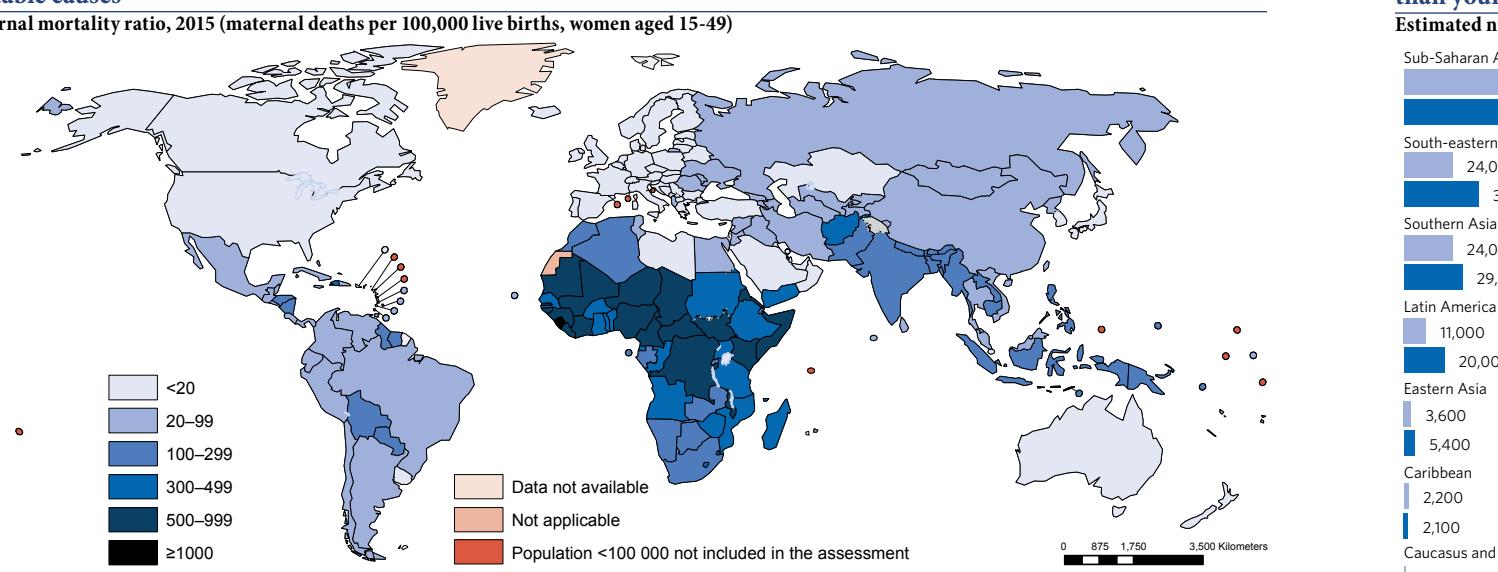


GOAL 5 | Improve maternal health

Maternal mortality has declined by nearly 44 per cent since 1990; but most maternal deaths are still attributed to preventable causes



