by 2015.

The negligible change in the region's proportion of food-deprived persons is the result of stagnant rates in most Arab countries of the Mashreq and Maghreb and among Arab LDCs, with the exception being the GCC countries. In the Maghreb and Mashreq, the proportion of population living below the food deprivation line remained unchanged from 1991 to 2002, at 4.7 per cent and 3.2 per cent, respectively. As

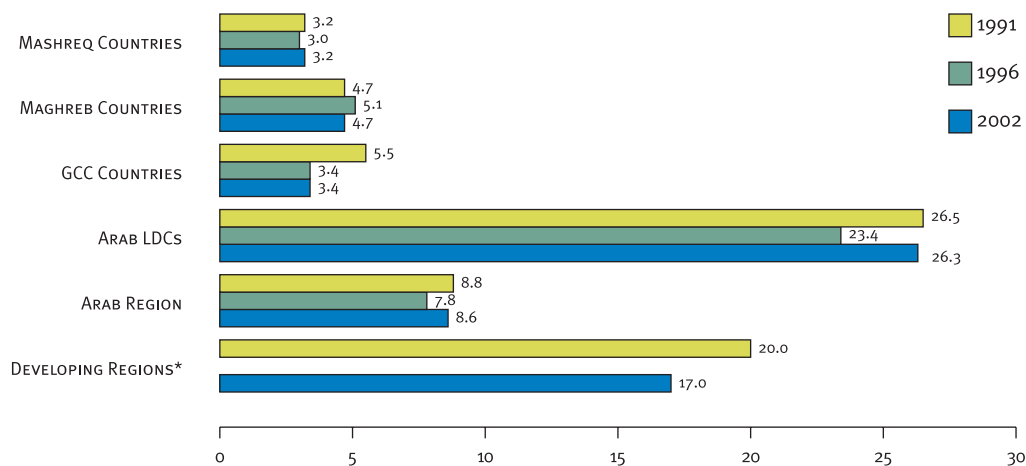
future MDG monitoring is likely to reveal, the food security situation in Palestine has considerably deteriorated, with 4 out of 10 Palestinians food insecure. In 2006, the withholding of taxes by Israel and donor withdrawal of aid to the Palestinian Authority caused the number of families without adequate access to food to rise by 14 per cent. In Iraq, children are the major victims of food insecurity, and chronic malnutrition affects the youngest and most vulnerable aged between 0 and 2.

Arab LDCs also did not make any noticeable progress, with the number of food-deprived persons amounting to 26.5 per cent of the population in 1991, and 26.3 per cent in 2002.

Only the GCC countries showed good progress on that front. However, that observation is relevant to the first half of the 1990s. Available information shows that the proportion of food-deprived in the GCC countries dropped from 5.5 per cent in 1991, to 3.4 per cent in 1996, but has remained unchanged since.

Country data reflect wide disparities in the magnitude of hunger and in the progress towards its reduction. That is exemplified in Somalia where, in 2002, the proportion of population below the minimum level of dietary energy consumption intake was 73 per cent, or 29 times the prevalence in the United Arab Emirates and Morocco.

FIGURE 2.1.3. Proportion of population below the minimum level of dietary energy consumption by subregion.



Sources: UNDP-SURF; UNSD, *Millennium Development Goals Indicators Database*, available at: <http://mdgs.un.org/unsd/mdg/Data.aspx>.
 * Data for developing regions refer to the time periods 1990-1992 and 2001-2003.

Box 2.1.2. Impact of the separation wall on Palestinians

Since September 2000, the Palestinian economy has experienced one of the worst recessions in modern history as a consequence of Israeli closures that have caused rising social costs, including poverty, and harmful implications for future development trends. Israel continues to cause economic and social decline with its maintenance of a separation wall, confining Palestinians from access to Israel and protecting illegal settlements that have been built on occupied land. The ongoing construction of the Wall is unilaterally drawing the de facto borders of a future Palestinian State and is isolating Palestinian population centres from their adjacent agricultural land and water resources. Israel is annexing large parts of the Palestinian territories, while leaving communities isolated from one another and restricting freedom of movement.

Upon completion of the Wall, the Palestinian population will be restricted to scattered enclaves constituting less than 13 per cent of historic Palestine. Villages and cities with tens of thousands of inhabitants have become enclaves, completely surrounded by fences, walls and checkpoints. Palestinians are suffering restricted access to food, water, medicine, education and work. Approximately 2,900 students are directly impacted by the Wall. Many have lost school days because of access restrictions and face diminishing overall quality of education. Many others, particularly in higher education, have lost access to education due to economic difficulties inflicted by closure policies. The Wall has also separated numerous communities from vital health-care facilities. International health NGOs predict that the Wall could prevent over 130,000 Palestinian children from being immunized, and deny more than 100,000 pregnant women, out of which 17,640 are high-risk pregnancies, access to health care in Israel. In addition, almost a third of West Bank villages will suffer from lack of access to health care. After completion of the Wall, many residents may lose complete access to emergency care at night. In 2006, movement restrictions due to the Wall and other forms of closure resulted in the death of 106 patients at Israeli checkpoints, including 33 newborn infants, and a tenfold increase in home births, which in turn contributed to a significant increase in stillbirths.

The policy of land expropriation not only puts the idea of statehood at risk, since the largest aquifers and the most productive lands are within the territory surrounded by the Wall, but is also making the creation of a contiguous and viable Palestinian State impossible. Furthermore, Israel has damaged much of the existing Palestinian infrastructure, especially roads, in its building of the Wall and other closures since 2000.

The impediment of the educational process violates the human rights, including the right to development of Palestinian individuals and isolated communities. The Wall violates the United Nations General Assembly resolution 2625 (XXV) and the Fourth Geneva Convention, articles 27, 33(1) and 50. It also violates the United Nations Security Council resolution 446.

On 9 July 2004, the International Court of Justice, the principal judicial organ of the United Nations, issued an advisory opinion finding “[t]he construction of the wall being built by Israel, the occupying

Power, in the Occupied Palestinian Territory, including in and around East Jerusalem,* and its associated regime, are contrary to international law". Citing the violation of the Charter of the United Nations and the United Nations resolution 2625, and contrary to the relevant provisions of The Hague Convention IV of 1907 and of the Fourth Geneva Convention, the Court called on Israel to tear down the Wall and compensate Palestinians harmed by its construction.

In its Advisory Opinion, the Court stated that an occupying power remains responsible for fulfilling its obligations under the relevant human rights conventions in occupied territory. It specifically found the applicability of the obligations of Israel under the International Covenant on Civil and Political Rights, the International Covenant on Economic, Social and Cultural Rights and the Convention on the Rights of the Child to the occupied Palestinian territories. The Wall impedes the liberty of movement of the inhabitants of the territory, as guaranteed by the International Covenant on Civil and Political Rights; and also impedes the exercise by the persons concerned of the right to work, to health, to education and to an adequate standard of living, as proclaimed in the International Covenant on Economic, Social and Cultural Rights and in the Convention on the Rights of the Child.

* Palestine consists of the two legally unified but geographically separated areas of the West Bank, including East Jerusalem, and the Gaza Strip. The Wall is being constructed inside the first of those areas.

Challenges and Policy Recommendations

MDG 1 is of crucial importance for the Arab region, particularly since it is closely linked to all other development areas. Regional and subregional averages conceal some significant geographic and social inequalities. Available information on poverty profiles in the region indicates wide disparities in the incidence of poverty among countries, and between rural and urban areas. The GCC countries may have met MDG targets 1 and 2 by most indicators, and some countries in the Maghreb and Mashreq subregions may follow suit if positive trends continue. Yet, there are no indications that Arab LDCs and the conflict-ridden Mashreq countries, Iraq and Palestine, will be able to reach those targets if the current political and economic conditions do not

change and regional and international support is increased. Combating poverty in the region will need to focus on social inclusion, on the protection of economic and social rights, and on policies that create jobs. In addition, policies will need to specifically address rural areas as the incidence of rural poverty in most Arab countries significantly exceeds that of urban poverty.

Accelerating progress towards MGD target 1 assumes continued improvement in the conditions of the poor in the context of sustained growth in output. If growth falters and incomes keep sliding, then redistribution policy by itself, while important, is liable to collapse or fall short of its commitments as a long-term source of decent work opportunities, and of finance for social provisions for the poor. Output growth provides the basis for

a sustained increase in incomes of the poor and, simultaneously, ensures a revenue base for a sustained flow of finances for social provisions.

Growth is certainly an element in any strategy for combating malnutrition and hunger. Yet, those two ailments are also influenced by the magnitude and scope of social provisioning, as well as lifestyles, including child-rearing, dietary and health practices of households. Studies continuously emphasize the importance of universal basic social services in the fight against malnutrition among children under 5 years of age. Mother's education, access to safe water and to sanitation, low-cost micronutrients and fortified foods, immunization and quality primary health care are all examples of instrumental interventions in the fight against malnutrition among children, mothers and adults. Creative and dynamic social protection can go a long way in combating poverty. Cash transfers, employment guarantees, public works, low-cost credit and microcredit, feeding programmes, subsidized baskets of basic food items, and compensation of those afflicted by natural calamities and internal conflict are all cases in point. In spite of the progress made so far, Arab countries have not yet tapped the full potential of social provisioning.

Combating poverty and hunger requires funds and resources. Higher and more sustainable output growth can only be achieved if both public and private investment activities are enhanced. Expanding and upgrading social provisioning calls for the allocation of larger amounts from the public coffers for that purpose. While countries must effectively mobilize their domestic resources, several Arab countries, especially LDCs, require funds exceeding those of their respective

Governments. However, poverty reduction in a country should not solely be a concern of the national Government, but should also involve responsibilities at subregional and regional levels. Civil society and the private sector need to be active players in that domain, and Governments need to ensure an environment in which those can operate freely. Regional frameworks and structures for intraregional cooperation need to be increased and upgraded to ensure a continuously expanding intraregional flow of public and private funds and resources to countries that have serious gaps in savings, foreign exchange and absorptive capacity.

Effective and relevant social and economic development frameworks and policies for MDGs assume the timely follow-up of poverty trends and an in-depth knowledge and analysis of the profiles of the poor, including age, sex, household size, education and profession, employment status, geographic location, ethnicity and accessibility to basic social services. Countries of the region need, therefore, to place adequate effort on maintaining a comprehensive, detailed, reliable and timely database on poverty.

Social and economic development frameworks and policies which ensure addressing the rights of all segments of the population and, specifically, the poor, can be effectively implemented only with sufficient political support and within the context of stability. Political commitment is indispensable for guaranteeing the mobilization and allocation of adequate resources for pro-poor interventions and, ultimately, the protection of all human rights. Political action to prevent, mitigate and/or eliminate conflict and social strife is a vital pillar in any meaningful and sustainable



poverty-reduction process. That also requires policies to respect, protect and fulfil human rights.

It is vital that policy interventions address both the supply and the demand side of the labour market, with a focus on the specific challenges facing the young. A precondition to strong employment generation is strong and stable economic growth. Education should aim at tailoring the skills of young graduates to the demands of the labour market and prepare them for the challenges of global competition. That may be done through involving successful business leaders in the development process of educational curricula, training programmes and awareness campaigns; and fostering programmes that target youth groups within, as well as outside the school system and at university level to promote concepts of career development. In the light of the abject poverty that exists in some parts of the Arab region, youth proposals must highlight the need to develop community projects in rural areas, since they are the most affected by poverty. It

is also in rural areas where infrastructure is most defective and youth unemployment the highest. In parallel, there is a need to improve domestic labour-market institutions and to support the development of the private sector, aiming at improving its capacity to absorb labour. Accordingly, the oil-rich countries in the region should aim at diversifying the economic structure in order to facilitate the creation of more jobs.

Increasingly, labour experts and labour organizations are identifying weak entrepreneurial spirit as a contributing factor to high unemployment in the region. In an international survey of business start-ups, the Middle East region ranked low; findings revealed that only 2.7 per cent of the population in the United Arab Emirates, for example, was engaged in early-stage entrepreneurial activity, compared with 19.3 per cent in Indonesia and 10 per cent in the United States of America.¹⁷

As experience indicates that small and medium enterprises (SMEs) significantly contribute to employment and GDP growth in developed countries, nurturing start-up initiatives that can turn into successful SMEs in the Arab region promises a positive impact on GDP growth and employment. Such initiatives and enterprises also help create employment opportunities, especially for young people in rural areas and secondary cities, thus mitigating the negative impact of increased rural-urban migration. As such, the need to nurture and encourage an entrepreneurial spirit among Arab youth is crucial. That may be achieved through establishing vocational training programmes

(17) Study conducted by Booz Allen Hamilton and reported in "UAE placed low in global SME ranking", *Emirates Today* (17 July 2007), available at: <http://www.zawya.com>.

to address the needs and concerns of SMEs, through creating national campaigns to bring more awareness and recognition towards entrepreneurship,¹⁸ and through improving financial schemes that could increase the potential for success of small business ventures. An ILO analysis of Jordan, Lebanon and the United Arab Emirates strongly recommends increasing awareness on the importance and value of entrepreneurship. In Jordan, public-sector programmes aimed at developing an entrepreneurial culture among young people have been introduced. In addition, a project initiated by Economic Opportunities for Jordanian Youth (INJAZ) specifically targeted the youth. Private-sector entrepreneurs and students were brought together in discussion sessions, which

then led to the development of curriculum material to be adopted by the school system.

The scarcity of data available on unemployment in general, and youth unemployment in particular, necessitates the creation of proper data-collection mechanisms to follow up and assess the unemployment situation. In fact, the twenty-fourth ESCWA ministerial session, held in Beirut in May 2006, called for the establishment of a regional observatory, aimed at monitoring international experience with youth unemployment, and of a database and set of indicators to aid in policy formulation and evaluation.¹⁹ A second policy proposal suggested the creation of a regional fund to finance pilot projects for youth employment.

(18) A. Taher, "Promoting youth employment through the development of entrepreneurship", paper presented at *ILO Tripartite Meeting of Experts on Youth Unemployment in the Arab States*, held in Amman, 6-8 April 2004.

(19) "Facing youth unemployment problems in the ESCWA region", paper submitted to ESCWA at its twenty-fourth ministerial session held in Beirut on 8-11 May 2006 (E/ESCWA/24/4(Part II)).

B.

GOAL 2: ACHIEVE UNIVERSAL PRIMARY EDUCATION



Target 3: Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling.

Education is a critical requirement for sustainable development, and the right to education is enshrined in the Universal Declaration of Human Rights and several core human rights treaties, including the International Covenant on Economic, Social and Cultural Rights, the Convention on the Rights of the Child, the Convention on the Elimination of All Forms of Discrimination against Women and the International Convention on the Elimination of All Forms of Racial Discrimination. Education is the key to knowledge and the future of young people, as it may be a means to breaking the cycle of poverty by providing them with choices and opportunities. As such, education and, more generally, the broad culture of continuous learning are receiving increased attention

from policymakers and scholars interested in promoting development. Education can especially help young women break out of poverty, in part because it often leads to smaller families. Delaying first births can improve the quality of life, as well as educational and employment opportunities for young women.

Against that backdrop, at the Millennium Summit, the international community made the commitment to achieve universal primary education by 2015. The principal indicators used to measure progress towards MDG 2 are the primary net enrolment rate (NER),²⁰ the gross intake rate at the last grade of primary school,²¹ the survival rate to the last grade of primary school²² and the youth literacy rate.²³

(20) Primary net enrolment rate is calculated as the enrolment of the official age group for the primary level of education, expressed as a percentage of the corresponding population.

(21) Gross intake rate at the last grade of primary education measures the total number of students newly enrolled in the final grade of primary school in a given year, expressed as a percentage of the total number of children of the official age to be in the last grade.

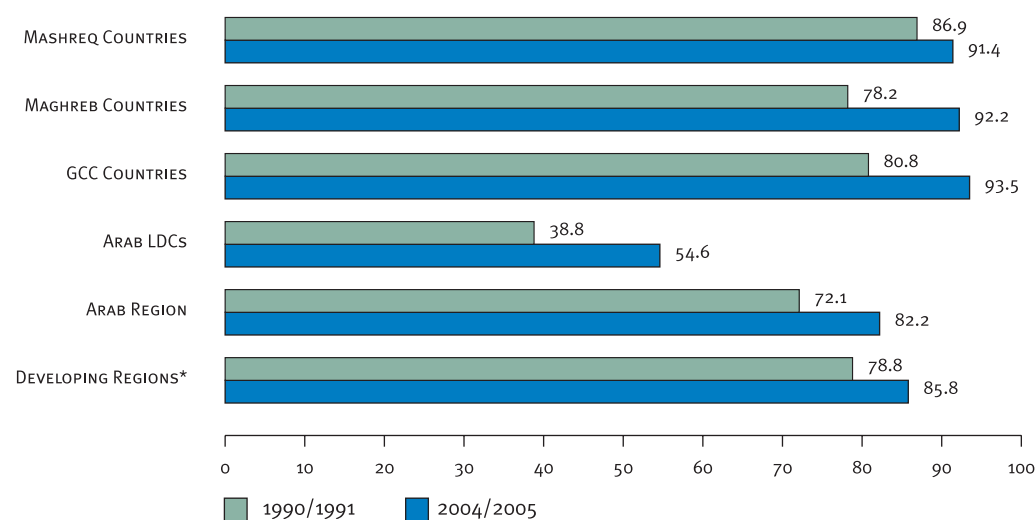
(22) Survival rate to last grade calculates the percentage of a cohort of students enrolled in the first grade of a primary education in a given school year who are expected to reach the last grade.

(23) Youth literacy rate is the number of literate persons aged 15-24, expressed as a percentage of the total population of that age group. A person is considered literate if he/she can read and write, with understanding, a short simple statement related to his/her daily life.

Since 1990, there has been a tangible improvement across all education indicators in the Arab region, as more importance has been given to achieving universal primary education. However, despite significant progress, the region lags behind the developing world average in the four aforementioned education indicators, with only Sub-Saharan Africa and Oceania registering lower results. According to UNESCO data, primary NER for the Arab region progressed by 10 percentage points since 1990 to reach 82.2 per cent, as illustrated in figure 2.2.1, with the respective literacy gender parity index increasing from 0.81 in 1991, to 0.92 in 2005. In addition, the primary completion rate for the region suggests that about 81.8 per cent of eligible children completed primary education, as illustrated in figure 2.2.2. Consequently, youth literacy rates rose by almost 17 percentage points, registering 83.4 per cent in 2005, as illustrated in figure 2.2.3.

Within that context, it is necessary to highlight two important points. First, progress in education has taken place despite rapidly increasing population growth, which is a major challenge to the provision of basic education. Second, socio-economic differences among the four subregions and differences in initial rates have resulted in heterogeneous progress towards universal primary education. That is exemplified by the fact that of the 7.5 million out-of-school children in the Arab region, two thirds live in LDCs. Similarly, gender disparity is also heterogeneous, as 73 per cent of out-of-school children in Arab LDCs are girls, a number significantly higher than in other subregions. It is worth noting that monitoring progress towards universal primary education is not restricted to monitoring enrolment rates; rather, it is important to measure the extent to which the educational system is capable of keeping children in school until they complete primary education. Many countries are able to

FIGURE 2.2.1. Primary net enrolment rate (Percentage)



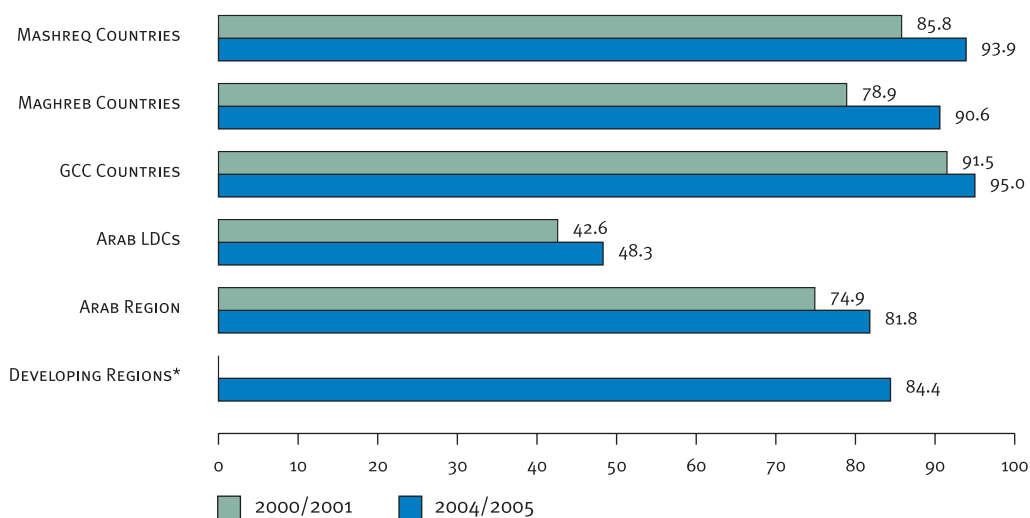
Sources: National data; UIS; UNSD, *Millennium Development Goals Indicators Database*, available at: <http://mdgs.un.org/unsd/mdg/Data.aspx>.
 * Data for developing regions refer to 1991 and 2004.

ensure that most children start grade one, but fail to keep them in school for a full course of primary education. That happens for a number of reasons, including poor quality of education and high cost of schooling. Therefore, it is important not to limit monitoring to enrolment rates, but to also assess the ability of educational systems to retain children in school. Poor retention rates invariably contribute to lower rates of literacy, as schoolchildren do not have sufficient opportunities to develop basic reading and writing skills. As such, the education indicators are intricately interconnected. Similarly, it is important to monitor data regarding the different population groups within regions, subregions and countries.

In 2005, NER for the Mashreq countries was 91.4 per cent, a significantly higher rate than the developing world average despite registering only modest growth of 4.4 percentage points since 1990, as illustrated in figure 2.2.1.

Furthermore, the Mashreq subregion had the highest completion rate in the Arab region, with around 94 per cent of eligible children reaching the last grade of primary school, as illustrated in figure 2.2.2. Occupation and conflict continue to restrict access to education in Iraq and Palestine. The Separation Wall in Palestine has caused 22 per cent of all persons attending school, university or other centres of learning to discontinue their education. Since 1990, enrolment rates have dropped by 16 percentage points in Palestine, and by more than 6 percentage points in Iraq. The drop in NER in those two countries is an outcome of conflict, as the security cost for school-age children to attend school is very high. Furthermore, enrolment figures do not reflect school attendance problems, with occupation preventing many students from reaching their schools, and harsh economic conditions causing teachers to go on strike or leave their jobs. As such, worsening educational conditions in the

FIGURE 2.2.2. Primary completion rate (Percentage)



Sources: UIS; UNSD, *Millennium Development Goals Indicators Database*, available at: <http://mdgs.un.org/unsd/mdg/Data.aspx>.
 * Data for developing regions refer to 2004.

conflict-ridden countries contrast sharply with significant advancements registered by other countries within the subregion, for example Egypt. Following a Government pledge to make education a national project and, consequently, increase allocated resources, enrolment rates in Egypt went up by 10 percentage points since 1990. As a result, youth literacy rates increased by about 20 percentage points between 1990 and 2005 to reach 85 per cent, according to UNESCO data. Egypt, which accounts for over half the total population of the Mashreq, thus contributed substantially to the observed strong improvement in the youth literacy rate in the subregion, which increased by 23 percentage points over the said period to reach 87.3 per cent in 2005, as illustrated in figure 2.2.3.

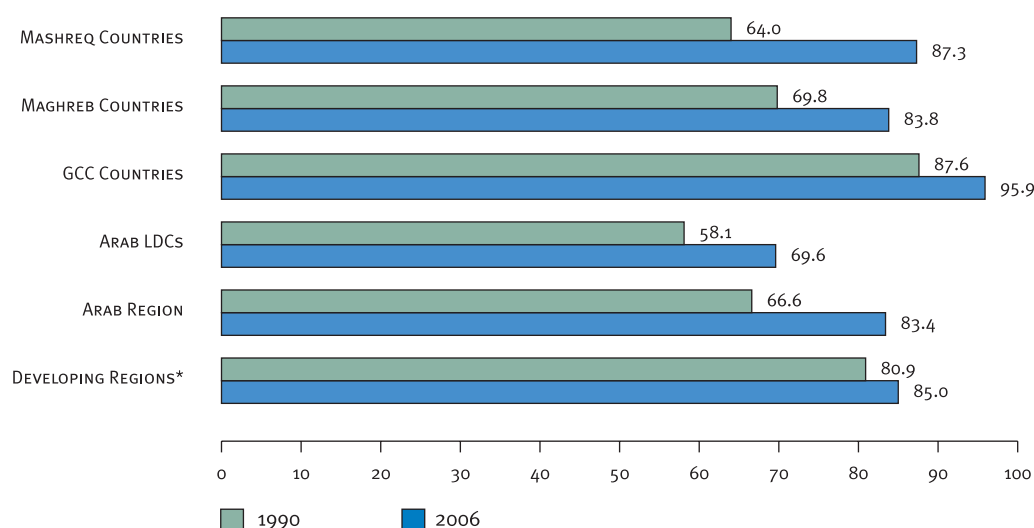
The performance of the Maghreb subregion in MDG 2 has been noteworthy, with enrolment and completion rates higher than the respective developing world averages. Indeed, although around one million children in the Maghreb countries are not in school, the number of out-of-school children in the subregion fell by almost two thirds between 1999 and 2005. In fact, NER increased by about 14 percentage points over the period 1991-2005 to reach 92.2 per cent, as illustrated in figure 2.2.1. The Maghreb countries also managed to retain students for a longer period of time than before, with the average completion rate rising by over 10 percentage points to 90.6 per cent in 2005, as illustrated in figure 2.2.2. As a result of higher enrolment and completion rates, the average youth literacy rate in the Maghreb subregion increased by almost 14 percentage points since 1990, reaching 83.8 per cent in 2005, as illustrated in figure 2.2.3. The significant improvement is mostly attributed to an estimated increase of 30 percentage points in enrolment and completion rates in Morocco.

Following the adoption of an educational reform in the mid-1990s, Morocco has made great strides in those indicators, despite high population growth and the fact that a sizeable number of the population live in mountain regions. Reform efforts included the admission of children with disabilities; development of non-formal education; training of professionals, of which a significant number are women; and amendment of the school curriculum. More importantly, reform efforts were mainly directed at the large rural population, in an attempt to enhance the incentives of parents in those areas to send their children to school, as well as the incentives of the children themselves to go to school.

The average primary NER in the GCC countries increased by 12.7 percentage points over the period 1991-2005, reaching 93.5 per cent as illustrated in figure 2.2.1. The progress is primarily the result of significantly higher school enrolment rates in Oman and Saudi Arabia. At the same time, the average primary completion rate rose from 91.5 per cent in 2001 to 95 per cent in 2005. The gender parity index of NER of 1.02 implies that GCC is the only Arab subregion that has fully succeeded in eliminating gender disparity in primary education. Furthermore, youth literacy rates in GCC countries reached almost 96 per cent, the highest literacy level in the region, and significantly higher than the average youth literacy rate in the developing world at large, as illustrated in figure 2.2.3.

Arab LDCs remain the countries with the most urgent need to make substantial efforts to achieve universal primary education. In fact, despite recording a significant improvement of 15.8 percentage points over the period 1991-2005, their average NER of 54.6 per

FIGURE 2.2.3. Youth literacy rate (Percentage)



Sources: UIS; UNSD, *Millennium Development Goals Indicators Database*, available at: <http://mdgs.un.org/unsd/mdg/Data.aspx>.

* Data for developing regions refer to 1990 and 2000-2004.

cent in 2005 remains far from the target rate. In 2005, about one child in two was out of school in those countries. Overall progress in the subregion can be attributed mainly to progress made in Yemen and Mauritania, which together account for over 30 per cent of the population. In fact, both those countries registered a significant improvement of over 20 percentage points since the 1990s, and an improvement of over 10 percentage points since 1999, though NER remained below 80 per cent. In other words, the best-performing countries in that subregion are still lagging behind the developing world average. The Government of Yemen has undertaken numerous initiatives in order to improve access to primary education. They include not only awareness campaigns, but also partnerships with international organizations to build schools, supply textbooks and train teachers. Moreover, while gender disparity remains entrenched in the social norms of the country, and continues to constitute one of the major factors that hinder

universal primary enrolment, the increased inclusion of girls in education contributed to the observed progress in Yemen. According to UNESCO data, the gender parity index for primary education increased from a low 0.38 in 1990, to 0.73 in 2005. It is worth noting that, while the situation in Mauritania and Yemen has notably improved, data for the Comoros and the Sudan suggest that the situation in those countries is more challenging. In Djibouti and Somalia, not even one child in three is enrolled in primary school. Significantly low completion rates further characterize the situation in Arab LDCs, where only 48.3 per cent of the eligible children reached the last grade of primary education in 2005. The aforementioned explains the relatively low youth literacy rate in Arab LDCs. Indeed, the rate improved by only 11 percentage points since 1990, reaching 70 per cent in 2005, which is well below the developing world average of 85.3 per cent. In other words, almost one young person out of three living in Arab LDCs is illiterate.

Challenges and Policy Recommendations

The challenges to achieving universal primary education and high levels of literacy in the Arab region are manifold and diverse, as the performances in the Arab countries vary considerably. They can be divided into challenges ensuing from an inadequate supply of educational infrastructure, and those ensuing from a lack of demand, particularly as a result of a lack of incentives. Some of the most evident challenges and obstacles are briefly discussed here.

On the supply side, the most straightforward challenge is the insufficient number of schools or classrooms. That issue plagues several countries in the region, and requires adequate funding and prioritization. In turn, adequate funding is difficult to acquire, particularly in Arab LDCs. Often, the problem goes hand in hand with poor management skills in public schools, which constitutes another major challenge to education in many Arab countries. The Committee on the Rights of the Child has called on Governments to take the necessary measures, including the allocation of adequate financial, human and technical resources, to ensure better internal efficiency in the management of education. In some countries in the region, public schools are a drain on the resources allocated to the education sector, due to a lack of accountability on behalf of the management and to the muting of parental voices.

A lack of qualified teachers is also an evident challenge, both to higher enrolment rates and to the quality of education. Educational quality tends to suffer when high numbers of students are attributed to a single teacher. The shortage in female teachers in rural areas translates



into lower female enrolment in schools, which is at the core of the low enrolment rates in most Arab LDCs. In some cases, the lack of female teachers is not due to a lack of qualification among females. That became apparent during a UNICEF project in Yemen, where a number of women underwent teacher training. However, due to clientelism or political patronage in hiring and to the traditional mind-set in the country, very few of the newly-qualified teachers were allocated teaching positions.

Furthermore, it is worth noting that the interconnectedness of development aspects is very apparent. A case in point is the shortage of proper infrastructure to connect villages in such countries as Morocco and Yemen, which renders it difficult for students in rural areas to reach school. On a similar note, experience shows that in Yemen, an improvement in water sanitation in rural areas contributed to an increase in female teachers in those areas which, in turn, led to higher enrolment rates.

The demand side of educational challenges primarily deals with the lack of incentives. The challenge is to increase incentives for parents to send their children to school, and in-

crease the incentives for children to actually go to school and, more importantly, to stay in school. For parents from low-income households, the compounded effect of poverty and of a perceived low rate of return to education renders the opportunity cost of sending a child to school very high. Indeed, parents from low-income households often perceive their children as a means to increasing the household earnings. A child could be earning a wage or could be of value added working in the home or, as is the case in rural areas, working on the land. Many Arab countries have addressed the opportunity cost of sending children, particularly girls, to school. Morocco and Yemen have both successfully implemented school feeding programmes to that effect. Such programmes benefit poor children not only by creating incentives to enrol in and attend school, but also by improving health and, therefore, attentiveness and the capacity to learn. In Morocco, within the first two years of implementing such programmes, the number of girls in the first year of primary school doubled. Results in Yemen were similar.

In addition to the opportunity cost, enrolment and other expenses, including costs of books, uniforms and transportation, also pose problems for poor families. Worldwide evidence shows that eliminating or reducing school fees substantially increases enrolment rates. However, that may not be feasible, due to a lack of official funding available for public schools or limited financial resources at private schools. Other measures, including providing equipment and school kits, establishing parent-teacher associations, providing supervision and paying for the transfer of textbooks, have proved to be helpful in reducing costs and enhancing incentives. Indeed, such efforts undertaken by UNICEF in Yemen contributed

to significant increases in enrolment rates in rural areas.

Furthermore, the quality of the curriculum is an important tool in enhancing the incentives of children to remain in school. There is substantive evidence that the introduction of innovative ideas and a more application-oriented approach have a positive effect on children's desire to learn. For example, curriculum reform is among the factors that contributed to an increase in the number of children completing primary school in Tunisia and Morocco.

In the cases of conflict countries, namely Iraq, Palestine, Somalia and the Sudan, security issues result in major challenges regarding access to education. School buildings are being destroyed. Teachers and students may not be able to reach school due to destroyed infrastructure and other barriers to freedom of movement, including those imposed by the Israeli army in Palestine, and some may join one of the conflict parties or flee the country. Such obstacles to the movement of free citizens transcend the supply aspect of the challenges, as the increase in the costs of security or excessive stress raises the opportunity cost and, thus, diminishes the incentives for school attendance. Resolving conflict and ending occupation in the Arab region will be essential to achieving universal primary education.

