## UNITED NATIONS



**Economic and Social Commission for Western Asia (ESCWA)** 

**Statistics Division** 

# THE ARAB GENDER ISSUES AND INDICATORS "G IS IN" METADATA HANDBOOK



United Nations
Economic and Social Commission for Western Asia

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### Introduction

The Arab Gender Issues and Indicators (GIsIn) Framework is a three dimensional framework links the Millennium Declaration to the Arab Priority Issues of the Beijing Platform for Action (BPfA), through corresponding region-specific, gender-sensitive indicators and sex-disaggregated data to measure and monitor progress achieved towards gender equality and the empowerment of women.

The GIsIn Framework was developed by The Economic and Social Commission for Western Asia (ESCWA), and was first published in the ESCWA booklet Gender in the Millennium Development Goals: Information Guide for Arab MDG Reports, in collaboration with United Nations agencies, national statistical offices, national machineries for women, and civil society in the Arab region, under the umbrella Gender Statistics Programme in the Arab Region led by ESCWA. The Framework responds to the increasing demand for the production of quality gender statistic in the Arab region and to ESCWA Resolution 286 (XXV) Gender statistics for equality and empowerment of women which requests the secretariat to work with member countries in developing a detailed gender database to act as a gender mainstreaming observatory in all sectors. The resolution recognized the need to address the lack of timely, reliable, sex-disaggregated data and statistics, and called upon member countries to develop a mechanism for the collection, dissemination and analysis of gender-sensitive indicators and sexdisaggregated data for the formulation of gender-related and gendersensitive policies and programmes.

This e-Handbook on GIsIn, a tool for data producers, is the outcome of consultations since the <u>second Inter-Agency Expert Group Meeting on Gender Statistics in the Arab Countries (Beirut, 12-14 October 2009)</u>. The e-Handbook aims to build on synergies from ongoing work in the area of gender statistics by forging a common methodological knowledge among stakeholders in order to facilitate the production of comparable statistics for evidence-based policymaking and planning.

The e-Handbook is a compilation of metadata for each indicator in the GIsIn framework, which includes definition, rationale, concept and sources, as well as method of calculation. The purpose of the e-Handbook is to provide a guiding tool for data producers to compile data for GIsIn Framework, which will allow for quantitative and qualitative measurement of gender equality and inequality at the international level. It uses an agreed common suite of

gender indicators with unified language, concepts and objectives as a means to encourage collaborative monitoring, reporting and learning through the sharing of best practice, which will encourage the use of indicators at the national, regional and international level for measuring accountability and effectiveness.

The Framework and the Handbook were revised in 2014 t as an outcome of the Workshop on Developing Gender Statistics in the Arab Countries, which was held in Istanbul during the period from 1 to 3 April 2014. The Framework was later endorsed by the 11<sup>th</sup> Statistical Committee in 2015. The revised framework meets current priority issues in harmony with international frameworks such as the UNSD minimum set of gender indicators and the EDGE initiative.

The e-copy of the Handbook can be accessed on the following link: <a href="http://www.escwa.un.org/sites/GISINHANDBOOK/index.asp">http://www.escwa.un.org/sites/GISINHANDBOOK/index.asp</a>

### I. Importance of a Framework

A framework is the first strategic step in developing gender statistics, and an important tool for monitoring and reporting for evidence based policymaking at the national, regional and international levels. It provides a tool for the following:

- Development and dissemination of comparable gender statistics in different policy areas
- Development of methodologies and indicators for evaluating policies and practices
- Monitoring and reporting on trends to implement evidence based policies
- Publication of a periodic report including progress towards targets and the evaluation of the results achieved.
- Strategy for further developing and collecting gender statistics.

A framework will serve as an official source of information on gender indicators, transparent with metadata to meet the needs of users from national and international communities. In addition, the framework along with its metadata will facilitate the use of a common language with regard to measurement of priority issues at the sub national, national, regional and international levels.

### II. The Arab Gender Statistics Framework

The Arab GIsIn Framework is three а dimensional framework links the eiaht Millennium Development Goals with the 12 areas of Beijing Platform through quantitative and qualitative indicators, based on regional priority issues.

The Arab GIsIn framework takes note of regional priority issues. Therefore, domains such as "Women in armed conflict", "Women and the environment", and "Women and the media", not included in the UNSD framework, are available in this framwork.

Moreover, the Arab GIsIn Framework includes

indictors on poverty and hunger, not in the UNSD framework, as main priority issues such as: Proportion of employed women and men living below

### Box 1: 12 areas of Beijing Platform of Action

- 1. Women and poverty, and 6. Women and economy
- 2. Education and training of women
- 3. Women and Health
- 4. VAW
- 5. Women and armed conflict
- 6. Women and the economy
- 7. Women in power and decision-making
- 8. Institutional mechanisms for the advancement of women
- 9. Human rights of women
- 10. Women and the media
- 11. Women and the environment
- 12. The girl-child

national poverty line per day (working poor); Prevalence of underweight children under-five years of age; and Women and men below minimum level of dietary energy consumption.

The revised 2014 Arab GIsIn Framework takes note of the new global frameworks (UNSD, EDGE), in addition to the MDG framework, and Beijing Platform of Action. It also takes into account regional issues and presents a comprehensive framework that meets the monitoring and reporting requirements at all levels. The revised 2014 Framework includes two additional Goals of extracted indicators from the original framework to highlight the Human Rights in Goal 9 (harmful practices, Violence against women and women in conflict), and compile all the qualitative policy indicators into Goal 10.

The framework includes 103 indicators (88 quantitative indicators and 15 qualitative indicators). There are 50 indicators available in the majority of countries (Tier I); 16 indicators to be made available by the majority of countries in the near future (Tier II), and 22 indicators to be collected with the use of new tools.

The below table provides a summary of the distribution of indicators over the different policy domains.

Poverty	4	MDG 1
Economy	17	MDG 1
Child labour	1	MDG 1
Hunger	2	MDG 1
Property rights	2	MDG 1
Education	11	MDG 2
Literacy	1	MDG 2
Training	3	MDG 2
Public life	4	MDG 3
Decision making	2	MDG 3
Empowerment	3	MDG 3
Child health	4	MDG 4
Reproductive health	10	MDG 5
General health	6	MDG 6
HIV/AIDS	2	MDG 6
Environment	2	MDG 7
Information technology	3	MDG 8
Media	2	MDG 8
Harmful practices	2	MDG 9
VAW	5	MDG 9
Conflict and War	2	MDG 9
Quantitative	88	
indicators		
Qualitative	15	MDG10
indicators		
Total Indicators	103	

Please note that the indicator number highlighted in green has no pdf metadata; methodology is being tested.

# The Arab GIsIn Framework

**Goal 1** Eradicate Extreme Poverty and Hunger - *Economy, poverty and hunger* 

### **Poverty**

1.1.1	Share of women and men (headed households) with mean income below national poverty line (or the poverty headcount ratio), in percentage.	Strategic Objective A.1 Review, adopt and maintain macroeconomic policies and development strategies that address the needs and
1.1.2	Poverty gap ratio for women and men (headed households), in percentage.	efforts of women in poverty
1.1.3	Share of women and men (headed households) in the poorest quintile in national consumption/ income, in percentage.	Para. 58 (i) "Formulate and implement, when necessary, specific economic, social, agricultural and related policies in support of female-headed households"
1.1.4	Gender parity index for households living below national poverty line, and recipients of poverty alleviation grants	Strategic Objective A.1 Review, adopt and maintain macroeconomic policies and development strategies that address the needs and efforts of women in poverty
		Para. 58 (g)  "Provide adequate safety nets and strengthen State-based and community based support systems, as an integral part of social policy, in order to enable women living in poverty to withstand adverse economic environments and preserve their livelihood, assets and revenues in times of crisis"

### **Economy**

1.2.1	Average number of hours spent on unpaid domestic work (domestic and caring for children and elderly) by sex	Strategic objective C.2. Strengthen preventive programmes that promote women's health Strategic objective F.1. Promote women's economic rights and independence, including access to employment, appropriate working conditions and
1.2.2	Average time ( number of hours) spent on paid and unpaid (domestic work and caring for children and elderly) combined (total work burden)	control over economic resources  Para. 107 (h) Develop policies that reduce the disproportionate and increasing burden on women who have multiple roles within the family and the community by providing them with adequate support and programmes from health and social services; Para. 165 (g) Seek to develop a more comprehensive knowledge of work and employment through, inter alia, efforts to measure and better understand the type, extent and distribution of unremunerated work, particularly work in caring for dependants and unremunerated work done for family farms or businesses, and encourage the sharing and dissemination of information on studies and experience in this field, including the development of methods for assessing its value in quantitative terms, for possible reflection in accounts that may be produced separately from, but consistent with, core national accounts;  Strategic objective H.3. Generate and disseminate gender disaggregateddata and information for planning and evaluation Para 206 (F)Develop a more comprehensive