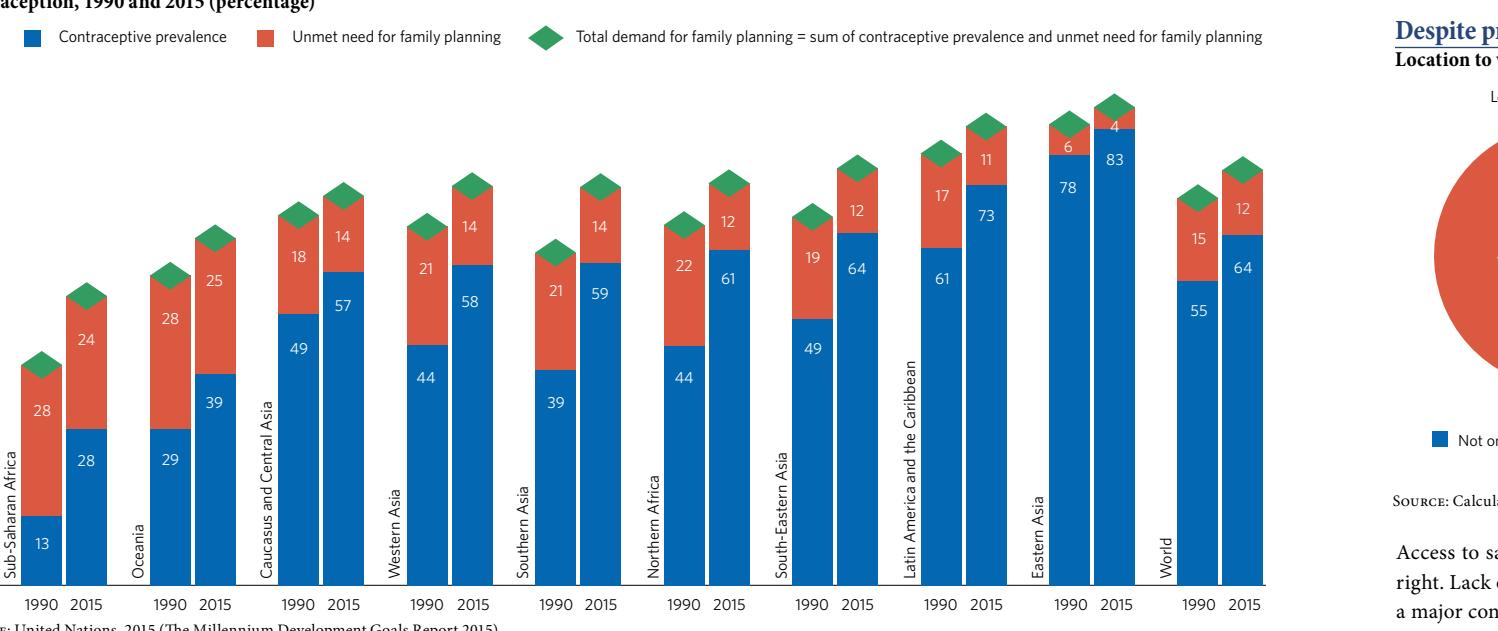
The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

SOURCE: WHO, 2015 (Trends in Maternal Mortality: 1990 to 2015. Estimates by WHO, UNICEF, UNFPA, World Bank Group and the United Nations Population Division).

Globally, there were an estimated 303,000 maternal deaths in 2015. The maternal mortality ratio dropped by nearly 44 per cent from the 1990 level, but well below the MDG target to reduce the maternal mortality ratio by three quarters by 2015. High levels of maternal mortality persist in sub-Saharan Africa and Southern Asia, which together accounted for 88 per cent of the total maternal deaths in 2015. Most of these deaths are preventable. The causes of maternal mortality vary by region but are

Unmet need for family planning has declined worldwide, but remains unacceptably high in most regions

Proportion of women aged 15-49 worldwide, married or in union, who have an unmet need for family planning or who are using any method of contraception, 1990 and 2015 (percentage)



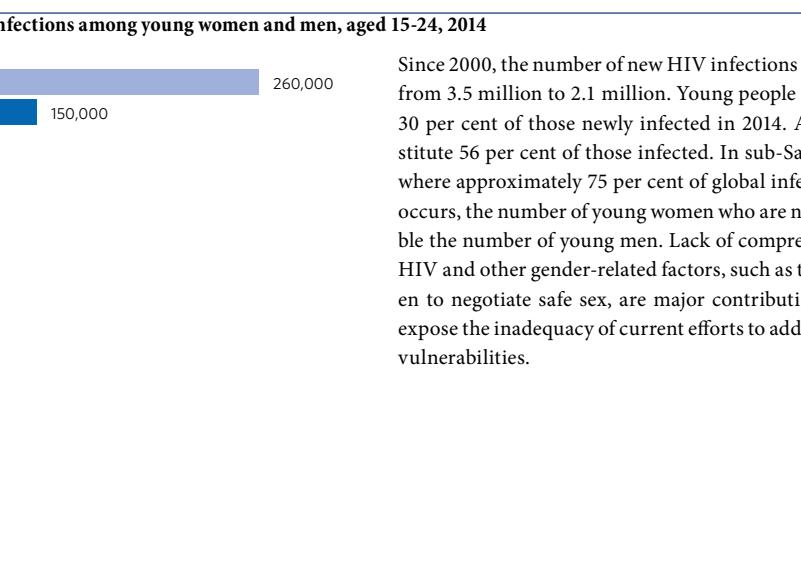
SOURCE: United Nations, 2015 (The Millennium Development Goals Report 2015).