As stated in the Cairo Declaration, adopted by the Regional Conference on Education for All for the Arab States in 2000, "improving the quality of education is to be considered as priority number 1 in the Arab Framework for Action for meeting the goals of education for all at both quantitative and qualitative levels". The quality of education is also the emphasis

of article 29, paragraph 1, of the Convention on the Rights of the Child, which addresses the aim of education.²⁴

That priority encompasses all educational processes and skills, including the achievement by all learners of nationally defined and objectively measured levels of learning in literacy, mathematics and life skills. The latter involves technology skills that entail open-mindedness, development of thinking, the desire for knowledge and the desire to seek knowledge from all sources. Within that priority, the emphasis is to improve the status of teachers, including their qualifications and work conditions. After Jomtien,²⁵ learning achievement was adopted as a key indicator of the quality of education. Between 1993 and 1999, nine Arab countries participated in the Monitoring Learning Achievement Project conducted by UNESCO and UNICEF. The results showed that competencies acquired by students at the primary level, namely, grade four, were far below the standard proposed in Jomtien. Only 12 per cent, 10 per cent and 25

per cent showed high skills in Arabic language, mathematics and life skills, respectively. In Arabic language, only Tunisia and Morocco achieved the benchmark rate, namely, minimum 80 per cent of the competencies. None of the participating countries achieved the suggested level in mastering competencies in mathematics. Only Tunisia and Jordan reached the suggested level of achievement in life skills. On average, the achievement of girls was better than that of boys. Achievement among students in urban schools was higher than among those in rural schools. According to those result, primary education in the Arab region appears to be of poor quality and is not providing adequate and basic learning needs to the students. Furthermore, the results suggest that, in the past, those countries focused more on providing school places than on enhancing the quality of education. Accordingly, improving the quality of education in accordance with obligations under the Convention on the Rights of the Child constitutes a main challenge to the Arab region.

(24) United Nations, *Compilation of general comments and general recommendations adopted by human rights treaty bodies* (United Nations, 8 May 2006), available at: <http://www.unhchr.ch/tbs/doc.nsf/0/b12db96f5cle2491c1256ffd004914d8?Opendocument>

(25) UNESCO, *World Conference on Education for All 1990*, held in Jomtien, Thailand, 5-9 March 1990, during which delegates from 155 countries and around 150 organizations agreed "to universalize primary education and massively reduce illiteracy before the end of the decade".

C.

GOAL 3: PROMOTE GENDER EQUALITY AND EMPOWER WOMEN

The third Goal aims at eliminating discrimination against women by addressing gender disparities in three dimensions considered crucial for human development, namely, education and literacy, economic opportunity through improved job prospects, and participation in public policy through greater representation in national parliaments and decision-making bodies.

The region has witnessed a surge in efforts by Governments, NGOs and civil society organizations to tackle all forms of discrimination against women, and to invest in women's issues on a large scale. By May 2007, 18 of the 22 Arab countries had ratified the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). National and international NGOs and agencies have been actively implementing a diverse range of programmes, from empowerment and capacity-building projects aimed at enhancing the capabilities of women in rural areas, to campaigns raising awareness about women's rights, as well as lobbying for the amendment of laws. Several countries have amended family and personal status laws, as well as the penal code, to eliminate some of the provisions discriminating against women.

Despite such advancements, Arab women still do not enjoy the same legal protection and hu-



man rights as men, and are denied equal opportunities in employment and education. Gender inequality starts early and keeps women at a disadvantage throughout their lives, dominating all spheres of society. Girls are more likely to drop out of school, and to receive less education than boys in many Arab countries. Young women grow up in a discriminatory environment where inequalities in law and practice, including wage disparities, persist. There continues to be a great need for Governments to translate the international legal commitments under CEDAW into realities on the ground, both in law and practice, in order to ensure gender equality and the empowerment of young women and girls in the Arab countries. Social change needs to start with the young, who are generally more amenable to changes in social norms than older persons.

It is crucial to note that 11 of the Arab States that ratified CEDAW expressed reservations to certain articles, and some announced that they would not follow those articles²⁶ that "do not comply with provisions of Islamic Shari'a".²⁷

(26) ESCWA, *Developments in the Situation of Arab Women: Health, Education, Employment, Political Representation, CEDAW*, (ESCWA, 22 February 2007), available at: http://www.escwa.org.lb/divisions/ecw_editor/Download.asp?table_name=other%20&field_name=id%20&FileID=%2071.

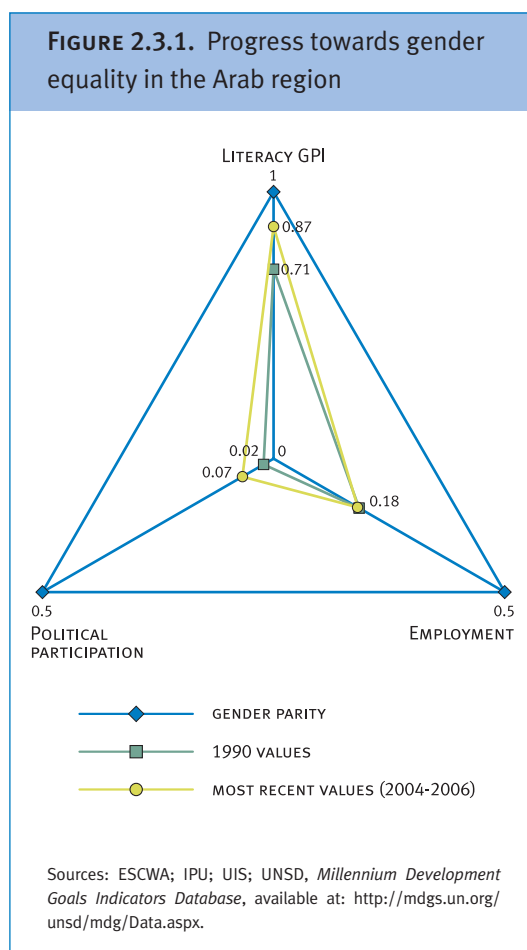
(27) Ibid.

Most prominent were reservations to article 2, which stipulates the steps a State should take to implement CEDAW, among which is mainstreaming the principle of equality in the constitution and “taking legislative, administrative and other steps to ensure that equality”.²⁸ In that context, it should be highlighted that CEDAW stresses that States with partial commitment should take into consideration the effect of such reservations on the integrity of CEDAW, in order to determine if a reservation is incompatible with its overall object and purpose.

The considerable strides that women have taken towards gender parity in education have not been mirrored by noteworthy increases in rates of economic and political participation. Figure 2.3.1 illustrates that point. The corner-points of the largest triangle represent gender parity in the three dimensions addressed, namely, education through the youth literacy gender parity index (GPI), share in wage employment in the non-agricultural sector and percentage of seats held in national parliament.²⁹ The three axes connecting the centre of the largest triangle with the corners provide measures for the extent of parity achieved. The two smaller triangles depict the position of the Arab region with regard to parity in the three gender dimensions. The smallest triangle depicts the situation of women in the year 1990, while the larger triangle refers to the latest observation available.³⁰ On the education front, Arab women have moved closer to equality, as youth literacy GPI has risen considerably from 0.71 to 0.87, as illustrated in figure 2.3.3. By contrast, the percentage of seats held in national

parliaments has increased only slightly since 1990, whereas women’s share in wage employment did not improve at all. In both areas, the current status is very far from parity, clearly confirming that gains achieved by women in education have not been translated into greater economic and political participation. Policies that aim at eliminating gender disparities must address that issue to ensure that Arab countries remain on the path towards gender equality in all its dimensions.

FIGURE 2.3.1. Progress towards gender equality in the Arab region



(28) Ibid.

(29) GPI of 1 indicates full parity in education; a 50-per-cent share denotes parity in economic and political participation.

(30) Concerning youth literacy GPI and political participation rates, the most recent data available are for 2006; whereas for economic participation, data are for 2004.

Target 4: Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015.

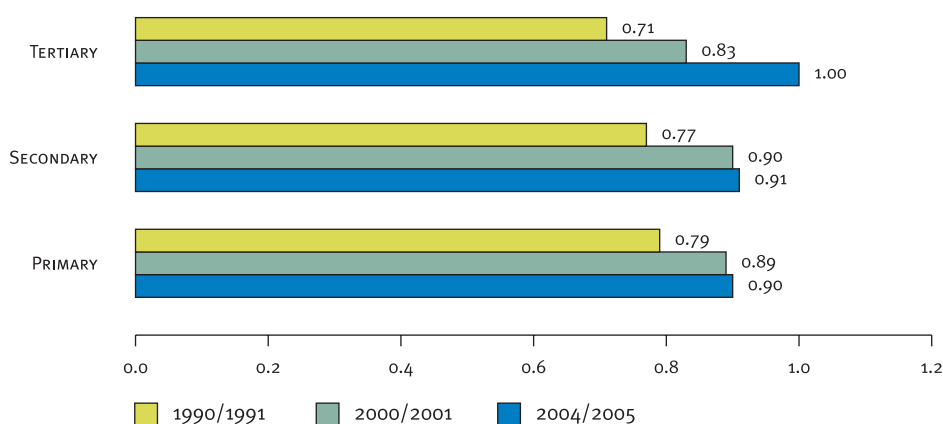
Education

At the regional level, Arab countries have succeeded in making vital progress towards the goal of gender equality in education. As illustrated in figure 2.3.2, GPI measured by the girls-to-boys gross enrolment ratio has substantially increased at all levels of education over the period 1991-2005. The regional average of 1.00 indicates that, for the region as a whole, gender disparities in enrolment at the tertiary level have been eliminated, though large differences between subregions and individual countries continue to exist. At the primary and secondary level, by contrast, full gender parity in enrolment rates has yet to be achieved, as indicated by the respective 2005 GPI values of 0.90 and 0.91. It is important to highlight that progress has been broad-based, with each of the subregions moving towards gender parity

at the different educational levels. Higher female enrolment and completion rates have contributed to major progress towards gender parity in literacy rates for the age group 15-24, as illustrated in figure 2.3.3. According to the latest UIS data, youth literacy GPI for the Arab region increased from 0.71 in 1990, to 0.87 in 2006.

In the Mashreq countries, progress towards gender parity has been faster at the secondary and tertiary level of education than at the primary. The GPI value for the primary level increased only slightly from 0.86 in 1991, to 0.91 in 2005. That relatively slow improvement in primary education is largely a result of a stagnating girls-to-boys enrolment ratio in Iraq. To what extent recent developments in Iraq and Palestine will dampen long-term achievement of educational equality remains

FIGURE 2.3.2. Gender parity index for education in the Arab region



Source: UIS.

unknown, but closer monitoring of changing gender disparities in education is vital. For girls in Egypt, by contrast, access to primary and secondary education has substantially improved, with GPI having increased by 11 and 13 percentage points during the period 1991-2005 respectively. Progress at the secondary level has also been remarkable in the Syrian Arab Republic, where GPI rose from 0.73 in 1991 to 0.94 in 2005. With respect to gender parity in youth literacy, the Mashreq is the Arab subregion with the largest gains between 1990 and 2006. As illustrated in figure 2.3.3, GPI for youth literacy increased from 0.72 in 1990 to 0.91 in 2006.

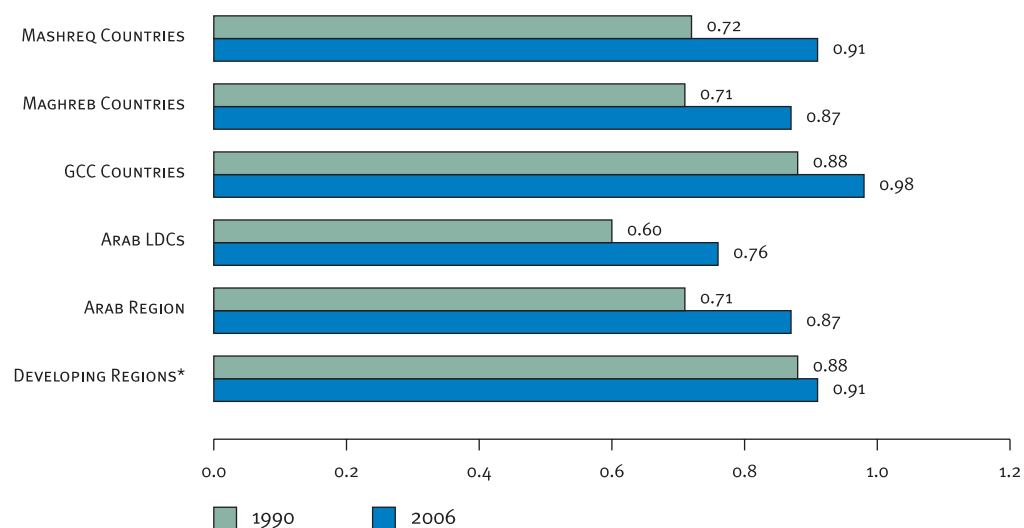
Since the early 1990s, the four Maghreb countries have all taken essential steps towards gender equality in education. Increased access for girls to primary, secondary and tertiary education has translated into substantially higher literacy rates among young females, with corresponding GPI rising by 16 percentage points from 0.71 in 1991 to 0.87 in 2006. Morocco, which in the mid-1980s lagged far behind in terms of female education, has reduced the gender gap at all levels, reaching GPI values in 2005 of 0.89 for primary and 0.85 for both secondary and tertiary education. However, the relatively low GPI for youth literacy of 0.75 illustrates that the gender gap is still significant. The remaining Maghreb countries have achieved almost full gender parity in primary education, and female enrolment rates have largely surpassed male rates at the secondary and tertiary levels.

GCC is the only Arab subregion that has reached full gender parity at the level of primary education. All six countries of the subregion have a balanced girls-to-boys enrolment ratio at the primary level. While enrolment at the

secondary level is also characterized by a balance between girls and boys, national GPI values for tertiary education show a strong dominance of females. In Bahrain and Qatar, for example, 223 and 337 girls were enrolled in 2005 for every 100 boys, respectively. That situation can be mainly explained by the fact that, in the Gulf countries, young men are much more likely to study abroad than their female counterparts. Girls also often outperform their male peers at secondary levels, gaining higher acceptance to tertiary institutions. In the area of youth literacy, GPI increased to 0.98 in 2006, indicating that practically the same number of girls and boys are able to read and write.

Starting from a low base, Arab LDCs have made the most progress of all subregions in primary education, narrowing the gender gap by 27 percentage points from 1991 to 2005. While in 1991, on average, only 54 girls were enrolled for every 100 boys, the number increased to 81 in 2005. Yemen is the Arab country that achieved the most significant gains at the level of primary education, with an increase in GPI from 0.35 to 0.74 over the said period. Guaranteeing girls equal access to secondary and tertiary education remains a major challenge for Arab LDCs, as illustrated by the low average GPI values of 0.68 and 0.60 and the relatively slow progress. Such outcomes largely reflect the fact that national Governments and international development organizations have so far given priority to universal primary education. In Mauritania and Yemen, the ratio of girls to boys that receive tertiary education is around 1 to 3. With respect to gender parity in youth literacy, the subregion has achieved significant progress since 1990. However, a GPI value of 0.76 for 2006 indicates that women are still notably disadvantaged, and it is unlikely that gender equality can be reached by 2015.

FIGURE 2.3.3. Gender parity index for youth literacy rates



Sources: UIS; UNSD, *Millennium Development Goals Indicators Database*, available at: <http://mdgs.un.org/unsd/mdg/Data.aspx>.
* Data for developing regions refer to 1990 and 2000-2004.

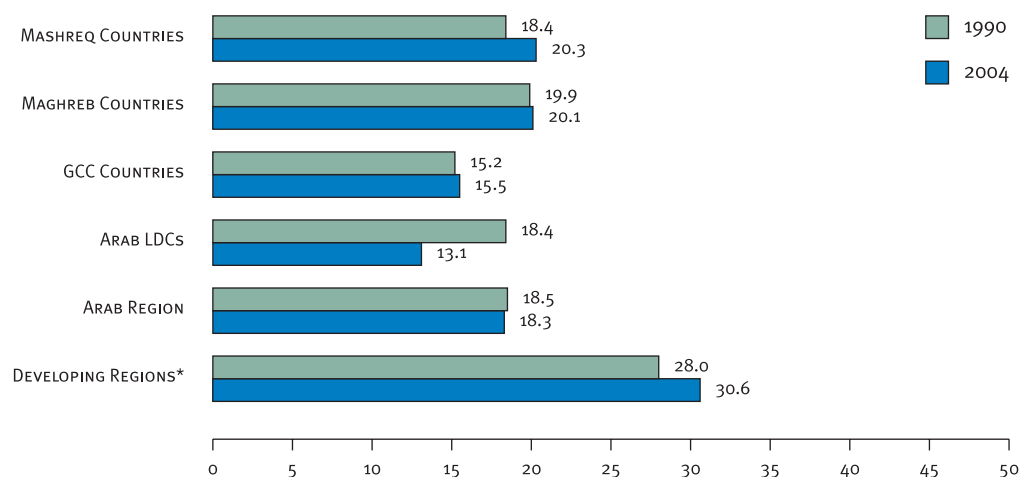
Economic opportunity and the labour market

Historically, female participation in Arab labour markets has been bound by a combination of factors that include low educational levels, conventional perceptions on the role of the different members of society and employment regulations that implicitly create a bias against women. In addition, the relatively poor economic performance of most Arab countries during the 1980s and 1990s, associated with rising rates of unemployment and underemployment, has deterred the labour market from accommodating a larger share of women. In that context, it is worth noting that official statistics measuring female participation in labour markets fail to accurately reflect reality, as they exclude all forms of non-paid work.

As mentioned above, the share of women in wage employment in the non-agricultural sector has remained constant in most subregions since 1990, as illustrated in figure 2.3.4. For the region as a whole, the share of women stood at 18.3 per cent in 2004, slightly down from 18.5 per cent in 1990. In comparison, countries of the developing regions witnessed, on average, an increase from 28.0 per cent in 1990 to 30.6 per cent in 2004.

The Mashreq and Maghreb saw incremental increases in the participation of women in paid employment over the period 1990-2004, rising to 20.3 per cent and 20.1 per cent, respectively. On average, women in the GCC countries and Arab LDCs tend to have a considerably lower share of non-agricultural wage employment than their other Arab counterparts, with 15.5 per cent and 13.1 per cent,

FIGURE 2.3.4. Share of women in wage employment in the non-agricultural sector (%)



Sources: UNSD, *Millennium Development Goals Indicators Database*, available at: <http://mdgs.un.org/unsd/mdg/Data.aspx>; United Nations, *World Population Prospects: 2006 Revision, Online Population Database*, available at: <http://esa.un.org/unpp/>.

Note: Subregional and regional averages are obtained by weighing national data with the appropriate working age population (15-64).

respectively.³¹ While participation in wage employment in GCC has seen almost no variation since 1990, the share of women in Arab LDCs actually dropped from a relatively high 18.4 per cent in 1990 to 13.1 per cent in 2004.

Women in politics and public representation

Arab countries have expended significant efforts to enhance women's legal status and their role in politics. Kuwait has founded the Cabinet Women's Committee, whose tasks include "the follow-up on women's affairs at the domestic level and participation in regional

and international conferences".³² Other GCC countries have followed suit, namely, Bahrain, with Bahrain Women's Union; Qatar, with a women's rights committee; and Saudi Arabia, with a centre for women's issues. Several countries, including Iraq, Jordan, Morocco, Qatar and Tunisia, have amended family and personal status laws, granting women expanded rights in divorce,³³ alimony and the custody of children. Marriage ages were raised to 18 or 19 for both men and women in a number of countries. Algeria, Morocco and Tunisia amended their citizenship laws to give children born of non-national fathers the right to the nationality of their mothers. Jordan and Tunisia also changed their penal codes,

(31) Figures for Arab LDCs refer only to the Sudan and Yemen, which constitute around 82 per cent of the population of the subregion.

(32) CEDAW, *Consideration of reports submitted by States parties under Article 18 of the Convention on the Elimination of All Forms of Discrimination against Women* (United Nations, 2003), available at: <http://www.un.org/womenwatch/daw/cedaw/reports.htm>.

(33) In Jordan, for example, women were granted the right to *shiqaq* and *khul'u*, two types of divorce that they could not previously demand.

criminalizing honour killings and sexual harassment, respectively, although the CEDAW Committee continues to indicate concern with regard to the treatment of honour crimes in the penal code in Jordan.³⁴ In February 2006, Oman became the eighteenth Arab State to accede to CEDAW. In addition, some national Arab parliaments have adopted the quota system to promote women's participation, as stipulated by the Convention.³⁵

On the political scene, as illustrated in table 2.3.1, women's participation in parliaments in the Arab region stood at 8.7 per cent in 2007, a figure among the lowest in the world, highlighting the need for continued action.³⁶ Quota systems did indeed bring about an influx of women to national parliaments, resulting in higher levels of political participation. Iraq witnessed the most substantial changes of any Arab country, with women's representation in parliament reaching 25.5 per cent since the 2005 elections. In Jordan, the percentage increased from 1.3 per cent in 1997 to 5.5 per cent in 2006; and in Morocco, it increased from 0.6 per cent in 1997 to 10.8 per cent in 2006, bringing 35 women to parliament. While women's representation in the Egyptian parliament is low, a number of female judges have been appointed for the first time after a long campaign by Egyptian civil society groups. Following decades of struggle, Kuwaiti women gained massive political ground in 2005, when they attained comprehensive political rights, though they failed to win any seats in the 2006 parlia-

mentary elections. However, the new cabinet of March 2007 includes two women who, as ministers, also sit in parliament. In the United Arab Emirates, elections in December 2006 heralded the success of nine women in acceding to the lower house of parliament, which has a total of 40 seats. Bahraini women managed to obtain only one seat in elections the same year. Despite such advancements, GCC is still the sub-region with the lowest representation where, on average, only 5.1 per cent of parliamentary seats are held by women. Recent trends in Arab LDCs varied; women's participation in parliament in Yemen fell from 4.1 per cent in 1990 to 0.3 per cent in 2007; while the number in the Sudan rose from 5.3 per cent in 1997 to 14.7 per cent in 2007. The impact of adopting the quota system, and the extent to which it can support fundamental change in women's status in the Arab region, remains debatable. The experiences of Jordan, Morocco, the Sudan and Tunisia suggest that, in general, quotas might be a useful preliminary mechanism to increase women's participation in legislative bodies.



(34) United Nations, "United Nations committee monitoring elimination of discrimination against women to celebrate twenty-fifth anniversary", background release (20 July, 2007), available at: <http://www.un.org/News?press/2007/wom1635.doc.htm>.

(35) CEDAW, General recommendation No. 25, on article 4, paragraph 1, of the Convention on the Elimination of All Forms of Discrimination against Women, on temporary special measures, advance unedited version (30 January 2004), available at: <http://www.un.org/womenwatch/daw/cedaw/cedaw30/GenRecWP1-auv.PDF>.

(36) Data on women's representation in national parliaments refer to the lower or single house, as per IPU classification.

TABLE 2.3.1. Proportion of seats held by women in National Parliament

Country	1990	2000	2007
Egypt	3.9	2	2
Iraq	10.8	6.4	25.5
Jordan	0	0	5.5
Lebanon	0	2.3	4.7
Palestine			
Syrian Arab Republic	9.2	10.4	12
Mashreq	4.8	4.2	9.9
Algeria	2.4	3.2	6.2
Libyan Arab Jamahiriya			(4.7)
Morocco	0	0.6	10.8
Tunisia	4.3	11.5	22.8
Maghreb	2.2	5.1	13.3 ^{a/}
Bahrain	0	0	2.5
Kuwait	0	0	3.1
Oman	0	2.4	2.4
Qatar	0	0	0
Saudi Arabia	0	0	0
United Arab Emirates	0	0	22.5
GCC	0	0.4	5.1
Comoros	0		3
Djibouti	0	0	10.8
Mauritania		3.8	17.9
Somalia	4		7.8
Sudan			14.7
Yemen	4.1	0.7	0.3
Arab LDCs	2	1.5	9.1
Arab region	2.2	2.5	8.7
Developing regions^{b/}	10.4	10.1	15.3

Sources: UNSD, *Millennium Development Goals Indicators Database*, available at: <http://mdgs.un.org/unsd/mdg/Data.aspx>; IPU.

Note: Regional and subregional averages are arithmetic.

a/ Maghreb average does not include the Libyan Arab Jamahiriya.

b/ Data for developing regions refer to 1997 and 2006.

Challenges

There is an interconnected matrix of legal, educational, social, behavioural and economic factors that hinder the inclusion of Arab women in the labour market, and impede their participation in political decision-making. On the employment front, those factors have resulted in increased barriers, namely, wage and non-wage discrimination, unequal access to the market and lack of complete control over resources. On the political participation front, hurdles are mainly social in nature, with public attitudes frequently expressing a clear prejudice against women's participation in political life.

While education in itself enhances women's well-being and quality of life, it can also be a vehicle to improving women's economic and political prospects. Higher levels of educational attainment, however, have not yet positively affected the economic and political participation rates of women in the Arab region. Male domination of the labour market continues, especially in the highly-demanded professional fields of engineering and information and communications technology. In many countries, only some of the technical and vocational programmes are open to girls. Another contributing factor is the pervasive stereotype that the jobs women engage in should be an extension of their reproductive roles. Thus, most Arab women tend to specialize in care and education, or in other fields considered suitable, for example the humanities or social sciences.

Though labour laws in some Arab countries do not explicitly discriminate against women, family laws and regulations intended to concede to women's special needs, including

maternity leave and limits on working hours, frequently discourage employers from hiring women. Often, employers mistakenly fear that children and house-related responsibilities negatively affect women's ability to work and the quality of their output. That is compounded by the lack of services at work that facilitate their reproductive roles, including nurseries and inexpensive cafeterias. In addition, women in several countries face legal and/or social restrictions on their mobility, hindering their ability to travel and conduct business abroad. All the above detracts from the incentive to hire women and supports the strong preference for employing men. It encourages one form of wage and non-wage discrimination and increases unemployment rates among women, especially those with higher education.

The aforementioned stereotype follows from a traditional ascription of gender roles in the Arab family and society that remains powerful. Men, for the most part, are still viewed as the primary breadwinners and assigned the productive roles in a family, while women are mainly assigned to the reproductive role. Thus, a prevailing notion is that women's work and participation in the public sphere and outside the house is a secondary activity and of no considerable consequence. Such attitudes can also account for the low political participation of women. Coupled with the strong clanship/tribalism that characterizes the region and affects the public and private lives of individuals, and the evident discrimination in laws and practices, women are left at a particular disadvantage. The result is that women are often perceived as beneficiaries of the development process, not as active participants with equal rights and entitlements.

Moreover, women's economic rights, as well

as access to productive resources, credit and assets, have often been impeded by institutional constraints and traditions. Along with the wage disparity, women face the problem of lack of control over financial resources and land, as well as a lack of access to formal credit markets. A recent study found that less than 4 per cent of total SMEs are owned by women in Jordan, despite the fact that the majority of microenterprises in the informal sector are women-owned.³⁷ A lack of access to funds and of training and capacity-building opportunities, however, may prevent them from growing into SMEs.

In general, the social patriarchal structure in the region and the discriminatory legal framework play large roles in limiting women's control of and access to economic resources. Inheritance laws that restrict women's share in property are one example; another is legislation in some countries that prohibits women from concluding contracts in their own name.³⁸ Therefore, Arab women are more likely than men to be engaged in informal sectors, for example selling products in local open-air markets or working on a family farm, which typically involves non-wage work or work under contracts that supply few benefits.³⁹

Box 2.3.1. Adolescent-friendly youth centres in Jordan

Adolescents and youth in Jordan have few safe outlets for social or recreational activities. Girls, in particular, have restricted mobility and few chances to further develop their leadership skills and enhance their critical thinking skills. In 2006, a project to establish so-called adolescent-friendly youth centres was launched by the UNICEF Jordan country office, in partnership with the Jordan Higher Council for Youth, a key service provider for the sector of adolescents and youth in the country. The Project focuses on creating a safe and conducive environment for adolescent girls, where they can come during their free time to socialize with their peers, express themselves, learn and develop skills, and play sports. Activities include training on such life skills as decision-making, dealing with peer pressure, leadership and communication to enable them to participate in the decisions that influence their lives, express their opinions and lead a healthy lifestyle. Recreational activities include sports and drama, which are also used as tools to promote key health messages among their peers. Capacity-building for youth workers in gender-sensitive and participatory programming is a key strategy to enhance their participation. Combining those various approaches has enhanced the quality of activities offered and provided increased opportunities for marginalized adolescent girls, raised their profile in their local communities, as well as improved their self-confidence and social interaction skills. The Project is being replicated at all youth centres affiliated to the Higher Council for Youth.

(37) "USAID/SABEQ to provide technical support, capacity building for women's organisation", *The Jordan Times* (30 August 2007), available at: <http://www.jordantimes.com/index.php?news=1821>

(38) Rania Jazair, "Gender Equality: A Vehicle for the Achievement of all MDGs", presented at the *Expert Group Meeting for the MDGs 2007*, Amman, 26-27 February 2007.

(39) Rana Hussein, "UNIFEM launches 'Progress of Arab Women 2004' report", *The Jordan Times* (19 July 2004), available at: <http://www.jordanembassyus.org/07192004004.htm>.

D.

GOAL 4: REDUCE CHILD MORTALITY



Target 5: Reduce by two thirds, between 1990 and 2015, the under-five mortality rate

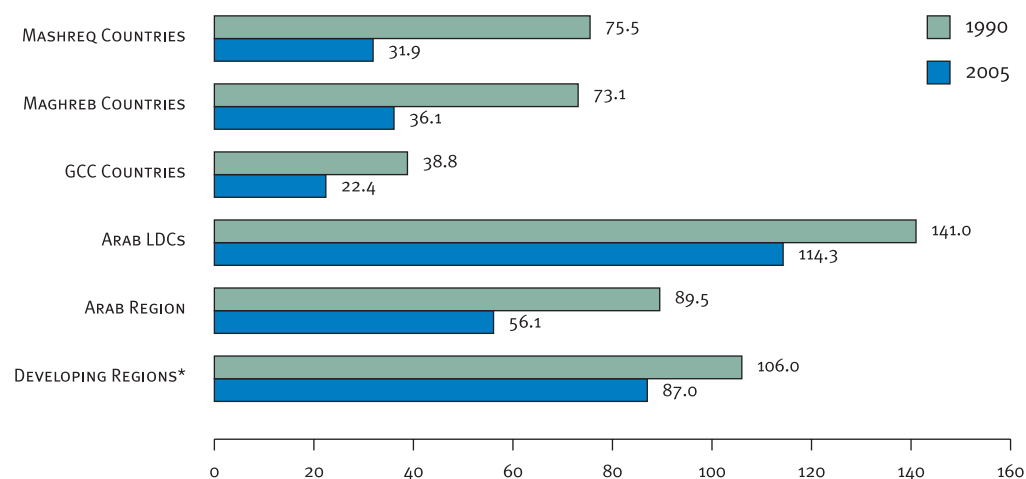
Goal 4 aims at reducing child mortality by lowering the under-five and infant mortality rates, principal measures of the health status in a country or region.⁴⁰ Empirical research has led to an increased understanding of the key determinants of health outcomes, and findings have resulted in different sets of policy interventions that increasingly account for the linkages between health and other development areas, including poverty, education and the environment. As such, since the mid-1980s, efforts in developing countries, including those in the Arab region, have increased considerably to improve health outcomes, particularly for the poor.

With respect to under-five mortality rates (U5MRs), the Arab region continues to be characterized by strong disparities across the four subregions and between individual countries; in fact, no other region in the world records

such wide contrasts. However, the region has made significant progress since 1990, and is not far “off track” to meet the target of reducing U5MR by two thirds over the period 1990-2015. In fact, average U5MR per 1,000 live births in the Arab region dropped by 37 per cent between 1990 and 2005, from 89.5 to 56.1 deaths per 1,000 live births, as illustrated in figure 2.4.1. Assuming linear progress towards the target, a reduction of around 40 per cent between 1990 and 2005 would have been required to be “on track”. In contrast to the other subregions, progress was slow in Arab LDCs, and those countries continue to suffer from very high U5MRs. The average rate decreased from 141 per 1,000 live births in 1990 to 114.3 per 1,000 live births in 2005, a mere reduction of 19 per cent. In other words, more than 1 child in 10 living in Arab LDCs dies before reaching his/her fifth birthday. It is particularly striking that in Somalia and Mauritania, the two Arab

(40) Child mortality is defined as mortality for children under 5 years of age, while infant mortality measures mortality for children below 1 year of age.

FIGURE 2.4.1. Under-five mortality rate (Per 1,000 live births)



Sources: UNICEF-MENARO; UNSD, *Millennium Development Goals Indicators Database*, available at: <http://mdgs.un.org/unsd/mdg/Data.aspx>.