		knowledge of all forms of work and employment by: (i) Improving data collection on the unremunerated work which is already included in the United Nations System of National Accounts, such as in agriculture, particularly subsistence agriculture, and other types of non-market production activities;(ii) Improving measurements that at present underestimate women's unemployment and underemployment in the labour market;(iii) Developing methods, in the appropriate forums, for assessing the value, in quantitative terms, of unremunerated work that is outside national accounts, such as caring for dependants and preparing food, for possible reflection in satellite or other official accounts that may be produced separately from but are consistent with core national accounts, with a view to recognizing the economic contribution of women and making visible the unequal distribution of remunerated and unremunerated work between women and men;
1.2.3	Proportion of employed women and men living below national poverty line per day (working poor), in percentage.	Strategic Objective A.1 Review, adopt and maintain macroeconomic policies and development strategies that address the needs and efforts of women in poverty Para. 58 (h)  "Generate economic policies that have a positive impact on the employment and income of women workers in both the formal and informal sectors and adopt specific measures to address women's unemployment, in particular their long-term
1.2.4	Informal employment as a percentage of total non-agricultural employment	unemployment"  Strategic objective F.1. Promote women's economic
1.2.5	Unemployment rate for persons aged (a) 15+ years and (b) 15-24 years, by economic activity, in percentage	rights and independence, including access to employment, appropriate working conditions and control over economic resources  Strategic objective F.2. Facilitate women's equal access to resources, employment, markets and trade Para. 166 (a) Promote and strengthen microenterprises, new small businesses, cooperative enterprises, expanded markets and other employmen opportunities and, where appropriate, facilitate the transition from the informal to the formal sector, especially in rural areas;
1.2.6	Labor force participation rate for persons aged (a) 15+ years and (b) 15-24 years, by economic activity rate, in percentage	Strategic objective F.1. Promote women's economic rights and independence, including access to employment, appropriate working conditions and
1.2.7	Employment-to-population ratio of women and men, in percentage	control over economic resources  Strategic objective F.2. Facilitate women's equal
1.2.8	Share of women and men in: (a) Waged and salaried workers, (b) Self-employed workers, (c) Employers, (d) Vulnerable employment [Own-account workers + Contributing family workers], in percentage	access to resources, employment, markets and trade Para. 166 (a) Promote and strengthen microenterprises, new small businesses, cooperative enterprises, expanded markets and other employment opportunities and, where appropriate, facilitate the transition from the informal to the formal sector, especially in rural areas;

1.2.9	Share of women working in agriculture, by status in employment, includes unpaid family workers, subsistence farmers and own-account worker, in percentage	Strategic Objective A.1 Review, adopt and maintain macroeconomic policies and development strategies that address the needs and efforts of women in poverty Para. 58 (n) "Formulate and implement policies and programmes that enhance the access of women agricultural and fisheries producers (including subsistence farmers and producers, especially in rural areas) to financial, technical, extension and marketing services; provide access to and control of land, appropriate infrastructure and technology in order to increase women's incomes and promote household food security, especially in rural areas and, where appropriate, encourage the development of producerowned, market-based cooperatives"
1.2.10	Share of women and men in employment by sector (a) agriculture, (b) industry, (c) services, in percentage  Proportion of Scientific and Technical and Vocational	Strategic Objective F.5  Eliminate occupational segregation and all forms of employment discrimination  Para. 178(g)  "Eliminate occupational segregation, especially by promoting the equal participation of women in highly skilled jobs and senior management positions, and through other measures, such as counseling and placement, that stimulate their on-the-job career
	Education and Training (TVET) programme graduates, girls and boys, with jobs, in percentage	development and upward mobility in the labour market, and by stimulating the diversification of occupational choices by both women and men; encourage women to take up non-traditional jobs, especially in science and technology, and encourage men to seek employment in the social sector"
1.2.12	Share of firms with female ownership, in percentage	Strategic objective A.2 Revise laws and administrative practices to ensure women's equal rights and access to economic resources Para. 61 (b) "Undertake legislative and administrative reforms to give women full and equal access to economic resources, including the right to inheritance and to ownership of land and other property, credit, natural
1.2.13	Proportion of population with access to credit, in percentage	resources and appropriate technologies"  Strategic objective F.1.  "Promote women's economic rights and independence, including access to employment, appropriate working conditions and control over economic resources"  Para. 165 (e)  Undertake legislation and administrative reforms to give women equal rights with men to economic resources, including access to ownership and control over land and other forms of property, credit, inheritance, natural resources and appropriate new technology  Para. 165 (j)  Revise and implement national policies that support the traditional savings, credit and lending mechanisms for women  Strategic objective F.2. Facilitate women's equal access to resources, employment, markets and trade

1.2.14	Gender pay (wage) gap (by occupation, level of education, etc)	Strategic Objective F.1  Promote women's economic rights and independence, including access to employment, appropriate working conditions and control over economic resources  Para. 165 (a)  "Enact and enforce legislation to guarantee the rights of women and men to equal pay for equal work or work of equal value "  Strategic Objective F.5  Eliminate occupational segregation and all forms of employment discrimination  Para. 178 (k)  "Increase efforts to close the gap between women's and men's pay, take steps to implement the principle of equal remuneration for equal work of equal value by strengthening legislation, including compliance with international labour laws and standards, and encourage job evaluation schemes with gender-neutral criteria"
1.2.15	Proportion of employed working part-time, by sex	Strategic Objective F.5 Eliminate occupational segregation and all forms of employment discrimination Para. 178 (d) "Eliminate discriminatory practices by employers on the basis of women's reproductive roles and functions,
1.2.16	Employment rate of persons aged 25-49 with (a) a child under age 3 living in a household and (b) with no children living in the household	including refusal of employment and dismissal of women due to pregnancy and breast-feeding responsibilities"  Strategic objective F.6.
1.2.17	Proportion of children under age 3 in formal care by mother's employment status	Promote harmonization of work and family responsibilities for women and men

### Child Labour

1.3.1	Proportion of children, girls and boys (5 to 14 years old) employed in productive activities, in percentage.	Strategic Objective L.6 Eliminate the economic exploitation of child labour and protect young girls at work
		Strategic objective F.5 Para. 178 (n) Ensure that strategies to eliminate child labor also address the excessive demands made on some girls for unpaid work in their household and other households, where applicable

### <u>Hunger</u>

1.4.1	Prevalence of underweight children under-	Strategic Objective A.1
	five years of age, in percentage	Review, adopt and maintain macroeconomic policies
1.4.2	Women and men below minimum level of dietary energy consumption, in percentage	and development strategies that address the needs and efforts of women in poverty Para. 58 (f) "Develop policies and programmes to promote equitable distribution of food within the household"

**Property Rights** 

Troperty Rights	T	T =
1.5.1	Gender Parity Index in farm ownership by	Strategic Objective A.1
	area, and proportion of farms jointly held	Review, adopt and maintain macroeconomic policies
1.5.2	Proportion of population in house ownership,	and development strategies that address the needs and
	and proportion of houses jointly owned, in	efforts of women in poverty
	percentage	
		Para. 58 (m)
		"Enable women to obtain affordable housing and
		access to land by, among other things, removing all
		obstacles to access, with special emphasis on meeting
		the needs of women, especially those living in
		poverty and female heads of household"
		Strategic objective A.2.
		Revise laws and administrative practices to ensure
		women's equal rights and access to economic
		resources
		Para. 61 (b)
		Undertake legislative and administrative reforms to
		give women full and equal access to economic
		resources, including the right to inheritance and to
		ownership of land and other property, credit, natural
		resources and appropriate technologies;
		,
		1

**Goal 2** Achieve Universal Primary Education - *Education, literacy and training* 

### **Education**

2.1.1	Gender Parity Index in education in three levels of education (a) primary, (b) secondary, (c)	Strategic Objective B.1
	tertiary	Ensure Equal Access to Education Para. 80 (f)
2.1.2	Proportion of girls and boys starting grade 1 who reach last grade (survival rate), in percentage	"Increase enrolment and retention rates of girls by allocating appropriate budgetary resources; by enlisting the support of parents and the community, as well as through campaigns, flexible school schedules, incentives, scholarships and other means to minimize the costs of girls' education to their
2.1.3	Net enrolment ratio in (a) primary and (b) secondary education	families and to facilitate parents' ability to choose education for the girl child; and by ensuring that the rights of women and girls to freedom of conscience and religion are respected in educational institutions through repealing any
2.1.4	Net intake rate in the first grade of primary education	discriminatory laws or legislation based on religion, race or culture" Strategic Objective L.4 Eliminate discrimination against girls in education, skills

2.1.5.	(a) Primary and (b) secondary completion rates,	development and training
	in percentage	Para. 279 (d)
		"Increase enrolment and improve retention rates of girls by
		allocating appropriate budgetary resources and by enlisting
		the support of the community and parents through campaigns
		and flexible school schedules, incentives, scholarships,
		access programmes for out-of-school girls and other
2.1.6	Gross graduation ratio from lower secondary	measures"
2.1.0	education	measures
	cucation	
2.1.7	Effective transition rate from primary to	
	secondary education (general programmes)	
2.1.8	Education attainment of the population aged 25	
	and older	
2.1.9	Drop-out rates for girls and boys in (a) primary	
	and (b) secondary, in percentage	
2.1.10	Out-of-primary-school children, in percentage	
2.1.10	out of primary sensor emidren, in percentage	
2.1.11	Proportion of repeaters in (a) primary and (b)	1
21	secondary levels, by grade, in percentage	
1	secondary revers, by grade, in percentage	

**Literacy** 

2.2.1	A 1 1/2 1 2/1 1/2 1 1/11/2 2 C	C( ( ' OI' ( DOF I' ( III')
2.2.1	Adult and youth literacy and illiteracy rate of persons,	Strategic Objective B.2 Eradicate illiteracy among
	in percentage	women Strategic Objective L.4
		Eliminate discrimination against girls in education,
		skills development and training
		Para. 279 (d)
		"Increase enrolment and improve retention rates of
		girls by allocating appropriate budgetary resources
		and by enlisting the support of the community and
		parents through campaigns and flexible school
		schedules, incentives, scholarships, access
		programmes for out-of-school girls and other
		measures"

