

RELEVANCE & APPLICATION OF THE MILLENNIUM DEVELOPMENT GOALS (MDGs) IN THAILAND

A WORKSHOP CO-SPONSORED BY THE THAILAND
NATIONAL ECONOMIC & SOCIAL DEVELOPMENT BOARD
(NESDB), THE WORLD BANK AND THE UN RESIDENT
COORDINATOR OFFICE IN THAILAND TO FRAME THE ROLE
OF MDGs IN THAILAND AND TO DETERMINE NEXT STEPS.

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About 80 participants – including senior officials of key ministries of the Royal Thai Government and representatives of international and bilateral agencies – participated in this day-long workshop. GivingWorks Inc. was engaged by the World Bank to carry out the design, facilitation and the follow-up report on the workshop. For further information, please contact GivingWorks Inc., P.O. Box 8904, Falls Church, Virginia 22041, USA.

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I. Background & Objectives

On August 29, 2002, the National Economic & Social Development Board (NESDB) of Thailand, with the support of the World Bank, brought together representatives from numerous government agencies and several interested international partners, to launch an effort to incorporate the Millennium Development Goals (MDGs) into Thailand's monitoring and development work. The workshop set the stage for a yearlong project to prepare a thorough report on the MDGs for Thailand under the aegis of the United Nations Resident Coordinator – and with the active participation of The World Bank. Approximately 80 individuals attended the workshop representing various government ministries (including the ministries of Finance, Foreign Affairs, Health, Education and the National Statistics Organization) and a number of invited international and bilateral agencies. The Hon. Secretary General of the NESDB inaugurated the conference.

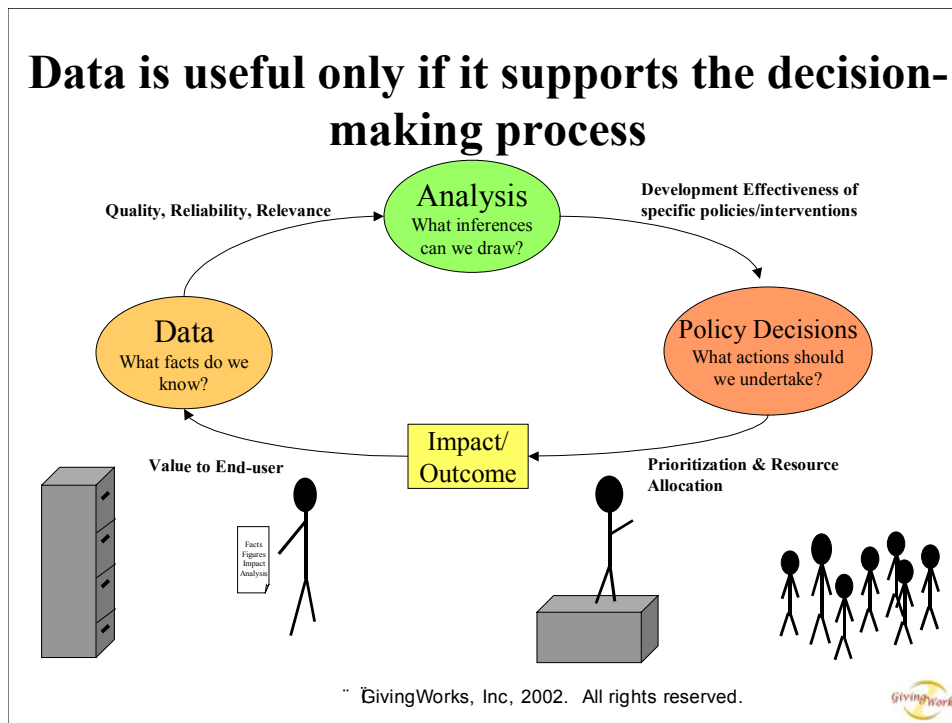
The objectives of the workshop were as follows:

- Familiarize participants with the MDGs – its evolution and its increased importance in the international context
- Present a new analytical and organizational framework developed by GivingWorks for analyzing and prioritizing gaps and challenges of achieving the MDGs at the country, regional, and sub-national (provincial) level.
- Reach a preliminary assessment of the status of MDGs in Thailand, and some challenges and issues that may be relevant to Thailand
- Undertake an initial review of the “official” MDG indicators to discuss their availability and reliability in Thailand – and their linkages to the 9th National Plan.
- Explore how the proposed MDG framework can be adapted to the needs, and achievements of Thailand as a middle income country
- Discuss how the process of working towards the MDGs can be used to further Thailand's overall development strategy as articulated in Thailand's 9th National Plan, including the ongoing decentralization processes.