Between 1990 and 2015 the unmet need for family planning has declined worldwide. However, there are more than 225 million women (married or in union) with unmet need for contraception who are not using mod-

ern contraception. In 2015, 12 per cent of married or in-union women of reproductive age worldwide want to delay or avoid pregnancy but are not using any method of contraception.

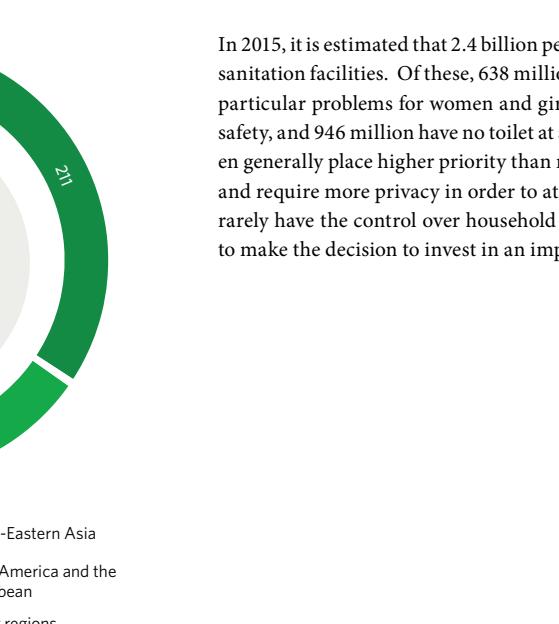
GOAL 6 | Combat HIV/AIDS, malaria and other diseases

The number of new HIV infections among young people has declined, but young women continue to be more vulnerable than young men



Since 2000, the number of new HIV infections has declined by 40 per cent, from 3.5 million to 2.1 million. Young people aged 15-24 years constitute 30 per cent of those newly infected in 2014. Among youth, women constitute 56 per cent of those infected. In sub-Saharan Africa in particular, where approximately 75 per cent of global infection among young people occurs, the number of young women who are newly infected is nearly double the number of young men. Lack of comprehensive knowledge around HIV and other gender-related factors, such as the inability of young women to negotiate safe sex, are major contributing factors and continue to expose the inadequacy of current efforts to address young women's unique vulnerabilities.

Population using shared sanitation facilities of an otherwise improved type in 2015, by region (millions)



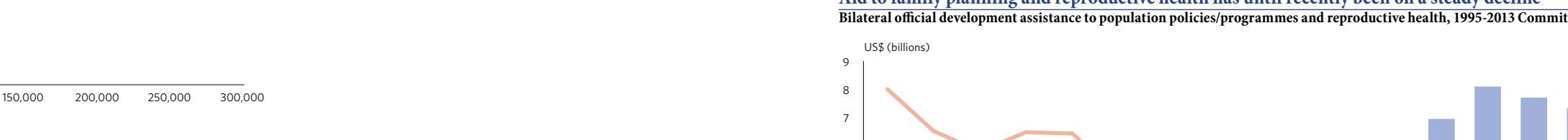
In 2015, it is estimated that 2.4 billion people worldwide still lack improved sanitation facilities. Of these, 638 million use shared facilities, which pose particular problems for women and girls due to their lack of privacy and safety, and 946 million have no toilet at all and defecate in the open. Women generally place higher priority than men on having a toilet in the home and require more privacy in order to attend to their needs. However, they rarely have the control over household resources that would enable them to make the decision to invest in an improved sanitation facility.