**Training** 

2.3.1	Proportion of girl and boy students enrolled in scientific	Strategic Objective B.3
	and Technical and Vocational Education and Training	Improve women's access to vocational
	programmes, in percentage	training, science and technology, and
		continuing education
2.3.2	Share of female graduates in science, engineering,	Para. 82 (e)
	manufacturing at tertiary level	"Diversify vocational and technical training and
		improve access for and retention of girls and women
		in education and vocational training in such fields as
		science, mathematics, engineering, environmental
2.3.3	Proportion of females among tertiary education teachers	sciences and technology, information technology and
	or professors	high technology, as well as management training"
	_	Strategic Objective B.4
		Develop non-discriminatory education and training
		Para. 83 (d)Take actions to ensure that female
		teachers and professors have the same opportunities
		as and equal status with male teachers and professors,
		in view of the importance of having female teachers at
		all levels and in order to attract girls to school and
		retain them in school;
	l	1

**Goal 3** Promote Gender Equality and Empower Women - *Public life, decision-making, and empowerment* **Public life** 

3.1.1	Proportion of seats held by women and men in national parliament	Strategic Objective G.1
3.1.2	Share of women and men in ministerial positions	Take measures to ensure women's equal access to and full participation in power structures and decision-making
		Para. 190 (e)
3.1.3	Share of women and men ambassadors	"Monitor and evaluate progress in the representation of women through the regular collection, analysis and dissemination of quantitative and qualitative data on women and men at all levels in
3.1.4	Share of women and men in local government bodies	various decision making positions in the public and private sectors, and disseminate data on the number of women and men employed at various levels in Governments on a yearly basis; ensure that women and men have equal access to the full range of public appointments and set up mechanisms within governmental structures for monitoring progress in this field"

Decision-making

Decision-ma	<u>Decision-making</u>		
3,2.1	Share of women and men in managerial positions	Strategic Objective F.5 Eliminate occupational segregation and all forms of employment discrimination Strategic Objective G.1 Take measures to ensure women's equal access to and full participation in power structures and decision-making Para. 190 (e) "Monitor and evaluate progress in the representation of women through the regular collection, analysis and dissemination of quantitative and qualitative data on women and men at all levels in various decision making positions in the public and private sectors, and disseminate data on the number of women and men employed at various levels in Governments on a yearly basis; ensure that women and men have equal access to the full range of public appointments and set up mechanisms within governmental structures for monitoring progress in this field"	
3.2.2	Share of ministerial gender units or focal points, in percentage	Strategic objective H.2 Integrate gender perspectives in legislation, public policies, programmes and projects Para 204 (e) "Give all ministries the mandate to review policies and programmes from a gender perspective and in the light of the Platform for Action; locate the responsibility for the implementation of that mandate at the highest possible level; establish and/or strengthen an inter-ministerial coordination structure to carry out this mandate, to monitor progress and to network with relevant machineries."	

**Empowerment** 

3.3.1	Share of female and male police officers, in percentage	Strategic Objective I.2 Ensure equality and non-discrimination under the law and in practice
3.3.2	Share of female and male judges, in percentage	Para. 232 © Embody the principle of the equality of men and women in their legislation and ensure, through law and other
3.3.3	Share of female and male lawyers, in percentage	appropriate means, the practical realization of this principle; Para. 232 (m) Ensure that women have the same right as men to be judges, advocates or other officers of the court, as well as police officers and prison and detention officers, among other things;

**Goal 4** Reduce Child Mortality – *Health of children* 

### **Child Health**

4.1.1	Under-five mortality rate per 1,000 live births,	Strategic Objective L.5 Eliminate discrimination against girls in health and
4.1.2	Infant mortality rate per 1,000 live births	nutrition
4.1.3	Immunization coverage for girls and boys of 1-year-of age in percentage	Para. 281 (a)
4.1.4	Adolescent birth rate (15-19 year)	"Provide public information on the removal of discriminatory practices against girls in food allocation, nutrition and access to health services"

### **Goal 5** Improve Maternal Health – *Health of women*

**Reproductive health** 

5.1.1	Total fertility rate for aged 15 to 49, births per woman (child per woman)	Strategic objective C.1 Increase women's access throughout the life cycle to appropriate, affordable and quality health care, information and related services
5.1.2	Maternal mortality ratio	Para. 106 (e)
5.1.3	Proportion of births attended by skilled health personnel, in percentage	"Provide more accessible, available and affordable primary health-care services of high quality, including sexual and reproductive health care, which includes family planning
5.1.4	Antenatal care coverage, (a) at least one visit and (b) at least four visits	information and services, and giving particular attention to maternal and emergency obstetric care, as agreed to in the
5.1.5	Proportion of women with access to postpartum care up to 42 days, in percentage	Programme of Action of the International Conference on Population and Development"
5.1.6	Unmet need for family planning, in percent	Population and Development Para. 106 (i)  "Strengthen and reorient health services, particularly primary health care, in order to ensure universal access to quality health services for women and girls; reduce ill heal and maternal morbidity and achieve world wide the agreed upon goal of reducing maternal mortality by at least 50 per cent of the 1990 levels by the year 2000 and a further one half by the year 2015; ensure that the necessary services are available at each level of the health system and make reproductive health care accessible, through the primary health-care system, to all individuals of appropriate ages as soon as possible and no later than the year 2015"
5.1.7	Contraceptive prevalence among women 15-49, in percentage	
5.1.8	Incidence of breast cancer among women (35 yrs and over) diagnosed, in 1,000 women	Strategic objective C.1 Increase women's access throughout the life cycle to appropriate, affordable and quality health care, information
5.1.9	Incidence of cervical cancer among women (35 yrs and over) diagnosed, in 1000 women	and related services

5.1.10	Proportion of women aged 15 years and over	Strategic Objective C.2
	who undergo a cervical cancer screening	Strengthen preventive programmes that promote women's
	examinations (coverage) annually by health	health
	systems, in percentage	Para. 107 (m)
		"Establish and/or strengthen programmes and services,
		including media campaigns, that address the prevention,
		early detection and treatment of breast, cervical and other
		cancers of the reproductive system"

**Goal 6** Combat HIV/AIDS, Malaria and Other Diseases – *Health and diseases* 

### **General Health**

General	Health	
6.1.1	Incidence and death rates associated with tuberculosis, for women and men	Strategic objective C.1 Increase women's access throughout the life cycle to appropriate, affordable and quality health care, information
6.1.2	Proportion of tuberculosis cases detected and cured under directly observed treatment short	and related services
	course	Strategic Objective C.2 Strengthen preventative programmes that promote women's health
6.1.3	Smoking prevalence among (a) adult persons aged 15+ and (b) adolescents (13-15 years), in percentage	Strategic objective C.1 Increase women's access throughout the life cycle to appropriate, affordable and quality health care, information and related services
6.1.4	Proportion of adults who are obese, by sex, in percentage	Strategic Objective C.2 Strengthen preventative programmes that promote women's
6.1.5	Life expectancy at (a) birth and at (b) age 60, by sex, in years	health
6.1.6	Adult mortality for age groups (a) 15-34 and (b) 35-59 years, by cause, in percentage	

### HIV/AIDS

6.2.1	Share of women population aged 15-49 living with HIV/AIDS, in percentage	Strategic Objective C.3 Undertake gender- sensitive initiatives that address sexually
6.2.2	Proportion of individuals with access to anti- retroviral drug, by sex, in percentage	transmitted diseases, HIV/AIDS, and sexual and reproductive health issues

### **Goal 7** Ensure Environmental Sustainability

### **Environment**

7.1.1	Share of women and men with sustainable access to an improved water source, in percentage	Strategic objective C.1 Increase women's access throughout the life cycle to appropriate, affordable and quality health care,
7.1.2	Share of women and men with access to improved sanitation, in percentage	information and related services Para. 106 (x) "Ensure the availability of and universal access to safe drinking water and sanitation and put in place effective public distribution systems as soon as possible"

### **Goal 8** Develop a Global Partnership for Development

**Information Technology** 

mormation 1	eemology	
8.1.1	Proportion of individuals using the Internet, by sex, in	Strategic Objective J.1
	percentage	Increase the participation and access of women to
8.1.2	Proportion of individuals using a mobile-cellular	expression and decision-making in and through the
	telephone, by sex, in percentage	media and new technologies of communication
0.1.0	D (1 01 1 11 1/1 (1 11	Strategic objective F.3.
8.1.3	Proportion of households with access to mass media	Provide business services, training and access to
	(radio, TV, Internet), by sex of household head	markets, information and technology, particularly to
		low-income women

Media

Micuia		
8.2.1	Share of women and men in technical managerial	Strategic Objective J.1
	positions at national newspapers and television	Increase the participation and access of women to
	channels, in percentage.	expression and decision-making in and through the
		media and new technologies of communication
8.2.2	Proportion of girls and boys graduating from media	Para. 239 (a)
	institutes, in percentage	"Support women's education, training and
		employment to promote and ensure women's equal
		access to all areas and levels of the media"

# **Goal 9** Human Rights (women and girl child) **Harmful Practices**

Hai min i i a	CHCCS	
9.1.1	Prevalence of female genital mutilation /cutting (for relevant countries only)	Strategic Objective L1 Eliminate all forms of discrimination against the
9.1.2	Prevalence of women aged 20-24 yrs old who were married or in a union before (a) age 15 and before (b) age 18	girl child Strategic Objective L2 Eliminate negative cultural attitudes and practices against girls

