

# Millennium Development Goals in Europe

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## INTRODUCTION AND BACKGROUND

Although the term 'Europe' is regularly taken to include only the 28 countries of the European Union (often expanded to include Norway and Switzerland), the European region of WHO comprises 53 countries, home to nearly 900 million people (table 1). The countries vary in size, languages, political systems, economic situations and cultural backgrounds. WHO information on the region is included in reports on the UNECE region (United Nations Economic Commission for Europe) or incorporated in the group of high-income countries.<sup>1 2</sup>

Western European countries and early members of the European Union have had the advantage of relatively long political stability, established health systems and well educated more affluent populations. They have been at the forefront in innovative research and development in all fields, especially in health topics, leading to many improvements for their own populations. Though many aspire to the standards of living, welfare and health of the Nordic countries there is, and always has been, inequity in health and wealth between and within European countries. The affluence and accessibility of many of these countries has led to mass influxes of migrants and asylum seekers, including children. However, many host countries are unable to offer the care and support needed. Due to recent economic crises many health gains have been lost. Some WHO European Member States now need WHO's assistance themselves for health systems reforms.

## OVERVIEW MILLENNIUM DEVELOPMENT GOALS (MDGS)

### MDGs strongly affecting children

#### MDG 1: Eradicate extreme poverty and hunger

Almost 27 million children in Europe are at risk of poverty or social exclusion (see online supplementary table). Even in European Union member states, children are more vulnerable to poverty than the rest of the population with 19% of children living under the threat of poverty. The financial and economic crisis that started in 2008 has severely affected children and their families by hitting employment and welfare systems. In the central and eastern areas of the region much has changed since the collapse of the old Soviet Union and many of these countries have not caught up easily. A small minority became very wealthy quickly but many people are worse off than before. The old regime allowed full employment, a minimum income with child cash benefits, free health care and education for many families.<sup>1</sup> However, since 1999 nearly 90 million of the 480 million people in eastern Europe and central Asia (about 18% of the population) have moved out of poverty and vulnerability.<sup>3</sup>

In the report 'Child well-being in rich countries' (2013), the relative child poverty rate (percentage of children living below the nation's poverty line) is lowest (4%) in Finland.<sup>4</sup> The child poverty gap (the distance between the poverty line and the median incomes for those below the line) is smallest in Luxembourg and Hungary (just over 10%) but it has widened to more than 30% in several countries, including Bulgaria, Ireland and Italy. In Spain 20% or more children fall below the relative poverty line and on average they fall almost 40% below that line. In Austria and The Netherlands 6–8% fall below the relative poverty line and on average 16% below. Among the countries in this report, children's material wellbeing is rated as highest in The Netherlands and lowest in Romania.

Poverty means not only that children's basic needs, such as food, clothes and adequate housing, might not be met. It is linked to social exclusion and lack of access to services, including health care, child care and high-quality education. These effects can last a lifetime and be felt in future generations.

#### MDG 4: Reduce child mortality

In addition to infant mortality, the under-five mortality rates are dropping across the European region (from 26 to 10 per 1000 live births between 1990 and 2012). However, the decline is less steep than in 1975–1990, with marked variations between countries, for example, under-five mortality rates of 1 in The Netherlands, 4 in the UK and 26 per 1000 live births in Uzbekistan.<sup>2</sup> The high average immunisation rates achieved in many countries are falling in some, exacerbated by activities of anti-immunisation lobby groups and fears of complications (often based on inaccurate scientific reports).<sup>2</sup>

#### MDG 5: Improve maternal health

Child health is closely related to, and to a large extent dependant on, maternal health. Over the whole region the maternal mortality rate has dropped from 42 to 17 deaths per 100 000 live births between 1990 and 2013. The risk of dying from causes related to pregnancy and childbirth differs greatly across the region, depending on where mothers live, with maternal mortality rates of 4 in Finland and 75 (per 100 000 live births) in Kyrgyzstan.<sup>2</sup>

#### MDG 6: Combat HIV/AIDS, malaria and other diseases (including tuberculosis)

Since 2010 paediatric HIV/AIDS has decreased by 10% in the European region, mainly due to a decrease in western countries, even though 75% of infected children were in the east. Mother to child transmission accounted for just 1% of new cases of paediatric HIV/AIDS reported in 2012. Almost