Millennium Development Goals Gender Chart 2015



GOAL 8 | Develop a global partnership for development

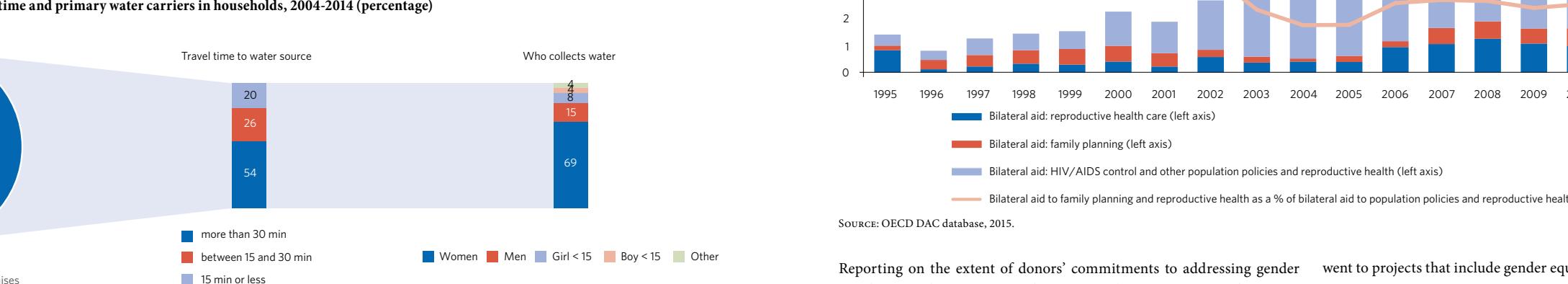
Aid to family planning and reproductive health has until recently been on a steady decline



GOAL 7 | Ensure environmental sustainability

Despite progress, women and girls still face constraints in access to improved drinking water and improved sanitation

Location to water source, travel time and primary water carriers in households, 2004-2014 (percentage)



the remaining households, 54 per cent spend up to 15 minutes collecting water, while 26 per cent spend between 15 and 30 minutes and the remaining 20 per cent take more than 30 minutes to go to the water source, collect water and come back. In those households where water has to be fetched, women and girls are the primary water carriers for their families, doing the fetching in 77 per cent or more of households.

Access to safe drinking water and adequate sanitation is a basic human right. Lack of access to water, sanitation and hygiene facilities constitutes a major constraint for women and girls. Globally 663 million people still lack improved drinking water sources; eight out of ten live in rural areas. In households where water is not readily available, women and girls are usually in charge of water collection. In 21 countries with data, only 46 per cent of households have access to water sources on premises. Out of

Reporting on the extent of donors' commitments to addressing gender equality in aid programming has improved in recent years. The OECD Development Assistance Committee (DAC) gender equality policy marker measures aid activities that target gender equality as a "principal" or "significant" policy objective. In recent years, aid focused on gender equality has risen on average by 4 per cent annually, compared to overall aid which grew at a mere 1 per cent annually. However, despite this growth, the share of aid focused exclusively on promoting gender equality remains grossly inadequate. In 2012-2013, only US\$ 4 billion or 5 per cent of total screened aid was spent on projects exclusively targeted at achieving gender equality and women empowerment. Instead, the bulk of aid for gender equality