Violence aga	ainst Women	
9.2.1	Proportion of ever-partnered women subjected to (a)	Strategic Objective D.1
	physical and/or (b) sexual violence by a current or	Take integrated measures to prevent and eliminate
	former intimate partner, in the last 12 months	violence against women
9.2.2		Strategic Objective D.2
		Study the causes and consequences of violence
	Proportion of women subjected to (a) physical and/ or	against women and the effectiveness of preventative
9.2.3	(b) sexual violence by persons other than an intimate	measures
	partner, since age 15	Para. 129 (a)
		"Promote research, collect data and compile statistics,
9.2.4	Proportion of ever-partnered women subjected to	especially concerning domestic violence relating to
	psychological violence in the past 12 months	the prevalence of different forms of violence against women."
	Proportion of ever-partnered women subjected to	Para. 129 (b)
	economic violence in the past 12 months	"Disseminate findings of research and studies
	-	widely."
		Para. 129 (c)
		"Support and initiate research on the impact of
		violence, such as rape. On women and girl-children,
		and make the resulting information and statistics
		available to the public"
9.2.5	Annual rate of femicides (including honor killing and	
	gender-based killing)	

### Conflict and War

9.3.1	Number of programmes currently in operation that are designed specifically to provide protection, assistance and training to refugee women, by type of organization responsible	Strategic Objective I.1 Promote and protect the human rights, through the full implementation of all human rights instruments, especially the Convention on the Elimination of All Forms of Violence
9.3.2	Proportion of public officials trained annually in human rights and humanitarian law for women and men, in percentage	Para. 232 (i) "Provide gender-sensitive human rights education and training to public officials, including, inter alia, police and military personnel, correction officers, health and medical personnel, and social workers and teachers at all levels of the education system and make available such education and training also to the judiciary and members of parliament in order to help them to better exercise their public responsibilities"

### **Economy**

### 1 Economic structures, participation in productive activities and access to resources

- 1a Extent of country commitment to gender equality in employment 1a Whether or not ratified ILO Convention No. 100 on equal remuneration for women and men
- 1b Whether or not ratified ILO Convention No. 111 on discrimination in employment and occupation

### 2 Extent of country commitment to support reconciliation of work and family life

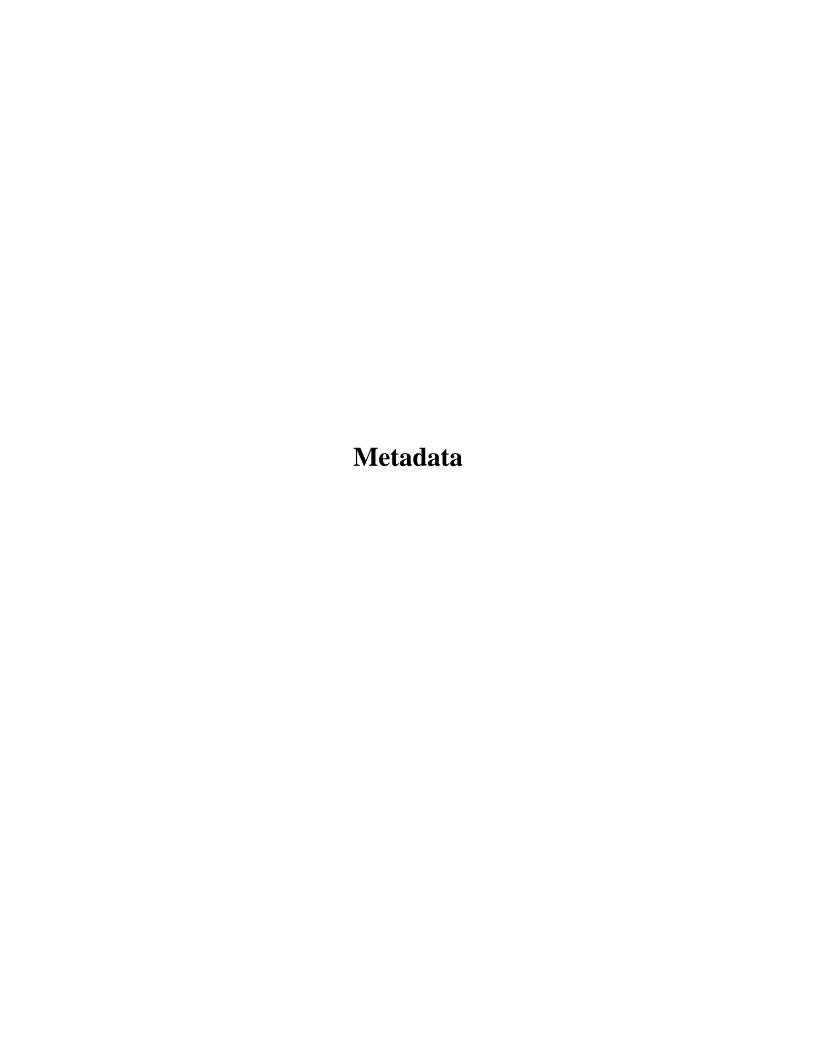
- 2a Whether or not ratified ILO Convention No. 156 on workers with family responsibilities
- 2b Whether or not ratified ILO Convention No. 175 on part-time work
- 2c Whether or not ratified ILO Convention No. 177 on home work
- 2d Whether or not ratified ILO Convention No. 183 on maternity protection
- 3 Length of maternity leave
- 4 Percentage of wages paid during maternity leave

### Public life and decision-making

- 5 Presence of a gender quota for parliament (reserved seats and legal candidate quotas)
- 6 Presence of a gender quota for parliament (voluntary party quotas)
- 7 Existence of law on gender statistics

### Human rights of women and girl children

- 8 Whether or not reservation to article 16 (Marriage and Family Life) of the Committee on the Elimination of Discrimination against Women
- 9 Existence of laws on domestic violence
- 10 Whether or not inheritance rights discriminate against women and girls
- 11 Legal minimum age at marriage, by sex



# **Goal 1: Eradicate Extreme poverty and Hunger**

# 1.1 Poverty

Indicator 1.1.1 Share of women headcount ratio), in percentage	n and men (headed households) with mean income below national poverty line (or the poverty
Rational and Gender Issues	National poverty lines reflect local perceptions of the level of consumption or income needed to be not poor. The perceived threshold between poor and not poor rises with the average income of a country and does not provide a uniform measure for comparing poverty rates across countries. Nevertheless, national poverty estimates are clearly the appropriate measure for setting national policies for poverty reduction and for monitoring their results. The international poverty measurements provide a uniform standard for comparing poverty rates and the number of people living in poverty across countries.  The poverty rate is a useful tool for policy makers and donors to develop policies that target the poor. Yet, it does not capture the depth of poverty and fails to account for the fact that some people may be living just below the poverty line while others experience far greater shortfalls. Policymakers seeking to make the largest possible impact on the headcount measure might be tempted to direct their poverty alleviation resources to those closest to the poverty line (and therefore the least poor).  Women make up the majority of the 1.7 billion people who live in absolute poverty. Households headed by women tend to have lower incomes and concentrated in the bottom fifth are therefore more likely to have incomes per person lower than that headed by men. However, this relationship should be carefully studied to take into account national circumstances and the definition of head of household adopted in data collection, which is not necessarily related to being the chief source of economic support. Whether households are headed by women or men, gender relations affect intra household resource allocation and use.
Definition	The national poverty rate (poverty headcount ratio) is the percentage of the total population (with/without children) living below the national poverty line by type of household (women/men headed household, with/without children) in rural/urban locations.  National poverty lines are commonly set in terms of finding the consumption expenditure or income level at which food energy intake is just sufficient to meet pre-determined requirements; or by stipulating a consumption bundle (incorporating both food and non-food items) deemed to be adequate for basic consumption needs, and then estimating its cost for each of the subgroups being compared in the poverty profile.  The poverty line is a common method used to measure poverty based on incomes or consumption levels. A person is considered poor if his or her consumption or income level falls below some minimum level necessary to meet basic needs. This minimum level is what is called the "poverty line".
Description and method of computation	The proportion of population whose income\ consumption is below the official threshold (or thresholds) set by the national government. National poverty lines are usually set for households of various compositions to allow for different family sizes.  The share of women/men headed household with mean income below national poverty line is the percentage of women/men headed household population (with/without children) living below national poverty line out of total women and men headed household population (with /without children) living below national poverty line.  Estimates are based on population-weighted subgroup estimates from household surveys.  The formula for calculating the share of the population (women/men headed household) living below the national poverty line is as follows:

	$P_0 = \frac{1}{N} \sum_{i=1}^{N} I(y_i \le z) = \frac{N_p}{N}$
	Where P0 is the headcount index, I(.) is an indicator function that takes on a value of 1 if the bracketed expression is true, and 0 otherwise. If individual consumption or income (yi) is less than the poverty line (z), then I(.) is equal to 1 and the individual is counted as poor. Np is the number of poor women/men headed household. N is the total women and men headed household population.
	The calculation method is:
	Share of women/men population (with/without children) at primary level of education and living below national poverty line is as follows:
	= <u>Poor women/men headed household (with/without children) with primary education</u> x100 Total women and men headed household (with/without children) with primary education
	The unit of measure is in percentage. The indicator values may range from 0 (no population in poverty according to the national poverty line) to 100 (all the population in a country living below the national poverty line).
	Disaggregation: Women/men headed household (with/without children) in rural/urban, by age, disabled, size of household, income and education.
Sources and data collection	The main data sources for poverty indicators are from nationally representative household surveys; household budget surveys and income and/or expenditure surveys (IHS, LSMS, LSS, NSS, PMS, RUHS, SECH, SES). National statistical offices, sometimes in conjunction with other national or international agencies, undertake such surveys. The periodicities of these surveys are every 3-5 years in the Arab countries.
	http://mdgs.un.org/unsd/mdg/Metadata.aspx http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf
Reference	World Bank Metadata for Indicators 2009