* Data for developing regions refer to 1990 and 2004.

countries with the highest rates, there has been almost no improvement since 1990. The Comoros is currently the only Arab LDC that is considered on track to meet target 5. That contrasts sharply with the experience in the Maghreb, where all four countries are on track and rates fell, on average, by 51 per cent during the said period. Progress was even faster in the Mashreq, where the average U5MR decreased by 58 per cent between 1990 and 2005 to 31.9 per 1,000 live births. Egypt recorded the largest improvement among all Arab countries, reducing U5MR from 104 per 1,000 live births in 1990 to 33 in 2005. In Iraq, survey information estimated U5MR at 41 per 1,000 live births in 2006.⁴¹ While that rate is higher than in the other Mashreq countries, it is considerably below previous estimates, which had suggested rates of above 100. The GCC countries have the

lowest average levels in the region. They have made significant progress since 1990, reducing U5MR by 42 per cent to 22.4 per 1,000 live births in 2005. Oman was particularly successful in combating under-five mortality; the rate decreased by 63 per cent during the said period. Saudi Arabia has also achieved notable progress and is on track to meet the target by 2015. However, U5MR of 26 per 1,000 live births in 2005 is higher than in the rest of the subregion.

Almost 75 per cent of deaths before the age of 5 in the Arab region occur in the first year of life. The average infant mortality rate in 2005 was 41.2, down from 61.6 per 1,000 live births in 1990. Progress since 1990 has mostly mirrored the trend in under-five mortality. In Arab LDCs, around 1 child in 12 dies before reaching his/her first birthday.

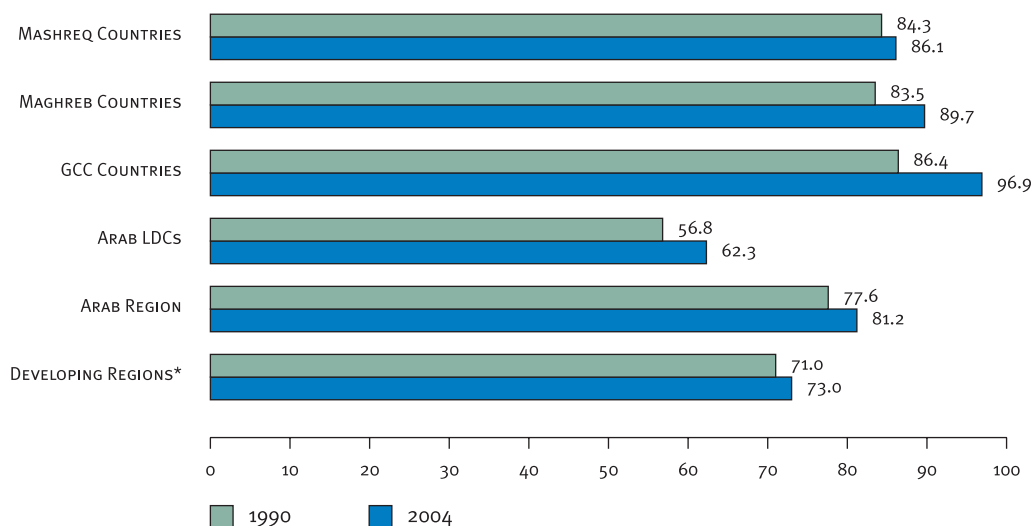
(41) UNICEF, *Monitoring the Situation of Children and Women: Findings from the Iraq Multiple Indicator Cluster Survey 2006*, (March 2007), available at: http://www.childinfo.org/mics/mics3/docs/countryreports/MICS3_Iraq_Preliminary_Report_2006_eng.pdf.

For infants, the rate of immunization is an important indicator of access to medical care and of the degree of knowledge surrounding the need for vaccination. Immunization against measles is often the last in a series of vaccinations and would, therefore, indicate that the infant has access to health care and has been given the full course of immunizations. Routine immunization coverage of 1-year-old children in the Arab region increased to 81.2 per cent in 2004, a number significantly above the average of 73 per cent for the developing regions, as illustrated in figure 2.4.2. With the exception of Iraq and Algeria, the countries of the Mashreq, Maghreb and GCC have managed to attain almost complete vaccination coverage of children. By contrast, only around 6 out of 10 children living in Arab LDCs were immunized against measles in 2004. In Somalia, immunization coverage remained below 50 per cent; while in the Comoros and Djibouti, immuni-

zation levels decreased considerably between 1990 and 2004. In countries where coverage is lagging behind, many measles-induced deaths can be prevented by making more efficient use of existing immunization services. Increasing the percentage of vaccinated children is critical for preventing disease in the community as a whole. Even those children that remain unvaccinated benefit from "herd immunity", since immunization decreases the rate of disease transmission.

In all Arab countries, there is a need to improve access to basic social services and the quality of care; and to promote the use of health services and care practices, namely, child feeding, including breastfeeding and complementary feeding, as well as better hygiene and maternal care. Special support is needed for improving the coverage of immunization and the use of safe water and sanitation by households liv-

FIGURE 2.4.2. Proportion of 1-year-old children immunized against measles (Percentage)



Sources: UNICEF-MENARO; UNSD, *Millennium Development Goals Indicators Database*, available at: <http://mdgs.un.org/unsd/mdg/Data.aspx>.

ing in Arab LDCs and the countries in conflict. Millions of Iraqis lack drinking water and live with poor sewage systems and, therefore, suffer from increased incidence of waterborne diseases. Improving access to education, for both girls and boys, and improving the livelihoods of the poorest population groups will also contribute to lowering mortality rates. The high-performing countries, namely, Tunisia and Lebanon, will need to focus on reducing neonatal mortality as a means of further reducing overall infant mortality. In fact, unless the issue of newborn mortality is also addressed, it would be unlikely for many countries to reach MDG 4, not just those with low under-five mortality.

Youth and Child Mortality

The argument that health and nutrition problems tend to be inter-generational supports strong linkages between child mortality and youth. For example, poor health and nutrition during adolescent pregnancy can lead to poor pregnancy and low birth-weight babies. There is sufficient evidence that early pregnancy and inappropriate child-spacing, which are widespread phenomena in many countries in the region, contribute to poor infant health and nutrition, thus increasing the risk of early death.

Iron-deficiency anaemia among adolescent girls is another problem, increasing the health risk for both mother and child. The majority of young people in the region, both male and female, are ill-prepared for the challenges associated with pregnancy, early pregnancy and child health. They lack the knowledge of good health practices, and available maternal and child health services in many areas do not fully meet the needs of young parents. In many parts of the Arab region, girls face discrimination in

terms of access to information and social services, which raises their own vulnerability, as well as that of their children, to health- and mortality-related risks. In addition, in some parts of the region, emerging health problems among the young, including HIV/AIDS and substance abuse, increase health risks and mortality rates of infants and young children.

Role of Youth

Young people can be active partners in promoting progress in the area of child health by advocating increased and more efficient public spending on health programmes and services, especially for poor families and communities. Priority areas include extending immunization coverage, focusing on disease prevention, providing treatment in the early stages for mothers and children, and ensuring affordable access to health services to adolescents, both married and unmarried. The ability of young people to plan safe childbearing and to raise healthy children depends, among other factors, on the educational level, nutritional status and specific knowledge of health issues, as well as on the availability of health services. Adequate health services are lacking in many Arab countries, especially in LDCs, where child mortality rates are still very high.

There are specific areas in which young people can contribute to improved child health. For example, boy and girl scouts can play an important role in communication and social mobilization campaigns, including immunization and HIV/AIDS prevention. Youth clubs can also play an active role in promoting the rights of children and be involved in communicating behavioural change and promoting life skills, including those related to health, nutrition and

hygiene practices. Similarly, peer-to-peer support groups are emerging as a major resource for promoting sound reproductive health behaviour and related life skills.

Challenges and Policy Recommendations

In general, efforts to improve health outcomes have increased significantly in the Arab region. However, while infant and under-five mortality rates have been reduced considerably, that may not necessarily imply that efforts have focused on marginalized groups. Relatively little is known about the extent of within-country disparities in child mortality and the role of different individual or family characteristics, including socio-economic status or ethnical belonging. As such, the aim of MDG 4, which includes reducing such disparities within countries rather than looking only at national averages, is difficult to reach and progress towards it is difficult to monitor.

Wide disparities exist in access to social services, especially health, nutrition, education, and water and sanitation, among the countries facing the biggest child health challenges. It is of utmost importance to address disparities within countries and between different groups so as to ensure the application of the principle of non-discrimination. The low level of investment in social sectors in most countries highlights the need for Governments and the donor community to increasingly focus resources on areas which are most lagging behind, namely, the establishment of national child health policies. The development of such national plans, to which key partners in a country contribute, should adopt a different approach from the current project-oriented policy that prevails and

set clear priorities and directions, commit resources and harmonize partner actions. In addition, bringing peace to conflict-afflicted countries will be a key step to reducing disparity.

The nature of adolescent and youth health problems seems to vary between Arab LDCs and other Arab countries. Indeed, in Arab LDCs and in disadvantageous areas of some middle-to high-income countries, reproductive health problems contribute significantly to poor child health and high child and maternal mortality. Apart from direct investment in reproductive health services and care, educational and communication interventions need to tackle the issues of early marriage, early pregnancy and poor child-spacing, especially through the participation and empowerment of girls, and address existing inequalities.

Nutrition is a critical factor for the health of both mothers and children. While under-nutrition is directly associated with child mortality in the region, the consequences of poor nutrition can also be inter-generational. Nutrition interventions need to focus on both mother and child. They must include the need to address micronutrient deficiencies, namely, vitamin A, iron and iodine, since their insufficiency results in high mortality and morbidity rates. Programmes should aim at improving weight gain in pregnancy and early nutrition, especially through continued breastfeeding and complementary feeding during early childhood. In areas where household food security is a major concern, following natural disasters, conflict or poor livelihoods, the provision of supplementary feeding programmes targeting needy families is essential.

Some of the main challenges faced by the young in the Arab region, especially young females,

stem from deeply-rooted traditional views on their roles in the family and society, as well as discrimination in legislation. In many parts of the Arab region, young females face the risk of early marriage and childbearing, which often results in a disruption of education. In addition, low decision-making power and a generally low societal status contribute to the difficult situation of women. The various forms of violation of women's rights have a direct impact on their own well-being, as well as on the health of their children.

Active participation of young people in decision-making, as well as in policies and pro-

grammes that affect their own health and the health of children and women at large, is being recognized as a critical factor for achieving and sustaining longer-term gains in child health. While youth centres, youth municipalities, youth-friendly services and peer-to-peer counselling are frequently available in the region, taking those to scale requires wider acceptance, appreciation and the provision of resources, both financial and institutional, in accordance with international obligations under the Convention on the Elimination of All Forms of Discrimination against Women, the Convention of the Rights of the Child and other relevant treaties.

E.

GOAL 5: IMPROVE MATERNAL HEALTH



Target 6: Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio

Reducing maternal and infant mortality requires universal access to reproductive health and rights. That is particularly important for young women, who face the highest risk and, yet, have the least access to reproductive health information and services. Two indicators have been selected to help track progress towards the target of reducing the maternal mortality ratio by three quarters between 1990 and 2015, namely, the maternal mortality rate (MMR) and the proportion of births attended by skilled health personnel.

The monitoring of progress is hampered by a lack of comprehensive recent data that use the same methodologies as previous estimates. As such, the analysis in this section is mainly based on regional and subregional averages for the years 1990 and 2000. If available, more updated figures are presented for individual countries.

A new study, entitled *Maternal Mortality in 2005* includes updated estimates developed by WHO, UNICEF, UNFPA and the World Bank. However, as emphasized by the authors of that study, the new figures on maternal mortality ratios “should not be compared with those from the previous exercises to assess changes in time”.⁴² While the lack of comparable 1990 figures does preclude a thorough assessment of progress towards MDG target 6, those recent estimates suggest a slower rate of progress in the Arab region than the previous estimates used in this section.⁴³

Average MMR in the Arab region fell to about 272 per 100,000 live births in 2000, a decrease of almost 34 per cent from its 1990 level of 411 per 100,000 live births. As such, the Arab region is on track in reducing maternal mortality by three quarters from its 1990 level by 2015,

(42) WHO, *Maternal Mortality in 2005: Estimates developed by WHO, UNICEF, UNFPA, and The World Bank* (WHO, Geneva, 2007).

(43) The new maternal mortality estimates are expected to be included in the next MDG report for the Arab region, after adjusting the respective 1990 figures to allow comparison over time.

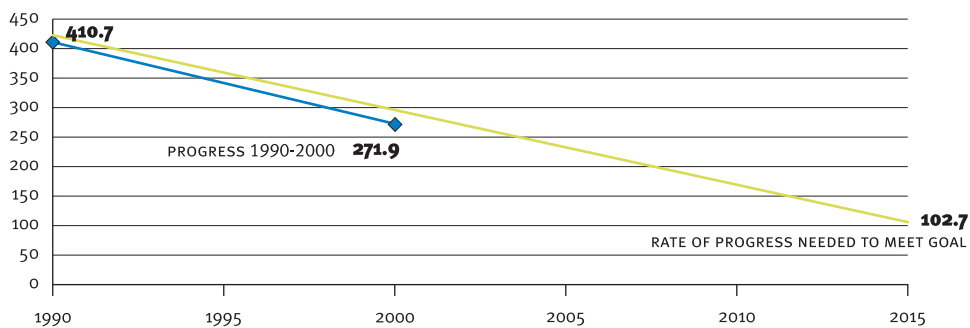
as illustrated in figure 2.5.1. The decline in maternal mortality is linked to the significant increase in births attended by a skilled health professional. In fact, births attended by skilled health personnel have risen by over 16 percentage points from 1990 to 2000.

There are great variations in the maternal mortality level among countries of the region, ranging from levels below 10 per 100,000 in some GCC countries, to around 1,600 per 100,000 live births in Somalia. The burden of maternal death in the Arab region is primarily carried by Arab LDCs and, to a lesser extent, by Iraq and Morocco. Countries of the region can be broadly classified into four groups: those countries where MMR was less than 100 per 100,000 live births in 2000, namely, Bahrain, Egypt, Jordan, Kuwait, Lebanon, the Libyan Arab Jamahiriya, Oman, Palestine, Qatar, Saudi Arabia, the Syrian Arab Republic, Tunisia and the United Arab Emirates; those where MMR ranged from 140 to 370 per 100,000 live births, namely, Algeria, Morocco, Iraq and Yemen; those where MMR ranged from 400 to 600 per 100,000 live births, namely, the Comoros,

Djibouti and the Sudan; and those where MMR was above 1,000 per 100,000 live births, namely, Mauritania and Somalia.

In the Mashreq subregion, maternal mortality dropped by almost 16 per cent between 1990 and 2000, to 125 per 100,000 live births. Such progress is partly explained by an increased proportion of births attended by skilled health personnel from 55.7 per cent in 1990 to 70.6 per cent in 2000. According to more recent data, Egypt, Lebanon, Palestine and the Syrian Arab Republic continued to achieve progress over the period 2000-2005, albeit at a lower pace than during the 1990s, when all countries in the subregion, except Iraq, achieved reductions in maternal mortality rates of over 30 per cent. MMR in Iraq in the 1990s increased by around 150 per cent, as the economic and social situation worsened owing to the imposition of sanctions, resulting in a significant decline in the proportion of births attended by skilled health personnel from 74 per cent of births in 1990 to 55 per cent in 2000. Today, maternal health continues to be threatened by conflict and occupation in both Iraq and Palestine, as

FIGURE 2.5.1. Maternal mortality in the Arab region (per 1,000 live births)



Source: WHO-EMRO.

Note: MDG Goal 5 aims at reducing the maternal mortality ratio by three quarters between 1990 and 2015.

road closures and curfews frequently obstruct and prevent travel to medical facilities. Lack of qualified health personnel and inadequate health facilities constitute other main obstacles for improving maternal health in those two conflict countries. Egypt, which accounts for about half of the live births in the Mashreq subregion, registered a 60.9 per cent reduction in MMR between 1990 and 2000. That decline is in part attributed to the increase in births attended by a skilled health professional from 35 per cent in 1990 to 69 per cent in 2000. The Government of Egypt, supported by national and international NGOs, has pushed forward the agenda for reproductive health, family planning and reproductive rights. Indeed, the National Council for Women is playing an important role in ensuring gender equity in access to health care, while the National Council for Childhood and Motherhood has introduced an education initiative to help girls and women improve access to information and decision-making power. Such manifold initiatives, undertaken both by the Government and NGOs, are directly linked to the results of a health survey which indicated preventable factors as being the primary causes of maternal mortality.

In the Maghreb subregion, average MMR dropped by a considerable 44 per cent between 1990 and 2000 to reach 125 per 100,000 live births. The proportion of births attended by skilled health personnel in the subregion increased from 40.7 per cent in 1990 to 63.8 per cent in 2000. The improvement over that period is in part due to the considerable decrease in MMR witnessed in Morocco, from 500 per 100,000 live births to 228 per 100,000 live births, representing a drop of 54.4 per cent in a country which accounts for 39.2 per cent of all live births in the region. The drop in MMR

in Morocco is linked to a significant increase in the proportion of births attended by skilled health personnel from 26 per cent in 1990 to 49 per cent in 2000. Such improvements are a result of the Morocco Family Planning and Maternal and Child Health Project, phase 5, Safe Motherhood. A maternal mortality reduction programme was put into action between 1994 and 2000 to raise the survival rates of women of childbearing age through improving maternal health services and lobbying policymakers to effect change. Together with the Ministry of Health, a national communication strategy was developed and implemented to raise awareness about maternal mortality and convey the message that women need not die in childbirth.

In the GCC subregion, maternal mortality dropped from 50.4 per 100,000 live births in 1990 to 17.2 in 2000 and to 10.9 in 2005. While some countries within that subregion, namely, Bahrain and Oman, registered MMR declines between 1990 and 2005 of more than two thirds, the considerable reduction in the subregion as a whole is mostly due to a decline of 56.1 per cent in Saudi Arabia, which accounts for 75.5 per cent of all live births in the subregion. At the same time, the number of births attended by skilled health professionals in the subregion increased from 91.3 per cent in 1990 to 96.2 per cent in 2005.

Despite having dropped by a significant 37.9 per cent from a high 1,026 per 100,000 live births in 1990 to 638 in 2000, average maternal mortality in the Arab LDCs remains very high. Only 44.8 per cent of live births in the year 2000 were attended by a skilled health professional. However, that constitutes a substantial improvement since 1990, when a mere 22.8 per cent of live births were attended by skilled

health personnel. The trends in maternal mortality and births attended by skilled health professionals in Arab LDCs are largely influenced by the developments in the Sudan and Yemen, which together account for almost 80 per cent of all live births in that subregion. In Yemen, maternal mortality dropped from around 1,400 per 100,000 live births in 1990 to 366 in 2000; and the proportion of births attended by a skilled health professional rose by 16 percentage points to 28 per cent. The average fertility rate in Yemen is one of the highest in the world, with seven children per woman. Moreover, an estimated eight women die during childbirth each day. Not only is there merely one doctor per 10,000 people, but doctors and health centres tend to be concentrated solely in main cities, namely, Sana'a, Aden and Taiz. In parallel, maternal mortality in the Sudan dropped by 22.9 per cent over the said period to reach 509 per 100,000 live births in the year 2000, as the proportion of births attended by a skilled health professional rose from 30 per cent in 1990 to 57 per cent in 2000. Some data on the distribution of certified midwives in the Sudan indicate gross inequalities, both between and within the federal states of the country. It is estimated that one certified midwife serves 30 to 70 per cent of villages in some states. In addition to the inequitable distribution of midwives, there is the question of whether they could be considered as skilled birth attendants or not, since they are not permitted to perform life-saving procedures or prescribe drugs. That becomes critical when considering that, in the year 2000, there were on average 5.9 births per woman in the Sudan. Such features are common in all Arab LDCs, where care during delivery is minimal and post-natal care scarce. Therefore, such initiatives as Making Pregnancy Safer, launched in the Sudan in 2000, are much needed in the countries of the subregion. The

Sudan initiative aims at improving maternal and newborn health by reducing morbidity and mortality related to pregnancy and childbirth. That may be done by building an effective continuum of care that will increase access to and utilization of skilled care during pregnancy, birth and the post-partum period.

The reduction in maternal mortality in the Arab region is in part attributed to the reduction in adolescent pregnancy, which is associated with high risks. Indeed, adolescents aged 15 to 19 are twice as likely to die during childbirth, and those under 15 are five times as likely to die during childbirth as women in their twenties. However, families are undergoing major changes as new patterns of marriage and family formation emerge across the region. Early marriage is no longer the standard it once was in Arab countries.

The average age at marriage for both men and women is generally rising. More Arab women are staying single longer or not marrying at all. For example, in Egypt, 22 per cent of women aged 15 to 19 were married in 1976; whereas in 2003, only 10 per cent of women in that age group were married. In Tunisia, the proportion of women aged 15 to 19 who were married dropped from 11 per cent in 1975, to 1 per cent in 2001; and in Kuwait, the rate decreased from 38 per cent in 1970, to 5 per cent in 1996. At the same time, more and more women in Arab countries use contraceptives. In fact, according to data that refer to the years 2000 to 2005, the contraceptive prevalence rate in Bahrain, Egypt, Jordan, Kuwait, Lebanon, the Libyan Arab Jamahiriya, Morocco, the Syrian Arab Republic and Tunisia was above 50 per cent. By contrast, it is still below 10 per cent in Djibouti and the Sudan.

While such trends are part of a general global phenomenon, they are also introducing new issues into Arab societies, namely, issues that can confront deeply-rooted cultural values and raise legal and policy challenges and opportunities. Changing demographic patterns of marriage reflect broader social and economic changes taking place throughout the region. Arab economies have increasingly moved away from an agrarian system, which supported early marriage and extended family structure.

Adolescent girls face considerable health risks during pregnancy and childbirth, accounting for 15 per cent of the global burden of disease for maternal conditions and 13 per cent of all maternal deaths. As mentioned above, adolescents face a higher risk of death during pregnancy than other age groups. Unsafe abortion,⁴⁴ pregnancy-induced hypertensive diseases and severe anaemia contribute, to a large extent, to high maternal mortality among adolescents. Infant and child mortality is also higher among children born to adolescent mothers.

Pregnant adolescents vary greatly in their circumstances, their behaviour and, consequently, their needs. Lack of information about the needs of pregnant adolescents means that service providers are often ill-equipped to deal with them. Failure on the part of communities to acknowledge and address the issues related to, and stemming from the problem, further complicates the situation. There are major barriers that preclude access of adolescents to maternal health-care services. Failure to address those barriers and needs seriously

threatens the health of young mothers and newborns, and further contributes to the already high maternal mortality ratios and pregnancy-related morbidities.

Challenges and Policy Recommendations

A major challenge to meeting the educational, informational and clinical needs of adolescent women in the Arab region is the eradication of existing social and cultural biases against adolescent women. Therefore, the needs of pregnant adolescents must be approached from a holistic standpoint, rather than a solely bio-medical perspective.

There are three generally identified delays in accessing and receiving care that contribute to maternal and infant mortality. The first delay is in deciding to seek care on the part of the individual, the family, or both. That includes knowledge about pregnancy and labour, as well as symptoms and signs of complications; in other words, the perception of need. Moreover, other issues are the status of women, the costs associated with delivery and cultural factors. The second delay is in reaching an adequate health-care facility. Causes include an inability to access health facilities because of underdeveloped transportation infrastructures, nonexistent communications networks, prohibitive costs of transportation and other financial constraints. The third delay is in receiving adequate care at an existing facility. Causes include inefficient triage systems, inadequate caregiver skills,

(44) WHO defines unsafe abortion as a procedure for terminating unwanted pregnancy by persons lacking the necessary skills, or performed in an environment lacking minimal medical standards, or both.

inadequate numbers of caregivers and inadequate equipment and supplies.

Although such delays are largely systemic and, thus, affect health care for most pregnant women in developing countries in general, and the Arab region in particular, their presence poses specific challenges for the care of pregnant adolescents because of physical and psychological immaturity and limited autonomy. If appropriate actions to eliminate those delays are not taken, advances in antenatal and obstetric care designed to curb maternal mortality ratios will have little effect on corresponding ratios for pregnant adolescents.

The evidence clearly suggests that the situation of pregnant adolescents varies by age, marital status, whether the pregnancy is wanted or unwanted, social class, educational attainment, urban or rural residence, region and cultural context. Consequently, necessary interventions must be flexible and responsive to such disparate needs. Policies must address the underlying social, cultural and economic factors that contribute to pregnancy and childbearing among adolescents. They must improve the status of adolescent girls and expand their opportunities by employing the following interventions:

(a) Providing opportunities to formal education. Special efforts are needed to overcome barriers that preclude young girls from attending school. Greater political commitment and resources are required to improve the overall status of girls;

(b) Enabling pregnant and parenting girls to continue their schooling. Traditionally, pregnant girls have been forced to leave school.

Policies designed to keep girls in school will allow them to acquire education and develop skills that will enhance their ability to care for themselves and their families, and to take advantage of worthwhile employment opportunities;

(c) Publicizing and enforcing existing laws on minimal age of marriage. Experience in many countries suggests that it is difficult for policymakers to influence age at marriage and childbearing directly. In spite of the legal age-limit being 16 or 18 in most countries, many women marry before reaching that age;

(d) Ensuring that reproductive health information and services for married and unmarried pregnant adolescents are legally available and widely accessible;

(e) Training providers, especially in counselling and interpersonal communication skills, to better work with adolescents. Adolescents, in particular, should be given adequate social support during pregnancy, delivery and the post-partum period;

(f) Enabling safe motherhood programmes to be particularly vigilant, sensitive and responsive to the conditions of physically-abused adolescents during pregnancy and the post-partum period;

(g) Providing maternal health care for adolescents with the provision of pregnancy tests, counselling, early detection and management of complications; and the provision of psychological and nutritional support, including iron and vitamin supplements. Antenatal care provided to adolescents should include treatment and management of malaria and other communicable diseases in endemic areas. Intermittent

preventive treatment and insecticide-treated bed nets should be provided, particularly in areas of stable transmission, and adolescents should be prioritized;

(h) Planning for birth, including the place of birth, availability of transportation and costs involved. That should be an essential step in the light of the higher incidence of premature delivery;

(i) Promoting post-partum care for adolescents, supporting breastfeeding and providing contraceptive method of choice;

(j) Working with individuals, families and communities, including key decision makers, to promote awareness about symptoms and signs of pregnancy and childbirth complications, as well as emergency preparedness; and to ensure provision of the required support to pregnant adolescents.

F.

GOAL 6: COMBAT HIV/AIDS, MALARIA AND OTHER DISEASES



Target 7: Have halted by 2015 and begun to reverse the spread of HIV/AIDS

Though the prevalence of HIV/AIDS continues to be relatively low in Arab countries, risks and vulnerability are high as the epidemic is on the rise. Based on data for 10 Arab countries, an estimated 68,000 people were newly-infected with HIV in 2006, bringing the approximate number of persons living with the virus to around 460,000.⁴⁵ Against a backdrop of still limited access to antiretroviral treatment, HIV/AIDS caused the death of an estimated 36,000 adults and children in 2006. Algeria, the Libyan Arab Jamahiriya and Morocco are witnessing HIV epidemics localized in geographical areas, or among particular at-risk groups. Djibouti, the Sudan and, to a lesser extent, Somalia face a generalized epidemic; in other words, those countries have an HIV prevalence rate in the general population of 1 per cent or more.⁴⁶ In 2005, Djibouti and the Sudan had the highest prevalence rates among the general population in the Arab region. Djibouti recorded a 3.1 per

cent rate, while estimated rates in the Sudan ranged from 0.8 to 2.7 per cent, with infection rates being highest in the south of the country. Although most reported HIV and AIDS cases throughout the region are among men, the ratio of infection among men to that of women is narrowing in a number of Arab countries.

Access to antiretroviral treatment is only available for a fraction of persons living with HIV in the Arab countries. According to recent WHO estimates for 15 Arab countries, only around 6.5 per cent of those in need actually received it. The poor regional average mainly reflects the low rate of access of 1 to 2 per cent in the two Arab countries with the highest incidence of HIV/AIDS, namely, Somalia and the Sudan. By contrast, in such countries as Oman, Saudi Arabia and Tunisia, most people in need receive the treatment.

(45) The 10 countries are Bahrain, Djibouti, Egypt, Jordan, Kuwait, Lebanon, Morocco, Somalia, the Sudan and Tunisia.

(46) The HIV prevalence rate in Somalia in 2005 was estimated at 0.9 per cent.

Across the region, unprotected sex remains the main mode of HIV transmission, while drug injection plays a catalytic role in the epidemic in a number of countries, most prominently in the Libyan Arab Jamahiriya. A general lack of awareness on modes of transmission and prevention measures is pervasive in the region, particularly among young people. As more information becomes available, elevated risk practices and vulnerability factors, including drug injection and sex work, have been documented across the region. In addition, increased vulnerability related to mobility, development challenges and humanitarian emergencies have also been reported. Women are disadvantaged in terms of access to health information and care, as well as to economic, social, legal and political empowerment. Furthermore, in some countries, women are subject to harmful cultural practices, including genital mutilation, which also carry the risk of transmitting the virus.

Young people in the region are increasingly at risk of infection from HIV. Notwithstanding the embedded community and family values, rapid change is taking place among younger generations, as exemplified by delayed marital age and increased pre-marital sex. In the Sudan, HIV prevalence of 1 per cent has been found among university students. Internally displaced persons face an even higher risk of HIV infection. A survey by the Ministry of Health in 2005 found a HIV prevalence rate of 1.6 per cent among displaced pregnant women seeking antenatal care in Khartoum. A second study on young people in the Sudan in 2005 showed that the level of knowledge on HIV and

the percentage of adopting preventive practices were extremely low. Recent data from Djibouti indicate that HIV prevalence among 15- to 24-year-olds attending antenatal care clinics was around 2.4 per cent; while in a national population-based survey, the HIV prevalence among the same age group was 2.6 per cent. Globally, infection with HIV is increasing faster among young women than among any other group, as a result of biological, cultural and socio-economic factors. Most young people do not know if they are infected, how HIV is transmitted, or how to prevent it. According to a recent study in the Sudan, only 5 per cent of the surveyed women knew that condom use could prevent HIV infection, and more than two thirds had never seen or heard of a condom.⁴⁷ The pandemic cannot be reversed unless young people have the information and services they need. Comprehensive efforts have been made by country partners and the international community, aiming to increase awareness of Voluntary Counselling and Testing (VCT) and equip young people with skills and tools to make informed decisions. Yet, the evolving lifestyle and behaviour of young people call for focused and adapted intervention approaches to be developed in close collaboration with the young themselves.

A better understanding of the magnitude of the HIV epidemic through second-generation surveillance and increasing availability and coverage of VCT services, in particular among those most at risk, remain fundamental challenges. While several countries have registered progress and commitment, they have yet to be translated into functional systems. Endeav-

(47) UNAIDS and WHO, *AIDS epidemic update: December 2005, Middle East and North Africa*, available at: http://www.unaids.org/epi/2005/doc/EPIupdate2005_html_en/epi05_11_en.htm.

Box 2.6.1. Prevention of HIV/AIDS among adolescents and young people

Several youth programmes in Jordan are promoting healthy lifestyles and focusing on sexual and reproductive health and prevention of HIV/AIDS as key issues. Working through vocational centres, one project targeted Jordanian adolescents, particularly those most at risk, namely, street children and child workers. A peer-to-peer approach was adopted, whereby young people were provided with the information and skills needed to protect themselves and their peers from HIV/AIDS. Furthermore, such skills as decision-making, assertiveness and dealing with peer pressure were taught, with the aim to enable them to make informed decisions about their lifestyle. The peer-to-peer approach allowed reaching out to a large number of young people, who also became active in fighting HIV/AIDS and keeping Jordan a low-prevalence country. The project was implemented through a partnership with the National AIDS Programme and the Family and Child Protection Society. In addition, a youth educational manual about reproductive health and HIV has been issued. Published by the UNICEF Jordan country office and the Ministry of Health, the manual was first piloted in Palestine, the Syrian Arab Republic and Yemen, and subsequently circulated extensively throughout the region.

ours to strengthen the sentinel surveillance and conducting national seroprevalence surveys have yielded results on the status of the epidemic in Algeria, the Libyan Arab Jamahiriya, Morocco, Somalia and the Sudan.

Overall, the response to HIV/AIDS in the Arab region has been evolving substantively. UNAIDS “Three Ones” principle, namely, one national action plan, one coordinating authority and one monitoring and evaluation framework, has been widely adopted across the region, engendering partnership and collaborative efforts of Government, NGOs and other international institutions. However, due to diverse political commitments, socio-economic policies and different levels of access to services, national responses to the epidemic have varied across countries.

Multisectoral national strategic plans currently drive the national AIDS responses in more than 15 countries of the region. Often, key sectors have been actively involved, including education, health, police and defence, in

addition to religious organizations and other influential segments of society. In many countries, civil society actors have developed action plans on AIDS to reinforce actions and mobilize resources. In 2006, the Arab countries embraced the move towards universal access of HIV prevention, treatment, care and support. Some countries in the region critically reflected on obstacles and potential solutions to scaling up the AIDS response within ongoing national processes.