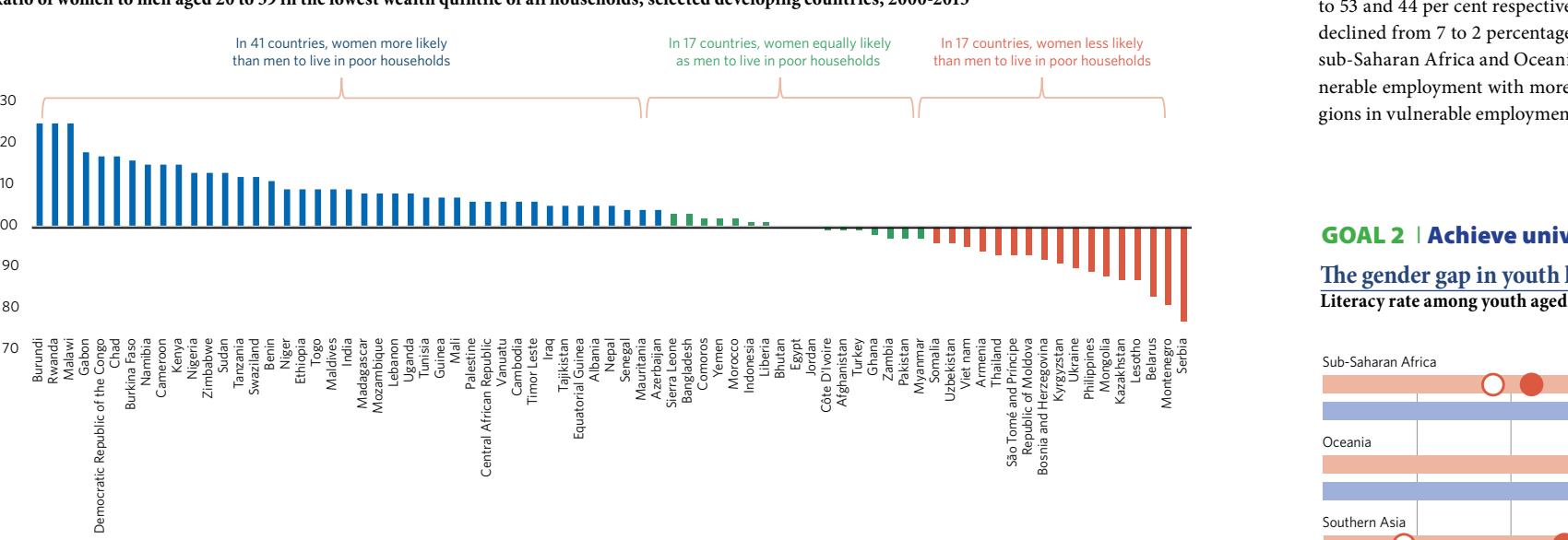
went to projects that include gender equality as a secondary objective.

The biggest gap in funding is in the area of women's sexual and reproductive health and rights. Despite important commitments in this area, as spelled out in MDG5 to improve maternal health, aid to population policies/programmes and reproductive health has plateaued since 2008. Also noteworthy, until recently, aid to family planning and reproductive health as a percentage of overall aid to the sector has been on a steady decline, despite continued high levels of unmet need for family planning, and the double dividend of improving maternal and child health that such services can provide.

GOAL 1 | Eradicate extreme poverty and hunger

Women are more likely than men to live in the poorest households in 41 out of 75 countries

Ratio of women to men aged 20 to 59 in the lowest wealth quintile of all households, selected developing countries, 2000-2013