Indicator 1.1.2 Poverty gap r	atio for women and men (headed households), in percentage.
	The indicator measures the "poverty deficit" of the population, by sex, where the poverty deficit is the per capita amount of resources that would be needed to bring all poor people above the poverty line through perfectly targeted cash transfers.
Rational and Gender Issues	Households headed by women tend to have lower incomes and concentrated in the bottom fifth are therefore more likely to have incomes per person lower than that headed by men. However, this relationship should be carefully studied to take into account national circumstances and the definition of head of household adopted in data collection, which is not necessarily related to being the chief source of economic support. Whether households are headed by women or men, gender relations affect intrahousehold resource allocation and use.
Definition	Poverty gap is the mean shortfall of the total women/men headed household population from the poverty line (counting the non poor as having zero shortfall), expressed as a percentage of the poverty line. This measure reflects the depth of poverty as well as its incidence.
	The indicator measures the "poverty deficit" of the entire population, where the poverty deficit is the per capita amount of resources that would be needed to bring all poor people above the poverty line.
	The poverty gap = average income gap ratio of poor people x headcount ratio $x100$
	The poverty headcount ratio for women/men headed household is the proportion of the national population whose income \ consumption is below the official threshold (or thresholds) set by the national government. National poverty lines are usually set for households of various compositions to allow for different family sizes.
	The poverty gap index, which is related to the headcount index, is measured as follows:
	$P_1 = \frac{1}{N} \sum_{i=1}^{N} I(y_i \le z) * (1 - \frac{y_i}{z})$
Description and method of computation	where P1 represents the poverty gap and is calculated as the sum of relative distance between the poverty line (z) and income or consumption for those women/men headed household who are poor (the non-poor have a poverty gap of zero). I(.) is an indicator function that equals 1 if the bracketed expression is true, and 0 otherwise. N is the total population.
	This formula is calculated based on data on individuals (yi as individual income or consumption). If household-level data are used, the formula has to be adjusted by the weight wi, which is the household size times sampling expansion factor for every household i.
	The unit of measure is in percentage.
	Disaggregation: Women/men headed household (with/without children) in rural/urban, by age, disabled, size of household, income and education.
Sources and data collection	The main data sources for poverty indicators are from nationally representative household surveys; household budget surveys and income and/or expenditure surveys (IHS, LSMS, LSS, NSS, PMS, RUHS, SECH, SES). National statistical offices, sometimes in conjunction with other national or international agencies, undertake such surveys. The periodicities of these surveys are every 3-5 years in the Arab countries.
	http://mdgs.un.org/unsd/mdg/Metadata.aspx http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf
Reference	World Bank Metadata for Indicators 2009
	World Bank account: households headed by woman" in the rational section of the second indicator, but it is not consistent with the classification of households.

Indicator 1.1.3 Share of wor	nen and men (headed households) in the poorest quintile in national consumption/income, in percentage.
Rational and Gender Issues	The indicator on share of women / men in poorest quintile provides information about the distribution of consumption or income of the poorest fifth from the women and men population. Because the consumption of the poorest fifth of women and men is expressed as a percentage of total household consumption (or income) of the poorest quintile, this indicator is a "relative inequality" measure. Therefore, while the absolute consumption of the poorest fifth may increase, its distribution between women and men may vary.
Gender Issues	Women (headed households) may be concentrated in the bottom fifth. However, this relationship should be carefully studied to take into account national circumstances and the definition of head of household adopted in data collection, which is not necessarily related to being the chief source of economic support. Whether households are headed by women or men, gender relations affect intra-household resource allocation and use.
	It is the income that accrues to the poorest fifth of the women/men population.
Definition	Poorest quintile is the bottom 20 percent of the population, ranked by income or consumption levels.
	Inequality in the distribution of income is reflected in the percentage shares of women/men headed household in income or consumption accruing to portions of the population ranked by income or consumption levels.
	Consumption, including consumption from own production, or income is calculated from household data for the entire household, adjusted for household size, and then divided by the number of persons living in the household to derive a per capita measure. The population is then ranked by consumption or income; and then the bottom fifth of the population's consumption or income is expressed as a percentage of aggregate household income and distributed by women/men headed household. The calculations are made in local currency, without adjustment for price changes or exchange rates or for spatial differences in the cost of living within countries are not made, because the data needed for such calculations are generally unavailable.
Description and method of computation	Share of women/men (headed household) in poorest quintile in national consumption is calculated as follows:
	$Share = \frac{\sum_{i=1}^{n} Y_i}{\sum_{i=1}^{n} Y_i X_i}$
	where $y_1 \le y_2 \le y_3 \dots \le y_n \dots$ , and the n observations represent 20 percent of the total women
	(Y)/men (X) headed household population. The unit is in percentage.
	The unit of measure is in percentage.
	Disaggregation:
	Women/men headed household (with/without children) in rural/urban, by age, size of household, disabled, income and education.
Sources and data collection	The main data sources for poverty indicators are from nationally representative household surveys; household budget surveys and income and/or expenditure surveys (IHS, LSMS, LSS, NSS, PMS, RUHS, SECH, SES). National statistical offices, sometimes in conjunction with other national or international agencies, undertake such surveys. The periodicities of these surveys are every 3-5 years in the Arab countries.
	http://mdgs.un.org/unsd/mdg/Metadata.aspx
	http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf
Reference	World Bank Metadata for Indicators 2009

	The indicator on condemnative among (headed households) recipients of according to the condemnative among the condemnative and the condemnative among the condemnative
Rational and	The indicator on gender parity among (headed households) recipients of poverty alleviation grants and living below national poverty line provides information about the equality in distribution of poverty alleviation grants between women and men.
Gender Issues	Women headed households, in some communities, are less likely to receive funding or poverty alleviation grants in comparison to men headed households.
	The Gender parity index for women and men headed households who are living below national poverty line and who are treated equally in receiving poverty alleviation grants.
Definition	A parity of 1 means equality between women and men is achieved in receiving poverty alleviation grants, while less than 1 of parity means that there are less women than men receiving grants, which illustrates a discrimination against them, while a parity above 1 means there are more women receiving grants than men.
	Gender Parity among headed households living below national poverty line and recipients of poverty alleviation grants is calculated by dividing the proportion of women headed households in receipt of poverty alleviation grants and living below national poverty line by the proportion of men headed households in receipt of poverty alleviation grants and living below national poverty line.
Description and method of computation	Women headed hh living below national poverty line and receiving poverty alleviation grants  Women headed hh living below national poverty line
	divided by
	Men headed hh living below national poverty line and receiving poverty alleviation grants  Men headed hh living below national poverty line
Sources and data collection	The main data sources for poverty indicators are from nationally representative household surveys; household budget surveys and income and/or expenditure surveys (IHS, LSMS, LSS, NSS, PMS, RUHS, SECH, SES). National statistical offices, sometimes in conjunction with other national or international agencies, undertake such surveys. The periodicities of these surveys are every 3-5 years in the Arab countries.
	http://mdgs.un.org/unsd/mdg/Metadata.aspx
Reference	http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf World Bank Metadata for Indicators 2009

# 1.2 Economy

Indicator 1.2.1: Aver	Indicator 1.2.1: Average number of hours spent on unpaid domestic work (domestic and caring for children and elderly) by sex		
Rational and Gender Issues	Time-use statistics are quantitative summaries of how individuals "spend" or allocate their time over a specified period—typically over the 24 hours of a day or over the 7 days of a week.		
	Time-use accounts and household production accounts are two approaches that allow the detail needed for better income and production estimates to be made on an individual basis. They also have the advantage of being easily linked to national accounts through the measurement and distribution of labour inputs and outputs of goods and services" (United Nations, 1995, p.107, para.8). The main goals for collecting time use data for these accounts are providing a more accurate description of a national economy by including household production in traditional measures of economic status or progress—particularly measure of gross domestic product (GDP)—and improving the status of women by making their economic contribution visible and valued.		
	In addition to household production, a large amount of unpaid work is also carried out in the community, resulting in a range of important goods and services. People run sports clubs, administer schools, care for older people and persons with disabilities, and transport those who are unable to transport themselves. In rural areas, people produce food for their own subsistence and assist each other with farm labour on a communal basis. This work too is part of the national production that is not included in traditional measures of the economy. Work of this kind may shift between the paid and unpaid sectors. Participation in voluntary work of various kinds and the connections between voluntary and market services are also investigated through time-use data.		
Definition	Productive activities are those that can be associated with the concept of "work" and constitutes production, productive activities and work activities and to differentiate these from personal activities.		
	These activities are outside the SNA production boundary and include domestic and personal services produced and consumed <i>within</i> the same household (except those produced by paid domestic staff including cleaning, servicing and repairs; preparation and serving of meals; care, training and instruction of children; care of the sick, infirm and elderly; transportation of members of the household or their goods etc.; as well as unpaid volunteer services to other households, community, neighborhood associations and other associations.		
Description and method of computation	Average number of hours spent on unpaid domestic work by the average number of hours spent on paid and unpaid work (combined total work burden)		
	Time spent on unpaid work = $\frac{\text{Total time spent by women performing unpaid work}}{\text{Total number of persons performing unpaid work}}$		
	The unit of measure is in hours /minutes		
Sources and data collection	Disaggregation: By sex, housework and child care, localities and income groups  Time use surveys, labour force surveys		
Reference	ESCWA Statistics Division		