Civil societies, including NGOs, faith-based organizations and community associations, have increasingly played an active role in national AIDS responses. An example is the Regional Arab Network Against AIDS (RANAA), which provides a forum for exchange and capacity-building of NGOs on AIDS. However, civil society organizations have only partial influence in the AIDS response, to a certain extent due to their limited capacity and experience in AIDS prevention, care and support. There is also considerable reluctance on the part of Governments to consider a more active contribution

of civil society to national efforts. In that context, the community organization People Living With HIV/AIDS emerging in several countries has been a landmark development. Associations and support groups are active in several Arab countries, including Algeria, Djibouti, Egypt, Lebanon, Morocco and the Sudan. Training of people living with HIV/AIDS on psychosocial support and on other areas constitutes pioneering efforts in the region.

Yet, studies show that many communities, including health-care workers, continue to ostracize people living with HIV, mainly due to judgemental attitudes and ignorance. Concerted efforts of partners are needed to confront stigma and alter policies and regulations to fight discrimination. Monitoring

and evaluation remain the most elusive of the Three Ones in the region. Data-collection efforts need to be strengthened, not only to measure the magnitude of the epidemic and HIV-related risk behaviours, but also, more importantly, to establish baseline information and determine the impact of efforts over time. To that effect, as monitoring and evaluation systems are being established, particular focus should be placed on disaggregating population data by gender and age group. That will facilitate a systematic evidence-based evaluation of programmes and progress towards achieving MDG 6. If the spread of HIV is to be halted in the Arab region, a substantial scaling-up of services related to prevention, information and multisectoriality must be ensured, coupled with a profound qualitative enhancement of such services.

Target 8: Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases

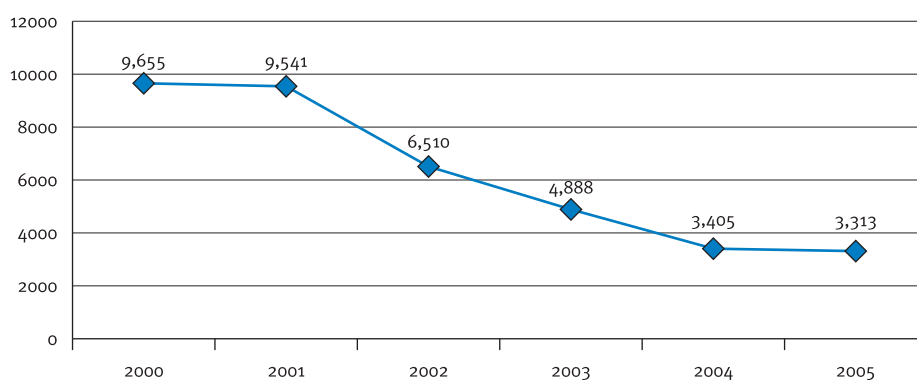
Malaria

While malaria has been almost eliminated in most Arab countries, it remains highly endemic in Arab LDCs, where on average 3,313 cases per 100,000 persons were reported in 2005, as illustrated in figure 2.6.1. Djibouti, Somalia, the Sudan and Yemen accounted for 98 per cent of notified cases in the region. Meeting Target 8 in the subregion, and in the region as a whole, is therefore heavily dependent on progress in those four countries.

Malaria is no longer a problem in the GCC countries except Saudi Arabia, where it occurs mainly in the south-west region. The number of

local cases reported in 2005 was 204, and the current Government programme aims at complete elimination. Among the Mashreq countries, malaria is present in Iraq, but remains mainly restricted to the three northern governorates. Iraq adopted a malaria elimination strategy in 2005, and has achieved a significant reduction in the number of cases, with only 21 reported in 2006. Egypt still has a residual focus in the Fayoum area. Other countries in the Mashreq subregion are free from malaria. In the Maghreb, Morocco recently confirmed the eradication of malaria, with the last local malaria cases being reported in 2004. The Sudan alone accounted for about 76 per cent of the region's total burden. According to the

FIGURE 2.6.1. Notified cases of malaria in Arab LDCs (per 100,000 population)



Source: WHO-EMRO.

latest survey, conducted in 10 federal states in 2005, the average malaria prevalence rate was 5.4 per cent, ranging from 1.3 to 22.0 per cent. Prevalence among young people aged 15 to 24 was estimated at 4.1 per cent.

Malaria notification in Djibouti, Somalia, the Sudan and Yemen tends to underestimate the actual number of cases as surveillance is weak and, in some areas, nonexistent. Lack of adequate health-care and laboratory facilities and adverse security conditions are some of the factors hindering progress in survey efforts. Though all four Arab LDCs have adopted effective malaria treatment policies, including ACTs⁴⁸ for falciparum malaria, the scaling-up of reliable and effective malaria diagnosis and treatment has been a challenge. Efforts have been hindered by the following factors: limited coverage of primary health-care services; poor quality of malaria diagnostic services; lack of mechanism for delivery of ACTs at the community level and to remote, marginalized people; high cost of new drugs; weak logistic and sup-

ply system for timely supply of the drugs; low compliance of the private sector to new treatment guidelines; and presence of counterfeit drugs in the market.

In addition, coverage of malaria risk areas by adequate preventive and curative measures is still very low. In Somalia, only 0.4 to 3.8 per cent of the population in various risk zones used insecticide-treated bed nets. A survey of the Sudan in 2005 estimated that 11.2 per cent of the population in malaria-risk areas and only 9.4 per cent among the young were sleeping under insecticide-treated bed nets. A mere 10.5 per cent of all patients and 13.9 per cent of youth patients were treated with ACTs. Despite major difficulties, the Sudan has been making massive scaling-up efforts over the past two years, with the financial support of the Global Fund to Fight Aids, Tuberculosis and Malaria. Hence, current coverage in several countries is likely to be higher than what available figures suggest. Nonetheless, overall coverage in Arab LDCs still falls substantially short of the targets.

(48) ACTs are artemisinin-based combination therapies for malaria.

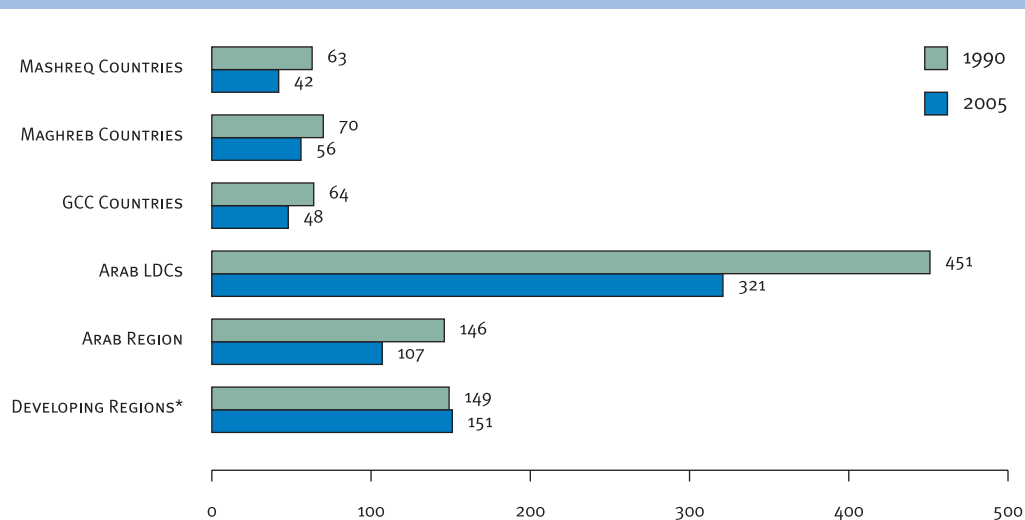
Tuberculosis

Tuberculosis (TB) remains a significant public health problem, and is probably the leading cause of communicable disease deaths in adults in the Arab region. The TB burden is assessed by three indicators, namely, the rate of incidence, prevalence and mortality, each measured per 100,000 people. It is estimated that in 2005, 240,000 people in the Arab region developed TB and 43,000 died from it, corresponding to incidence and mortality rates of 75 and 13 per 100,000, respectively. The average prevalence rate in the region fell by 27 per cent since 1990 to 107 per 100,000, as illustrated in figure 2.6.2. More than 70 per cent of cases and deaths occurred among 25- to 54-year-olds, who are usually the breadwinners; thus, their disease substantially affects the family income. TB, therefore, presents a developmental, as well as a public health, challenge.

Arab LDCs are most affected by TB. A total of 134,000 people developed the disease in 2005, accounting for almost 56 per cent of all new cases in the Arab region. The average incidence rate in the six Arab LDCs was 191 per 100,000 in 2005, with Djibouti suffering from the highest rate at 762 per 100,000, followed by the Sudan and Somalia with 224 and 228 per 100,000, respectively. On average, the Maghreb countries had an incidence of 62 per 100,000 people, while the Mashreq and GCC remain less affected with incidence rates of 32 and 35, respectively. As for prevalence rates, figure 2.6.2 shows that all four subregions have registered substantial declines since 1990. However, the situation in Arab LDCs remains challenging, with an average prevalence rate in 2005 of 321 per 100,000.

Most Arab countries have made good progress in TB control. Care based on the Directly Observed Treatment Short course (DOTS),

FIGURE 2.6.2. Tuberculosis prevalence rate (per 100,000 population)



Sources: WHO-EMRO; UNSD, *Millennium Development Goals Indicators Database*, available at: <http://mdgs.un.org/unsd/mdg/Data.aspx>.
* Data for developing regions refer to 1990 and 2004.

the internationally recommended strategy for TB control, has been widely expanded to encompass, on average, more than 90 per cent of the general population. In addition, the regional treatment success rate under DOTS reached around 82 per cent in 2003, only three percentage points below the global target of 85 per cent. The Mashreq countries and Arab LDCs achieved the most progress on that front since 1995, increasing their rates by 27 and 10 percentage points, respectively. Countries have also begun to scale up TB control by adopting the Stop TB Strategy, and such innovative approaches as the Practical Approach to Lung Health and computerized surveillance systems have been introduced in several countries.

However, the case detection rate under DOTS has been relatively low in the region as a whole. The percentage of cases detected was around 59 per cent in 2004, whereas the global target is 70 per cent. That implies that at least 41 per cent of TB patients do not have access to quality care. Only 8 of the 22 Arab countries, namely, Algeria, Jordan, Kuwait, Lebanon, the Libyan Arab Jamahiriya, Morocco, Oman and Tunisia, have achieved the target case-detection rate, and the Maghreb is the only subregion where all countries have reached the target.

In order to hasten the decrease of the TB burden, countries have developed strategic plans in line with the Global Plan to Stop TB 2006-2015. Such plans aim at rapidly scaling up TB care, especially through improving case-detection capacities, and are in line with the Stop TB Strategy. The plan also indicates financial requirements for the scheduled activities. For example, for WHO-EMRO countries, which include Afghanistan, the Islamic Republic of Iran and Pakistan, in addition to all Arab countries, except Algeria, the Comoros and

Mauritania, it is estimated that a total of US\$ 3.1 billion is needed to achieve Target 8. Almost all the countries eligible for financial support under the Global Fund have received the grant support. However, financial gaps remain wide in many countries and, thus, continued fundraising activities, particularly via national and regional partnerships, become very important.

A close link between TB and HIV has been well-established. HIV has abetted the incidence and spread of TB, which today is the most common cause of death in AIDS patients. Since the HIV epidemic has been expanding in some Arab countries, particularly LDCs, it is increasingly crucial to monitor the prevalence of both diseases in the same patients. HIV prevalence in adult TB patients in 2005 was estimated at 16 per cent in Djibouti, and 9 per cent in the Sudan. Data on multidrug-resistant TB, particularly the virtually untreatable extensively drug-resistant TB, are limited in the region. However, in the light of the low case detection, the wide availability of anti-TB drugs in private pharmacies indicates the presence of multidrug, and probably extensive drug resistance in many, if not all, countries of the Arab region.

The youth is not the age group most affected by TB, since the disease affects predominantly adults aged between 25 and 54 years old. However, epidemiologically, young people are particularly important as they will soon enter the age group that faces the highest risk. Improved awareness among young people is therefore of crucial importance, particularly in countries where HIV/AIDS is increasingly becoming a key determinant of TB. More importantly, the youth is a main driving force of the community. TB remains a highly stigmatized

disease, and patients and their families often suffer unnecessarily. Communication and social mobilization for the support of patients is much needed. That is one area where young people can play a significant role in community development. A good example is the anti-TB campaign by the International Federation of Medical Students' Associations, which aims at improving awareness by disseminating comprehensive information on the disease.

On the whole, the TB burden, namely, prevalence, incidence and mortality, has been reduced in the Arab region, in part as a result of the expansion of DOTS, coupled with good treatment outcomes. However, the reduction process has not been rapid enough to halt and reverse the spread of TB, or to halve its prevalence by 2015.

Box 2.6.2. Arab project for family health

The League of Arab States is implementing the Arab Project for Family Health (PAPFAM) in the Arab countries, funded by the Arab Gulf Programme for United Nations Development Organizations (AGFUND), UNFPA, OPEC Fund for International Development, UNICEF, WHO, International Planned Parenthood Federation (IPPF), the Islamic Organization for Medical Sciences (IOMS) and UN-ESCWA.

The Project aims at providing detailed and accurate information on family health and reproductive health through carrying out surveys and studies on youth, maternal mortality, circumcision, social and health care provided to the elderly, and maternal and child nutrition status. In addition, the Project will provide data concerning knowledge, good practices, attitudes and health status of young people, as well as developing a database that contains information related to youth employment and education, aspects of family life, health status, knowledge about contraceptives and sexually transmitted diseases and preparation for the reproductive role. Accordingly, surveys were conducted in the Syrian Arab Republic and Tunisia in 2001, Algeria and Djibouti in 2002, Yemen in 2003, Morocco in 2003/2004, Lebanon in 2004 and Palestine in 2006. Furthermore, two qualitative studies have been carried out in both the Syrian Arab Republic and Algeria.

G.

GOAL 7: ENSURE ENVIRONMENTAL SUSTAINABILITY



The environmental diversity in the Arab region is mainly due to geography, as well as the varying economic systems and levels of development among the countries. The region is home to 5 per cent of the world population, but has less than 1 per cent of the world's renewable fresh water. Arable land and water resources are scarce and high population growth, coupled with urban and industrial pollution and increased agricultural run-off, has contributed to deteriorating water and land quality, compounding water scarcity and desertification which, in turn, threaten future food security. In general, national policies, as well as conflict situations, are not conducive to conservation of resources. Despite geographical and climatic variations, environmental challenges revolve around a certain set of issues, namely, water scarcity and distribution, occupation and destruction, sanitation, land degradation, access to sustainable energy sources and natural disasters that cause environmental damage.

Target 9: Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources

All Arab countries share, in varying degrees, the major challenge of improving environmental governance and integrating environmental resource management into poverty-reduction strategies and national development plans. A significant part of the environmental problems the region is facing is related to poor management, weak institutional capacity and insufficient public expenditure on environmental issues. Economic development policies in most Arab countries promote price interventions and subsidies related to water, biodiversity and energy resources, which tend

to exacerbate economic and ecological losses, particularly in the energy and agricultural sectors. Such environmental problems not only affect young people today, but will have severe implications for their futures.

Percentage of land area covered by forest

The percentage of land area covered by forest in the Arab region has declined from 7.4 per cent in 1990 to 6.7 per cent in 2005. If that

trend persists, the Arab region will not meet its target despite reforestation efforts in several countries, including projects in the GCC countries to expand green areas. Some of the challenges facing the region include high population density; deforestation resulting from high demand for energy resources, especially in Arab LDCs; lack of institutional capacity; and lack of legislation and incentives encouraging reforestation.

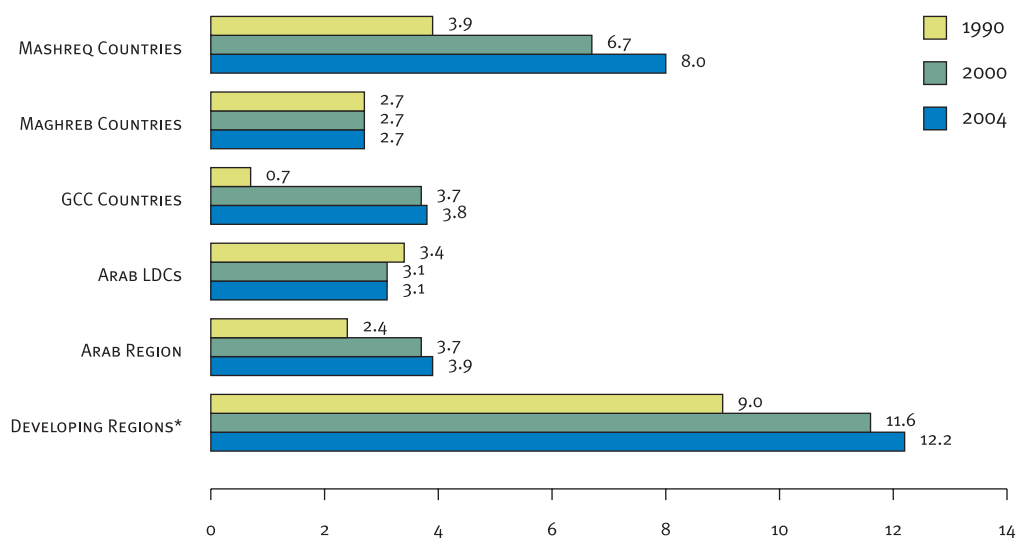
Despite such limitations, the Arab region has witnessed a strong increase in protected areas since 1990. The size of protected areas in the region relative to the total surface area has risen from 2.4 to 3.9 per cent between 1990 and 2004, as illustrated in figure 2.7.1. Nevertheless, the ratio of protected areas to total surface area in the Arab region remains around three times less than the world average of 13 per cent. The

increase is mainly a result of concerted efforts in the GCC subregion, where protected areas more than quadrupled over the same period. Such drastic increase is mostly attributed to the declaration in 1994 of a 64-million-hectare wildlife management area in Saudi Arabia, the largest in the world. In the Mashreq, the share of protected areas doubled between 1990 and 2005. By contrast, the Maghreb and Arab LDCs, the subregion with the highest biological diversity in the Arab region, have not witnessed any increases in the proportion of protected areas since 1990.

Energy Use

Rapidly expanding populations, rural-urban migration and widespread subsidies have contributed to a rising demand for energy in

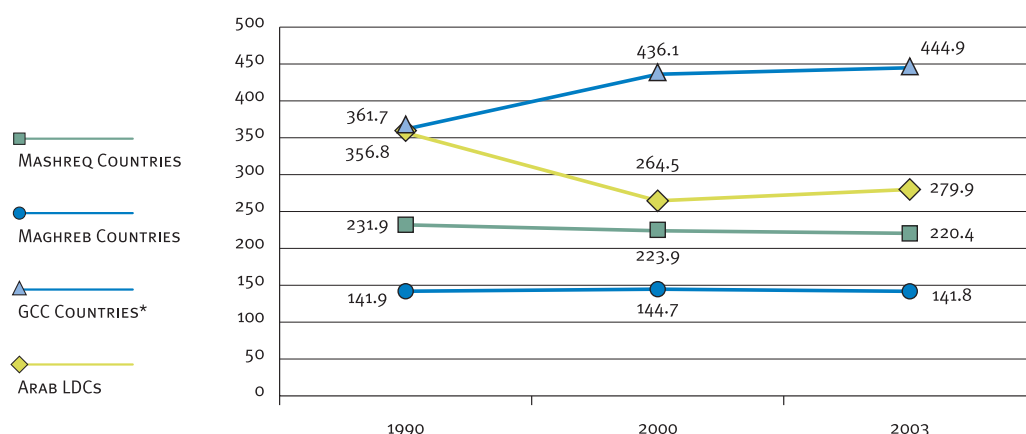
FIGURE 2.7.1. Protected area as a share of total surface area (Percentage)



Sources: ESCWA; UNSD, *Millennium Development Goals Indicators Database*, available at: <http://mdgs.un.org/unsd/mdg/Data.aspx>.

* Data for developing regions refer to 1990, 2000 and 2005.

FIGURE 2.7.2. Energy use (kilogram oil equivalent) per US\$ 1,000 GDP (PPP)



Sources: ESCWA; UNSD, *Millennium Development Goals Indicators Database*, available at: <http://mdgs.un.org/unsd/mdg/Data.aspx>.

* Excluding Qatar.

the Arab world since 1990. On average, energy consumption per US\$ 1,000 GDP⁴⁹ increased by 10 per cent between 1990 and 2003. While the Mashreq and Arab LDCs witnessed decreases of 5 per cent and 22 per cent, respectively, energy consumption per US\$ 1,000 GDP in the GCC countries rose by 23 per cent. The Maghreb subregion maintained a constant average level over the same period, as illustrated in figure 2.7.2.

In per capita terms, a large discrepancy in energy use persists between the GCC countries and all other Arab countries. Per capita electricity consumption in the GCC countries remains among the highest in the world. Transport, water and power sectors have witnessed increasing shares in energy use, as electricity generation and water desalination

are energy-intensive processes. Qatar recorded the highest use of energy in the region at 587 kg oil equivalent per US\$ 1,000 GDP,⁵⁰ with Bahrain following a close second at 559 kg oil equivalent. Energy use per US\$ 1,000 GDP was lowest in Morocco, with 96 kg oil equivalent. Among Arab LDCs, the Sudan and Yemen consumed 267 and 329 kg oil equivalent per US\$ 1,000 GDP in 2003, respectively. Given their low income, such relatively substantial numbers reflect a high degree of inefficiency in energy use in those countries.

Electrification rates also varied widely among Arab countries, averaging 80 per cent in 2005. While Kuwait boasted total electrification, some Arab LDCs had limited electricity coverage. Across the region, about 63 million people, almost 20 per cent of the Arab population, had

(49) Kilogram oil equivalent per US\$ 1,000 GDP (PPP).

(50) Since 1990 data for Qatar is unavailable, the country could not be included in the subregional calculations to ensure the validity of statistical comparisons. Hence, energy consumption in Qatar is not reflected in figure 2.7.2.

no access to electricity, and one fifth relied on non-commercial fuels. Another 20 per cent of people living in poor urban and rural areas had limited and unreliable access to energy.

In general, countries of the region have recently elevated efforts towards enhancing the sustainability of the energy sector. Several countries have partly switched to natural gas and are upgrading oil refineries, improving fuel specifications, and adopting vehicle inspection and maintenance programmes. Renewable energy development has been another focus, particularly in rural and remote areas. Conserving energy and achieving efficiency in the various economic sectors are also priority issues, and integration projects on electricity grid interconnection and gas distribution have been implemented.

Despite such efforts, there remains an urgent need for policies and strategies that expand accessibility and further develop sustainability, especially in remote and rural areas. Investments should be enhanced in oil and gas exploration and production activities; the use of cleaner technologies and of natural gas in the power and transport sectors should be encouraged; energy production and consumption efficiency should be upgraded; and renewable energy technologies should be developed and their application promoted. Furthermore, developed countries are requested to adopt stable regulations concerning additional tasks on fossil fuels that could reduce the negative impact on the producing countries.

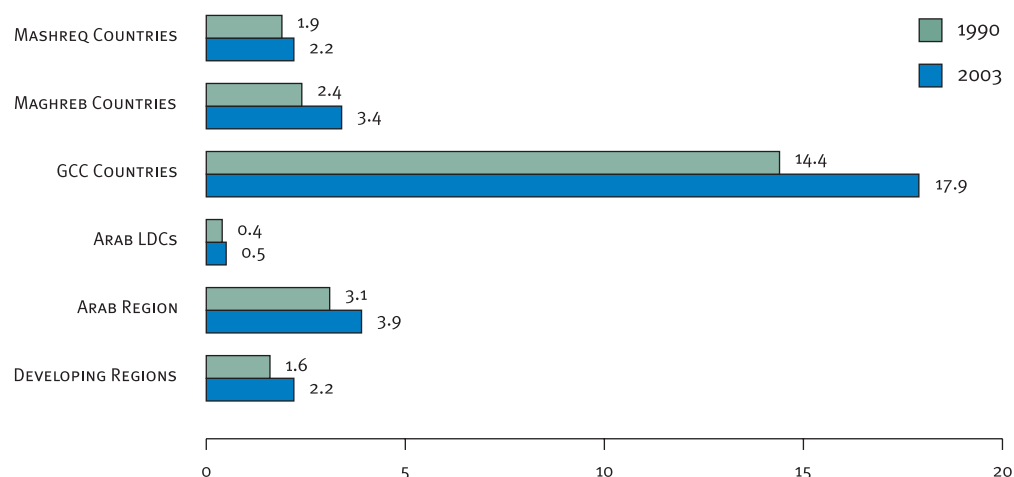
Carbon dioxide emissions and consumption of ozone-depleting substances

Total emissions in the region soared to 1.2 trillion metric tons in 2003, the equivalent of an increase of 81 per cent since 1990. That is partly accounted for by a surge in population of 35 per cent. In addition, per capita carbon dioxide (CO₂) emissions also intensified, contributing to the increase in total emissions. The regional level of per capita emissions rose by 28 per cent in the same time period, from 3.1 to 3.9 metric tons. The Maghreb, Mashreq and Arab LDCs saw total emissions of CO₂ rise by 80 per cent, 66 per cent and 57 per cent, respectively, as illustrated in figure 2.7.3. The Mashreq and Arab LDCs maintained relatively stable levels of per capita emissions, while those in the Maghreb rose by 42 per cent. GCC remains the region with the highest total and per capita emission; the former increased by 86 per cent between 1990 and 2003.

Arab countries have expended serious efforts in implementing the Montreal Protocol.⁵¹ Legislation and programmes have been developed to reduce, control and monitor the consumption of ozone-depleting substances (ODS), especially chlorofluorocarbons (CFCs). By 2004, the region had succeeded in decreasing the level of consumption of ODS by 31 per cent. In fact, since 2000, all subregions have witnessed drops in total ODS consumption, the most significant of which was in the Mashreq, with a decrease of 40 per cent. CFCs accounted for 64 per cent of total ODS in the region.

(51) The Montreal Protocol on Substances that Deplete the Ozone Layer is an international treaty governing the protection of stratospheric ozone.

FIGURE 2.7.3. Carbon dioxide emissions per capita (Metric tons)



Sources: ESCWA; UNSD, *Millennium Development Goals Indicators Database*, available at: <http://mdgs.un.org/unsd/mdg/Data.aspx>.

Box 2.7.1. Conflict and the environment

Occupation and conflict are especially destructive of land, vegetation and the marine environment. As reported in the fifty-seventh session of the General Assembly of the United Nations in 2002, the Israeli occupation has severely depleted many elements of the environment that are necessary to Palestinian livelihoods. Land expropriation and the bulldozing of land have continued in Palestine for the expansion of illegal settlements. The Separation Wall has isolated many of the most precious water resources, reducing production and income in what were considered some of the most profitable agricultural centres of the West Bank. In Gaza, Israeli warplanes have undertaken sonic boom air raids that impact entire urban populations. They constitute intentional noise pollution that may cause miscarriages, heart problems among the elderly and panic attacks among adults and young children. In Iraq and Lebanon, as well as in Palestine, the uprooting of trees and destruction of other vegetation cause deterioration in soil quality and sustainability. Millions of Iraqis lack drinking water and live with poor sewage systems as a result of ongoing conflict, thereby suffering increased incidence of waterborne diseases. The number of Iraqis without adequate water supply has risen from 50 to 70 per cent since 2003. In Lebanon, the destruction of fuel tanks during the war in July and August 2006 has led to the loss of 15,000 tons of oil into the local marine environment.



Policy Recommendations

The following policy actions are needed to be acted upon by countries in the Arab region to address Target 9 set out in Goal 7:

- (a) Integrate environmental resource management into poverty-reduction strategies and national development plans;
- (b) Localize/nationalize MDG targets to better represent priorities and reliably achieve the targets in the region and in individual countries;
- (c) Institutionalize stakeholder participation, including civil society organizations, youth organizations and NGOs, in the decision-making and monitoring of environmental resources;
- (d) Enhance coordination mechanisms between relevant departments and institutions as related to monitoring of natural resources;
- (e) Promote the use of renewable sources of energy for both domestic and industrial uses, allocate resources for the development of cleaner fossil fuel technologies and adopt appropriate economic means and incentives for the promotion of its use;

(f) Take measures for reducing land degradation and desertification. Restructure land tenure and distribution for the conservation and sustainable use of land resources;

(g) Integrate environmental budgeting in national development budgets. Cost of environmental degradation is higher than investment in environmental management and conservation;

(h) Establish sustainable development councils and ensure they are operationalized at the highest level of authority to promote environmental sustainability, as well as providing more sustainable economic and social development opportunities;

(i) Promote and develop technologies to capture and store CO₂, while also promoting cleaner production industries and climate change adaptation measures.

Reduce biodiversity loss

Biodiversity conservation and its sustainable use rely on integrating conservation with economic development and on ensuring that benefits of biodiversity are equitably shared. In the Arab region, biodiversity assessment programmes are weak or non-existent. Although all Arab countries, with the exception of Iraq and Somalia, have ratified the Convention on Biological Diversity, and initiated numerous activities, more concerted efforts are needed to establish an integrated approach to biodiversity conservation, ecosystem management and protected areas in order to ensure the conservation of species, ecosystems and the genetic resources of the region.

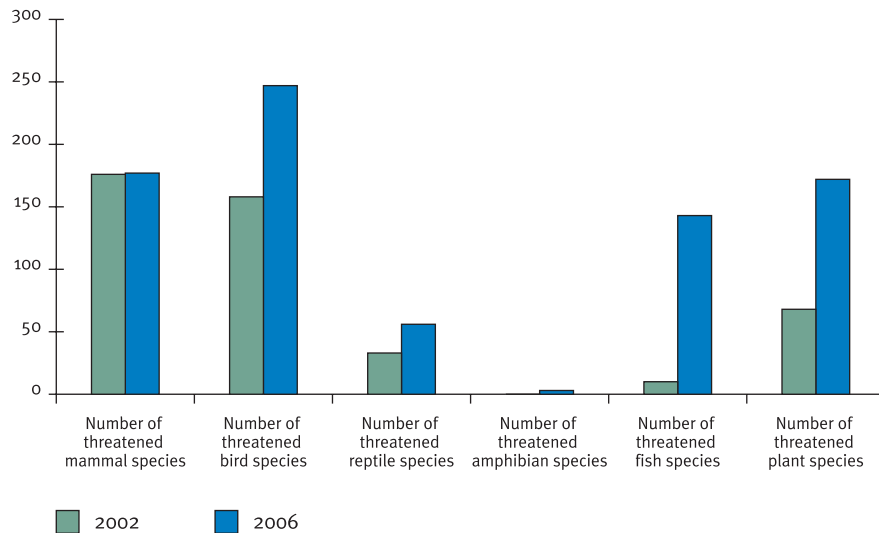
The rich and diversified genetic heritage of the region is highly endangered. Available data show that the total number of known animal species in the Arab region was 13,164 in 2006, 5 per cent of which are threatened with extinction. At a species level, 9 per cent of mammals, 3 per cent of birds, 5 per cent of reptiles, 4 per cent of amphibians and 8 per cent of fish species are threatened, as illustrated in figure 2.7.4.

The trends in biodiversity loss in the Arab region are alarming; the number of birds and reptiles species threatened with extinction doubled between 2002 and 2006, and the number of fish species increased 14 times. Such trends can be attributed to a combination of factors that exhibit cascade effects, includ-

ing land use, climate change, invasive species, overexploitation, pollution, destruction and fragmentation of ecosystems resulting from wars, construction projects, industrial pollution and oil spills.



FIGURE 2.7.4. Trends in biodiversity in the Arab region



Sources: ESCWA; UNEP-WCMC, 2002 and 2003; World Bank, *The Little Green Data Book 2007* (World Bank, Washington D.C., 2007).