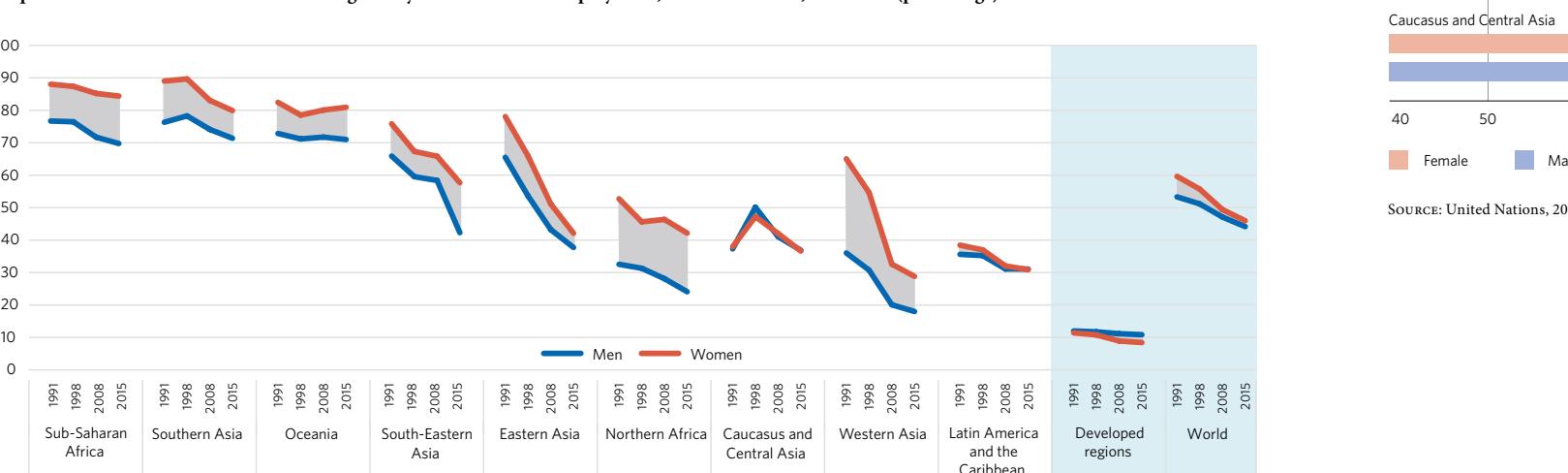
SOURCE: UN Women calculations using the latest available data from Demographic and Health Surveys (DHS) and the Multiple Indicator Cluster Survey (MICS).

NOTE: This indicator is defined by the ratio of female to male aged 20-59 in all households to take into account the fact that women may be overrepresented in the entire population. Values above 103 indicate that women are overrepresented in the poorest quintile. Values between 97 and 103 indicate parity. "Poor households" refers to the bottom 20 per cent of households, using the wealth asset index as a proxy measure in DHS and MICS.

Data gaps limit our understanding of women's experience of poverty. Data on poverty and vulnerability to poverty by sex are not available in many countries, making the assessment of global and regional trends very difficult. Despite such limitations, research shows that women face a heightened vulnerability to poverty. A recent study using the wealth asset index as a proxy for household poverty found that women aged 20-59 are more likely than men of the same age to live in poverty in most countries with data. Further analysis indicates that in countries where women are over-

Women are still more likely than men to be in vulnerable employment, despite a decreasing trend of people in vulnerable employment

Proportion of own account and contributing family workers in total employment, women and men, 1991-2015 (percentage)



SOURCE: ILO, 2015 (Key Indicators of the Labour Market Database).

Globally, the proportion of women in vulnerable employment – defined as the share of own-account and contributing family workers in total employment – declined from 60 per cent in 1991 to 46 per cent in 2015, compared to 53 and 44 per cent respectively for men. As a result, the gender gap has declined from 7 to 2 percentage points during this period. Southern Asia, sub-Saharan Africa and Oceania have the highest shares of women in vulnerable employment with more than 4 in 5 employed women in those regions in vulnerable employment.

The challenges posed by vulnerable employment are multiple. A recent ILO report indicates that this group constitutes the overwhelming majority of the world's 300 million workers who live in extreme poverty. These jobs generally provide limited income security, limited job security, poor working conditions and little or no social protection. For women, who constitute close to two-thirds of contributing family workers, the challenge is even greater. Because this work is unpaid, it increases not only their vulnerability to poverty but can also contribute to a vicious cycle of low resources leading to lower bargaining power in the household.