Indicator 1.2.2 Average time ( number of hours) spent on paid and unpaid (domestic work and caring for children and elderly) combined (total work burden)		
Rational and Gender Issues		
Definition		
Description and method of computation		
Sources and data collection		
Reference		

percentage.	ortion of employed women and men living below national poverty line per day (working poor), in	
Rational and Gender Issues	The proportion of working poor women/men in total employment gives an indication of the lack of decent work in a country. Jobs that do not provide incomes high enough to lift individuals and their families out of poverty, at the very least, do not fulfill the income component of decent work and it is likely that other components are not being fulfilled either. Within the development process, the share of working poor should decrease, and in turn, further foster development.  The working poor definition combines poverty data with countries' specific labour market characteristics, such as the size of the labour force. Working poor estimates thereby provide a picture of the relationship between poverty and employment that is not depicted by standard poverty data.	
	Disaggregated by women and men, the indicator can be used to analyse gender differentials in the incidence of working poverty. There are probably more women workers than men workers who are poor the indicator should decrease more (or increase less) for women than for men	
Definition	This indicator measures the working poor women and men – the proportion of individuals who are in the labour force, but nonetheless live in a household whose members are estimated to be living below the national poverty line (or international poverty line of \$1.25 purchasing power parity (PPP) )per day. This indicator is expressed in units of percentage	
	Working poor refers to employed persons living below the poverty line.  Labour force is the economically active population, aged 15 and above, or the sum of the employed and unemployed  The poverty line is the minimum level of income deemed necessary to achieve an adequate standard of living in a given country. For international comparisons, a poverty line of \$1.25 a day measured at 2005 international prices and adjusted for PPP is used.  The purchasing power parity (PPP) conversion factor is the number of units of a country's currency required to buy the same amounts of goods and services in the domestic market as the United States dollar would buy in the United States.	
	Employed refers to persons above the nationally defined working age (different in every country, but generally close to 15 years) who worked or held a job during a specified reference period. Included are persons who worked for pay or profit (or pay in kind); persons who were temporarily absent from a job for such reasons as illness, maternity or parental leave, holiday, training or industrial dispute; and unpaid family workers who worked for at least one hour, although many countries use a higher hour limit in their definition. The measure of employment is intended to capture persons working in both the formal and informal sectors.	
	Unemployed refers to all persons not in employment who would have accepted a suitable job or started an enterprise during the reference period if the opportunity arose, and who actively looked for ways to obtain a job or start an enterprise in the recent past.	
	An increase indicates that there are more persons whose work does not provide an income high enough to get them out of poverty	
Description and method of computation	The number of women/men working poor is calculated by multiplying the women/men labour force by the poverty rate. The Poverty Rate for each sex is calculated by dividing the women/men population living below poverty line over the total population of women and men.	
	Working poor = povertyrate × labour force	
	Poverty rate = $\frac{\text{Population living below poverty line}}{\text{Total population}}$	
	The key assumption behind using the labour force instead of employment numbers to calculate the working poor is that all, or nearly all, of the poor in the labour force are employed. This assumption is made because in countries where social safety nets do not exist, poor individuals must work in order to maintain a subsistence level of living. While 15 years and over is typically used to define the standard working-age population of a country, some countries apply other age limits. It is the nationally-defined working-age population which should be used for this calculation.	

	The proportion of working women/men poor in total employment equals the number of women employed persons living in a household with income below the poverty line divided by total employment multiplied by 100.  Proportion of working poor = $\frac{\text{working poor}}{\text{total employment}} \times 100$
	The best method for calculating the number of working poor is on the basis of cross-tabulations from micro survey data sets that include variables on both poverty status and labour force characteristics. However, these data are usually not available.
	It is expressed in units of percentage.
	Disaggregation: While it might be desirable to disaggregate the proportion of working poor by sex or age group, disabled, disaggregation is frequently not feasible. This is mainly because of the difficulties of producing disaggregated poverty rate information. However, if estimates are derived from micro survey datasets, disaggregation is sometimes feasible.
Sources and data collection	To estimate the number and proportion of the working poor, it is necessary to establish the poverty line. In many countries the poverty line is established from information obtained through surveys on personal consumption expenditure or, in a few cases, personal income. Personal consumption data is usually preferred, since it tends to be more reliable, and also because it tends to give a better reflection of the real, current living standards of households. The level of personal consumption expenditure (or income) below which individuals or households are considered to be poor is set to reflect the amount of net income (and therefore expenditure) necessary to buy a specified minimum quantity of household goods.
	Labour market information (labour force and total employment) are obtained from population censuses, labour force or other household surveys, establishment surveys, administrative records and official estimates based on results from several of these sources. Labour force surveys can be designed to cover virtually the entire population of a country, all branches of economic activity, all sectors of the economy, and all categories of workers, including own-account workers, unpaid family workers and persons engaged in casual work or marginal economic activity. For this reason, household-based labour force surveys offer a unique advantage for obtaining information on the labour market of a country and its structure.  Other sources such as population censuses and administrative records differ in scope, coverage, units of measurement and methods of data collection.
Reference	INTERNATIONAL LABOUR ORGANIZATION (annual). Key Indicators of the Labour Market. Geneva. Available from http://www.ilo.org/trends INTERNATIONAL LABOUR ORGANIZATION (2005). World Employment Report 2004-05. Geneva. Available from http://www.ilo.org/trends

Indicator 1.2.4. Informal employment as a percentage of total non-agricultural employment		
Rational and Gender Issues		
Definition		
Description and method of computation		
Sources and data collection		
Reference		

Indicator 1.2.5 Unemployment rate for persons aged (a) 15+ years and (b) 15-24 years, by economic activity, in percentage		
	Unemployment rates can be used to address issues of gender differences in labour force behaviour and outcomes. The unemployment rate has often been higher for women than for men. Possible explanations are numerous but difficult to quantify; women are more likely than men to exit and re-enter the labour force for family-related reasons; and there is a general "crowding" of women into fewer occupations than men so that women may find fewer opportunities for employment. Other gender inequalities outside the labour market, for example in access to education and training, also negatively affect how women fare in finding jobs.	
Rational and Gender Issues	Traditionally, men were expected to be the primary "bread-winners" in a family and women were expected to be homemakers. These roles presumably placed greater pressure on men to settle for sub-optimal jobs to support their families and placed greater pressure on women to stay at home or, if they were forced to enter the labor force for some reason, to accept employment that did not place undue stresses on their family responsibilities. Because of these different roles, it is logical to expect marriage and children to lead to lower unemployment rates for men, but higher unemployment rates among women. It is also noticed that the higher the degree or level of education for women and men the lesser is the gap in unemployment between them.	
	Young women experience higher unemployment and lower employment rates than young men, even when they are highly qualified. Moreover, when employed, young women are, more than young men, particularly affected by low quality jobs.	
	Women have a lower return on education than men. There is consequently a risk to disincentives women to be on the labour market if they cannot fully develop their skills and achieve their careers this may lead in some countries to a high rate of women leaving the labour market for motherhood" Some labour markets still actively bar young women from quality employment to the point that many opt to have children instead.	
Definition	The unemployment rate is defined mathematically as the ratio resulting from dividing the total number of unemployed (for a country or a specific group of workers) by the corresponding labour force, which itself is the sum of the total persons employed and unemployed in the group. It should be emphasized that it is the labour force or the economically active portion of the population that serves as the base for this statistic, not the total population.	
	The unemployed comprise all persons above a specified age who, during the reference period, were: (a) without work; (b) currently available for work; and (c) actively seeking work. The labour force is the sum of the number of persons employed and the number of persons unemployed.	
	The unemployment rate is computed by dividing the total number of unemployed adults (or youth) by the corresponding labour force, which itself is the sum of the total persons employed and unemployed in the group.	
Description and method of computation	Unemployment rate for adults = Number of unemployed women and men aged 15 and over  Number of employed and unemployed women and men aged 15 and over  *100  aged 15 and over	
	The unit of measure is in percentage	
	Disaggregation: By age (15+, 25-64 yrs, 65+), level of education, disabled, rural/urban	
Sources and data collection	Data are obtained from labour force surveys, Working conditions surveys, administrative records.	
Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx http://www.ilo.org/trends http://www.peoplemanagement.co.uk/pm/blog-posts/2009/07/the-youth-unemployment-gender-gap-in-the-eu.htm	

Indicator 1.2.6 Labor force participation rate for persons aged (a) 15+ years and (b) 15-24 years, by economic activity rate, in percentage

The indicator for labour force participation rate plays a central role in the study of the factors that determine the size and composition of a country's human resources and in making projections of the future supply of labour. The information is also used to formulate employment policies, to determine training needs and to calculate the expected working lives of the male and female populations and the rates of accession to, and retirement from, economic activity – crucial information for the financial

planning of social security systems.

The indicator is also used for understanding the labour market behaviour of different categories of the population. According to one theory, the level and pattern of labour force participation depend on employment opportunities and the demand for income, which may differ from one category of persons to another. For example, studies have shown that the labour force participation rates of women vary systematically, at any given age, with their marital status and level of education. There are also important differences in the participation rates of the urban and rural populations, and among different socio-economic groups.

Malnutrition, disability and chronic sickness can affect the capacity to work and are therefore also considered as major determinants of labour force participation, particularly in low-income environments. Another aspect closely studied by demographers is the relationship between fertility and female labour force participation. This relationship is used to predict the evolution of fertility rates, from the current pattern of female participation in economic activity.

Rational and Gender Issues In less-developed economies, labour force participation rates can be seen to decline with economic growth. Economic growth is associated with expanding educational facilities and longer time spent studying, a shift from labour-intensive agricultural activities to urban economic activities, and a rise in earning opportunities, particularly for the prime working age (25 to 54 years) head of household so that other household members with lower earning potential may choose not to work. These factors together tend to lower the overall labour force participation rate for both men and women, although the effect is weaker for the latter and shows a wider variation.

It is also instructive to look at labour force participation rates for males and females by age group. Labour force activity among the young (15 to 24 years) reflects the availability of educational opportunities, while labour force activity among older workers (55 to 64 years or 65 years and over) gives an indication of the attitude towards retirement and the existence of social safety nets for the retired. Labour force participation is generally lower for females than for males in each age category (as verified in the subsequent Trends section). At the prime working age, the female rates are not only lower than the corresponding male values, but often exhibit a somewhat different pattern. During this period of their life-cycle, women tend to leave the labour force to give birth to and raise children, returning – but at a lower rate – to economically active life when the children are older. In developed economies, the profile of female participation is, however, increasingly becoming similar to that of men and the rates are also approaching male levels.