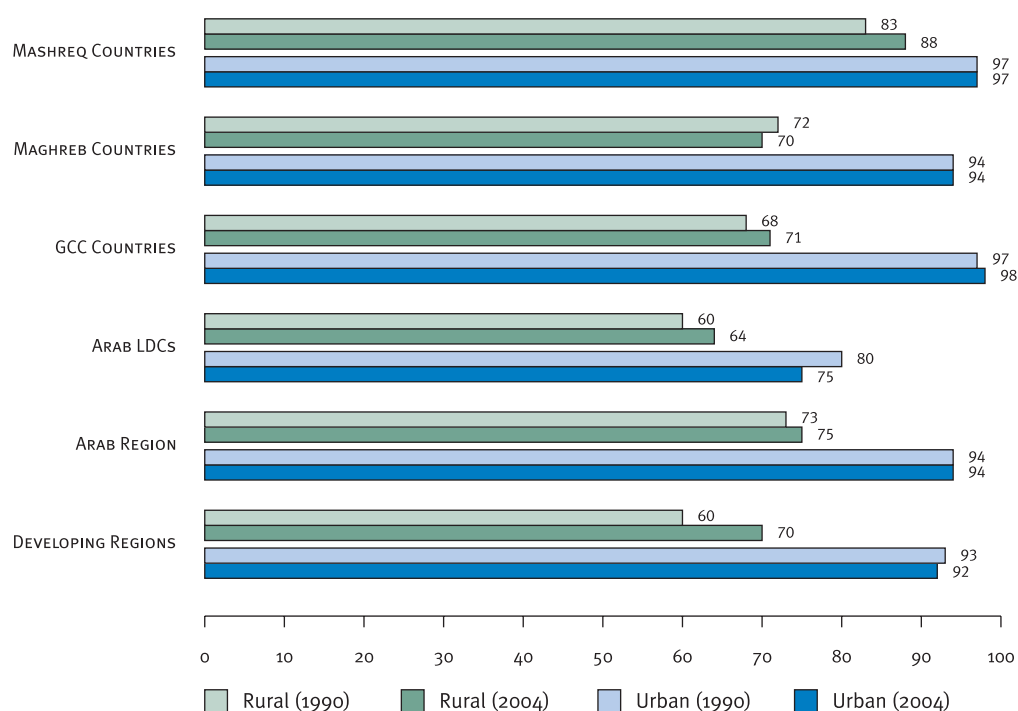
Target 10: Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation

Sustainable access to safe drinking water

The proportion of the population using improved drinking water sources⁵² in the Arab region slightly improved between 1990 and 2004 from 83 per cent to 85 per cent. It increased from 65 to 68 per cent in Arab LDCs. However, this subregional average does not include Somalia

where only 29 per cent of the population had access to safe water in 2004. In the other three subregions, it reached 86 per cent in the Maghreb, 94 per cent in the GCC countries, and 86 per cent in the Mashreq. The slight improvement in the Arab region suggests that significant efforts are still required to halve the proportion of people without sustainable access to safe drinking water by 2015.

FIGURE 2.7.5. Proportion of population using improved drinking water sources, urban vs. rural (Percentage)



Sources: ESCWA; UNSD, *Millennium Development Goals Indicators Database*, available at: <http://mdgs.un.org/unsd/mdg/Data.aspx>.

(52) According to WHO, access to safe drinking water measures the proportion of people using improved water sources, including household connection, public standpipe, protected dug well, protected spring and rainwater.

In 2004, the proportion of the population using improved drinking water sources in rural areas was almost 18 percentage points less than those in urban areas. The significantly lower number of people with access to safe water in rural areas is primarily resulting from the considerable urban-rural divide manifested in both the Maghreb and the GCC countries, as illustrated in figure 2.7.5. Indeed, in Morocco, which accounts for well over a quarter of the population in the Maghreb, only 56 per cent of the rural population had access to safe drinking water, compared to 99 per cent of the urban population. Furthermore, the figure for Arab LDCs indicates that slightly less than half the rural population does not have access to an improved water source. As such, some countries in the region require more cooperation at all levels for mainstreaming service provision for drinking water in national water resource management strategies and plans and for closing the urban-rural divide.

In addition, the Arab region as a whole faces a severe water resource shortage problem. Seven of its countries rank amongst the ten most water-scarce in the world, and most Arab countries receive a large part of their water resources from outside their borders or share them with other states. By 2004, water demand had already exceeded the actual water resources available in the region by about 46 per cent. Serious stress on available water resources reduces the ability of countries to utilize cultivable lands to their full potential. Some countries are currently cultivating less than 5 per cent of their potential agricultural land, while others are close to full potential.

Moreover, the practice of full cost recovery for providing water services is almost non-existent in the region. Most countries, especially non-

GCC countries, collect fees to recover service costs. However, the low rates of such fees fail to reflect the scarcity of water as a resource, especially since most countries aim to recover only their operation and maintenance costs. For example, investments of approximately US\$ 12.5 billion a year in the water resource sector, including agricultural water, in the Maghreb go un-recovered. Hence, subsidies play a role in distorting user incentive to preserve the resource, or to use it in a cost-effective way.

Financing for desalination plants has been provided mainly from state budgets, and partly from foreign loans. However, with the changing strategies for development since the mid-1990s, and reduced Government funding, dependence on external funds has increased. Arab countries have only recently turned to the private sector for additional funding.

Sustainable access to basic sanitation

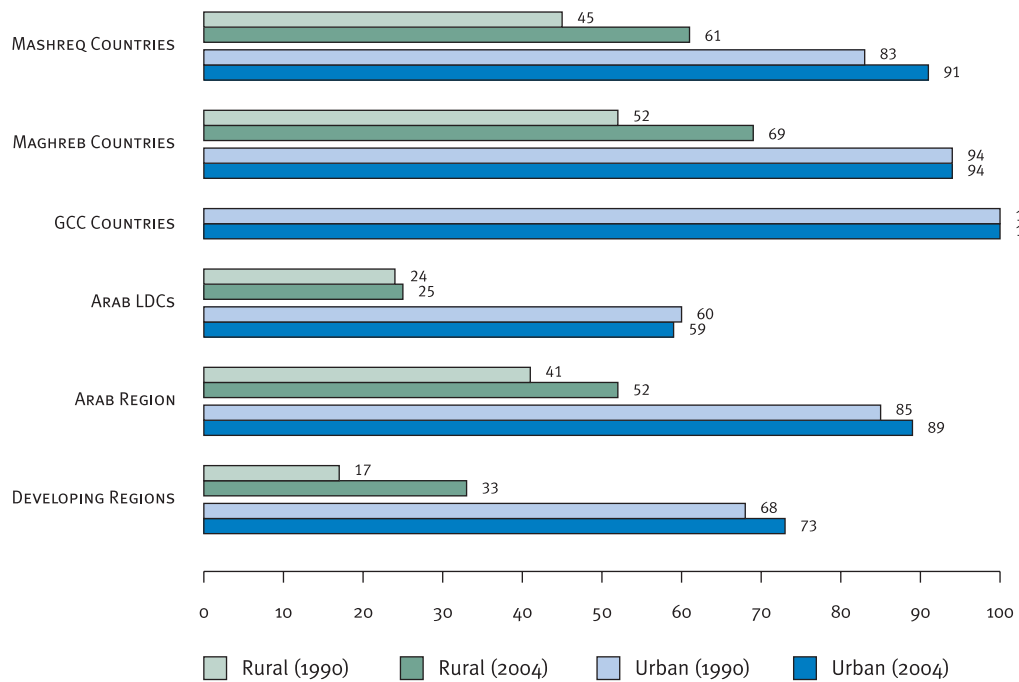
The various Arab subregions have been gradually improving access to sanitation facilities for their populations since 1990. However, in 2004, the proportion of the population in Arab LDCs using improved sanitation facilities was still as low as 38 per cent. That figure was higher for the other subregions, with 98 per cent of the population in GCC countries, 89 per cent for the Maghreb and 79 per cent for the Mashreq. If Arab countries maintain their sluggish trajectory, an estimated 124 million people in the region will be without access to basic sanitation in 2015, half of them living in Arab LDCs.

Major disparities in access to sanitation facilities become apparent when comparing urban and rural areas, as is illustrated in

figure 2.7.6. In Arab LDCs, only 25 per cent of the rural population has access to sanitation facilities, compared to 59 per cent in urban areas. However, despite inequity in access to improved sanitation between rural and urban areas, the overall improvement in sanitation services since 1990 is mainly resulting from better access for people in rural areas. In fact, the proportion of the rural population with access to sanitation facilities rose by 16 and 17 percentage points in the Mashreq and Maghreb

countries, respectively. As such, the proportion of the rural population with access to improved sanitation facilities in the Arab region increased from 41 to 52 per cent, compared to a smaller improvement in urban areas from 85 to 89 per cent. The slower improvement in urban areas is mostly attributed to rural-urban migration and the exacerbated pressures on providing adequate sanitation facilities for a growing urban population.

FIGURE 2.7.6. Proportion of population using improved sanitation facilities, urban vs. rural (Percentage)



Sources: ESCWA; UNSD, *Millennium Development Goals Indicators Database*, available at: <http://mdgs.un.org/unsd/mdg/Data.aspx>.

Challenges and Policy Recommendations

Poor standards of drinking water and sanitation services heighten the risk of diseases as pesticides and industrial waste contribute to polluting scarce water resources. The lack of integrated water resource management (IWRM) processes, strategies and policies, as well as conflicts and transboundary issues, present major challenges to the region. Obstacles in implementation of IWRM include inadequate coordination and integration among water-related institutions and shortage of skilled staff, as well as related technical, institutional and legal capacities. Additional factors challenging IWRM implementation are insufficient data sharing and information exchange among concerned institutions and authorities, in addition to limited budget and financial resources and insignificant stakeholder involvement, including local units, civil society, the private sector, NGOs, water boards and consumer associations. The development and implementation of water policies and strategies can also be hampered by inadequate legislative settings and arrangements, including laws, by-laws, rules, decrees and agreements; as well as poor enforcement of laws and regulations resulting from shortage of inspection capabilities and infrequent monitoring by water institutions.

In addition, inconsistent statistical data on water services and sanitation facilities have prevented the adoption of proper policies. In some Arab countries, rapid urbanization without proper planning and integrated management systems has added stress on limited resources. Compounded by over-extraction of groundwater resources or construction of more desalination facilities, such development has led to salinization of and wastewater infiltration into

the groundwater. In addition, the high level of demand for water without proper management, the low economic value of water used in agriculture and the irrational use of water in different sectors contribute to resource deterioration and scarcity.

To improve the sustainable access to safe drinking water and to basic sanitation in the Arab region with a view to meeting the targets set out in Goal 7, the following issues need to be addressed:

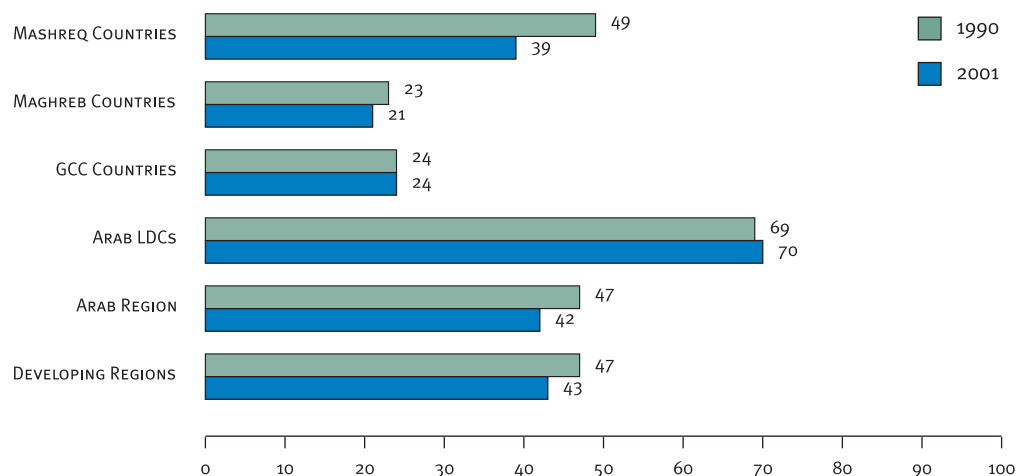
- (a) Sanitation should be part of integrated management schemes of water resources. Wastewater treatment and reuse should be merged in IWRM plans and programmes;
- (b) The region should seek low-cost and high-value technologies for the desalination and provision of drinking water services;
- (c) Proper urban and rural planning strategies are needed to reduce pressure on urban areas and provide rural areas with the sanitary services they need;
- (d) Water resources management should be decentralized at the local levels in most Arab countries. However, that requires major institutional and legal reforms at the national level;
- (e) Capacity-building in integrated water resource management should be a priority in all Arab countries;
- (f) Stakeholder participation, including the private sector, is an area where more attention should be exerted to ensure proper management, protection and monitoring of both quantity and quality of water resources;
- (g) Ending occupation and resolving conflict will be essential to achieving sustainable access to basic sanitation.

Target 11: By 2020, to have achieved a significant improvement in the lives of at least 100 million slum-dwellers

Many large cities in the Arab region are growing at a very fast rate, as a result of high population growth and rural migration to urban areas in search for job opportunities and better public services. In the Arab region, urbanization has tended to occur in a limited number of very large poles, or mega-cities, that are often much larger than secondary/tertiary poles. In fact, each country counts one, sometimes two, large urban centres that dominate also its resource allocation. Much urbanization and urban growth is happening illegally, with more than one third of the total urban population in the Arab region living in informal settlements and slums and under very precarious environmental conditions. The situation is particularly grave in the Mashreq and Arab LDCs, where city residents face overcrowding, inadequate housing, and a lack of water and sanitation.

Added to that, they suffer from severe shortages in health, educational, communication and transportation amenities, as well as adequate sanitation. The rapid expansion of urban areas in the two said subregions is creating cities of unprecedented size and complexity, as well as challenges for providing a decent environment for the poor and ensuring the fulfilment of their rights. It is estimated that in 2001, around 57 million people in the Arab region lived in urban slums, of which around 30 per cent lived in Arab LDCs, 44 per cent in the Mashreq, 17 per cent in the Maghreb and about 8 per cent in GCC countries. In Arab LDCs, slum-dwellers represented around 70 per cent of the urban population in 2001, while in the Mashreq they represented 39 per cent, as illustrated in figure 2.7.7. Those figures are much higher than the world average of 31 per cent. In the Maghreb

FIGURE 2.7.7. Slum population as share of urban population (Percentage)



Sources: ESCWA; UNSD, *Millennium Development Goals Indicators Database*, available at: <http://mdgs.un.org/unsd/mdg/Data.aspx>.

and GCC countries, the percentage was 21 and 24, respectively, which is lower than the respective figures in all the other regions of the world except the Commonwealth of Independent States (CIS) and developed countries.

In addition to rural-urban migration and urban population growth, conflicts and, in some cases, natural disasters are major factors leading to the internal and international displacement of people. Most displaced people have lost their homes and assets and have to live in temporary shelters with low levels of hygienic conditions and services. As shelters become congested, they increase the agony of their residents. Host countries have also witnessed stress on their natural resources with an abrupt increase in demand on water resources and sanitary and health services, as well as other infrastructural services.

Host countries, supported by the international community, should provide adequate services to reduce the impact on environmental resources and services. Such services include developing public housing programmes, adopting a multisector approach to services and extend-

ing basic infrastructure, including roadway systems, water, electricity and latrines to cover temporary shelters or refugee camps.

Challenges and Policy Recommendations

Recognizing the significance of the urban dimension of poverty and the need of a special policy framework are essential elements of a strategy that aims at significantly improving the lives of slum-dwellers in the Arab region. Governments need to develop public policies and adopt a multisectoral approach that is guided by the objective of providing adequate housing for low-income groups, and ensuring equal access to social services and basic infrastructure. In addition, policymakers need to advocate for the international community to support host countries in providing adequate shelter and services to displaced people in the region. It is also essential to establish early warning systems for monitoring civil unrest and natural disasters, specifically those affecting poor urban and rural areas.

H.

GOAL 8: DEVELOP A GLOBAL PARTNERSHIP FOR DEVELOPMENT



Target 12: Develop further an open, rule-based, predictable, non-discriminatory trading and financial system

Despite contrasting views of international observers and experts concerning the optimal trade policy regime for developing countries, there is a broad consensus that improved access to markets of developed economies and stronger intraregional and South-South integration promote higher and more sustainable economic growth. MDG 8 aims at creating a global partnership for development that is based on an open, rule-based, predictable, non-discriminatory trading and financial system. For the Arab region, further integration into the global economy and enhanced intraregional trade cooperation are of particular importance. While oil exports have provided a major stimulus to economic activity in the GCC countries, textiles and garment exports have had an important impact on the economies of Egypt, Morocco and Tunisia. However, trade has had less of an impact on the economies of Arab countries than in other regions of the world. In 2006, the region's share of world exports increased to 5 per cent, from 4.2 per cent in the early 1990s. That rise mainly resulted from the increased share of GCC countries, brought

about by increased oil prices. Total exports from North African Arab countries fell from 1.2 to 1 per cent of total world exports between 1990 and 2006. The share of Arab countries in total imports rose only marginally to 3.2 per cent of total world imports in 2006, from 2.8 per cent in 1990.

The GCC countries, which make up around 11 per cent of the total Arab population, accounted for more than two thirds of total Arab exports in 2004, as illustrated in figure 2.8.1. By contrast, a mere 3 per cent of the region's exports in that year came from Arab LDCs. Arab exports continue to be highly concentrated in primary products and low-value added goods, mainly oil. Export concentration indices for the GCC countries and Arab LDCs significantly exceed those for middle- and low-income countries. In 2004, fuel exports constituted an average of 75 to 90 per cent of exports from GCC countries, Algeria, the Libyan Arab Jamahiriya and Yemen. By contrast, manufactured exports accounted for a mere 10 per cent of GCC exports and 5 per cent of LDC exports; while they

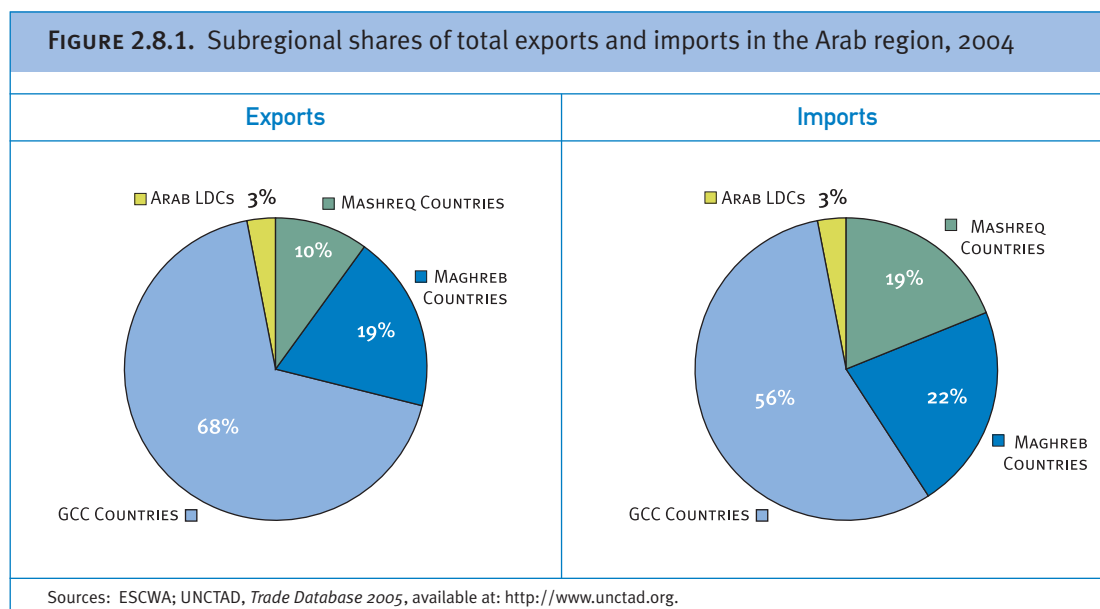
constituted 26 per cent of exports from the Mashreq, and 21 per cent of exports from the Maghreb.

An important determinant of the weak trade performance of Arab countries, particularly in goods with higher-value added, is the low degree of intraregional trade integration. Intra-regional trade accounts for only around 11 per cent of total Arab trade, a figure far below that of other world regions. Such sluggish performance can be attributed to a myriad of factors, including the lack of complementarities among Arab economies; non-compliance by many Arab countries to their obligations under trade agreements, most importantly the Greater Arab Free Trade Area (GAFTA); the absence of credible dispute settlement mechanisms; high transaction costs; and excessive regulation and legislation. Occupation and conflict

have a particularly “isolatory” effect on national economies, reducing production in tradable and non-tradable sectors; more than three decades of declining exports in relation to its GDP is observed in data on Palestine. Nonetheless, the prospects for, and benefits from intra-Arab trade are promising, despite the undisputable weaknesses of intraregional trade agreements, if certain steps are taken, namely, improving transport links, simplifying transaction procedures and de-linking political and economic relations between Arab countries.

Over the recent past, most Arab countries have taken serious steps towards trade liberalization and integrating themselves into the world economy. As of June 2007, 12 Arab countries were members of WTO and 6 countries were in the process of negotiating WTO membership.⁵³ Eight Arab countries are part of the Euro-Med-

FIGURE 2.8.1. Subregional shares of total exports and imports in the Arab region, 2004



(53) WTO member States are Bahrain, Djibouti, Egypt, Jordan, Kuwait, Mauritania, Morocco, Oman, Qatar, Saudi Arabia, Tunisia and the United Arab Emirates. The countries in the process of negotiating access to WTO are Algeria, Iraq, Lebanon, the Libyan Arab Jamahiriya, the Sudan and Yemen.

iterranean Partnership⁵⁴ and seven Arab countries are partners of the European Free Trade Association (EFTA).⁵⁵ In addition, a variety of new regional and interregional initiatives are also being pursued by Arab countries aiming at trade liberalization and further integration into the world economy. Bahrain, Jordan, Morocco and Oman have signed bilateral trade agreements with the United States of America, and negotiations are currently underway between the Libyan Arab Jamahiriya, GCC and the European Union (EU). In the long term, trade liberalization in the context of the multilateral trading system offers the potential for significant welfare gains for Arab countries through higher efficiency and productivity. In the short run, increased foreign competition may lead to substantial costs and losses, especially in import-competing domestic sectors that have historically been protected from foreign competition. In the case of Saudi Arabia, which became a member of WTO in December 2005, parts of the local services sector are likely to suffer from increased foreign competition. Adjustment costs can only be kept low if domestic enterprises are well prepared for the liberalization process, which requires strong support from, and cooperation with national Governments.

In addition, positive effects of WTO membership for Arab countries depend, to a large extent, on whether future negotiations succeed in lowering the still high levels of protection of labour-intensive activities in OECD countries, particularly agriculture, textiles and clothing. In those fields, the results of the Uruguay

Round, which entered into force in 1995, were clearly disappointing. Non-tariff barriers to trade imposed by developed countries, such as production and export subsidies, technical barriers and anti-dumping measures, were largely kept in place. Furthermore, the "tarification" process in the agricultural sector resulted in tariffs that mostly exceeded the tariff equivalents of the non-tariff barriers they replaced. Similarly, the Doha Development Round, initiated in 2001, collapsed in 2006 as developing countries called for "fair", not "free" trade to correct structural flaws and distortions in the system. In particular, the refusal of the United States to improve the current offer on reduction of the allowed maximum level of trade-distorting domestic support in agriculture instigated the indefinite postponement of the Doha Development Round.

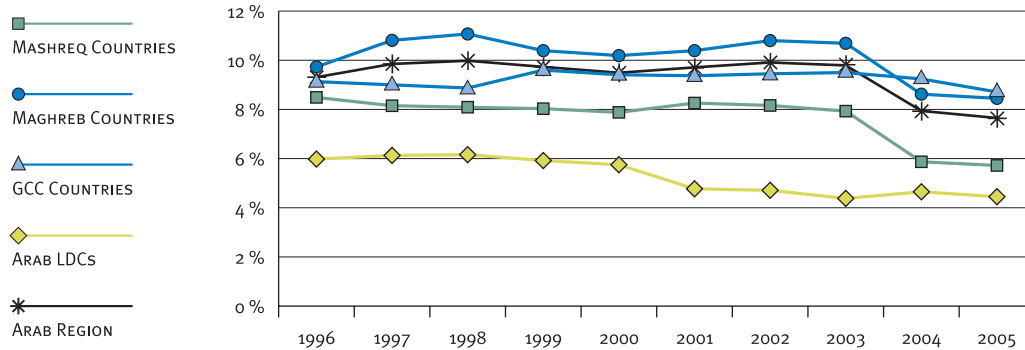
Deleterious effects of liberalization can be observed most poignantly under conditions of occupation. For Palestine, Israeli liberalization has resulted in influx of goods that offset domestic household production and dampen burgeoning low-value added manufacturing activities. Early-stage growth processes are thereby obstructed and preclude early steps in economic development that can lead to greater-value added processes. Without sovereign trade policies, the harmful effects of liberalization prevail over growth-inducing potentialities.

The lack of substantial progress in key areas of international trade has led to only a modest decline in average tariffs imposed by developed market economies on imports of agricultural,

(54) The eight Arab countries part of the Euro-Mediterranean Partnership are Algeria, Egypt, Jordan, Lebanon, Palestine, Morocco, the Syrian Arab Republic and Tunisia.

(55) The seven Arab EFTA partners are Algeria, Egypt, Jordan, Lebanon, Palestine, Morocco and Tunisia.

FIGURE 2.8.2. Average tariffs imposed by developed market economies on agricultural, clothing and textile products (preferential tariffs) (Percentage)

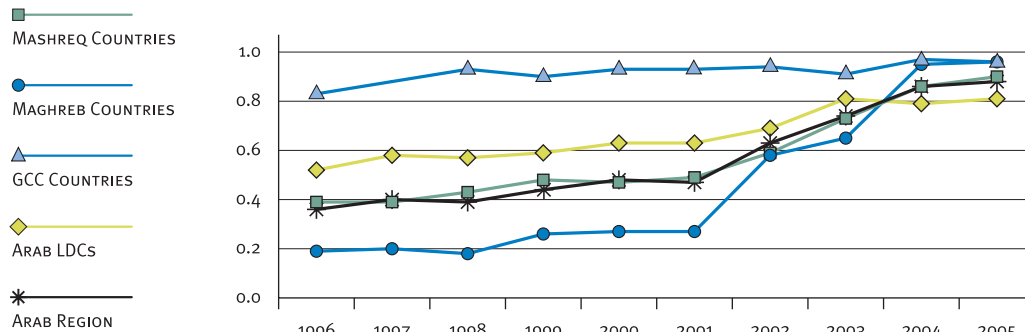


Sources: ESCWA, UNCTAD, ITC and WTO.

textile and clothing products from Arab countries. Arab exports of those goods to developed economies faced an average preferential tariff of 7.7 per cent in 2005, compared with 9.3 per cent in 1996, as illustrated in figure 2.8.2. In that context, it is important to highlight that average tariff levels do not reveal the problems caused by exceptionally high tariffs on selected products, “tariff peaks”, and by tariff escalation,

whereby importing countries protect their manufacturing industries by setting lower duties on imports of raw materials and components, and higher duties on processed goods. Tariff escalation is frequently used in the areas of agro-industrial products and textiles, and severely restricts the capacity of developing countries to export higher-value added goods. It is also important to note that non-tariff bar-

FIGURE 2.8.3. Proportion of total developed country imports admitted free of duty (excluding arms and oil)



Sources: ESCWA, UNCTAD, ITC and WTO.

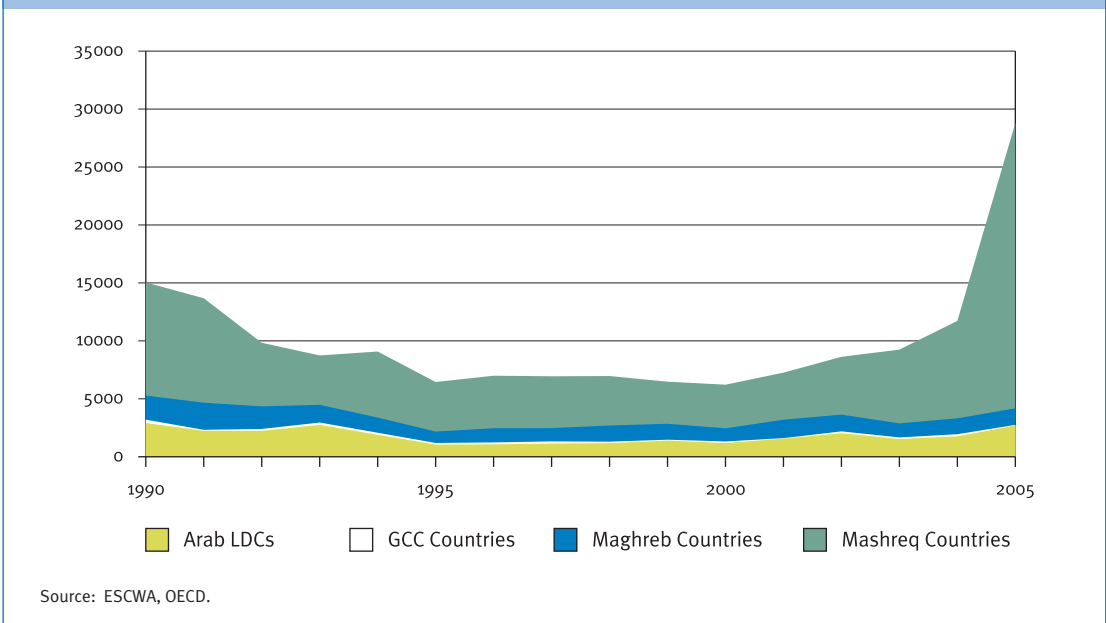
riers still constitute the major hurdle facing Arab exports to developed countries. In most cases, tariff reduction and quota removal have not led to significant increases, in absolute real terms, in Arab exports to developed countries, as illustrated in figure 2.8.3.

Despite the limited progress in some product groups that are of particular interest to developing countries, overall market access for Arab goods has improved considerably since the mid-1990s. In 2005, 88 per cent of exports from Arab countries, excluding arms and oil,

entered developed countries free of duty. That compares favourably with the situation in 1996, when only 36 per cent of total Arab exports could enter those markets free of duty. Progress has been most significant for the Maghreb, where the proportion of goods that were admitted into developed countries free of duty increased from 19 per cent in 1996 to 96 per cent in 2005. Market access for Arab LDCs to developed countries was initially much higher than for the other subregions, but has only improved slightly over the past decade.

Target 13: Address the special needs of the least developed countries

FIGURE 2.8.4. Official development assistance to Arab countries, 1990-2005 (net real flows) (US\$ millions)



Goal 8 also emphasizes the financial efforts needed to be undertaken by developed countries to promote development in LDCs. Official

development assistance (ODA) to Arab countries decreased throughout the 1990s, partly as a result of widespread scepticism concern-

ing the role of foreign aid in development. In fact, between 1990 and 2000, ODA to the Arab region fell by a significant 58.6 per cent, as illustrated in figure 2.8.4. Since then, however, it has been on a steady upward trend. Following the United Nations Millennium Summit in 2000, total aid to the region rose from a low of US\$ 6.2 billion in 2000 to US\$ 11.7 billion in 2004, and to US\$ 28.8 billion in 2005. The significant increase in ODA to the Arab region in 2005 is mostly attributed to the debt forgiveness grants of nearly US\$ 14 billion provided by the OECD Development Assistance Committee members to Iraq.

The distribution of ODA among Arab subregions and countries is far from equitable. Aid flows to the region have not primarily targeted the poorest countries. Geopolitical reasons, economic interests and past colonial ties often prevailed over developmental needs in the aid allocation decisions of major donors. Colonial relations are particularly relevant considering that the bulk of ODA to the Arab region comes from non-Arab donors. Over the period 2000-2005, the Mashreq countries received 72.7 per cent of total aid flows to the region, averaging about US\$ 8.7 billion per year. In absolute terms, Iraq was the major Arab recipient of foreign aid between 2000 and 2005, accounting for 40.8 per cent of total flows to the region. Egypt was the second largest recipient of net ODA, followed by Palestine and Jordan. In per capita terms, Palestine received the most financial support from the international community. Per capita ODA to Palestine rose from an annual average of US\$ 237.2 during the period 1990-2000 to US\$ 359.5 in the period 2000-2005. That increase is mostly resulting from a rise in per capita aid to more than US\$ 500 in 2001 and 2002, when greater aid flows aimed at relieving the critical humanitarian conditions due to



attacks by Israel against the second intifada. However, since the election of the Hamas-majority Government in early 2006, a large part of total ODA to Palestine has been frozen. As such, the Mashreq portrays the current bias in aid allocation adequately. Indeed, Egypt and Jordan have been among the top recipients of net ODA after they signed peace treaties with Israel in 1979 and 1994, respectively.

During the period 2000-2005, only 15 per cent of total aid flows to the region were directed to Arab LDCs, which account for 22 per cent of the total Arab population. The increase in foreign aid in absolute terms since 2003 can be exclusively attributed to the increase in ODA to the Sudan that followed the intensification of the conflict. In fact, the Sudan was the only Arab LDC among the top five Arab recipients of net ODA in the period 2000-2005. By contrast, ODA to other Arab LDCs in 2005 was below its level of 1990. In per capita terms, the Sudan and Yemen received the lowest ODA within the group of Arab LDCs during the period 2000-2005, with a mere US\$ 21.5 and US\$ 21.6, respectively. Indeed, per capita ODA to Yemen declined from an annual average of US\$ 23.7

in the period 1990-2000. Two factors have contributed to the decrease in per capita ODA to Yemen, namely, a very high population growth rate and a scaling-down of the amount of aid by some multilateral and bilateral donors, as many aid programmes have failed to achieve the expected results.

It is vital that donors channel a substantially larger share of total ODA to LDCs in the region and meet their commitments in the Brussels Programme of Action for the Least Development Countries for the decade 2001-2010. That would require major donors to base their aid allocations less on geopolitical considerations and more on developmental needs. Moreover, many Arab countries, particularly the least developed and those in conflict, are faced with a high volatility of aid flows, which hampers medium- and long-term planning and negatively impacts public investment. Accordingly, a steadier and more predictable flow of aid funds is recommended, especially for the countries in the region that are most dependent on foreign aid. Notably, in direct relation to MDG attainment, an increasing share of foreign aid to Arab countries in recent years has been channelled to such social sectors as education and health, at the expense of economic sectors, particularly agriculture and industry.