II. Key Observations

- **The basic set of MDGs is still relevant to Thailand, but its application should be tailored to the conditions of Thailand.** On an aggregate basis, Thailand is likely to meet most of the MDGs – and indeed has already met several. However, national aggregate trends may conceal differences among various provinces and population groups – and may not fully take into account potential risks and vulnerabilities.
 - Application to Regions & Subpopulations
 - Under current momentum, not all regions or subpopulations are likely to meet the basic MDGs, even where the goals are likely to be met as a national aggregate.
 - Risks of Losing Ground
 - Internal and external shocks can lead to backsliding even on MDGs that have made good progress historically. The case of Argentina (where poverty rates have multiplied several fold recently) was brought forward to illustrate the dangers of complacency.
- **A proposed “MDG+” framework was presented as a mechanism for countries that have already met basic MDG targets to establish related benchmarks that extend beyond the minimum conditions of the MDGs.¹ Additional “MDG+” targets and indicators can be used to adapt the MDGs to the needs of Thailand as a middle income country. MDG Plus has three dimensions:**
 - Extend And/Or Accelerate Coverage
 - Improve Quality
 - Expand Scope
- **While considerable information and statistics were available on Thailand, the quality, consistency, and coverage of a number of these statistics are inadequate.** The proliferation of inconsistent metrics and measurement techniques makes it a challenge to undertake evidence-based policy-making, monitoring and evaluation. It is quite plausible that contradictory trends for the same indicator are frequently due to differences in measurement techniques and interpretation, and Thai authorities and the international agencies need to resolve these differences and stabilize the data standards.

¹ MDG+ is a term coined by GivingWorks to emphasize i) that the MDGs emanating from the UN Millennium Summit are foundational to development and therefore should be of interest to both Low and Middle Income countries; and ii) that MDGs should be considered as part of a *continuum* of development objectives in the dimensions specified in the MDGs. We have found this approach to resonate in a number of Middle Income Countries. (Nazir Ahmad, “MDG-Plus: Adapting Global Consensus to A Continuum of Progress: A Proposal” forthcoming, 2002)



- The MDGs present an opportunity for Thailand to take stock of its existing data sets and definition of indicators and to harmonize and rationalize the indicators used across the government and by other stakeholders.** A conceptual framework was presented on how to better integrate data and decision-making through increased emphasis on analysis and impact measurement. (See chart on next page) Revision of the data framework would need to accommodate both the technical quality and the decision relevance of the indicators. It was also acknowledged that the quality of the data was not entirely dependent on the technical aspects --- and that one of the best guarantees of sustained quality was the serious use of such data as an input to policy debates and decisions. This puts a particular responsibility on the part of technical departments who collect and analyze social indicators to make sure that the indicators are responsive and relevant to specific decision areas and decision makers.
- The harmonization of indicators will require participation, collaboration, and endorsement of relevant ministries and agencies.** By involving representatives of a number of line ministries as well as the National Statistics Office (NSO), the NESDB has already generated some interest and momentum for such collaboration. This is, however, only the beginning of intensive consultations among government agencies as well as other stakeholders to define the core set of indicators. The workshop was an opportunity to lightly touch on some questions of data availability and reliability – and to explore some potential MDG Plus indicators. The initial assessment by the groups at the workshops will

need to be tested, modified, and validated through further investigation and dialogue.