GOAL 2 | Achieve universal primary education

The gender gap in youth literacy has fallen since 1990, and a greater proportion of youth can read and write

Literacy rate among youth aged 15 to 24 by sex and region, 1990, 2000 and 2015 (percentage)



Since the 1990s, global progress in youth and adult literacy has been slow but steady, and the gap between women and men has narrowed. The literacy rate among youth aged 15 to 24 increased globally from 83 per cent in 1990 to 89 per cent in 2010. This improvement was largely a result of increasing attendance in primary and secondary school among younger generations. According to projections based on historical trends, 93 per cent of male youths and 90 per cent of female youths are expected to be able to read and write by the end of 2015.

Northern Africa and Southern Asia have shown the greatest improvement in youth literacy, especially among young women. Over the past two decades, sub-Saharan Africa has also experienced a large increase in youth literacy. However, compared to other regions, a smaller proportion of its young women and men (70 and 78 per cent respectively) are expected to be able to read and write by the end of 2015.

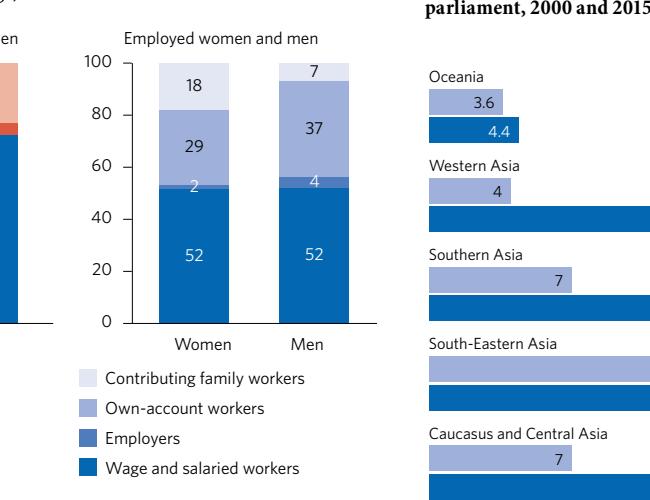
Equal access to decent paid work, with earnings that support an adequate standard of living and that are compatible with women's and men's shared responsibility for unpaid care work, is essential for gender equality and women's empowerment. However, globally, less than half of working age women are employed compared to almost three quarters of men. In developing regions, the majority of women remain concentrated in low-skilled, low-paid jobs, often in the urban, informal and agricultural sectors that do not provide an adequate route out of poverty.

Globally women earn 24 per cent less than men and perform two and a half times more unpaid care and domestic work than men. This work, which is essential for the development of children and for nurturing healthy and productive individuals, may prevent women from fully engaging in employment, and too often goes unrecognized and unsupported through adequate policies. Women are more likely than men to work as contributing family workers, who have little or no financial security or social benefits. In 2015, the proportion of employed women working as contributing family workers is 18 per cent, compared to 7 per cent of employed men. Women are less likely to work as own-account workers. These differences in occupations between women and men are some of the root causes of the gender differences in pay.

GOAL 3 | Promote gender equality and empower women

Globally women earn 24 per cent less than men, and gender gaps in pay persist in all regions

Distribution of working-age women and men (aged 15 and above) by labour force participation and employed women and men by status in employment, 2015 (percentage)



Note: Data for 2015 are projections.
Percentages in charts may not always add to 100 because of rounding.

Northern Africa, 2015 (The Millennium Development Goals Report 2015).

Sub-Saharan Africa, 2015 (The Millennium Development Goals Report 2015).

Latin America and the Caribbean, 2015 (The Millennium Development Goals Report 2015).

Eastern Asia, 2015 (The Millennium Development Goals Report 2015).

Developed regions, 2015 (The Millennium Development Goals Report 2015).

Caucasus and Central Asia, 2015 (The Millennium Development Goals Report 2015).

World, 2015 (The Millennium Development Goals Report 2015).

SOURCE: Calculated using data from Demographic and Health Survey STATA Compiler. Data are based on simple averages for 60 countries (2014).