Against that backdrop, it is essential for donors to conform to the Paris Declaration on Aid Effectiveness, which lays down a practical, action-orientated roadmap to improving the quality of aid and its impact on development, particularly on MDG attainment. The Paris Declaration specifies 12 indicators of aid effectiveness as a way of tracking and encouraging progress. The Declaration promotes transparency and accountability on the use of development resources, primarily through empha-

sizing the importance of ownership, whereby developing countries employ strong and effective leadership over their development policies and strategies. Accordingly, many countries in the region are undergoing surveys that measure progress in key indicators on ownership, alignment, harmonization and accountability, so as to focus efforts on the most apparent problem areas. Survey results in Egypt, which has historically been the largest recipient of total ODA in the region, indicated that the country has enhanced participation of national stakeholders in strategy formulation and implementation, and that aid flows have become increasingly aligned with national priorities, while highlighting the need for a coherent national capacity-building strategy. The survey also indicated that aid flows to Egypt have become more predictable, and that common arrangements and procedures among external partners have enhanced harmonization. Surveys in Arab LDCs, which are in need of higher development aid, demonstrate the challenges those countries are facing in making efficient use of aid inflows. Indeed, according to survey results in Yemen, the capacity for planning and implementation in central and line ministries is limited as a result of insufficient availability of skills and resources, a lack in mechanisms to link overall budgetary allocations to sector strategies, and an apparent lack of harmonization among all partners. In addition, disbursements are not yet fully synchronized with the annual budget cycle. With the promise of increasing aid flows to Yemen, the Government has launched a procurement reform, aimed at strengthening transparency, efficiency and effectiveness of public procurement, and is making an effort to lead external assistance coordination. Furthermore, action is being taken to strengthen private-sector participation in policy formulation with respect to development aid.

Box 2.8.1. Foreign aid and MDGs

A 2007 ESCWA study, entitled *Economic Trends and Impacts: Foreign Aid and Development in the Arab Region*, examined the role of foreign aid in development, with a particular focus on four ESCWA member countries, namely, Egypt, Jordan, Palestine and Yemen. It provided a comprehensive macroeconomic analysis of the major trends and characteristics of foreign aid flows to the Arab region, and of their impact on economic growth and social indicators. The effect of aid on economic growth and social indicators was estimated by means of a panel analysis for low- and middle-income countries, which incorporated several main elements of new research approaches in the field and isolated the impact of aid in the Arab region.* The study also identified several key policy areas that need to be addressed in order to make aid flows to the Arab region more effective in reducing poverty and promoting development.

The panel analysis provided evidence that both total ODA and short-impact aid have, on average, promoted economic growth in Arab and in other middle- and low-income countries. The results did not support the hypothesis that aid only works in countries with a good policy framework. Moreover, no evidence was found for severe absorptive capacity constraints in the Arab region. The results also indicated that aid is likely to have impacted growth both through capital accumulation and through increases in total factor productivity. When estimating the impact of aid on social indicators, the study found a significantly positive effect on life expectancy, but not on illiteracy. Those findings provide additional justification for calls to scale up significantly the volume of development aid over the coming years.

Among the policy recommendations made, the study suggested that a steadier and more predictable flow of aid funds would facilitate medium- and long- term planning and reduce potential negative effects of aid flows. Furthermore, given that most Arab LDCs are not on track to meet MDGs by 2015, it is vital that both Arab and non-Arab donors channel a larger share of total ODA to those countries. A substantial increase in funds directed to LDCs is only feasible if some of the major donors to the region base their aid allocation decisions less on geopolitical, and more on developmental considerations. In addition, future decisions on development assistance programmes and projects should give more attention to the short- and medium-term effects on employment. However, aid should not be thought of as a panacea or the ultimate cure for the economic and human development challenges that Arab countries are currently facing. Intensified efforts to create a policy framework that addresses the main obstacles to a higher and more equitable development path are vital to ensuring faster progress towards the achievement of MDGs. Despite the heterogeneity of Arab countries, a number of obstacles to a better economic performance were identified. Those include insufficient investment levels and productivity gains, lagging political and institutional reforms, inefficient and inequitable educational systems, underdeveloped financial markets and high trade-related costs.

* The panel analysis sought to address four major issues evolving from the literature and posed the following corresponding questions: (a) Through which channels, if any, does aid affect growth? (b) Which, if any, policy interaction terms govern the relationship between aid and growth? (c) Does aid have diminishing returns? (d) Over which time frames do various types of aid impact growth? A neo-classical growth model was used to address those issues. The model incorporated an aid policy interaction term, allowed for diminishing returns to the aid variable and permitted the differentiation between various types of aid.

The growth regression model used was as follows:

$$Y_{i,t}^* / Y_{i,t} = \alpha + \beta d_{i,t}^{\text{net}} + \gamma q_{i,t} + \delta (d_{i,t}^{\text{net}} \times q_{i,t}) + \rho (d_{i,t}^{\text{net}})^2 + \lambda I_{i,t} + X_{i,t} \eta + \theta \ln y_{i,t} + \varepsilon_{i,t} \quad (1)$$

for N countries i and T time periods t , where Y^* / Y represent the growth rate of income per capita, d^{net} is net ODA disbursements, q is some country characteristic on which the effect of aid may partially rest, I is a vector of investment variables, X is a vector of additional country characteristics, α , β , γ , δ , ρ , and θ are all constants, η and λ are vectors of constants, and ε is random noise.

Target 18: In cooperation with the private sector, make available the benefits of new technologies, especially information and communications

With very few exceptions, access to information and communications technology (ICT) in the 22 Arab countries increased steadily since 1990. Despite such progress, the region as a whole lags considerably behind the world average in terms of fixed telephone lines, personal computers and Internet users. Moreover, disparities between Arab countries remain very high. The digital divide is most noticeable when comparing the advanced GCC countries with many poorer Arab countries.

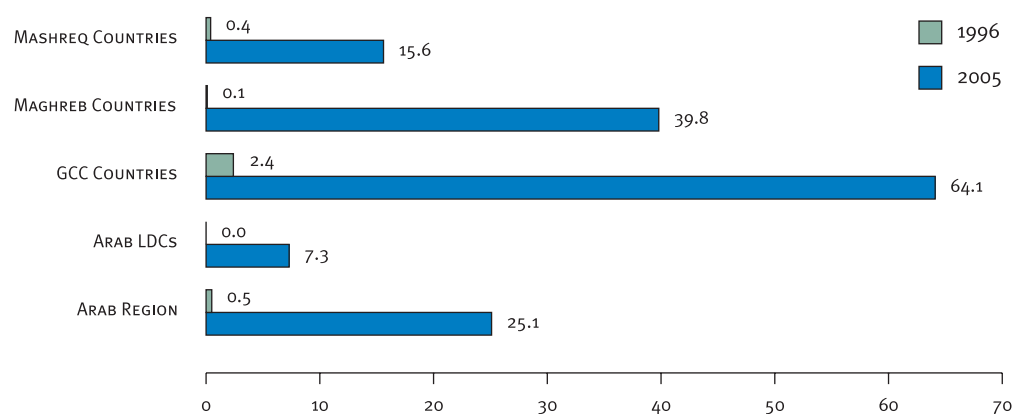
The mobile sector in the Arab region has grown very rapidly during the past decade. Between 1996 and 2005, the number of cellular subscribers has increased by a factor of 50 and, today, there are on average more than 25 subscriptions per 100 population, as illustrated in figure 2.8.5. It is the only indicator of that target for which the average of the Arab

countries comes close to the world average. However, in the Comoros, Iraq and the Libyan Arab Jamahiriya, there are still less than five cellular subscriptions per 100 people.

In contrast to the mobile sector, the number of fixed telephone lines in the Arab region has grown at a slow pace since the early 1990s. By 2005, the average number of fixed lines in operation per 100 population had reached only 9.5, around half of the world average. While fixed telephone markets in some of the GCC countries, namely Kuwait, Saudi Arabia and the United Arab Emirates, are showing signs of saturation, the penetration rate remains below 4 per cent in all six Arab LDCs.

While still less than half the world average of 13.4 per 100 population, the number of personal computers (PCs) in the Arab countries has

FIGURE 2.8.5. Cellular subscribers (per 100 population)



Sources: ESCWA and ITU.

increased notably since the mid-1990s, to 6.5 per 100 population in 2005. The average number of PCs in the four Arab subregions clearly portrays the digital divide that separates the GCC countries from the rest of the region, as illustrated in figure 2.8.6. Excluding Lebanon, all Mashreq and Maghreb countries and Arab LDCs have rates below 10 per cent. The relatively high average number of PCs in Arab LDCs in 2005 is primarily resulting from a significant increase in PC usage in the Sudan.

Internet access has improved significantly and the use of the Internet in Arab countries has grown at a very fast pace. In 2005, 6.5 per cent of the Arab population was using the Internet, compared to only 0.9 per cent in 2000. However, the average number of Internet connections in the Arab countries is still well below the world average of 15.2 per 100. Internet use is particularly limited in Iraq, Mauritania and Yemen, where less than 1 per cent of the population access the Internet. That may in part be attributed to the low number of websites available in Arabic.

Box 2.8.2. ICT best practices in selected Arab countries

EGYPT

The Ministry of Communications and Information Technology is supporting ICT development with a number of projects, including public awareness campaigns and infrastructure building, as well as the development of regulatory frameworks and education programmes. A specific example is the SMEs e-Learning Project, which supports the development of skills of young professionals with ICT and management training. Various partners are involved in content and platform development, as well as training delivery. The main focus is on the role that ICT plays in solving problems pertaining to the operation and management of SMEs.

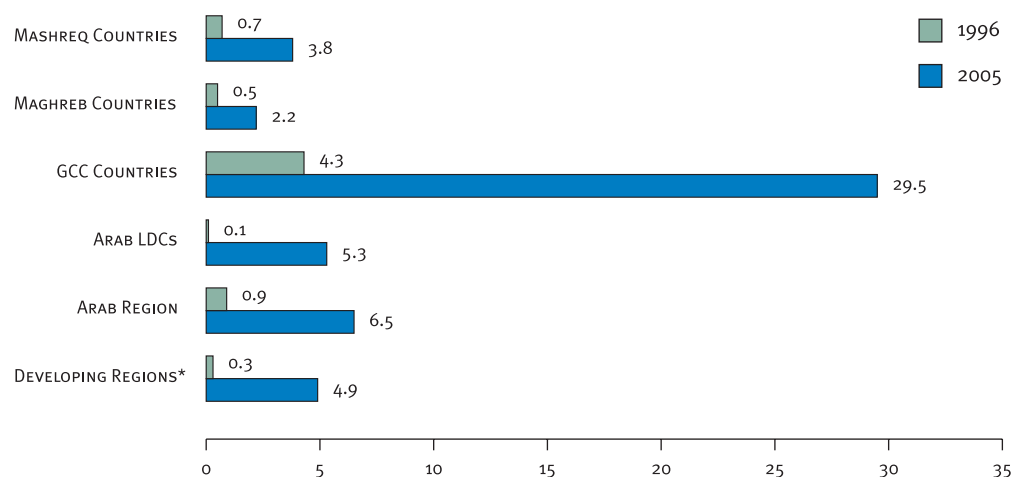
JORDAN

The REACH initiative was launched in 1999 in partnership with the United States Agency for International Development (USAID). The project, an acronym for regulatory framework, enabling environment, advancement programmes, capital and finance, and human resources development, is part of the country's strategy to develop an export-oriented, internationally competitive ICT sector. REACH has contributed to making the ICT sector the fastest-growing in the Jordanian economy.

LEBANON

Berytech was established in 2001 and provides incubation, support and hosting opportunities to start-ups and growing enterprises operating in the fields of technology, multimedia and health. Services offered include management training, business counselling and access to infrastructure and shared resources. In January 2007, BeryTech II was set up, focusing on bio-technology incubation.

FIGURE 2.8.6. Personal computers (per 100 population)



Sources: ESCWA; ITU; UNSD, *Millennium Development Goals Indicators Database*, available at: <http://mdgs.un.org/unsd/mdg/Data.aspx>.
* Data for developing regions refer to 1990 and 2005.

Challenges and Policy Recommendations

Governments in the Arab countries lack the commitment and suffer from the scarcity of resources necessary for the development of partnerships that will propagate the benefits of ICT to their populations. Those problems are less obvious for the more affluent GCC countries but, taken as a whole, the countries of the region should be encouraged to develop partnerships on three levels, namely, national, regional and international. On the national level, Governments need to accelerate the deployment of citizen-oriented e-government applications and facilitate access to ICT in underprivileged areas. On the regional level, projects and initiatives beneficial to the region as a whole should be implemented specifically in the areas of communication infrastructure, where the development of a shared infrastructure could lower the costs of digital access. Furthermore, the developing of digital content in local lan-

guages would provide an incentive to unilingual speakers to start using the Internet. On the international level, cooperation with more developed countries would allow some Arab countries to leapfrog over unnecessary hurdles by learning from their experiences.

Additionally, Arab Governments should be guided towards creating ICT enabling environments for local and foreign businesses and investors by implementing measures to build trust, developing a culture of transparency and accountability, and by drafting cyber legislation that would guarantee and protect the rights of businesses and citizens alike. Support could also be extended to more risky ICT investments and start-ups by creating ICT incubators, or by supporting existing ones. To alleviate the problem of brain drain, which is especially acute in the poorer countries of the region, better salaries, social benefits and other incentives, as well as relevant training of local ICT staff, should be encouraged. Furthermore, partner-

ships between universities, Government institutions and ICT businesses should be encouraged to promote research and development. By making ICT more affordable through lowering the cost of access to ICT services, and by implementing measures and enacting laws to make e-government and e-services viable, use

would increase. Suggested measures include abolishing taxes on ICT equipment and services, improving ICT infrastructure, connecting schools and public institutions, lowering the cost of local and international bandwidth, creating electronic identification and enacting cyber-crime laws.

Box 2.8.3. Use of ICT in education

Though affordable hardware and access through Internet cafes and other public facilities are increasingly available, there has been a relatively slow uptake and, above all, use of ICT in the Arab region resulting from a lack of ICT skills. Many countries have therefore set up pilot projects to bring ICT into schools. Furthermore, the World Economic Forum Global Education Initiative has introduced ICT into the national education systems in such countries as Egypt and Jordan. Since 2003, the Jordan Initiative has received resources of over US\$ 25 million for 100 schools and training of 1,500 teachers; and in Egypt, computer laboratories have been installed in almost 2,000 schools and 65,000 teachers have been trained since 2006.* Such figures suggest two key aspects of the successful introduction of new technologies into education.

The first factor is the importance of introducing ICT technology concurrent with appropriate changes to both curriculum and teacher training. Teachers must be confident using the new technology which, in turn, must be soundly integrated into the curriculum. ICT technology cannot be a simple “add-on”, but must become a fundamental part of the learning process for both students and teachers. The ability to search out learning material using computers is a skill students will transfer to adult life.

The second factor is the availability of ICT hardware and skills in order to maximize the economic impact on youth and adults. ICT offers opportunities to link remote, rural schools with the country as a whole, and with the rest of the world. Arab countries are increasingly using wired and wireless networks for education administration, which need to be expanded to allow exchanges of learning experiences and curricular material between schools, teachers and students. Such policies address the “digital divide” between rich and poor, and urban and rural.

The ultimate aim, however, is to improve school achievement. While measuring the impact of ICT on school achievement has at times proved elusive, even in OECD countries, there is no doubt that the use of ICT provides increased learning opportunities, through access to a wider network, and offers students new skills. Where a successful impact on academic performance has been achieved, it can be associated with the careful introduction of ICT at all levels of education and the thorough integration of ICT into the learning process. For Arab countries to acquire the necessary skills to be able to maximize their participation in the global world, those are of primary concern.

* Results abstracted from World Economic Forum Global Education Initiative (January 2007), available at: <http://www3.weforum.org/en/initiatives/gei/index.html>.

CHAPTER III:

YOUTH PRIORITY ISSUES AND THE MILLENNIUM DEVELOPMENT GOALS IN THE ARAB REGION



*Your children are not your children
They are the sons and daughters of Life's longing for itself
They come through you but not from you,
And though they are with you, yet they belong not to you.
You may give them your love but not your thoughts,
For they have their own thoughts
You may house their bodies but not their souls,
For their souls dwell in the house of tomorrow
Which you cannot visit, not even in your dreams.
You may strive to be like them, but seek not to make them like you,
For life goes not backward nor tarries with yesterday.*

The Prophet, Gibran Khalil Gibran

At this juncture in time, halfway through the time frame given to reach the Goals and meet the targets stipulated in the Millennium Declaration, a number of pressing issues affect development in the Arab region and the degree of progress towards MDG attainment. Regional political instability, violence and conflicts, demographical changes, stark subregional disparities and pervasive gender disparities are overarching issues that penetrate all others relevant to MDG attainment in the region. This chapter will address how those issues particularly affect the youth within the framework of education and employment, political participation, and health and environment.

A.

EDUCATION AND EMPLOYMENT



Education and productive employment are among the key elements of youth development in the Arab region. The Millennium Development Goals depict the importance of the education-employment nexus.

The Millennium Declaration gives specific attention to decent work and puts the focus on youth in Goal 1. The scale of need to generate enough jobs for young people in the Arab region is indicated by the fact that young people who account for over 20 per cent of the total population, suffer from a rate of unemployment which, at 25 per cent in 2005, was almost double the regional average rate. Youth employment can serve as an important vehicle towards community participation, active citizenship, autonomy and independence. The lack of productive work for young people in many countries of the region perpetuates poverty

and has the potential to contribute to crime, substance abuse, violent conflict, and the rise of political and religious extremism.

MDG 2 on universal primary education is the first step in a life cycle approach to a better quality of life. Education is not only a human right in itself, but also an indispensable means of realizing other human rights. As an empowerment right, education is the primary vehicle by which economically and socially marginalized young people can lift themselves out of poverty and obtain the means to participate fully in their communities. Education also plays a vital role in empowering women, safeguarding children from hazardous labour and sexual exploitation, promoting human rights and democracy, protecting the environment and controlling population growth.

1. Access of young men and women to education

As discussed in chapter II, the Arab region has experienced tangible progress in primary education and literacy over the past decades. However, particularly in Arab LDCs, strong increases in primary enrolment levels are often followed by relatively low secondary enrolment rates.⁵⁶ That can be attributed to a number of factors which differ somewhat for boys and girls. In several countries, poverty remains a major barrier to schooling. That is reflected in the need for many young people to work and support their families.⁵⁷ In addition, poor families frequently cannot afford the enrolment costs and other expenses associated with secondary education. Low female enrolment rates often reflect cultural biases and stereotypes regarding the role of Arab women in society. Barriers to female enrolment include early marriage and pregnancy, as well as conservative mindsets prohibiting women from attending schools that are not nearby and excluding them first in case of financial limitations.

In tertiary education, enrolment rates in many Arab countries actually favour women, in part resulting from the lack of job opportunities or the negative attitudes towards women working outside the home, which drives women to engage in tertiary education as a second choice; and in part from the higher grades achieved by female students in the university admission exams. This is compounded by the fact that male students are more likely than female

students to study abroad. The attractiveness of foreign education to Arab youth indicates limitations on the qualitative, and often quantitative supply of university education relative to demand, especially in postgraduate education. One aspect of the limitation of the “quantitative” supply of national university seats is the admission requirements, which are frequently more stringent in the home country than in some foreign countries. Both types of supply limitations account for the preference for foreign education by students who can afford its cost.

Notwithstanding the aforementioned observations, tertiary enrolment rates in the Arab region remain lower than in Latin America and East Asia. Low returns to higher education and uncertain labour market outcomes are the main factors underlying the low enrolment in universities across the Arab region. Low enrolment rates have often coincided with declines in quality, as public education systems face tight budgets. The relevance of education to market demand has become one of the most debated issues of education in the Arab region.

2. Quality of education

Evaluating the quality of education in the Arab region is extremely difficult owing to the lack of quantitative data and the absence of any standardized measurement for comparison among Arab countries and with the rest of the world. However, most research concludes that the

(56) Heba Nassar, “Youth Employment and Education: The Millennium Development Goals in the Arab Region 2007: A Youth Lens”, background paper, (United Nations, February 2007).

(57) UN-DESA, *World Youth Report 2005: Young people today, and in 2015* (United Nations, New York, 2005), available at: <http://www.un.org/esa/socdev/unyin/wyr05.htm>.

quality of education in the Arab region has not improved, and that there is a severe mismatch between the labour market demands and the skills acquired in the education system. That is reflected in the fact that unemployment rates are sometimes highest among individuals with intermediate and upper levels of educational attainment. For example, in Tunisia, the unemployment rate is at over 40 per cent for young people with higher education, compared with about 25 per cent for those with primary education.⁵⁸ In Jordan, the unemployment rate is at over 30 per cent for secondary school graduates and 15 per cent for university graduates, compared to 8 per cent for those with only primary education.

That phenomenon is in part the result of educational systems that are geared toward preparing students to serve in the public sector which, in most Arab economies, used to be the primary employer of educated new entrants to the labour force. With the move towards more market-based economies in the region, the introduction of new technologies and greater integration into the world economy, the demand for particular skills is increasing, making much of the material taught in existing public education systems obsolete. Arab economies have created significant mismatches between the human skills demanded by new enterprises and those available in the work force, leading to an extended and difficult transition period when graduates are trying to find work. Studies

show that Arab countries clearly lag behind many other emerging developing countries in human capital formation, primarily due to the lack of progression in educational quality.

Arab students tend to perform worse than most of their counterparts in international assessments. Trends in International Mathematics and Science Study (TIMSS)⁵⁹ 2003 indicate that educational standards in the participating Arab countries were below the international average both in mathematics and sciences, with a larger gap in fourth grade performance than in eighth grade. In the mathematics test for the eighth grade, Arab countries obtained an average score of 393, which is far below the international average of 467. Lebanon ranked first among the participating Arab countries, achieving a score of 433, as illustrated in figure 3.1. In sciences, only Jordan, with a score of 475 for eight-graders, exceeded the international average of 474, while the rest of the Arab countries recorded scores well below the international average.

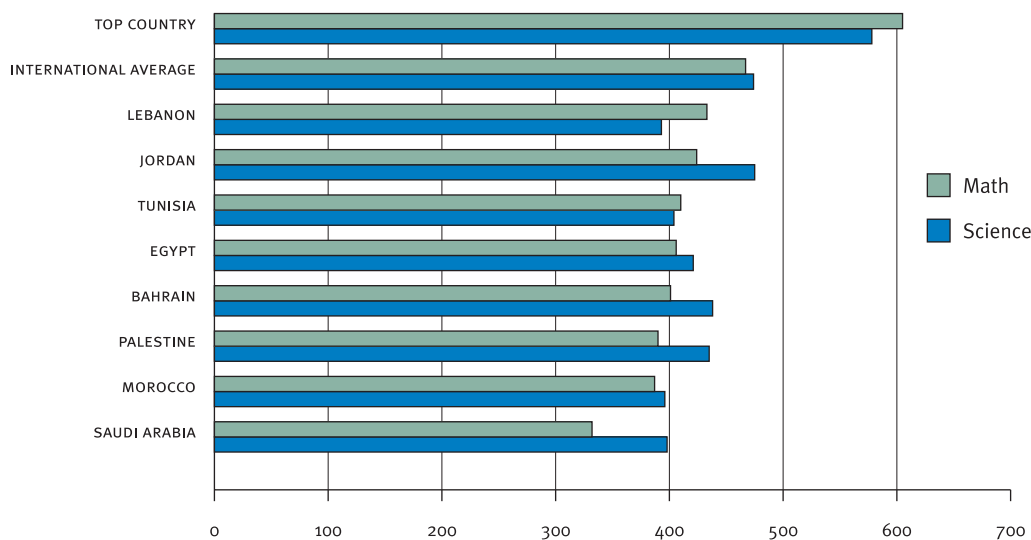
Many factors contribute to the low outcome of the education process in the Arab region. Often children are brought up in neopatriarchal⁶⁰ home and school environments which, combined with archaic rote methods in school education, have the potential to stifle creativity and problem-solving abilities, and discourage free and independent thinking. Moreover, the insufficient allocation of funds to education

(58) World Bank, *World Development Report 2006: Equity and Development* (World Bank, Washington, D.C., 2006), available at: <http://publications.worldbank.org>.

(59) TIMSS is an international assessment of the mathematics and science knowledge of fourth- and eighth-grade students around the world, developed by the International Association for the Evaluation of Educational Achievement (IEA) to allow participating nations to compare educational achievement across borders. The assessment includes those topics in mathematics and science that students are likely to have been exposed to up to and including grade 4 and grade 8.

(60) Hisham Sharabi, *Neopatriarchy: A Theory of Distorted Change in Arab Society* (Oxford University Press, New York, 1992), available at: www.oup.com/us/catalog/general/subject/Politics/ComparativePoliticsMiddleEast.

FIGURE 3.1. Scores of international achievement test in mathematics and science for grade 8, 2003



Source: TIMSS, TIMSS 2003 *International Reports in Mathematics and Science*, available at: <http://timss.bc.edu/timss2003.html>.

has translated into low teacher salaries, limited teacher training, lack of adequate facilities and overcrowded classrooms, all of which led to a decline in the quality of teaching provided. In a number of Arab countries, the quality of education is also adversely affected by the lack of an appropriate overall school environment. That could be attributed to a shortage of buildings, classrooms, libraries and laboratory equipment. The wanting environment could also be attributed to a lack of such participatory activities as engaging in sports, or in facilities for social and cultural interaction where students are given free reign to express their opinions. It is also important to note the adverse influence of highly centralized

and tradition-bound school administrations on the quality of education. Reform is constrained not only by inadequate financial resources, but also, in some countries, by restricted freedom of thought, action and initiative in addressing the problems facing educational administrations and the teaching profession.

Other factors that also adversely affect educational quality include education policies and curricula.⁶¹ Education policies in most Arab countries are characterized by the lack of a clear vision of educational objectives. There is little or no exchange of ideas and best practices between countries and, in some cases, coordination within a country is lacking.

(61) UNDP, *Arab Human Development Report 2003: Building a Knowledge Society* (ISBN: 92-1-126157-0), available at: <http://www.undp.org/arabstates/ahdr2003.shtml>.

That has led to the weakening of intellectual ties among Arab countries. Cooperative efforts and exchange of experience between countries, particularly in the areas of graduate studies and research, can contribute to an improvement of the Arab educational systems.⁶² Curricula in most Arab countries are outdated and based mainly on rote regurgitation, which is not conducive to creative thinking. The failure of curricula to keep up with contemporary developments and techniques has worsened the divide between education in the Arab region and its counterparts globally. In addition, the systems are plagued with a large number of poorly qualified teachers and instructors. Students graduating from high school with low grades are generally disqualified from admission to such high grades-demanding faculties as medicine, engineering and sciences, and are directed instead to less demanding disciplines which often include education and teacher training. In that way, the education system, which is defective in the first place, is equipped with the means to inbreed and perpetuate its deficiencies.

Conflict-ridden countries, namely, Palestine, Iraq, Somalia and the Sudan, continue to suffer from the disastrous effects that the ongoing violence has had on the quality of education. In Palestine, a drastic fall in educational standards is the legacy of the wide-scale school interruptions resulting from closures and mobility restrictions enforced by the Israeli authorities. The majority of the schools in the West Bank, especially government-owned, are overcrowded and have limited resources, with only a few offering extra-curricular activities. Educational

standards in Iraq have also severely worsened as hundreds of teachers and students have been killed or kidnapped, thousands more have fled, and those who remain face daily threats of violence. Teachers are fleeing the country on a daily basis, leaving schools without experienced staff, while many parents are opting not to send their children to school because of general insecurity in the country. If current levels of violence persist, schools and universities are likely to continue losing staff and students.

3. Education and nation-building

Social homogeneity is an important dimension to education. In every other Arab country, at least two diverging educational systems co-exist. On the one hand, there is the official system of government-owned schools in which attendance is virtually free, while the quality of education is largely rudimentary. Despite the weakness in quality, however, government-owned schools tend to adopt the national language as its principal, if not the exclusive medium of learning and to give attention to national traditions and values. On the other hand, there is the “private” school system, which is generally of higher quality, but is mostly run on commercial basis, seeking profit and dividends to private owners and investors. In many cases, such schools cater for the more affluent segments of society. Moreover, private schools, in some cases, accord skewed attention to the local traditions and national culture, relying largely on a foreign language, for example English and/or French, as the main medium of learning.

(62) UNDP, *Arab Human Development Report 2002: Creating Opportunities for Future Generations* (ISBN: 92-1-126147-3), available at: <http://www.undp.org/arabstates/ahdr2002.shtml>.

Such discrepancies, owing to differences in educational doctrine, methods, language and culture, result in the duality of education systems which counter the nation-building tasks expected of education. Indeed, that clash commonly results in the failure of individuals from the two different educational backgrounds to communicate effectively.

4. Transition to the workforce and youth unemployment

According to a recent ILO report, the rate of worldwide youth unemployment is approximately double that of adult unemployment.⁶³ Chances of finding employment for young people are much lower than for adults owing to their lack of substantial work experience and occupational skills required by potential employers. The problem in the Arab region is not restricted to the youth unemployment rate being three times that for adults, but to the magnitude of the youth unemployment rate which stands at around 25 per cent.

In the Arab countries, a large number of young men and women enter the labour market every year, resulting in great pressure to absorb new entrants. On the demand side, the stagnation of most Arab labour markets results from a combination of insufficient growth and structural weaknesses of the economies that contribute to job-less growth. On the supply side, inadequate educational standards, an inflexibility of wages and the difficulty for a worker to move from the public sector to the private sector contribute to the observed trends

in labour markets. Youth, as a result, are often concentrated in the informal sector, engaging in occupations that do not have the benefits and security of regular employment. The lack of opportunities renders young people particularly vulnerable to poverty. Young women are more susceptible to unemployment, long-term unemployment in particular, depriving society of the chance to make use of their full capacities and qualifications and widening the gender gap.

While the majority of Arab countries have concentrated on academic education, some of them have introduced special youth entrepreneurship training and vocational programmes. Examples include Economic Opportunities for Jordanian Youth (INJAZ) in Jordan, Self-Employment and National Autonomous Development (SANAD) in Oman, Developing A Curriculum (DACUM) in Kuwait, the Hariri High School III, a higher technical institution in collaboration with the Lebanese University in Sidon, and the National Programme for Employment and Training of Bahrainis. Such programmes aim to equip graduates with broad-based skills that can be applied to a wide range of professions. However, while the vocational system in the Arab region is expanding, many problems remain. They include limited private-sector involvement, low standards of services and insufficient information about the needs of the labour market, all of which form barriers for youth to enter the new economic sectors. In several countries, the system is still fragmented, burdened with a surplus of duplicated training programmes and marred by lack of coordination.

(63) ILO, "Employing Youth: Promoting employment-intensive growth", report presented at the *Interregional Symposium on Strategies to Combat Youth Unemployment and Marginalization* (Geneva, Switzerland, 13-14 December 1999), available at: <http://www.ilo.org/public/english/employment/skills/youth/publ/youthdoc.htm>.

The Arab region experienced substantial population and labour force growth since 1990. Despite positive growth of GDP per capita in nearly all Arab countries, the already high unemployment rates have continued to rise, prompting some experts to use the term “job-less growth” when describing the macroeconomic situation in the Arab region. Strong population growth, the youth bulge and higher female participation have led to an increase in labour supply which is not matched by an equal increase in labour demand. Although population growth rates have been gradually declining, a trend which is expected to continue over the coming decades, both the population and the labour force in most Arab countries are growing fast in absolute numbers. It is estimated that the countries of the region⁶⁴ will need to create more than 5 million new jobs a year to substantially reduce current unemployment levels.⁶⁵ The reduced labour demand in the public sector, the slow growth in the private sector and high job expectations of the educated workforce have all contributed to the alarmingly high unemployment rates in many Arab countries.

In addition to recording the highest regional unemployment rate in the world, the Arab region still has the lowest labour force participation rate, estimated at less than 60 per cent for adults and less than 40 per cent for youth in 2003.⁶⁶ There is also ample evidence that underemployment, in the form of less working hours per week and irregular work assignments, is a widespread socio-economic phe-

nomenon in the region. The economic activity of youth has decreased in most Arab countries, mostly resulting from the increasing number of young people who remain in the education system. The low participation rates are also attributed to still low rates among young women despite a marginal increase from 23 per cent in 1995 to 25 per cent in 2005.⁶⁷ Female labour participation is below 30 per cent in most Arab countries, the exceptions being the Comoros, Djibouti, Mauritania, Somalia and the Syrian Arab Republic. Palestine, Qatar and Saudi Arabia have female participation rates well below 10 per cent, an outcome largely linked to the prevailing social norms affecting women and their access to work in those countries.