- **Decentralization may have potentially profound implications on achieving and maintaining the MDGs – and should be explicitly taken into account in the formulation of indicators.** Done properly, the information architecture implicit in the selection of core indicators can increase the policy and implementation coherence between central and provincial governments while extending provincial autonomy and resource shifts away from the central government.
- **In the absence of a national framework of indicators and data standards, there is a risk** that information will become fragmented, that different provinces will apply slightly different twists on their choice of indicators and the method of information collection. The cumulative effect of small differences can be quite large for aggregation and national assessments. NESDB, NSO and other competent agencies should consider establishing guidelines and best practices for provincial authorities – based on consultations and piloting at the provincial level.
- In addition to stabilizing the MDG and MDG+ indicators for Thailand, clear distinctions should be drawn between final and intermediate indicators, with the accountability for collection, analysis, and application for each indicator clearly understood.

III. Small Group Work Sessions and Results

In the afternoon, small working groups held parallel sessions to launch the process of consultation and consensus building. It should be emphasized that this was simply an exploratory session – and that definitive policy recommendations would not be expected. The groups were organized as follows, and followed a common set of initial questions:

- **Group A:**
 - Extreme Poverty (MDG 1a)
 - Environmental Sustainability (MDG 7)
- **Group B:**
 - Hunger/Nutrition (MDG 1b)
 - Child & Maternal Health (MDG 4 & 5)
 - Communicable Diseases (MDG 7)
- **Group C:**
 - Primary Education (MDG 2)
 - Gender Equality (MDG 3)

Exercise 1: Likelihood of Reaching MDGs

	National Aggregate	Specific Regions/Sub-populations
Group A		
Extreme Poverty	Likely	Likely
Environmental Sustainability	Likely	Likely
Group B		
Hunger/Nutrition	Likely	Unlikely (Illegal immigrants; hill tribes)
Child & Maternal Health	Likely	Unlikely (Hill tribes; adolescent mothers)
Communicable Diseases	Likely	Unlikely (Fishermen; commercial sex workers; youth and adolescents; hill tribes; construction workers. Also truckers?)
Group C		
Primary Education	Likely	Likely
Gender Equality	Likely	Likely

Summary & Initial Discussion:

- All groups thought that Thailand was likely to meet the basic MDGs nationally by 2015 without any significant change in policy or effort level.
- The World Bank staff was less hopeful that all of these goals would be met, in particular in the area of sustainable environment.
- Even when there was a general agreement that MDGs would be more or less achieved at a national level, there were questions about certain MDGs being met for certain specific and vulnerable groups. Groups A and C thought that Thailand

was likely to reach their goals for all populations, but Group B concluded that while Thailand would meet the hunger, child and maternal health, and communicable diseases targets nationally, it would not do so for specific regions and sub-populations. *Consultant recommends that a further attempt be made to identify vulnerable populations and localities for education, environment, and extreme poverty.*

- While the likely assessment may be valid, there are typically risks associated with meeting the MDGs, both nationally and within sub-populations. These were not specifically discussed, and could influence the likelihood of

Exercise 2: Evaluating existing MDG indicators

	Available?	Reliable?	Important to the 9 th plan?
Group A			
Extreme Poverty			
Proportion of population below \$1 (PPP) per day	Yes	Yes	Yes
Poverty gap ratio [incidence x depth of poverty]	Yes	Yes	Yes
Share of poorest quintile in national consumption	Yes	Yes	Yes
Environmental Sustainability			
Proportion of land area covered by forest	Yes	Yes	Yes
Ratio of area protected to maintain biological diversity to surface area	?	?	Yes
Energy use (kg oil equivalent) per \$1 GDP (PPP)	Yes	Yes	Yes
Carbon dioxide emissions (per capita) and consumption of ozone-depleting CFCs (ODP tons)	Yes	Yes	Yes
Proportion of population using solid fuels	Yes	Yes	Yes
Proportion of population with sustainable access to an improved water source, urban and rural	?	?	Yes
Proportion of households with access to secure tenure (owned or rented)	Yes	Yes	Yes
Group B			
Hunger/Nutrition			
Prevalence of underweight children under five years of age	Yes	Yes	Yes
Proportion of population below minimum level of dietary energy consumption	Yes-partial	?	X
Child & Maternal Health			
Under-five mortality rate	Yes	?	Yes
Infant mortality rate	Yes	?	Yes
Proportion of 1 year-old children immunized against measles	Yes	Yes	Yes
Maternal mortality ratio	Yes	?	Yes
Proportion of births attended by skilled health personnel	Yes	Yes	Yes