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**Table 1** Countries in the WHO European region

Albania	Germany	Poland
Andorra	Greece	Portugal
Armenia	Hungary	Republic of Moldova
Austria	Iceland	Romania
Azerbaijan	Ireland	Russian Federation
Belarus	Israel	San Marino
Belgium	Italy	Serbia
Bosnia and Herzegovina	Kazakhstan	Slovakia
Bulgaria	Kyrgyzstan	Slovenia
Croatia	Latvia	Spain
Cyprus	Lithuania	Sweden
Czech Republic	Luxembourg	Switzerland
Denmark	Malta	Tajikistan
Estonia	Monaco	The former Yugoslav Republic of Macedonia
Finland	Montenegro	Turkey
France	Netherlands	Turkmenistan
Georgia	Norway	Ukraine
		UK
		Uzbekistan

70% of all pregnant women were tested and knew their HIV status in 2011, over 95% of HIV-infected pregnant women had access to antiretroviral therapy and more than 95% of infants of women who were HIV-positive were tested within 2 months of birth. However there are still pregnant women who inject drugs, are sex workers, migrants, prisoners, or have partners at high risk of HIV infection who do not have access to antenatal care or present too late for consultation or treatment.<sup>5</sup>

Tuberculosis (TB) is still an important problem in the European region. During 2006–2010 TB notification in children (0–14 years) decreased by 10% from 7.0 to 6.3 cases per 100 000 population but in 20 of the region's countries children represented more than 5% of all TB cases. Poor adherence to control practices has created high levels of multidrug-resistant TB (MDR-TB) and extensively drug-resistant TB. Of the 27 countries globally responsible for most MDR-TB cases, 15 are in the European region.<sup>3</sup>

## MDG 2: Achieve universal primary education

Almost all children in the European region finish primary education and are literate. However, just being able to read and write is not enough in today's world. Populations living in poverty and ethnic, linguistic and religious minorities, and children with disabilities have fewer educational opportunities and will be unable to move out of poverty.<sup>2</sup>

## CONCLUSION

Every year 10.7 million babies are born in the WHO European region. However, these children do not all have the same chances. The social, educational and economic backgrounds of earlier generations all influence how they progress through life. A child born today in a high-income European country can expect to live, on average, 19 years longer than a child born in a low-income country.<sup>3</sup> Paediatricians are aware of the social, economic and cultural factors affecting the health of children. However, problems seen in hospital-based curative care reflect only the tip of the iceberg and the best hospital care in the world cannot make these problems go away for ever. However, all paediatricians can play an important role in improving the physical and mental health of children and can attempt to influence political decision-making on these questions.

**Competing interests** None.

**Provenance and peer review** Commissioned; internally peer reviewed.

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# Supplementary Table

Millennium Development Goals, targets, indicators and data on progress in the European Region of the World Health Organisation

Goal	Indicators for monitoring	Previous situation	Latest situation
<b>MDGs ON HEALTH</b>			
<b>Goal 4: Reduce Child Mortality</b>			
Target 5. Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate. <i>Note:</i> <i>Of 53 countries in European region Goal 4:</i> <i>17 Achieved</i> <i>8 On track</i> <i>28 Halfway or more</i> <i>0 Less than halfway</i>	13. Under-five mortality rate	32 per 1000 live births in 1990 *	12 per 1000 live births in 2012*
	14. Infant mortality rate	26 per 1000 live births in 1990*	10 per 1000 in 2012*
	15. Proportion of 1 year-old children immunized against measles	83% among 1 year olds in 1990*	94% in 2012*.  27,030 cases reported in 2012*
<b>Goal 5 – Improve maternal health</b>			
Target 6. Reduce by three-quarters, between 1990 and 2015, the maternal mortality	16. Maternal mortality ratio	42 deaths per 100 000 live births in 1990 *	17 deaths per 100 000 live births in 2013 *

