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Progress on the health MDGs in sub-Saharan Africa and Southern Asia: data*

Goals and Targets	*Indicators*
Goal 4: Reduce child mortality	
Target 5: Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate	**1.** Under-five mortality rate fell from 185 to 172 per 1000 live births in sub-Saharan Africa and from 126 to 90 in Southern Asia between 1990 and 2003. **2.** The percent of children (12-23 months old) immunized against measles increased from 56% to 61% in sub-Saharan Africa, and from 58% to 69% in Southern Asia.
Goal 5: Improve maternal health	
Target 6: Reduce by three-quarters, between 1990 and 2015, the maternal mortality ratio	**3.** The maternal mortality ratio (MMR) in sub-Saharan Africa is still the highest of all regions (920 per 100,000 live births compared with 450 per 100,000 on average for all developing countries in 2000). These figures are not much lower than the 1006 per 100 000 in 1995. Southern Asia has much lower rates than the average for developing countries, where MMR fell from 276 in 1995 to 210 in 2000.[w1] This is still a lot higher than the average MMR for the developed world which was 14 per 100,000 live births in 2000. **4.** Proportion of births attended by skilled health personnel was stagnant in sub-Saharan Africa between 1990 and 2000 (40%). In contrast, a substantial increase was observed in Southern Asia, from 34% in 1990 to 64% in 2003.
Goal 6: Combat HIV/AIDS, malaria and other diseases	
Target 7: Have halted by 2015 and begun to reverse the spread of HIV/AIDS	**5.** HIV prevalence among pregnant women aged 15-24 years attending antenatal clinics fell between 2000 and 2003 in 5 sub-Saharan Africa countries, and increased in 5 others. Overall there is no convincing evidence it has fallen. No information is available for Southern Asia.[w2] **6.** Condom or other contraceptive use among currently married women aged 15-49 increased from 3% to 11% in sub-Saharan Africa between 1990 to 2004. In South Asia rates increased slightly, from 11% in 1991 to 13% in 2001.[w2] **7.** Ratio of school attendance of orphans to school attendance of non-orphans aged 10-14 years: no information.
Target 8: Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases	**8.** Death rates in sub-Saharan Africa were higher in the 1990s than in the 1980s, and have probably also risen since 1998. Point estimates indicate around 950,000 deaths in 1998 and almost 1.3 million in 2004, but uncertainty intervals are relatively wide.[1] Malaria is not a significant cause of mortality in Southern Asia. **9.** Proportion of population in malaria-risk areas using effective malaria prevention and treatment measures: no information. **10.** Prevalence and death rates associated with tuberculosis: the death rate decreased from 47 per 100,000 in 1990 to 352 in 2003 in areas of South East Asia with high adult mortality. In the parts of sub-Saharan Africa with very high adult mortality, it increased from 45 to 96/100,000. [w3]

Source (unless indicated otherwise): United Nations; The Millennium Development Goals Report, 2005[9]

* Only indicators for which data are available are reported. Regional averages are simple averages across reporting countries, rather than weighted by population.

w1 Hill K, AbouZahr C, Wardlaw T. Estimates of maternal mortality for 1995. *Bull World Health Organ* 2001;79:182-93.

w2 United Nations; Millennium Development Goal Indicators Database, 2005, URL: http://unstats.un.org/unsd/mi/mi_goals.asp

w3 World Health Organization. Global tuberculosis control - surveillance, planning, financing WHO Report 2005 (WHO/HTM/TB/2005.349). World Health Organization, Geneva, Switzerland, 2005.