	Available?	Reliable?	Important to the 9 th plan?
Communicable Diseases			
HIV prevalence among 15-24 year old pregnant women	Yes	Yes	Yes
Condom use rate of the contraceptive prevalence rate	Yes	Yes	Yes
Number of children orphaned by HIV/AIDS	Yes	Yes	X
Prevalence and death rates associated with malaria	Yes	Yes	Yes
Proportion of population in malaria risk areas using effective malaria prevention and treatment measures	X	--	X
Prevalence and death rates associated with tuberculosis	Yes	X	Yes
Proportion of tuberculosis cases detected and cured under directly observed treatment short course (DOTS)	Yes	X	Yes
Group C			
Primary Education			
Net enrolment ratio in primary education	Yes	Yes	Yes
Proportion of pupils starting grade 1 who reach grade 6 (modified from '5' for Thailand)	Yes	Yes	Yes
Literacy rate of 15-24 year-olds	Yes	Yes	Yes
Gender Equality			
Ratios of girls to boys in primary, secondary and tertiary education	Yes	Yes	Yes
Ratio of literate females to males of 15-24 year-olds	Yes	Yes	Yes
Share of women in wage employment in the non-agricultural sector	Yes	Yes	Yes
Proportion of seats held by women in national parliament	Yes	Yes	Yes

Summary & Discussion:

- 28 of 31 basic MDG indicators are known to be available for Thailand
- About a fourth of the existing indicators (6 of 28) are of poor or unknown quality
- Although there were a couple of questions about MDG indicator definitions, nearly all basic MDG indicators (28 of 31) were thought to be important to the 9th plan.
- *Note: NOT all observers agreed on the quality ratings of the indicators; some indicators marked as reliable were thought to be of questionable quality by others.*
- Consultant recommends that an immediate inventory be taken of the various indicators being used by different ministries/agencies, their definitions, and their availability. This should be followed by a *technical* assessment of quality and reliability, perhaps by engaging an academic center.

Exercise 3: MDG + Outcome Indicators

	Coverage	Quality	Scope	Outcome Indicator
Group A				
Extreme Poverty				
			<input type="checkbox"/>	Lowest quintile of those below poverty line
	<input type="checkbox"/>			Meet extreme poverty targets regionally
		<input type="checkbox"/>		Vulnerable groups
Environmental Sustainability				
		<input type="checkbox"/>		Natural growth forest vs. regrowth
		<input type="checkbox"/>		Water quality
			<input type="checkbox"/>	Access to improved water –urban and rural
	<input type="checkbox"/>			CO2, CFC. <i>Decreasing rates of increase</i> for CO2 instead of absolute levels?
Hunger/Nutrition				
		<input type="checkbox"/>		Weight for height; weight for age
		<input type="checkbox"/>		Over-nutrition
		<input type="checkbox"/>		<i>Micronutrient provision</i> , including Vitamin A, Iodine, Iron, Calcium levels
			<input type="checkbox"/>	Seniority issues; menopause
Child & Maternal Health				
		<input type="checkbox"/>		Growth development
		<input type="checkbox"/>		Intelligence Quotient, Emotional Quotient
			<input type="checkbox"/>	Abortion
		<input type="checkbox"/>		Adolescent pregnancy
			<input type="checkbox"/>	Role of fathers
		<input type="checkbox"/>		Breastfeeding
		<input type="checkbox"/>		Screening test
Communicable Diseases				
			<input type="checkbox"/>	Dengue Fever
			<input type="checkbox"/>	Leptospirosis
			<input type="checkbox"/>	Hepatitis
			<input type="checkbox"/>	HIV prevalence among fertile groups
			<input type="checkbox"/>	Sexually Transmitted Infections (STIs)
*Non-Communicable Diseases				
			<input type="checkbox"/>	Violence/Injury
			<input type="checkbox"/>	Drug addiction