The traditional gender paradigm in the Arab region is that men serve as the main breadwinners of their families, while women are primarily concerned with raising children and managing households. Since many employers expect women to drop out of the labour force for an extended period of time to raise children, they have a preference to hiring men. Furthermore, in most countries in the Arab region, women who choose to work tend to favour work in the public sector, a feature mostly attributed to the perception that such public-service professions as teaching and nursing are appropriate for women. Job opportunities for women outside the public sector, by contrast, are often limited to low-paying employment with little potential for growth.

(64) Estimate takes into account Arab countries, as well as Turkey and the Islamic Republic of Iran.

(65) ERF, *Economic Trends in the MENA Region, 2002*, available at: <http://www.erf.org.eg/middle.php?file=trends02>.

(66) Nader Kabbani and Ekta Kothari, “Youth employment in the MENA region: a situational assessment”, discussion paper No. 0534, *Social Protection*, (World Bank, Washington, D.C., September 2005), available at: <http://siteresources.worldbank.org/SOCIALPROTECTION/Resources/SP-Discussion-papers/Labor-Market-DP/0534web.pdf>.

(67) Kemal Dervis, keynote address at *ILO Eleventh African Regional Meeting* (Addis Ababa, 25 April 2007), available at: <http://content.undp.org/newsroom/2007/april/dervis-ilo-african-meeting-200704>.

Box 3.1. Transition to the workforce: Good practices in the Arab countries

Economic Opportunities for Jordanian Youth (INJAZ) operates in Jordan and is a model for the involvement of the private sector in directing and guiding youth. The Save the Children initiative, funded by USAID, was established in 1999 in an attempt to bridge the gap between the output of the local educational system and the human resource needs of the private sector. Within the framework of the programme, volunteers from the private sector provide instruction to students on the issues of responsibility in a non-traditional context and personal choice with regard to choosing subjects at school. Volunteers deliver weekly courses to students based on a curriculum set up by individuals from the private and education sectors. They do not lecture the students; rather, they encourage brainstorming, problem-solving and communication skills. INJAZ targets the age group 14-25 and aims to foster creative thinking, critical problem-solving techniques and interpersonal communication skills among the young, and to provide the tools required for them to reach their goals. In addition, the close relationship between INJAZ and the private sector plays a role in improving human resources in Jordan, and developing the skills of young people to better prepare them to enter the labour market. Teachers have stated that INJAZ courses have had a positive impact on the behaviour of students and their grades, and have enabled them to recognize the needs of the job market. Before the programme, the majority of students expressed a preference for such careers as doctors or engineers, while opting for other professions would have indicated they, in some way, had failed. After having participating in INJAZ, however, the students considered a wider variety of career options more in line with local labour market requirements in the context of globalization.

The Developing A Curriculum (DACUM) programme in Kuwait, which has its origins in the United States, is based on the philosophy that workers in a particular field are more qualified than anyone else to offer suitable descriptions of their job and related responsibilities, tasks and skills. This concept is in evidence at DACUM workshops, which break down occupations into duties, tasks and steps. Once all tasks and steps are examined, skills, competencies, abilities and qualities required to perform a job are identified. This breakdown is then formulated and classified in the DACUM chart. The system was implemented in Kuwait in early 1999, when the Public Authority for Applied Education and Training, in coordination with colleges and universities, set up the Curriculum Development Center to identify education and training requirements for selected jobs based on market needs. Once requirements pertaining to a specific job are identified, colleges and universities are contacted to ensure that the graduates in a selected field possess the required skills and competencies. Since 1999, each year the Centre develops guidelines pertaining to 10 different jobs related to the faculties of commerce, health and petroleum engineering technology. For example, in the field of petroleum exploration and development engineering, the DACUM Chart includes information pertaining to 9 occupations, 42 duties and 216 tasks. Each job requires some 30 months of training over five semesters, in addition to hands-on training.

Though DACUM in Kuwait is in its early stages, the programme has been analysing requirements pertaining to skills and forging close relationships between graduates and the labour market. Moreover, it is envisaged that DACUM will go some way towards overcoming the growing problem of youth unemployment.

5. Internal and international migration

Internal and international migration have acted as a major outlet for the unemployment problem. Along with high youth unemployment rates, rising urbanization and harsh living conditions in major Arab cities have contributed to significant emigration, mostly by young males in search of jobs outside their home country. Although no recent reliable data exist on the emigration patterns of the youth population, available figures for overall Arab migrants indicate the severity of the phenomenon. Existing data show a great deal of intra-Arab migration from non-oil producing countries to the GCC countries. They also reveal different migration patterns across the various Arab subregions. Most emigrants from the Maghreb countries of Algeria, Morocco and Tunisia go to Europe, whereas most emigrants from the Mashreq go to the GCC and other Arab countries. In 2000, the total number of Lebanese emigrants constituted a significant 44.5 per cent of the country's total labour force. The Maghreb countries also experienced high emigration rates with emigrants accounting for 29.1 per cent of the labour force in Morocco in 2004 and 25.9 per cent of the labour force in Tunisia in 2003.⁶⁸

Naturally, such international migration patterns may contribute to unemployment in the GCC countries. The main objective for Governments in the GCC countries is to ensure that entering cohorts of young nationals are able to find appropriate jobs that match their skills and pay acceptable wages. As such, some argue that

expatriate workers, who make up between 50 and 90 per cent of the labour force in the GCC countries, are displacing national workers, thereby increasing youth unemployment in those countries. However, to the extent that expatriates are working in occupations for which nationals do not have the requisite skills or disposition to work, including technical and service occupations, migrant workers may actually complement young nationals and improve their employment opportunities.

For non-GCC countries, the main issue is creating a higher number of jobs to accommodate new entrants to the labour force. On the one hand, international migration may reduce labour supply pressures in those countries.

On the other hand, emigration of large numbers of the labour force, particularly of the more talented and enterprising members, implies a quantitative and qualitative depletion of the human capital of that country. Moreover, recent research points to some important political implications of migration, suggesting it may weaken political opposition and strengthen political conformity in the country of origin, since the emigrants often represent the more dynamic and less conformist segments of the population.⁶⁹

Moreover, the claimed benefits of outmigration in the form of increased financial remittances to the home country are a "mixed blessing". While remittances are usually found to provide short-term relief, they may also create moral hazard problems in the form of reduced labour supply and lower savings rates. In Jordan, for example,

(68) Estimates of international migration figures for Arab countries vary substantially, to a large extent depending on whether they are based on data from the country of origin or of destination.

(69) Gouda Abdel-Khalek, *Democracy and Development - the Case of Egypt* (forthcoming), chapter III, p. 111.

TABLE 3.1. Distribution of migrants from selected Arab countries (most recent data)

Country of birth	Migrants to European countries	Migrants to GCC and other Arab countries	Other countries	Total	Migrants as a share of total economically active population (percentage)
Algeria	991 796	66 398	14 025	1 072 246	13.2
Morocco	2 616 871	282 772	189 447	3 089 090	29.1
Tunisia	695 765	116 926	30 513	843 204	25.9
Egypt	436 000	1 912 729	388 000	2 736 729	14.2
Lebanon	157 000	123 966	325 604	606 600	44.5
Palestine	295 075	4 180 673	231 723	4 707 471	687.5

Sources: European University Institute, *Mediterranean Migration: 2005 Report*, Philippe Fargues (ed.), (EUI, Robert Shuman Centre for Advanced Studies, Florence, Italy, 2005), available at: <http://www.carim.org/index.php?areaid=8&contentid=159>; ILO, *Labour Statistics*, available at: <http://laborsta.ilo.org/>; ESCWA calculations.

Note: Figures for Palestine include refugees.

such remittances helped introduce many of the negative features of a rentier economy, similar to those of oil economies. Remittances are likely to have contributed to the observed “hyper-consumption”, allowing aggregate consumption to exceed domestic production. In that case, domestic investment is mainly financed by remittances, development assistance and foreign

credit. That pattern of financing investment may lead to significant distortions and inefficiencies in the investment profile. It may result in a bias towards speculative investments in housing and real estate, as well as in a bias against high productivity enterprises that require the close engagement of the owners of savings.⁷⁰

(70) Taher H. Kanaan, “The Jordanian Economy: Issues and Policies”, lecture given 19 March 2007, Amman, available at: http://www.jcp-prd.org/Eng/home_phd, (in Arabic); and Taher H. Kanaan and Marwan A. Kardoosh, “The story of economic growth in Jordan: 1950-2000”, research paper (ERF, Egypt 2003), available at: <http://www.gnet.org/middle.php?oid=237&zone=docs&action+doc&doc=10466>.

B.

POLITICAL, SOCIAL AND CULTURAL PARTICIPATION



1. Importance of youth participation

Participation by both men and women in political, social and cultural life is a basic right recognized by various international conventions and commitments. The principle of participation derives from the acknowledgement of people as the core of sustainable human and economic development: they are not only the ultimate beneficiaries of development, but are also the agents of development. Accordingly, they have the right and responsibility to make decisions on those issues that affect them most directly. If exercised properly and responsibly, participation ensures that rights are secured in a balanced and socially beneficial manner.

The capacity for development in the Arab region is based, among other factors, on the ability of countries to incorporate young people in the building of the future. For development to be attained in the region, it is crucial to promote active citizenship and capitalize on the youth as agents of social, political and economic change. Opportunities for youth participation in home, school and community development can help prepare young people to exercise the rights and responsibilities of adulthood and citizenship.

Exclusion from active participation, on the other hand, has serious consequences; rising levels of frustration demoralize youth and undermine social cohesion, leading to an aggravation of such social problems as poverty, crime, violence and extremism. In fact, the marginalization of young men and women poses a threat to development and MDG attainment, since the regional development challenges can only be properly met if they are actively engaged. Therefore, concrete actions should be taken to promote active youth citizenship. They include raising the level of awareness and promoting participation, building regional networks and promoting activities and exchange.

2. Conditions for enhanced youth participation

In most Arab countries, the youth suffer greatly from restrained freedoms, exclusion from active participation, absence of equal opportunities, and lack of representation. Despite recent efforts in a number of Arab countries to address those problems, improvements in youth participation have generally been slow and inadequate. That can be attributed to a number of factors, including regional conflicts,

which have prioritized political matters at the expense of social concerns; poor economic policies, which have resulted in very high youth unemployment rates; lack of appropriate youth strategies and programmes; and lack of understanding of the essence of civil society and its duties, as its role has been limited by Government interference and bureaucratic controls to social relief and civil society, rather than overseeing and promoting youth policies.

Along with those factors, the contemporary Arab landscape suffers from a democratic deficit and a general crisis of political empowerment,⁷¹ which inevitably affects the young and creates a sense of isolation, uncertainty and insecurity among them. Similarly, the social, cultural and institutional set-ups within which young people are brought up are still short on the values of freedom of thought and expression, and on the democratic practices of citizen participation and representation. There are significant lacunae in the institutional set-ups that provide young people with the modalities and channels to discuss and deliberate answers to their concerns, solutions to their problems, articulation of their expectations and pursuit of their future needs.

Specific dynamics apply to young people and their role in political participation in occupied and conflict-ridden countries. Since the mid-1990s, the region has witnessed an unprecedented increase in the number of youth engaged in armed conflicts, either as victims or as participants. That is of particular importance as a number of Arab countries are cur-



rently either under occupation, or undergoing civil strife. For example, in Iraq and Palestine, growing up in the midst of mostly tragic living conditions disrupts traditional development and takes its toll on the emotional well-being of Iraqi and Palestinian youth. The continued Israeli occupation, with its internationally condemned Separation Wall and the large number of security checkpoints that put various towns and villages under virtual siege, renders Palestine a special case of harsh restrictions on the movement of youth and their access to education, health care and employment. The constant humiliation, deprivation and isolation have the potential in both Iraq and Palestine to entice young people to take up arms or offer themselves for suicide missions. The rehabilitation and reintegration of such young persons is important in order to pave the way for their con-

(71) S. Makdisi and I. Elbadawi, "Democracy and development in the Arab world: case studies" (American University of Beirut, Lebanon), available at: <http://www.lb.aub.edu.lb/~webifeco/makdisi.html>; UNDP, *Arab Human Development Report 2002: Creating Opportunities for Future Generations*, (ISBN: 92-1-126147-3), available at: <http://www.undp.org/arabstates/ahdr2002.shtml>.

structive social, economic and political participation. Girls and young women, in particular, may need additional support to overcome social, cultural and economic barriers that limit their full participation.

Additionally, the role of the Arab youth in the process of MDG attainment is affected by the burdens of globalization, which is defined here as the multifaceted process that evolved during the closing decades of the twentieth century in the wake of the immense advance in the means of transport and the revolution in ICT. In general, the influence of globalization on the youth is mostly portrayed in the new hybrid forms of music and fashion, in rebellion against tradition and in the massive influx of information and ideas through mass media. As such, young Arab people are caught between a life of traditional social norms and practices in which they live, and the life that they grow to expect or want.

On the other hand, globalization also represents an opportunity for young people to express themselves in different ways and across spatial boundaries and, thus, to grow in cultural interaction and experiential knowledge. Given that ICT has the potential to become a tool to enhance Arab identity and regional integration, young people can assimilate the benefits of globalization by continuing to harness the vehicles of ICT. Young Arabs, as youth everywhere, are the main users of the latest ICT. Data from surveys in 2005 show that young people accounted for 60 per cent of all Internet users aged 15 and above in Egypt.

A significant portion of Arab youth receive ICT training through school and acquire complex information-processing skills, which enhances their ability to access information and connect to ideas and people outside their countries. In 2007, it was estimated that there were close to 1.2 billion Internet users worldwide, of which only about 20 million were in the Arab countries. The latter figure represents a degree of penetration of about 70 per 1,000, compared with a world average of 178 per 1,000. However, increase in Internet penetration in Arab countries since the year 2000 was close to 3 times, compared to world growth of 2.3 times.⁷²

New alternatives to the traditional mode of work are emerging around the world, and their adoption in the region would provide the Arab youth with many opportunities. For example, to counter the growing dilemma of migration, business process outsourcing could be employed. Estimates suggest that 11 per cent of all service jobs worldwide, amounting to 160 million jobs, could be carried out remotely. Such employment acts as an alternative to migration, allowing workers to sell their labour overseas without having to leave their countries.⁷³ Moreover, ICT also offers youth with disabilities the potential for a second chance at work. However, that promise has yet to be achieved for many disabled young persons. Speech synthesizers and text magnifier programs can allow visually impaired youth to use ICT for work, while e-mail and Short Message Service (SMS) offer greater flexibility in work-related communication needs for the hearing impaired. One example of a self-sustainable business

(72) Internet World Stats, September 2007, available at: <http://www.internetworldstats.com>.

(73) World Bank, *World Development Report 2007: Development and the Next Generation* (World Bank, Washington, D.C., 2007), available at: <http://publications.worldbank.org>.

model providing opportunities for disabled youth is Digital Divide Data, a data outsourcing centre in Cambodia employing young orphans, landmine victims, physically disabled, or trafficked, who also receive vocational training or are offered scholarships to continue their education.⁷⁴

Similarly, new means of education have the potential of providing Arab youth with opportunities. Distance education has long incorporated television and radio, and such traditional technologies are still the most cost-effective ICT educational interventions for secondary schooling in many developing countries. For tertiary education, the capacity of the Internet for two-way interaction offers the greatest promise for improving access and affordability, and for providing flexibility to combine work with further study. Several developing countries already cater to substantial numbers of online students, while those students also have the opportunity to take online classes from universities in developed countries without having to migrate. Close to a million students are studying online in China, while the University of Phoenix in the United States had students enrolled from around ninety countries in 2003.

The private and anonymous nature of the Internet offers young people the possibility to discretely access information about reproductive health and sexuality that they may be otherwise too embarrassed to ask, or unable to talk about for cultural reasons. Many young women who had access to the Internet through the World Links programme in Mauritania re-

ported obtaining information on sexuality, puberty and HIV/AIDS prevention.⁷⁵

Moreover, new technologies are lowering the barriers between migrants and their home communities. International calls are becoming possible at very low cost, and calls to migrant family members are becoming common even among villagers. Online discussion boards and migrant websites provide a way for migrants to connect with and meet others from their community, and to foster expatriate civic associations. Arab Governments may try to increase the opportunities for their migrants by allowing them to retain citizenship links with their home countries, making it easier and cheaper for them to send money back and removing barriers to their return. It is particularly important to also provide conditions for modes of such communal access as village phones and Internet cafes. Arab Governments also might find it useful to exchange experiences regarding best practices in providing youth with the skills needed to take advantage of the ICT potential, through teaching global languages, providing support for local language content development and developing ways to teach them responsible and safe use. Diligent follow-up and evaluation of such policies are needed to find out what works, and to share lessons across countries.

Indeed, the ability to make use of ICT and the success of such programmes as distance education requires overcoming the constraints imposed by poor infrastructure, low incomes and Government regulations that may limit the access of young people to online education. Simi-

(74) Available at: http://www.digitaldividedata.com/Social_impact_Social_mission.asp.

(75) Available at: <http://www.world-links.org/en/countries/alumni/mauritania.html>.

Box 3.2. Voice of Arab Youth

“Established by the Academy for Educational Development (AED), Voice of Arab Youth (VOAY) aims to give young Arabs the chance to document their experiences working on community development projects in the Middle East and North Africa. Selected participants receive training and funding to support projects to be carried out in their home countries. VOAY is designed to enable 18- to 25-year-old Arab leaders to implement community growth initiatives with self-designed projects in the fields of education, income generation, and/or job creation. VOAY draws on [the] optimism, creativity and energy [of the young] - qualities that ... make them a strong mobilizing force in community development. The hope is that, in the process of serving their neighbours and compatriots, participants will develop greater ties to their [home] country ... and greater commitment to [its development], while improving their own career opportunities.

Specifically, VOAY selects entrepreneurial [young people] from Arab countries based on the project proposals they have designed to serve the pressing needs of their communities. VOAY trains these leaders to master skills that enable them to mobilise their communities in an effort to effectively implement their projects - for example, the Jubilee School in Jordan ... serve[d] as a training site for a 6-week programme [where] 50 [young persons aged 18 to 25] from all over the Arab region ... learn[t] how to create projects in the fields of micro-enterprise and small business, fundraising, managing local organisations, protecting the environment, mapping community resources, and expanding health services.

VOAY provides seed money to assist in the start-up of projects while offering ongoing training and technical support. In addition, in an effort to encourage participants to document their experiences, organisers have designed a media competition to honour the best stories and photos from participants. The winner of the competition will be rewarded with additional funds for his or her project. Organizers also hope to have documentary film-makers film the project for later broadcast on television stations around the world”.*

* Quoted from VOAY, available at: <http://www.comminit.com/en/node/124090>.

larly, the cost effectiveness and justification for public provision of facilities for specialized classes in computer skills remain a function of ICT costs. Government intervention in that regard is important, because of uncertain market demand and network externalities that may lead the private sector to undersupply such facilities, especially in rural areas.

A youth perspective on ICT reveals that Government regulation affecting communal modes of

access determines youth access. Regulation can have dramatic effects on the incentives for private entrepreneurs, often young people, to set up Internet cafes. A reform of the licensing process in Algeria made it exceptionally affordable, at US\$ 13, to obtain authorization to provide Internet service.⁷⁶ Regardless of whether the

(76) World Bank, *World Development Report 2007: Development and the Next Generation* (World Bank, Washington, D.C., 2007), available at: <http://publications.worldbank.org>.

Government is involved in Internet provision, it can help stimulate demand for new services by providing public service content online. The Government can also kick-start local language content, preventing a vicious circle in which those who do not speak global languages do not use the Internet because of a dearth of content, while the lack of users acts as a disincentive to local-language website creation.

3. Institutional set-up for youth participation in civil life

What is lacking in the Arab region is an institutional framework for youth participation that allows access to adequate and appropriate

programmes and services by all young people, regardless of gender, geographic location, social, cultural and economic circumstances. In fact, great discrepancies are noted in terms of participation among the youth, and many young people do not feel the applicability of the principles of active citizenship on their reality. Generally, current avenues for participation are insufficient and consequently, many young Arab people are perceived as apathetic or disengaged.

For the most part, Arab societies traditionally perceived the young as being incapable of actively participating in public life, and did not consider them as responsible counterparts in the policy process. Indeed, while sports and

Box 3.3. League of Arab States Youth Forum

The LAS Youth Forum responds to the emerging need for a regional policy supporting youth empowerment. “Convening the Forum also comes in response to the regional need to integrate youth issues in global and sectoral development policies, and to crystallize ideas and mechanisms that aim at activating the role of youth and their organizations in developmental efforts and in achieving the MDGs”.

The objectives of the Forum include introducing the following initiatives:

- (a) “[E]stablish[ing] a permanent dialogue between young people that will nurture mutual understanding among the people of the region and to integrate young people into the fabric of the social and professional life of their communities, thus contributing to the process of democratization and activating the role of civil societ[y] organizations;
- (b) Developing youth capacities in participation in formulating and implementing development policies and enhance and support partnerships among all actors addressing youth-related issues operating at the national, regional and local levels including governmental and non-governmental organizations;
- (c) Formulating a vision, recommendations and constructive initiatives that can be implemented regionally through active national, regional and global partnerships”.*

* Quoted from LAS Youth Forum, available at: <http://www.lasyouthforum.org/en/vision.php>.

sports-related leisure activities should be encouraged as an outlet for health and educational reasons, a great portion of ministerial budgets are allocated to such activities contrary to the potentially more policy-affecting participatory activities. Nonetheless, student movements have played a crucial role in a number of major social and political transitions that have occurred in Arab countries. In addition, national and regional youth councils often act as outlets for political and civic participation. Increasingly, however, young people are recognized as key participants in decision-making processes and development, as reflected in the growing presence of non-governmental youth organizations and by the upsurge of youth advisory boards and committees to regional pro-

grammes, for example the LAS Youth Advisory Committee. Developing the capacity and creating sustained partnership with young people are crucial strategies to MDG attainment and sustainable development. Yet, effective youth participation requires changes in how young people are perceived in the Arab region. Those changes need to be reflected in appropriate funding, innovative ways of spreading information, training to facilitate intergenerational collaboration, and in organizational structures that welcome new voices. Effective strategies for youth participation must move away from ad hoc activity-based approaches to inclusion in core aspects of social structures, institutions and processes.

C.

ENVIRONMENTAL SUSTAINABILITY AND YOUTH HEALTH



1. Youth and the environment

Hitherto, economic development has mainly disregarded the entropic nature of economic processes. Youth will have to face and deal with the consequences of the fact that entropic processes are different from mechanistic processes by virtue of being irreversible. Future generations, starting with the young of today, are destined to face two momentous consequences of that irrevocable nature of entropic processes, namely, the increasing scarcity of natural resources with their irreversible depletion; and the waste generated by uncontrolled industrial production, thus rendering waste, and not consumption the last link of the production process.

Despite distinct differences among Arab subregions, the exploitation of natural resources, expanding population and urban growth are common elements across them all, with agriculture being a significant economic activity in the Mashreq, Maghreb and Arab LDCs and oil the dominant source of income in the GCC countries. With population growth rates close to 3 per cent, and declining, unemployment rates rising above 20 per cent, and urbanization rates in excess of 60 per cent, demograph-

ic pressures will continue to constitute a core development problem and to be a major challenge to the environment in the future.

A vast proportion of the region's land is arid, with great variability in rainfall within and between seasons and frequent spells of drought, making water the most precious resource. The region is characterized by harsh environment, fragile ecosystems and limited water resources and arable lands. Poor resource management over several decades has resulted in widespread land and marine degradation. Population growth and changes in consumption patterns have made urbanization and waste management major environmental issues.

Although most people have access to clean drinking water and sanitation, such services are not always reliable, especially in lower-income areas. A significantly lower number of people have access to safe water in rural areas than in cities and towns. Indeed, in Morocco, which accounts for well over a quarter of the population in the Maghreb subregion, only 56 per cent of the rural population has access to safe drinking water, while the figure for Arab LDCs indicates that slightly less than half the rural population does not have access to an im-

proved water source. Water shortage for domestic use is also a problem in cities like Sana'a, Amman and Damascus. In the GCC countries, rapid population growth and urbanization and the rise in per capita water consumption have resulted in an alarming increase in demand for water and energy, not to mention waste management challenges, and in the deterioration of urban air quality and of the environment in general.

The difficulty in access to water and sources of energy has a direct impact on young females. Young girls in some adversely affected areas are requested by their families to drop education to help collect water for the household, or fuelwood for cooking and heating. As such, the scarcity of such resources has the potential to deprive young females of their right to education, which includes the understanding of the threats of a polluted environment on their health, and of their chance to improve their overall living conditions. In addition, the health impact of poor water quality is a major concern and includes such waterborne diseases as anaemia, cholera, diarrhoea, hepatitis, lead poisoning, malaria, polio and typhoid.

As discussed in chapter II, overstretched urban infrastructures have resulted in the expansion of slum areas in a number of Arab countries. Since the mid-1990s, the number of people living in slum conditions almost doubled in Yemen and increased by about 15 per cent, 25 per cent and 30 per cent in Jordan, the Syrian Arab Republic and Lebanon, respectively.⁷⁷ Indeed, around 57 million people live in urban slums in the Arab region. Conflicts in Iraq,

Palestine, Somalia and the Sudan have contributed to the growth in the number of slum-dwellers and refugees living in camps. Almost 3 million Palestinian refugees and 2 million Iraqi refugees live in Jordan, the Syrian Arab Republic and Lebanon, straining the resources of the host countries as a result of the sudden increase in demand for water, sanitary and health services. In the Sudan, over five million internally displaced persons and international refugees currently live in rural camps, informal settlements and urban slums. That represents the largest population of displaced persons in the world today. Living conditions in such settlements are in many cases appalling. They are crowded and unsanitary, food and water are in short supply, insecurity is high and livelihood opportunities are generally lacking.

Assessing the full impact of urbanization on the environment continues to be an elusive goal, but poor housing conditions in slum areas can be conducive for biological pollutants, including moulds, bacteria, viruses, pollen, dust and mites. In addition, the urban environment is facing escalating challenges related to increased air pollution caused by stationary and mobile sources, seasonal sand and dust storms, and liquid and solid wastes.

The prime driver of both economic development and environmental degradation, however, is the energy sector, dominated by huge oil and gas facilities and thermal electric power plants. The region holds about 52 per cent of the total world oil resources and 25.4 per cent of its gas reserves; and it produces nearly 23 per cent of global oil and about 8.7 per cent

(77) UN-HABITAT, Millennium Development Goals (MDGs), available at: <http://www.unhabitat.org/categories.asp?catid=312>; UN-HABITAT, Guide to Monitoring Target 11: Improving the Lives of 100 Million Slum Dwellers 2003, available at: http://www.povertyenvironment.net/?q=guide_to_monitoring_target_11_improving_the_lives_of_100_million_slum_dwellers_2003.

of global gas,⁷⁸ a contribution that is expected to increase. Per capita energy consumption in the region varies greatly between oil-producing countries and non-oil producers, with the GCC countries consuming 504 kg oil equivalent per US\$ 1,000 GDP, and the Maghreb 137 kg oil equivalent per US\$ 1,000 GDP.⁷⁹ In addition to industrial expansion and use of fossil fuel, air quality has been affected by a growing number of vehicles, poor traffic management, energy subsidies, inefficient public transportation, ageing cars and congested roads. Nevertheless, some policies and successful measures have been implemented in several countries, including phasing out leaded gasoline, switching to natural gas, promoting renewable energy resources and introducing effective waste management systems.

Their energy, enthusiasm and creativity, coupled with the availability of advanced technologies and communication, empower the young men and women of today with the capabilities to be engaged in solving environmental problems. Sharing of information, application of advanced technologies in agriculture, running recycling programmes and implementing water harvesting techniques are some examples of the practical ways the young have been engaging in environmental issues. Environmental awareness is one of the areas in which young people have successfully been active, not only advocating for the protection of the environment, but also making their voices heard by Governments and the international community. Environmental education has grown steadily over the past decade through its inclusion in both school curricula and informal educational

programmes. However, the real challenge lies in achieving visible gains from environmental education; in other words, translating environmental values into changes in behaviour and lifestyle.

The young, in general, are more attentive to their social and environmental responsibilities through their activities. Working with local communities and indigenous groups, as well as through school clubs, young people target not only their own generation, but also the general public at large, reaching the most vulnerable sectors of the society to achieve their stated goals. School clubs run by the young themselves usually have a direct impact on the behaviour of young men and women which, in turn, has a distinct effect on their families, neighbourhood and local community. The behavioural change, if coupled with political action, awareness campaigns and advocacy, could cause a change in the way of life.

Governments, in many cases, have established youth-specific national strategies. However, such strategies often consider youth as a target group and address issues from the perspective of providing activities to usefully and productively filling their time. Young people themselves are rarely included in the structuring of, or decision-making aspect of such strategies, or other strategies addressing the youth. The role of young people can be institutionalized in policymaking through such advisory bodies as youth councils. Some countries, for example Jordan, have established high-level youth councils, while others have created special Government ministries for youth.

(78) OAPEC, Arab Energy Data, available at: <http://www.oapec.org>.

(79) United Nations, *The Millennium Development Goals in the Arab Region 2005* (United Nations Publication No. 05-0541, October 2005).

A 2006 report by an international team of over 350 young leaders from NGOs across the world, entitled *Youth and the Millennium Development Goals: Challenges and Opportunities for Implementation*,⁸⁰ indicates that investing in youth will provide the longest and most effective dividend towards meeting the eight Goals

by building the social capital needed to foster development. The Report argues that without the involvement of young people, representing almost 20 per cent of the world population, full MDG attainment will remain elusive and their long-term sustainability will be compromised.

Box 3.4. Case studies: youth working for sustainable development

LEBANON

The Society for the Protection of Nature in Lebanon (SPNL) is an NGO with national and international partners set up in 1984. SPNL advocates the traditional *hima*, or community-based approach of promoting sustainable use of natural resources and protecting nature and wildlife. In addition to other projects, SPNL has set up the Youth Correspondence Programme with a view of engaging young people and, from an early age, getting them involved in nature conservation and protection.

As a BirdLife National Partner in Lebanon, SPNL has also been assessing important bird areas (IBAs) in Lebanon, in order to work towards the conservation of such important biodiversity sites. That is done with close involvement of the local community through site support groups and training programmes to ensure the sustainable use and management of IBAs.

With the onset of conflict in Lebanon on 12 July 2006, two IBAs were affected, namely, Ebel es-Saqi in the south and Kfar Zabad wetlands in the Bekaa Valley. Ebel es-Saqi was evacuated, and the Kfar Zabad agrarian/artisanal community provided shelter for around 120 displaced families. In order to lessen the burden on people and to preserve vulnerable IBAs, the Hope Operation Campaign was introduced. Following a letter of appeal from SPNL, the Jordan regional office of the International Union for the Conservation of Nature and Natural Resources (IUCN) responded directly and provided a linkage with the Jordan River Foundation, which is now working hard to mobilize donations and support to the Lebanese people, and working collaboratively with several Lebanese NGOs and institutions for their distribution to needy families.

UNITED ARAB EMIRATES

A team of students at the American University of Sharjah has won an environmental award for designing an automated system to monitor air quality in urban areas. Readings are displayed through web services.

(80) Available at: <http://www.developmentgateway.com.au/jahia/Jahia/cache/offonce/pid/4132>.

The system, PolluMap, collects pollution data using mobile hardware modules, transmits that data through general packet radio service (GPRS) to a back-end server, and integrates the data to generate a pollution map of the city in question using its geographical information system. Unlike previous pollution-tracking systems, PolluMap provides continuous update of pollution information and maximum coverage. The system can easily be extended to cover other areas and is cost-efficient to operate.

PolluMap has been implemented and tested in Dubai, with initial results underscoring the effectiveness of the system. A working prototype can perform regular collection and transmission of data according to the proposed standards, taking into consideration different system limitations.

Such an initiative demonstrates the innovation of the young generation in pursuing sustainable development using the tools of the new millennium.

2. Youth health problems

Youth represents the period generally following that of threats of infectious childhood diseases, and prior to that of the threat of chronic diseases. However, it remains a critical period when long-term health implications and health hazards tend to increase as young people commonly experiment with smoking, drinking alcohol and sexual activities. Young people tend to underestimate the risk of diseases, accidents, or vulnerability associated with such actions, and often lack knowledge regarding the consequences, thereby exposing themselves to such serious health problems as nutrition-related, mental, and psychological health issues. That trend is especially important to consider in the Arab region, as many countries have made the epidemiologic transition to where chronic, rather than infectious diseases are the leading cause of death.⁸¹

A large number of health hazards can be prevented by education and guidance. Unfortunately, there is scant information and data on youth health issues in the region, particularly with regard to the mental or psychological health of Arab youth. That is especially critical, given the exposure of many young people in the region to conflict and violence. An understanding of these and other undocumented health issues, is vital to prevention. Similarly, data on other youth-related health issues, including reproductive health and sexually transmitted diseases, are lacking, which exemplifies the reluctance most Arab societies have in openly addressing the health needs of the young.

Tobacco use is the most recognized youth health problem in the Arab region, with around 20 per cent of 13- to 15-year-olds currently being tobacco users.⁸² In Lebanon, that percentage reached a staggering 60 per cent in 2005.