ratio			
	17. Proportion of births attended by skilled health personnel		2006-2013 = 98% *
Target to achieve, by 2015, universal access to reproductive health	Unmet need for family planning		Unmet need for family planning 2006-2012 = 10% *  Contraceptive prevalence 2006-2012= 69% *
<b>Goal 6 – Combat HIV/AIDS, malaria and other diseases [including TB]</b>			
Target 7. Have halted by 2015 and begun to reverse the spread of HIV/AIDS  <i>Note: Highly active antiretroviral therapy (HAART) coverage for the region rose between 2004 and December 2007, when it was estimated as “very good” (&gt; 75%) in 38 of the 53 Member States</i>		HIV/AIDS Mortality per 100,000 population 5 in 2001 *  HIV/AIDS Prevalence per 100,000 population 170 in 2001*	HIV/AIDS Mortality per 100,000 population 10 in 2012 *  HIV/AIDS Prevalence per 100,000 population 244 in 2012 *  Antiretroviral therapy coverage among people with advanced HIV. infection 38% in 2012*
	18. HIV prevalence among pregnant women aged 15-24 years		Pregnant women with HIV receiving antiretroviral to prevent MTCT in 2012 >95%*
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	Malaria not a great problem in region	
	23. Prevalence and death	2000 Prevalence TB per 100,000	2012 Prevalence TB per 100,000

	rates associated with tuberculosis	population= 129*  Mortality TB among HIV negative people per 100,000 population 8.1 in 2000 *	population= 56*  Mortality TB among HIV negative people per 100,000 population 3.9 in 2012*
	24. Proportion of tuberculosis cases detected and cured under DOTS (internationally recommended TB control strategy)	Case detection rate for all forms of TB 59% in 2000*  Treatment success rate for smear positive TB 75% in 2000*	Case detection rate for all forms of TB 79% in 2012*  Treatment success rate for smear positive TB 66% in 2010*
<b>MDGs on KEY DETERMINANTS OF HEALTH</b>			
<b>Goal 1 – Eradicate extreme poverty and hunger</b>			
Target 1. Halve, between 1990 and 2015, the proportion of people whose income is less than \$1 a day  <i>Note: UN recommends that indicators should be based on national poverty lines, also needs to be higher in region because of costs due to harsh climate</i>	1. Proportion of population below \$1 (1993 PPP) per day	Not noted for European region*  Population at risk of poverty in the EU and high income European countries 2000 Switzerland 9.1% UK 19% **  Population below national poverty line 2000 Former /Yugoslav Republic of Macedonia 22.3%, 2000 Republic of Moldova 67.8%**	Population at risk of poverty in the EU and high income European countries 2008 Switzerland 8.8% UK 19%**  Population below national poverty line 2008 Former /Yugoslav Republic of Macedonia 28.7%** 2005 Republic of Moldova = 29%**
Target 2. Halve, between 1990 and 2015, the proportion of	4. Prevalence of underweight children under five years of	% children< 5 years underweight 1990-1995 = 9.8 *	% children< 5 years underweight 2006-2012= 1.5% *

people who suffer from hunger	age  <i>Note:: Children &lt; 5 yrs. <b>overweight</b> 2006-2012= 12.1%</i>		
Target– to achieve full and productive employment and decent work for all, including women and young people		Unemployment 2000 Iceland total =1.9%, women=2.5% ** 2000 Bulgaria total =16.4%, women =15.9%**	Unemployment 2008 Iceland total= 3.0 %, women =2.6** 2008 Bulgaria total= 5.7 %, women =5.8%**
<b>Goal 2: Achieve Universal Primary Education</b>			
Target 3. Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling	6. Net enrolment ratio in primary education		Net primary school enrolment rate 2006-2012 Males 98% females 97%*
	7. Proportion of pupils starting grade 1 who reach grade 5		Survival to last grade and cohort completion rate 2004 Central and Eastern Europe almost 100% ***
	8. Literacy rate of 15-24 year-olds		2006-2012, 99% *
<b>MDG 3 – Promote gender equality and empower women</b>			
Target 4. Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later	9. Ratio of girls to boys in primary, secondary and tertiary education 10. Ratio of literate women to men, 15-24 years old		Gender parity in education has practically been achieved in the United Nations Economic commission for Europe (UNECE) region. In most countries there are more women than