Globally, the rate of reducing child mortality has more than tripled since 1990. According to the latest estimates, the global under-five mortality rate has declined by more than half, from 90 to 43 deaths per 1,000 live births between 1990 and 2015. Despite the significant decline in child mortality in most regions, current trends are not sufficient to meet the child mortality target and will take about 10 more years to meet the global target of reducing the under-five mortality rate.

Child health and maternal health are inextricably linked. When women are educated and have access to comprehensive sexual and reproductive health services, both before and during delivery, children are far more likely to survive. Mother's age at birth is also a powerful determinant of child survival. Childbearing at a young age, often the result of an early marriage, and a short age gap constitute a significant risk for the young woman and her children. Expanding access to sexual and reproductive health services and rights, particularly for poor women and those living in underserved locations such as rural areas, is important to improve the lives of women and their children.

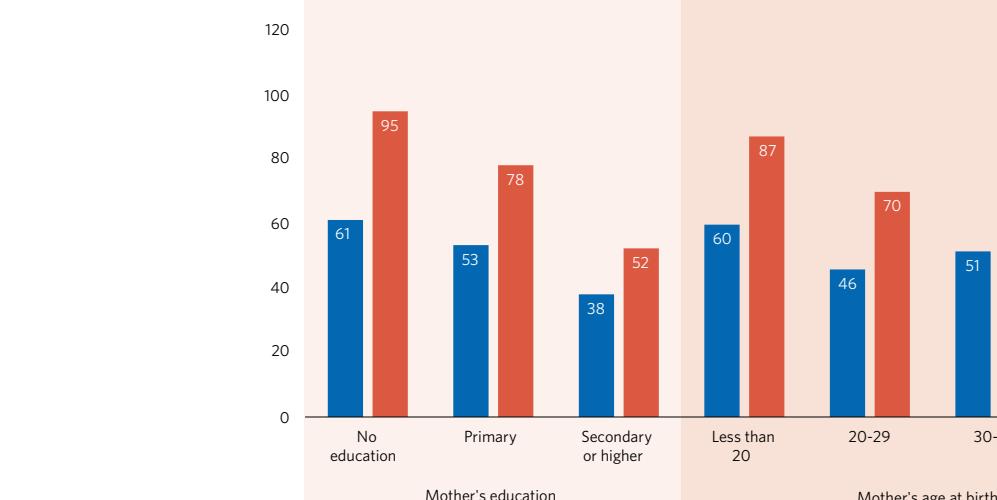
Child health and maternal health are inextricably linked. When women are educated and have access to comprehensive sexual and reproductive

GOAL 4 | Reduce child mortality

Child survival is inextricably linked with gender equality and women's empowerment

Infant and child mortality rates by mother's characteristics and access to health services, 2004-2014 (deaths per 1,000 live births)

1 in 5 parliamentarians worldwide is a woman
Proportion of seats held by women in single or lower houses of national parliament, 2000 and 2015 (percentage)



Mother's education
Mother's age at birth
Access to antenatal and delivery care

SOURCE: Calculated using data from Demographic and Health Survey STATA Compiler. Data are based on simple averages for 60 countries (2014).

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Since the MDGs were adopted, progress in women's representation in national parliaments has been significant. Globally, the proportion of women in parliaments increased from 14 per cent in 2000 to 22 per cent in 2015. In Northern Africa, in particular, progress has been impressive, with women's representation rising more than six-fold from 4 per cent to 25 per cent. Latin America and the Caribbean also registered impressive gains. By 2015, it became the region with the highest share of women in parliaments (27 per cent).

However, this also means that no region has more than one third of seats in parliament held by women. Similarly, gender differences are also persistent in other areas of decision-making not monitored by the MDGs: as of August 2015, there were 11 women Heads of State and 13 women Heads of Government (combined total of 19 women, because some hold both titles), and, as of January 2015, only 18 per cent of government ministers were women.

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