To some degree, the way in which the labour force is measured can have an effect on the extent to which men and women are included in labour force estimates. Unless specific probes are built into the data collection instrument, certain groups of workers may be underestimated – particularly the number of employed persons who (a) work for only a few hours in the reference period, especially if they do not do so regularly, (b) are in unpaid employment, or (c) work near or in their home, thus mixing work and personal activities during the day. Since women, more so than men, are found in these situations, it is to be expected that the number of women in employment (and thus the female labour force) will tend to be underestimated to a larger extent than the number of men.

Definition

Labour force participation (activity) rate is the ratio of those of a given cohort in the labour force to the overall size of their cohort (population in the same age range). The total labour force participation rate refers to this ratio calculated over all women and men of working age (typically 15-64) while specific rates can apply to any population subgroup ) for example, women in the 15 to 24 age group).

Description and method of computation

The Labor Force Participation Rate is a ratio that identifies the number of people who are active participants in the labor force relative to the overall population (within the same age range). Active participants in the labor force include those who currently hold employment as well as those

	individuals who are unemployed but actively seeking work, and are between the ages of 16 and 65. Unlike the Unemployment Rate, which measures the prevalence of unemployment, the Labor Force Participation Rate compares the labor force against the general population, identifying who is and who isn't working, making it an important measure of long-term economic growth.  The labour force participation rate is a measure of the proportion of a country's working-age population that engages actively in the labour market, either by working or looking for work; it provides an indication of the relative size of the supply of labour available to engage in the production of goods and services. The breakdown of the labour force by sex and age group gives a profile of the distribution of the economically active population within a country.  The labour force participation rate is calculated by expressing the number of persons in the labour force as a percentage of the working-age population. The labour force is the sum of the number of persons employed and the number of unemployed. The working-age population is the population above a certain age – ideally aged 15 and older – prescribed for the measurement of economic characteristics.  Disaggregation level: rural urban, education, marital status, child under 3 years, economic activity, occupation, sector,
Sources and data collection	A comprehensive source of data for determining the labour force participation rate and related indicators is specialized surveys of households or individuals, often referred to as labour force surveys.  Such surveys can be designed to cover virtually all the non-institutional population of the country, all branches of economic activity, all sectors of the economy and all categories of workers, including the self-employed, unpaid family workers, casual workers and multiple jobholders. In addition, such surveys generally provide an opportunity for the simultaneous measurement of the employed, the unemployed and the economically inactive in a coherent framework.  Population censuses are another major source of data on the labour force and its components. The labour force participation rates obtained from population censuses, however, tend to be lower, as the vastness of the census operation inhibits the recruitment of trained interviewers and do not allow detailed probing on the labour market activities of the respondents.  Another source is from the living conditions survey (Lebanon)
Reference	Worldbank and http://kilm.ilo.org

Indicator 1.2.7 Emplo	byment-to-population ratio of women and men, in percentage
	The employment-to-population ratio provides information on the ability of an economy to provide employment. The ratio typically falls between 50 and 75 per cent with a high ratio indicating that a large proportion of the working-age population is employed. A low ratio indicates that a large share of the population is not involved directly in market-related activities.
	Ratios for women may be lower than those for men as a result of women voluntarily or involuntarily staying at home and not participating in labour markets. Efforts should be made to determine whether the gender difference is the result of involuntarily low labour force participation for women. Comparing men and women ratios provides an idea of equal employment opportunities ratio should be equally high for men and women.
	Comparing men and women ratios provides an idea of equal employment opportunities ratio should be equally high for men and women
Rational and Gender Issues	Trends in the employment-to-population ratio can be monitored to inform policies to increase opportunities for decent work. A reduction of employment-to-population ratios for young people can be seen as positive if this is caused by an increase of youth participation in education. Efforts to increase employment-to-population ratios are needed when unemployment is very high in a country (indicating that people are looking for work but not finding it), or when the ratio is low because people have given up hope of finding a job. On the other hand, employment-to-population ratios should not be too high. Ratios above 80 per cent, for instance, often occur in very poor countries and usually indicate an abundance of low quality jobs. During the development process, employment-to-population ratios and poverty rates can both be high because people simply have to work to survive.
	The annual employment-to-population ratio and the ratio's rate of change over time can be viewed in connection with economic growth rates to determine the extent to which economic growth is pro-employment and pro-poor. Reviewing the indicator by sex (male versus female) and age (youth versus total) also provides a picture of the equality of employment opportunities across different population groups.
	The employment-to-population ratio is the proportion of a country's working-age population that is employed.
Definition	Working-age population is defined as persons aged 15 years and older. The International Labour Organization (ILO) standard for the lower limit of the working-age population is 15.  The employed are defined as persons above the nationally defined working-age who performed any work at all, in the reference period, for pay or profit (or pay in kind), or were temporarily absent from a job for such reasons as illness, maternity or parental leave, holiday, training or industrial dispute. Unpaid family workers who work for at least one hour should be included in the count of employment, although many countries use a higher hour limit in their definition.
	An increase means that the economy is increasingly able to provide employment to people However, the indicator says nothing of quality of employment, volume of employment, reasons that women or men are or are not in employment.
Description and method of computation	The employment-to-population ratio is calculated by dividing the total employment ie the number of persons, women/men employed by the working-age population (15+ years) and multiplying it by 100.  The women employment-to-population ratio is calculated by dividing the total women employed by the working age population of women and men and multiplying by 100, the men employment-to-population ratio is calculated by dividing the total men employed by the working age population of women and men multiplying by 100, as follows:
	Employment - to - population ratio = $\frac{\text{Persons employed}}{\text{working age population}} \times 100$
	The employment-to-population ratio is expressed in units of percentage.
	Disaggregation: Ideally, the data should be disaggregated by sex, disabled, and age group. When broken down by sex, the ratios for men and women can provide information on gender differences in labour market activity. Disaggregation of

	the ratio for persons of working age (ages 15 years and over), prime working-age (25 to 54 years), older workers (55 to 64 years or 65 years and over) and youth (ages 15 to 24 years) are useful for revealing relationships between labour force participation and availability of educational facilities, attitudes toward retirement, availability of earning opportunities for different age groups and the existence of social safety nets. Countries might also want to consider disaggregating according to urban/rural residence.
Sources and data collection	Data are obtained from population censuses, labour force or other household surveys, establishment surveys, administrative records and official estimates based on results from several of these sources. Both components (employment and population) should come from the same source.  Sources differ in scope, coverage, units of measurement and methods of data collection. Each source has advantages and limitations in terms of the cost, quality and type of information gained. The ideal geographic coverage is the entire country (no geographic exclusions) and entire populations (no exclusion of population groups), so the source that can best provide this coverage should be used.
	Contrary to censuses, surveys may have limited geographical and population coverage. However, household-based labour force surveys offer a unique advantage for obtaining information on the labour market of a country and its structure. Labour force surveys can be designed to cover virtually the entire population of a country, all branches of economic activity, and all sectors of the economy. In addition, labour force surveys can include all categories of workers, including own-account workers, unpaid family workers and persons engaged in casual work or marginal economic activity.
	The International Labour Organization (ILO) standard for the lower age limit of employment is 15 years. For many countries, this age corresponds directly to societal standards for education and work eligibility. Some countries impose an upper limit for eligibility, such as 65 or 70 years. However, if possible age groups beyond this upper limit should be included in the employable population.
	It is best if numerator and denominator come from the same source, therefore household surveys are best
Reference	INTERNATIONAL LABOUR ORGANIZATION (annual). Key Indicators of the Labour Market. Geneva. Available from http://www.ilo.org/trends INTERNATIONAL LABOUR ORGANIZATION (2005). World Employment Report 2004-05. Geneva. Available from http://www.ilo.org/trends

	re of women and men in: (a) Waged and salaried workers, (b) Self-employed workers, (c) Employers, (d) ment [Own-account workers + Contributing family workers], in percentage
	Vulnerable employment is a newly defined measure of persons who are employed under relatively precariou circumstances as determined by their status in employment. Because contributing family workers and own account workers are less likely to have formal work arrangements, access to benefits or social protection programmes, and are more "at risk" to downturns in economic cycles, these categories of work are considered "vulnerable".
Rational and Gender Issues	There is a connection between vulnerable employment and poverty. If the proportion of vulnerable workers in total employment is sizeable, it may be an indication of widespread poverty. The connection arises because vulnerable workers lack social protection and safety nets to guard against poverty in periods of low economic demand. In addition, vulnerable workers are often incapable of generating sufficient savings for themselve and their families to offset declines in remuneration demand during economic downturns.
	The indicator is highly gender sensitive since, historically, contributing family work is a status that i dominated by women. Consequently, women account for a disproportionate number of vulnerable workers in most countries. There are probably more vulnerable women workers than men workers the indicator should decrease more (or increase less) for women than for men
	The proportion of own-account workers and contributing family workers in total employment is defined a the proportion of workers in self-employment who do not have employees, and unpaid family workers in total employment.
Definition	Own-account workers are those workers who, working on their own account or with one or more partners hold self-employment jobs and who have not engaged on a continuous basis any employees to work for them Contributing family workers, also known as unpaid family workers, are those workers who are self-employe in a market-oriented establishment operated by a related person living in the same household, who cannot b regarded as partners, because their degree of commitment to the operation of the establishment, in terms o working time or other factors to be determined by national circumstances, is not at a level comparable to that of the head of the establishment.
	Self Employment includes those jobs where the remuneration is directly dependent upon the profits (or th potential for profits) derived from the goods and services produced (where own consumption is considered to be part of profits).
	Employees are all those workers who hold paid employment jobs, where the incumbents hold explic (written or oral) or implicit employment contracts that give them a basic remuneration that is not directly dependent upon the revenue of the unit for which they work.  Employment refers to persons above the nationally defined working age (different in every country, but generally close to 15 years) who worked or held a job during a specified reference period. Included at persons who worked for pay or profit (or pay in kind); persons who were temporarily absent from a job for such reasons as illness, maternity or parental leave, holiday, training or industrial dispute; and unpaid family workers who worked for at least one hour, although many countries use a higher hour limit in their definition. The measure of employment is intended to capture persons working in both the formal and informal sectors. Vulnerable employment is defined as the sum of the employment status groups of own-account workers an contributing family workers.
	A decrease indicates that there are fewer people in vulnerable employment. The measure is intended to capture persons working in the formal and informal sectors and households.  Taking vulnerable employment as an example, this indicator is calculated for each women and men, as the
	sum of contributing family women/men workers and women/men own-account workers divided by tota women and men employment multiplied by 100, as follows:
Description and method of computation	Vulnerable employment rate for women/men = <u>Own-account women/men workers + contributing family women/men workers</u> x 100
	Total employment
	The indicator is based on categories of status in employment as defined by the International Classification b