than 2015			men in tertiary education**
	11. Share of women in wage employment in the non-agricultural sector	Unemployment Armenia 1995: women 34.4%, men 38%**  Unemployment Iceland 1995: women= 4.9%, men 5.5%**	Unemployment Armenia 2008: women 35%, men 22.2%**  Unemployment Iceland 2008: women 2.6%, men 5.5%**
		Gender pay gap in gross monthly earnings % 2000 Norway, 16.5 %** 1995 Netherlands, 45%**	Gender pay gap in gross monthly earnings % 2008 Norway, 15.0 %** 2005 Netherlands, 41.4 % **
	12. Proportion of seats held by women in national parliament	Europe- OSCE member countries Both houses combined, in 2000 Including Nordic countries = 16%^ Excluding Nordic countries = 14.1% ^	Europe- OSCE member countries Both houses combined, in 2014 Including Nordic countries = 24.8%^ Excluding Nordic countries = 23.5% ^
<b>MDG 7 – Ensure environmental sustainability</b>			
Target 9. Integrate the principles of sustainable development into country policies and programs and reverse the loss of environmental resources	I25. Proportion of land area covered by forest  <i>Comment: Forests increasing in most countries</i>	Proportion of land covered by forest 1990 Sweden, 66.5% ** 1990 Malta, 1.1% **	Proportion of land covered by forest 2005 Sweden, 66.9%** 2005 Malta 1.1% **
	28. Carbon dioxide emissions per capita and consumption of ozone-depleting CFCs (ODP tons)  <i>Note: Global greenhouse gases reduced in developed countries from almost 1500 thousands of metric tons in</i>	Emission of carbon dioxide, kg per\$1 GDP 1995 Republic of Moldova, 1.65** 1995 UK, 0.38**	Emission of carbon dioxide, kg per\$1 GDP 2007 Republic of Moldova, 0.51** 1995 UK, 0.26**

	<i>1986 to almost elimination in 2012</i>		
Target 10. Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation  <i>Note: Still problems in some poor and rural populations.</i>	30. Proportion of population with sustainable access to an improved water source, urban and rural. 31. Proportion of population with access to improved sanitation, urban and rural	Developed regions 98% in 1990 *	Developed regions 99% in 2012 *
Target 11. Have achieved by 2020 a significant improvement in the lives of at least 100 million slum dwellers	32. Proportion of households with access to secure tenure	<i>Note: Roma, the very poor, asylum seekers and some other groups still have problems with housing ^^</i>	
<b>Goal 8: Develop a Global Partnership for Development</b>			
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	33. Net Official development assistance (ODA), total and to LDCs, as percentage of OECD/Development Assistance Committee (DAC) donors' gross national income (GNI)		Of the 28 countries (plus EU organisation) that are donors in the Development Assistance Committee (DAC) all but 6 are in the European region. Developed countries net official development assistance (ODA) to developing countries in 2013 rose by 6.1% compared with 2012. A total of 17 out of 28 countries increased their allocation and 11 decreased. The UK, Germany and France are among the largest donors by volume. Denmark , Luxembourg, Norway and Sweden exceeded UN ODA



			target of 0.7% of gross national income. This is all despite the financial problems austerity in many of these countries.^^^
Target 16. In cooperation with developing countries, develop and implement strategies for decent and productive work for youth	45. Unemployment rate of young people aged 15-24 years, each sex and total	<p>2008 Developed economies and European Union unemployment rates Total=43.3%# Male=45.0%# Female =41.6%#</p> <p>2008 Central and South-Eastern Europe (non-EU) and CIS unemployment rates Total=34.7%# Male=41.0%# Female=28.3%#</p>	<p>2012 Developed economies and European Union unemployment rates Total=38.7%# Male 39.8%# Female 37.7%#</p> <p>2012 Central and South-Eastern Europe (non-EU) and CIS unemployment rates Total=34.5%# Male=41.0%# Female=27.8%#</p>
<p>Target 17. In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries</p> <p><i>Note: Many drugs are developed and produced in the European region. There can be a conflict of interest the cooperation of pharmaceutical companies to provide access to affordable essential drugs in developing countries</i></p>	46. Proportion of population with access to affordable essential drugs on a sustainable basis (WHO)	no figures for European region	
Target 18. In cooperation with the private sector, make available the benefits of new technologies, especially	47. Telephone lines and cellular subscribers per 100 population		<p>Fixed telephone lines per 100 inhabitants stagnating</p> <p>2012 Mobile cellular subscriptions per</p>

information and communications technologies	<i>Note: Many people in the region have several telephone subscriptions</i>		100 inhabitants= 129 (per 100 population) *
	48. Personal computers in use per 100 population and Internet users per 100 population		2012 Internet users per 100 inhabitants = 84% in developed countries *

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