(81) F.A. Akala and S. El-Saharty, "Public-health challenges in the Middle East and North Africa", *The Lancet*, vol. 367, No. 9515 (25 March 2006), available at: <http://www.thelancet.com/journals/lancet/article/PIIS014067360668402X/fulltext>.

(82) WHO/CDC, *Global Youth Tobacco Survey*, available at: <http://www.who.int/tobacco/surveillance/gyts/en/index.html>.

Significantly less data is found on substance abuse, namely, alcohol and drugs, long considered a sensitive issue and taboo. Nowadays, a number of Arab countries have acknowledged the problem and are trying to tackle it. Despite limited data, an estimation of substance abuse in the region can be garnered. The magnitude and nature of the problem seem to vary depending on the country. The use of low active substance, for example cannabis in Morocco and Egypt and *qat* in Yemen, is well known and socially tolerated. However, almost all known drugs are available in the region, and some indicators rate the problem as moderate in certain countries and minor in others. Results from the Global School-based Student Health Survey conducted in 2005 indicated that 20 per cent of students in Lebanon aged 13-15 had had at least one alcoholic drink during the preceding 30 days, compared to 3.7 per cent in Morocco in 2006.⁸³

Much has been written about sexual and reproductive health in the region. However, the focus has mostly been on knowledge and attitudes around HIV/AIDS, and on reproductive health in general. Hence, it is an area where less is known on actual behaviour patterns. An inventory of knowledge, attitude and practice (KAP) studies in the Middle East and North Africa (MENA) region, published by UNFPA in 2004, suggests that, in general, the concept of reproductive health is unknown; knowledge of reproductive system anatomy and physiology is low in most countries; knowledge of at least one modern contraceptive is generally high; awareness of the existence of HIV/AIDS is generally high, but awareness of other sexually

transmitted infections is generally low; and knowledge of the transmission of HIV/AIDS by sexual contact is high, but of other modes of transmission is quite low. For young people, the risks associated with sexual relationships are heightened by their lack of access to information and services related to sexual and reproductive health. Premarital sexual relationships are not accepted in mainstream society, and discussions about sexual and reproductive health issues are considered taboo, largely resulting from the misconception that this would encourage unmarried youth to have premarital sex. Therefore, deprived of enlightened parental and school guidance, sexually active young people are at risk of sexually transmitted diseases, and young women are more vulnerable to unintended pregnancies and unsafe abortions.

In addition, the inventory suggests that, with respect to attitudes, most young people agree with the concept of family planning/contraceptive use and spacing of births. Overall, the young feel they are not susceptible to HIV infection. With respect to behaviour, most data across countries is related to age at marriage, number of children and use of contraception when married. The overall results indicate the presence of a KAP gap, namely, that knowledge is not related to behaviour.

Women in the Arab countries are generally living longer and healthier lives. Since 1980, their life expectancy has increased by some ten years, mainly because of improved health care and reduced maternal mortality. Above all, the region⁸⁴ has experienced spectacular declines in the fertility rate, from 6.2 children per wom-

(83) WHO, *Global School-based Student Health Survey*, available at: <http://who.int/chp/gshs/factsheets/en/index.html>.

(84) This figure refers to the MENA region.

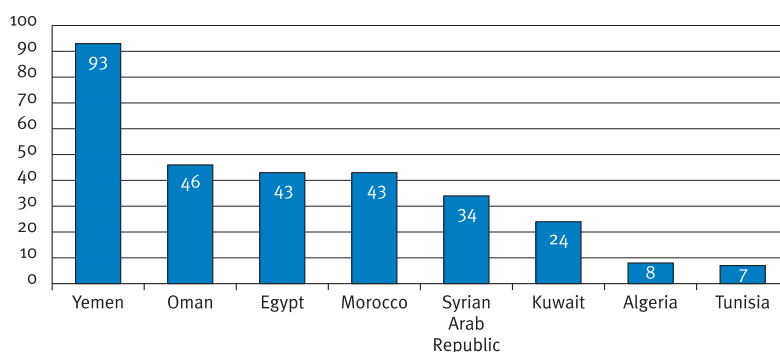
an in 1980 to 3.3 in 2000.⁸⁵ That decline is partly attributed to the improvement in women’s education, as educated women tend to marry at a later age and are more likely to use contraceptives.

Despite such improvements, significant inequalities in health status and in access to health education still persist for women in the Arab region. Discrimination against women, particularly young women, is common in traditional Arab communities. The value placed on marriage in Arab culture, compounded by religious and social disapproval of premarital sexual relationships, places considerable pressure on young people, especially women in rural areas, to marry and have children before they are ready. Early marriage tends to put women at health risks and limits their opportunities, usually disrupting their education and often violating their human rights. In some Arab subregions, young girls are exposed

to various forms of gender-based violence from harmful practice, including female genital mutilation and “honour killings”. While it is difficult to collect data on such abuses, which are believed to be rare in most countries, accepting them diminishes the status of women in society and within the family.

Despite a shift toward later marriage in many Arab countries, there are still population groups for whom early marriage and childbearing remain common. Early childbearing varies greatly across the region, with the highest rates found in Yemen, as illustrated in figure 3.2. For young women, complications of pregnancy and childbirth are a leading cause of death, with unsafe abortion being a major factor. Early marriage and adolescent pregnancy can also severely threaten child survival. Infants born to teenage mothers are twice as likely to die within their first year as those born to mothers aged 20-29.⁸⁶

FIGURE 3.2. Births per 1,000 women aged 15-19 in selected Arab countries, 2004



Source: World Bank, *World Development Report 2006: Equity and Development* (World Bank, Washington D.C., 2006).

(85) World Bank, *Gender and Development in the Middle East and North Africa: Women in the Public Sphere*, available at: <http://sit-eresources.worldbank.org/INTMENA/Publications/20262206/genderoverview.pdf>.

(86) Stan Bernstein, with Charlotte Juul Hansen, *Public Choices, Private Decisions: Sexual and Reproductive Health and the Millennium Development Goals*, United Nations Millennium Project 2006, available at: http://www.unmillenniumproject.org/documents/MP_Sexual_and_Reproductive_Health_Exec_sum.pdf.

3. Youth health education and role of youth in health promotion

Youth health education is necessary to equip young people with the information they need to substantially improve their chances of becoming healthy, productive citizens. For example, education is a major factor in preventing unwanted pregnancies and infections, and in dealing with substance abuse and trauma that may begin in youth, but have implications in adulthood.

Moreover, educating girls is a powerful lever for their empowerment. Sexual and reproductive health education prepares young girls,

whether sexually active at the time or not, to make more informed decisions about marriage, sexual relationships and childbearing. Girls who are educated are likely to marry later and to have smaller, healthier families.

Ensuring the full participation of youth in the development and promotion of health-related programmes and policies would enable them to become agents of change in their communities, improving their own lives and the lives of their peers. Easy access to health information and general health services, particularly sexual and reproductive health services, is a necessity for young people.

CHAPTER IV:

A YOUTH POLICY FRAMEWORK FOR THE ARAB REGION



Any youth policy framework which aims at supporting progress towards MDG attainment needs to focus on policies predicated on the premise that young men and women are not only beneficiaries, but also active agents of economic, social and political transformation. Such a framework should be based on the dual objective of improving the educational, recreational and employment opportunities for young people, and creating an environment that promotes their participation in public life and decision-making processes. Chapter III highlighted some of the major constraints and challenges young Arab men and women are facing today. Depending on the country and area they live in, they suffer to varying degrees from the lack of adequate education, enormous difficulties in finding decent employment, limited opportunities to participate in public life, inadequate health provision and poor access to health facilities, and from the effects of environmental damages. The strong interdependency between those factors requires establishing an integrated youth framework which addresses the constraints both at the micro and macro level. The latter is particularly relevant to the parts of the Arab region where violent conflict and security concerns continue to negatively impact the prospects of young people.

The specific policy priorities and action plans vary by country and subregion, and should be customized to suit the initial conditions in each. That requires consideration of four dimensions, which are set out in detail in the following paragraphs. The first dimension concerns income levels and distribution. Average income levels in a country and the distribution of income determine the extent to which young people and their families can afford to pay for required services themselves. Average income levels may also serve as a

proxy for administrative capacity to implement certain policies and programmes. For example, managing income-contingent loan programmes to encourage enrolment in tertiary education requires high levels of administrative capacity, especially in tax administration, making such programmes difficult to implement in many low-income countries. Other such financial incentives as conditional cash transfers are found to be effective in a wide range of contexts where many young people do not go to secondary school, even though the facilities are there.

The second dimension focuses on demography. A declining dependency ratio may offer an economic window of opportunity. The stage of the demographic transition is relevant to determining the financial implications of mid- and long-term policies. If the demographic transition is at a very early stage, emphasis should be given to basic child and maternal health service, in order to improve the lives of children and youth and lower fertility rates. In contrast, countries where the window of opportunity from falling dependency rates will soon close should act now, before rapid ageing results in sharper trade-offs between the needs of the young and those of the elderly.

The third dimension deals with the importance of a proper assessment of capacities as a basis for policy and action plans. A comprehensive assessment of the skills, capabilities and opportunities of young men and women in a country is required to identify the main challenges and to define policy priority areas. Factors to be considered include the quality of preschool upbringing, primary and secondary enrolment and completion rates, the quality of education, health of young people entering adolescence, the state of on-the-job training

and acquisition of skills through productive employment in the labour market, and youth preparedness for parenthood.

The fourth consideration is participation. The extent to which young people are able to actively participate in public life and decision-making processes is an important factor in identifying their role in society. In societies where decision-making is mainly communal, the family or community may have as much, or more, say in decisions that directly affect young people. In societies that are more individualistic, the views of young people may be more important in the decision-making. In the Arab countries, where social organization is still largely influenced by traditional patriarchal values, the meaningful participation by the young in decisions affecting their lives is a vital necessity for their character formation as free-thinking and responsible citizens, and for their emancipation from fear of challenging the dictations of "authority", be it that of the family, the state, or the clergy. In the words of Amartya Sen, "If a traditional way of life has to be sacrificed to escape grinding poverty... then it is the people directly involved who must have the opportunity to participate in deciding what should be chosen. The real conflict is

between: 1) the basic value that people must be allowed to decide freely what traditions they wish or not wish to follow; and 2) the insistence that... people must obey the decisions by religious or secular authorities who enforce traditions - real or imagined. ... Indeed, in the freedom-oriented perspective the liberty of all to participate in deciding what traditions to observe cannot be ruled out by the ayatollahs (or other religious authorities), nor by political rulers (or governmental dictators), nor by cultural "experts" (domestic or foreign)".⁸⁷

Based on comprehensive country- or subregion-specific assessments of those four dimensions, a youth policy framework for the Arab region can be established which is guided by the following three main objectives, namely, creating an enabling macroeconomic and institutional environment, expanding knowledge, skills and capacities of young men and women, and promoting and strengthening youth participation in decision-making processes.

The three objectives are closely interrelated and can be mutually reinforcing. Progress in one area may facilitate progress in each of the other areas, if the linkages between them are strengthened.

(87) Amartya Sen, *Development as Freedom* (Oxford University Press, 1999), ISBN 0192893300, pp. 31-33.

A. CREATING AN ENABLING MACROECONOMIC AND INSTITUTIONAL ENVIRONMENT

Offering young people better opportunities in life requires stable macroeconomic conditions and an institutional environment that is conducive to youth development. There are multiple channels through which macroeconomic developments in a country impact the prospects of young men and women. The following factors are some of those of particular relevance for the Arab region.

A stable macroeconomic environment and sustained high economic growth rates are necessary conditions to eradicate poverty in the Arab region, and to achieve a lasting reduction of the excessively high youth unemployment and underemployment rates. In many Arab countries, the employment prospects of young people were disproportionately affected by the weak economic performance of the early 1990s and at the turn of the new century. Despite the fact that the economic recovery has not yet led to a substantial decline in youth unemployment, there is no question that a broad-based economic expansion is a key element for sustainable employment growth. Naturally, that can only be achieved in an environment characterized by peace and security. The case of Lebanon illustrates how insecurity and political instability create a vicious circle of

poor growth and investment, lack of adequate employment opportunities and loss of human capital through migration of a large part of the highly-skilled workforce. In fact, since the onset of the civil war in 1975, the country has witnessed, year after year, a significant brain drain, which acquired even more momentum in the aftermath of the war with Israel in July and August 2006. A large percentage of highly-qualified young Lebanese continue to leave the country in search of employment elsewhere. The findings of two studies indicate that 22 per cent of the population of just over four million is actively working on an exit strategy; and of a sample of 600 university students, 60 per cent were hoping to leave Lebanon after graduation in mid-2007.⁸⁸ Lack of political stability and security has contributed to the well-documented insufficiency of private-sector investment in the region and the low productivity of total investment in most Arab countries.⁸⁹ A strategy that aims at increasing investment and its efficiency in Arab countries requires the following main elements: further development of physical infrastructure; human capital formation through improved education and training; better financial intermediation and easier access to credit for SMEs; stronger and more efficient regional cooperation, especially in the areas of trade and investment; and creation of an appropriate regulatory framework that ensures legal certainty, transparency and accountability.

High and sustainable GDP growth rates allow Governments to increase public expendi-

(88) Studies by the Beirut Research and Development Center and the Lebanese Emigration Research Center at the Notre Dame University; reported online in article "Lebanon's brain drain alarm", *Lebanon under Siege* (Higher Relief Council, Presidency of the Council of Ministers), 2 May 2007, available at: <http://www.lebanonundersiege.gov.lb/english/F/eNews/NewsArticle. CNewsID=794>.

(89) Elsa Vila-Artadi and Xavier Sala-i-Martin, "Economic Growth and Investment in the Arab World", working paper No. 683 (University Pompeu Fabra, Barcelona, Spain, May 2003), available at: <http://www.papers.ssrn.com>; <http://econ.upf.edu/en/research/ onepaper.php?id=683>.

tures on health, education and other basic social services which directly affect the lives of young men and women. In many countries of the Maghreb, the Mashreq and GCC, the most imminent problem of the health and education sectors is the relatively poor quality of services. That is often a result of weak administrative capacities and a lack of incentives to perform efficiently, rather than of mere shortages in funding. Recent research for ESCWA member countries suggests that increased spending is likely to result in further improvements in educational and health indicators, as elaborated in box 4. The positive effects of higher spending are expected to be the most significant for Arab LDCs, where educational and health standards are still very poor.

The quality of the institutions of a country affects youth development, both directly through the services offered and incentives provided to young men and women, and indirectly through the impact on economic growth and development. In fact, recent theoretical and empirical research has provided ample support to the view that economic and social institutions are a main determinant of long-term development. Institutions include dependable property rights, strong administrative capacities, appropriate regulatory structures, an independent judiciary system, the capacity to maintain law and order, and the ability to align economic incentives with social costs and benefits. Most

economic success stories are based on the creation of an institutional framework that generated market-oriented incentives, protected the property rights of current and future investors, and ensured social and political stability. In addition, fiscal policy often focused on large investments in education, health and infrastructure, thus contributing to human capital formation, higher investment and more equal opportunities. In contrast, countries where good public institutions were lacking mostly failed to achieve sustainable economic growth and development. A comprehensive analysis of the role of institutions in development also requires determining their origins, and how they need to evolve to support long-term growth. The experience of the recent success stories of institutional reform shows that such reform is often very different from a one-size-fits-all approach. Such cases suggest that “good institutions” depend to a large extent on country-specific circumstances. Establishing well-functioning institutions “often requires experimentation, willingness to depart from orthodoxy and pay attention to local conditions... An approach to institutional reform that ignores the role of local variation and institutional innovation is at best inadequate and at worst harmful”.⁹⁰ As such, the institutional requirements for Arab LDCs, where poverty is widespread, are fundamentally different from those in the other Arab subregions.

(90) Dani Rodrik, “Growth Strategies”, National Bureau of Economic Research working paper No. 10050, (October 2003), pp.12-17, available at: <http://www.nber.org/papers/w10050>.

Box 4.1. Public expenditure, per capita income and the Millennium Development Goals

Since 1975, ESCWA member countries have devoted a considerable proportion of their public resources to health and education. Consequently, substantial progress has been made in lowering mortality rates and life expectancy has increased by 15 years, while mortality rates have fallen significantly. In particular, infant mortality decreased by more than 71 per cent and child mortality by 67 per cent for the period 1975-2002. On any scale, those are remarkable health achievements. Impressive progress has also been made with regard to education, reflected in a stable upward trend in both adult and youth literacy rates, and in the large increases in the number of students enrolled in school, which is in line with the increasing numbers of the school-age population.

Using measures for GDP per capita, social spending, infant mortality rates, under-five mortality rates, life expectancy, school enrolment rates and literacy rates, a 2005 study conducted by ESCWA* focused on how those different indicators interacted and what the long-term relationship between economic trends and social achievements were. The study assessed the importance of real income levels and of public and private spending for health and educational achievements. The relation between economic and social development in the countries under review was investigated, using both a cross-country correlation analysis and a panel data analysis for the period 1975-2002.

The analysis demonstrated that, within individual countries, infant mortality and life expectancy improved sharply with rising income, especially at low levels of GDP per capita. Rising income, particularly for the poor, led to better nutrition, lower child mortality, better maternal health and also better education, especially for females which, in turn, again contributed to improved health. At the cross-country level, the correlation between income and health was also positive, even though some countries had reached an average health status far above that expected by their GDP per capita level, while other countries had fallen well below expected levels.

The analysis suggested that per capita spending on both health and education had a positive, and significant, direct impact on the various health and education indicators. Both absolute levels of spending and shares of public and private expenditure on health influence the MDG health indicators. That is in line with global analysis, indicating a positive correlation between health-care spending per capita and health outcomes.

However, the study also highlighted that the weak economic performance of ESCWA member countries since 1975 had significantly constrained progress in certain indicators of human development. In addition to a direct income effect on certain MDG indicators, poor growth had limited Government resources available for social programmes and policies.

The results of the ESCWA study indicated that a stable macroeconomic environment, sustained high rates of economic growth and increasing levels of per capita expenditure are crucial to substantially improve human development and to MDG attainment. Given a significant link between economic and social development, the study recommended that an integrated policy framework should be developed, where the macroeconomic environment was strengthened by improved fiscal management and strong public-sector institutions.

* ESCWA, *The Impact of Economic Variables on the Social Dimension of Development: Education and Health* (United Nations, New York, 2005), available at: <http://www.escwa.org.lb/information/publications/edit/upload/EAD-05-4.pdf>.

B. EXPANDING KNOWLEDGE, SKILLS AND CAPACITIES OF YOUNG MEN AND WOMEN

The second dimension of the proposed youth framework aims at increasing the knowledge, skills and capacities of young men and women. As illustrated in chapter III, educational standards in most Arab countries are relatively low. In addition, it is often claimed that educational curricula at all levels do not correspond to the needs and demands of the local labour markets. Life skills, namely, problem-solving, critical thinking, informed decision-making, conflict-resolution and avoidance of risky behaviour, are often not adequately developed among students. While most Arab countries have succeeded in substantially increasing enrolment and completion rates, more efforts are needed to raise the quality of education and to better prepare young people for work and active citizenship.

Recent research indicates that the failure of investment in education to have a strong impact on the quality of education, which stands in sharp contrast to the remarkable achievements in quantitative terms, can be explained by its almost exclusive emphasis on the “engineering” dimension of educational reform. Educational development has been seen as a predominantly technical matter that can be addressed by funding more schools, teachers and textbooks.⁹¹ At the same time, educational policies have tended to neglect the importance of improving the qualifications of teachers and of creating bet-

ter incentives for students, teachers and school administrators. One way to increase incentives for teachers and school administrators is to hold them more accountable for the achieved results. That may include providing modalities to monitor and evaluate their performance, and linking the performance to budgets and rewards. Student motivation and willingness to learn may benefit from increased participation in the designing of curricula, and from the use of modern teaching methods which promote interactive learning, teamwork and creative thinking. In developing curricula that respond to the changing needs of the domestic labour market, cooperation between educational institutions and private and public entities should be strengthened.

In general, education and training policies for young people should follow a more participatory approach in policy formulation and implementation than was the case in the past. Decisions on priorities should be a collaborative effort by policymakers and national and local government advisers working closely with youth councils, civil society partners, NGOs and, most importantly, the young themselves.

Promoting gender equality in education requires addressing the conditions that prevent girls from attending schools, colleges and universities. Evidence shows that scholarships, lower fees and subsidies in the form of food and cash transfers directed to girls, as in the case of Yemen, proved effective in reducing gender disparities in schooling. Additionally, reducing educational expenditures in rural areas, particularly targeting girls and young women, may

(91) Ahmed Galal, “The Paradox of Education and Unemployment in Egypt”, Egyptian Center for Economic Studies (March 2002), available at: <http://www.worldbank.org/wbi/mdf/mdf4/papers/galal.pdf>.

lead to significantly lower dropout rates from the educational system. As such, the provision of direct financial support to families most in need must be a key element of an educational framework in Arab countries that aims at improving access to all levels of education. Creating better opportunities for marginalized youth is also vital to promote social stability and nation-building.

In addition, educational policies and programmes in Arab countries should also aim to improve second chances for youth. Many young men and women in the Arab region drop out of school due to economic and social circumstances, namely, early marriage, pregnancy, conflict, or the need to provide financial support to their families. A wide range of programmes needs to be created to broaden the opportunities of those young people, as well as of those who never went to school in the first place. Since the individual circumstances and needs vary, a second chances framework should not only provide the possibility of re-entering the formal education system, but also include programmes that are tailored to specific groups of young people, including the disabled, illiterate, former drug-users and long-term unemployed. At the university level, the educational systems in most Arab countries tend to allow admission only to those who recently graduated from secondary school. In order to offer second chances, age restrictions for sitting school or college examinations or for enrolment in tertiary education may be waived. In addition, it is essential that public programmes promote a lifelong learning strategy, including both formal and non-formal learning and training activities. Non-formal learning

has typically been undervalued, while learning in such formal settings as schools, colleges and training centres is only one form of acquiring skills. Young people should at the same time be encouraged to take part in a wide range of activities outside the educational systems. The advantage of non-formal learning lies in its voluntary, and often self-organised nature, its flexibility, the possibilities of direct participation, the “right to make mistakes” and the closer link to interests and aspirations of young people. Non-formal activities also offer the chance to integrate marginalized young people.⁹²

Furthermore, expanding capacities for young people includes supporting their health and well-being. Among the most cost-effective investments a nation can make to improve health is introducing an effective school health programme. Most chronic or cardiovascular diseases, cancer, HIV/AIDS, sexually transmitted infections and depression, as well as violence and substance abuse, can be significantly reduced by raising awareness among the young regarding prevention methods and the benefits of alternative behaviour. It is also of particular importance to raise sexual awareness, especially among young women, in order to reduce the number of unintended pregnancies and related risks and diseases. In that context, easy access to health information is a necessity for young people. Accordingly, establishing toll-free, 24-hour health lines that allow young people to anonymously ask questions pertaining to their general or sexual health is of particular importance in the Arab region, where a culture that is reluctant to openly discuss such issues still prevails. In addition to educating and inform-

(92) Commission of the European Communities, “A New Impetus for European Youth”, European Commission White Paper (Brussels, 21 November 2001), available at: http://www.ec.europa.eu/youth/whitepaper/download/whitepaper_en.pdf.

ing young people, youth health may also be enhanced by diverting them away from unhealthy behaviour towards physical activity, especially sports. Financing of sports centres and recreational facilities by government entities is therefore strongly encouraged.

C. PROMOTING AND STRENGTHENING YOUTH PARTICIPATION IN DECISION-MAKING PROCESSES

An integrated youth policy framework for Arab countries, which is designated to ensure progress towards MDG attainment, should aim at promoting active citizenship. Young men and women are to be provided with the opportunity to voice opinions, to participate in public decision-making and to shape community priorities and service delivery. Chapter III has demonstrated that young Arab men and women face many obstacles when it comes to being heard and to actively participate in the existing decision-making systems. Often, they feel that their actual concerns and needs are not adequately taken into account in public policies. They do not have a chance to get involved in decisions which directly affect their lives. Eventually, that may result in discontent or indifference towards the political system as a whole. Increasing youth participation in civil society requires, first and foremost, efforts to strengthen dialogue and to foster youth engagement in social activities and NGOs. Student unions, youth councils and youth parliaments encourage young people to participate in the political process and to gain

leadership and decision-making experience. They offer young people a platform where their voices can be heard, and where they can bring in new ideas and concepts to improve the functioning of society. To realize the full potential of such institutions, it is crucial that government entities and municipalities engage in regular dialogue with young citizens and take into account their requests and proposals. Active participation in NGOs constitutes a way for young people to make a change in their communities, regions and countries. In many Arab countries, there seems to be insufficient cooperation between NGOs and Government agencies, which reduces the range and quality of community services. According to a report by the Consortium for Street Children (CSC), a group of British-based organizations, the situation of street children in Egypt could significantly improve with the full support and cooperation of local authorities, for example by establishing drop-in centres.

D. THE WAY FORWARD

Future progress towards MDG attainment in the Arab region depends to a large extent on the question whether Governments succeed in addressing more adequately the needs of young people, and in making better use of the potential the youth bulk offers. At the same time, the wide disparities in living conditions between Arab subregions and individual countries, which are highlighted throughout this Report, call for intensified regional and South-South cooperation activities. At the midpoint between the adoption of the Millennium Declaration and the target date for the attainment of the Goals, it is clear that Arab LDCs and the coun-

tries in conflict need to make much faster progress over the coming years in order to be able to reach the Goals and their targets by the year 2015. That requires not only intensified policy efforts in those countries themselves, but also more generous and effective financial assistance from developed countries and a further strengthening of regional cooperation among Arab countries. At the economic level, the low degree of regional integration represents a significant obstacle for higher and more equitable growth. In addition, intraregional migration contributes significantly to the brain drain several Maghreb and Mashreq countries and Arab LDCs have been experiencing. Finding sustainable solutions to such issues requires new dialogue and closer partnership. Regional cooper-

ation can also play a major role in accelerating progress towards social and environmental development goals. Sharing best practices and expertise in education and health among Arab countries can contribute to significant improvements in the respective indicators. With respect to the environmental dimension, sustainable development studies have frequently highlighted the need for more and better coordination of water and energy policies in Arab countries. In addition, common strategies are indispensable to address such transboundary environmental issues as pollution and desertification. Therefore, promoting cooperation and dialogue between Arab countries at the economic, political and social levels should figure high on the development agenda.

Millennium Development Goals (MDGs)	
GOALS AND TARGETS (from the Millennium Declaration)	INDICATORS FOR MONITORING PROGRESS
Goal 1: Eradicate extreme poverty and hunger	
TARGET 1: Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day	<ol style="list-style-type: none"> 1. Proportion of population below one dollar (PPP) a day 2. Poverty gap ratio [incidence x depth of poverty] 3. Share of poorest quintile in national consumption
TARGET 2: Halve, between 1990 and 2015, the proportion of people who suffer from hunger	<ol style="list-style-type: none"> 4. Prevalence of underweight children under-five years of age 5. Proportion of population below minimum level of dietary energy consumption
Goal 2: Achieve universal primary education	
TARGET 3: Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling	<ol style="list-style-type: none"> 6. Net enrolment ratio in primary education 7. Proportion of pupils starting grade 1 who reach grade 5 8. Literacy rate of 15-24-year-olds
Goal 3: Promote gender equality and empower women	
TARGET 4: Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015	<ol style="list-style-type: none"> 9. Ratios of girls to boys in primary, secondary and tertiary education 10. Ratio of literate women to men, 15-24 years old 11. Share of women in wage employment in the non-agricultural sector 12. Proportion of seats held by women in national parliament
Goal 4: Reduce child mortality	
TARGET 5: Reduce by two thirds, between 1990 and 2015, the under-five mortality rate	<ol style="list-style-type: none"> 13. Under-five mortality rate 14. Infant mortality rate 15. Proportion of 1-year-old children immunised against measles

Millennium Development Goals (MDGs)

GOALS AND TARGETS (from the Millennium Declaration)	INDICATORS FOR MONITORING PROGRESS
Goal 5: Improve maternal health	
TARGET 6: Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio	16. Maternal mortality ratio 17. Proportion of births attended by skilled health personnel
Goal 6: Combat HIV/AIDS, malaria and other diseases	
TARGET 7: Have halted by 2015 and begun to reverse the spread of HIV/AIDS	18. HIV prevalence among pregnant women aged 15-24 years 19. Condom use rate of the contraceptive prevalence rate 19a. Condom use at last high-risk sex 19b. Percentage of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS 19c. Contraceptive prevalence rate 20. Ratio of school attendance of orphans to school attendance of non-orphans aged 10-14 years
TARGET 8: Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases	21. Prevalence and death rates associated with malaria 22. Proportion of population in malaria-risk areas using effective malaria prevention and treatment measures 23. Prevalence and death rates associated with tuberculosis 24. Proportion of tuberculosis cases detected and cured under directly observed treatment short course DOTS (internationally recommended TB control strategy)
Goal 7: Ensure environmental sustainability	
TARGET 9: Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources	25. Proportion of land area covered by forest 26. Ratio of area protected to maintain biological diversity to surface area 27. Energy use (kg oil equivalent) per \$1 GDP (PPP) 28. Carbon dioxide emissions per capita and consumption of ozone-depleting CFCs (ODP tons) 29. Proportion of population using solid fuels

Millennium Development Goals (MDGs)

GOALS AND TARGETS (from the Millennium Declaration)	INDICATORS FOR MONITORING PROGRESS
<p>TARGET 10: Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation</p>	<p>30. Proportion of population with sustainable access to an improved water source, urban and rural</p> <p>31. Proportion of population with access to improved sanitation, urban and rural</p>
<p>TARGET 11: By 2020, to have achieved a significant improvement in the lives of at least 100 million slum-dwellers</p>	<p>32. Proportion of households with access to secure tenure</p>
<p>Goal 8: Develop a global partnership for development</p>	
<p>TARGET 12: Develop further an open, rule-based, predictable, non-discriminatory trading and financial system</p> <p>Includes a commitment to good governance, development and poverty reduction, both nationally and internationally</p> <p>TARGET 13: Address the special needs of the least developed countries</p> <p>Includes: tariff and quota free access for the least developed countries' exports; enhanced programme of debt relief for heavily indebted poor countries (HIPC) and cancellation of official bilateral debt; and more generous ODA for countries committed to poverty reduction</p> <p>TARGET 14: Address the special needs of landlocked developing countries and small island developing States (through the Programme of Action for the Sustainable Development of Small Island Developing States and the outcome of the twenty-second special session of the General Assembly)</p>	<p><i>Some of the indicators listed below are monitored separately for the least developed countries (LDCs), Africa, landlocked developing countries and small island developing States.</i></p> <p>Official development assistance (ODA)</p> <p>33. Net ODA, total and to the least developed countries, as percentage of OECD/DAC donors' gross national income</p> <p>34. Proportion of total bilateral, sector-allocable ODA of OECD/DAC donors to basic social services (basic education, primary health care, nutrition, safe water and sanitation)</p> <p>35. Proportion of bilateral official development assistance of OECD/DAC donors that is untied</p> <p>36. ODA received in landlocked developing countries as a proportion of their gross national incomes</p> <p>37. ODA received in small island developing States as a proportion of their gross national incomes</p> <p>Market access</p> <p>38. Proportion of total developed country imports (by value and excluding arms) from developing countries and least developed countries, admitted free of duty</p>

Millennium Development Goals (MDGs)

GOALS AND TARGETS (from the Millennium Declaration)	INDICATORS FOR MONITORING PROGRESS
<p>TARGET 15: Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term</p>	<p>39. Average tariffs imposed by developed countries on agricultural products and textiles and clothing from developing countries</p> <p>40. Agricultural support estimate for OECD countries as a percentage of their gross domestic product</p> <p>41. Proportion of ODA provided to help build trade capacity</p> <p><u>Debt sustainability</u></p> <p>42. Total number of countries that have reached their HIPC decision points and number that have reached their HIPC completion points (cumulative)</p> <p>43. Debt relief committed under HIPC Initiative</p> <p>44. Debt service as a percentage of exports of goods and services</p>
<p>TARGET 16: In cooperation with developing countries, develop and implement strategies for decent and productive work for youth</p>	<p>45. Unemployment rate of young people aged 15-24 years, each sex and total</p>
<p>TARGET 17: In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries</p>	<p>46. Proportion of population with access to affordable essential drugs on a sustainable basis</p>
<p>TARGET 18: In cooperation with the private sector, make available the benefits of new technologies, especially information and communications</p>	<p>47. Telephone lines and cellular subscribers per 100 population</p> <p>48. Personal computers in use per 100 population Internet users per 100 population</p>

The Millennium Development Goals and targets come from the Millennium Declaration, signed by 189 countries, including 147 heads of State and Government, in September 2000, available at: (<http://www.un.org/millennium/declaration/ares552e.htm>). The goals and targets are interrelated and should be seen as a whole. They represent a partnership between the developed countries and the developing countries “to create an environment, at the national and global levels alike, which is conducive to development and the elimination of poverty”.

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