	Coverage	Quality	Scope	Outcome Indicator
Group C				
Primary Education				
			<input type="checkbox"/>	Secondary enrolment rate (100% by 2015)
		<input type="checkbox"/>		National test scores
	<input type="checkbox"/>		<input type="checkbox"/>	Dropout ratio (0% by 2015)
		<input type="checkbox"/>	<input type="checkbox"/>	Average education level of population (currently at 7 years)
Gender Equality				
			<input type="checkbox"/>	Proportion of women in high ranking positions (C9-C11)
	<input type="checkbox"/>			Number of laws that are not consistent with gender equality clauses of constitution
	<input type="checkbox"/>		<input type="checkbox"/>	Proportion of women in local government and national government
			<input type="checkbox"/>	Proportion of women in national committees

** Additional category added under “MDG+”*

Summary & Discussion:

- Groups were able to propose a number of indicators that would increase the quality and scope of existing set of MDGs for Thailand.
- Some indicators areas require more specification to become measurable. This can perhaps be done under a broader effort on MDG+.
- Expanding the current set of primary education indicators to include primary completion could subsume the need for net enrolment, survival to grade 6, and the dropout rate.
- It was surprising to consultant that the proposed education indicators did not include any related to curriculum, and specific learning outcomes (other than general test scores). The inadequacy of teacher skills, however, was an area that was highlighted for attention. It is our overall perspective on “MDG Plus” that careful specification of the learning outcome targets can be quite valuable, especially if primary and secondary education is to provide the requisite foundation for Thailand’s participation in the knowledge-based economy envisioned in the 9th Plan.

Exercise 4: Bottlenecks to Achieving MDGs: Summary of Initial Group Discussions

	Infrastructure	Service Delivery	Household Behavior	Policies & Governance	Political Will, Climate for Change	Data, M&E	Knowledge Gaps	Internat'l Partner Coordination	Finance Gaps
Extreme Poverty*	Important	Critical	Critical	Critical	Important	Critical	Critical	Not a Constraint	Important
Regions	Not a Constraint	Not a Constraint	Not a Constraint	Not a Constraint	Not a Constraint	Not a Constraint	Not a Constraint	Not a Constraint	Not a Constraint
[Thai]	Critical	Critical	Critical	Critical	Critical	Critical	Critical	Not a Constraint	Critical
Sustainable Env't	Not a Constraint	Important	Critical	Critical	Critical	Critical	Critical	Not a Constraint	Not a Constraint
Hunger/Nutrition	Not a Constraint	Not a Constraint	Not a Constraint	Not a Constraint	Not a Constraint	Important	Not a Constraint	Critical	Not a Constraint
Child & Maternal	Not a Constraint	Not a Constraint	Not a Constraint	Not a Constraint	Not a Constraint	Not a Constraint	Not a Constraint	Critical	Not a Constraint
Communicable	Not a Constraint	Not a Constraint	Not a Constraint	Not a Constraint	Not a Constraint	Not a Constraint	Not a Constraint	Important	Important
Primary Education	Critical	Critical	Not a Constraint	Not a Constraint	Important	Not a Constraint	Not a Constraint	Not a Constraint	Critical
Gender Equality	Important	Important	Critical	Important	Critical	Critical	Critical	Not a Constraint	Important

*Lowest 20% of the poor

Summary & Discussion:

- The level of infrastructure for education varies across regions
- Service delivery bottlenecks for education include a low teacher to student ratio and inadequate teacher skills
- **There are a number of apparent inconsistencies in the group findings that will need to be sorted out through further discussion and clarification:**
 - In extreme poverty, the group expected the goal to be met both nationally and across regions/subpopulations, and yet, the above chart a large number of critical bottlenecks.
 - In a related point, is it reasonable to define the very poor as the lowest 1/5 among those already below the poverty line? In most countries, that would be too severe a standard. For example, consumption-based definition of the “ultra-poor” that is frequently used is as follows: “Households that are below 80% of minimum consumption needs and spend 80% or more of their incremental income on food and shelter.”
 - In terms of sustainable environment, the expectation that the MDG will be met under the momentum path is not consistent with the extent of critical bottlenecks that appear under sustainable environment.
 - On the other hand, while participants were not sanguine of meeting the nutrition, maternal and child health, and communicable disease targets for certain segments of the population, more work is required to identify specific bottlenecks in achieving the goals for those particular disadvantaged and vulnerable groups.