	Status in Employment (ICSE). The ICSE defines six employment status categorizes that are largely based on the types of economic risk associated with different jobs. Economic risk includes the strength of the attachment between the person and the job, and the type of authority over establishments and other workers which the job incumbents have or will have.  It is expressed in per 100 employed.  Disaggregation: Ideally, the data should be disaggregated by age group and education attainment. Countries might also want to consider disaggregating according to urban/rural residence.
Sources and data collection	Data are obtained from population censuses, labour force or other household surveys, establishment surveys, administrative records and official estimates based on results from several of these sources. Labour force surveys can be designed to cover virtually the entire population of a country, all branches of economic activity, all sectors of the economy, and all categories of workers, including own-account workers, unpaid family workers and persons engaged in casual work or marginal economic activity. For this reason, household-based labour force surveys offer a unique advantage for obtaining information on the labour market of a country and its structure.  Other sources such as population censuses and administrative records differ in scope, coverage, units of
	measurement and methods of data collection. Labour force and household surveys may have limited geographical and population coverage. Each source has advantages and limitations in terms of the cost, quality and type of information gained. The ideal geographic coverage is the entire country (no geographic exclusions) and entire populations (no exclusion of population groups).
Reference	INTERNATIONAL LABOUR ORGANIZATION (annual). Key Indicators of the Labour Market. Geneva. Available from http://www.ilo.org/trends INTERNATIONAL LABOUR ORGANIZATION (2005). World Employment Report 2004-05. Geneva. Available from http://www.ilo.org/trends (old 1.2.3)

	women working in agriculture, by status in employment, includes unpaid family workers, subsistence farmers
and own-account worker	r, in percentage Agriculture continues to play an important role in most non-industrial economies, as a major contributor to
Rational and Gender Issues	the country's export earnings and as a source of employment and livelihood. Official statistics often underestimate the value of women's work and their overall contribution to national wealth. Women continue to provide a large proportion of the labour that goes into agriculture. FAO's estimates show that women represent a substantial share of the total agricultural labour force, as individual food producers or as agricultural workers, and that around two-thirds of the female labour force in developing economies is engaged in agricultural work.
	Moreover, what is generally clear from the FAO data is that, as an aggregate, the low-income countries of the world - where agricultural production is still labour-intensive - also tend to have the highest percentages of economically active women working in agriculture, particularly in the LDCs. These percentages are also linked to an increase in male migration to off-farm activities, with women either assuming more responsibility for the family farm or for increased production of cash crops and food processing activities in order to increase family incomes.
	Recognition of the farming unit requires the contribution of all members of the family to be acknowledged and the role of both women and men as primary producers should be recognized. Besides working as paid workers, women worker also has to do unpaid housework. Less paid wage and less hours of work, made female headed households tend to be poorer than male headed households. The relative lack of gender-differentiated data precludes a full assessment of how gender may be related to increased poverty and female-headed households.
	Various studies have concluded that the social-institutional constraints faced by women - in terms of equal access to economic opportunities and productive resources such as land, credit, technology and market information - tend to make them more vulnerable than men, broadly-speaking, in managing risks arising from economic shocks.
	The share of paid women working in agriculture: refers to the share of female paid workers in the agricultural sector is expressed as a percentage of total paid people working in agriculture.
Definition	Similarly, the share of unpaid women working in agriculture is a percentage of total unpaid people working in agriculture (includes unpaid family workers and subsistence work,)
	An increase in paid employment in agriculture together with a decrease of unpaid family work and subsistence work in agriculture will mean that women are accessing better quality employment in agriculture.
	Share of women working in agriculture, paid
	<ul> <li>Number of paid women working in agriculture x100</li> <li>Total number of paid people working in agriculture</li> </ul>
	Share of women working in agriculture, unpaid
Description and method of	<ul> <li>Number of unpaid women working in agriculture x 100</li> <li>Total number of unpaid people working in agriculture</li> </ul>
computation	Share of women working in agriculture (paid and unpaid)  = Number of women working in agriculture x 100  Number of persons working in agriculture
	It is expressed in units of percentage.
	Disaggregation: Ideally, the data should be disaggregated by age group and education attainment.
Sources and data collection	Data are obtained from time use surveys and specialized surveys on women workers in agriculture, agriculture censuses, and labour force surveys.
Reference	http://www.fao.org/docrep/009/a0493e/a0493e03.htm#TopOfPagehttp://www.maf.govt.nz/mafnet/rural-nz/profitability-and-economics/employment/unpaid-work/unpdwk08.htm
	http://www.unescap.org/stat/meet/grpaa/grpaa_indonesia1.pdf

Rational and Gender Issues	The indicator for employment by sector divides employment into three broad groupings of economic activity: agriculture, industry and services. Sectoral information is particularly useful in identifying broad shifts in employment and stages of development.	
Definition	For the purposes of the aggregate sectors the agriculture, industry and services sectors are defined by the International Standard Industrial Classification (ISIC) System.  There are three broad sectors – agriculture, industry and services – and expresses each as a percentage of total employment. The indicator shows employment growth and decline on a broad sectoral scale, while highlighting differences in trends and levels between developed and developing economies.(1990). The agriculture, industry and services sectors are defined by the International Standard Industrial Classification (ISIC) System.2  The agriculture sector comprises activities in agriculture, hunting, forestry and fishing, in accordance with major division 1 of ISIC 2, categories A and B of ISIC 3 and category A of ISIC 4. The industry sector comprises mining and quarrying, manufacturing, construction and public utilities (electricity, gas and water), in accordance with major divisions 2 to 5 of ISIC 2, categories C to F of ISIC 3 or categories B to F of ISIC 4. The services sector consists of wholesale and retail trade, restaurants and hotels, transport, storage and communications, finance, insurance, real estate and business services, and community, social and personal services. This sector corresponds to major divisions 6 to 9 of ISIC 2 or categories G to P of ISIC 3. See the table below for a representation of how the aggregate sectors are calculated according to the different ISIC revisions:  Aggregate sector ————————————————————————————————————	
Description and method of computation	The indicator is calculated as the number of women/men in paid employment in a specific sector divided by the total number of persons in paid employment in the same sector sector. This is the proportion of women/men in "paid employment jobs" (in other words "women/men employees") in a specific sector.  Share of women/men in employment in sector x  Total number of persons in paid employment in sector x  Where "x" can be any of the following three sector: agriculture, industry, services	
Sources and data collection	Data are obtained from population censuses, labour force or other household surveys, establishment surveys, administrative records and official estimates based on results from several of these sources. Labour force surveys can be designed to cover virtually the entire population of a country, all branches of economic activity, all sectors of the economy, and all categories of workers, including own-account workers, unpaid family workers and persons engaged in casual work or marginal economic activity. For this reason, household-based labour force surveys offer a unique advantage for obtaining information on the labour market of a country and its structure.  Other sources such as population censuses and administrative records differ in scope, coverage, units of measurement and methods of data collection. Labour force and household surveys may have limited geographical and population coverage. Each source has advantages and limitations in terms of the cost, quality and type of information gained. The ideal geographic coverage is the entire country (no geographic exclusions) and entire populations (no exclusion of population groups).	
Reference	http://kilm.ilo.org	

Indicator 1.2.11 Proposition girls and boys, with job	rtion of Scientific and Technical and Vocational Education and Training (TVET) programme graduates,
Rational and Gender Issues	There is a need for monitoring and reporting on the persistent marginalization of women from certain educational domains and specializations, especially, Technical and Vocational Education and Training (TVET) centers and unequal access to educational opportunities in these domains.
Definition	The proportion of women and men graduates from TVET programmes expressed as a percentage of total number of graduates with jobs
	The indicator is calculated by dividing the number of women/men graduates from TVET programmes by the total number of graduates from TVET in a given school-year and who are working multiplied by 100.
	Percentage of pupils in TVET programmes with jobs=
Description and method of computation	Number of graduates by sex from TVET programmes x100  Total number of graduates with work in TVET programmes
	Percentage of women pupils graduates from TVET programmes and employed approaching 50% indicates gender parity in the composition of the graduates. A value of greater than 50% reveals more opportunities and/or preference for women students to participate in TVET programmes
	The unit of measure is in percentage
	Disaggregation: By age, occupation, rural/urban
Sources and data collection	Population census, household and labour force surveys.
	http://mdgs.un.org/unsd/mdg/Metadata.aspx
Reference	http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf  UNITED NATIONS (2003). Millennium Indicators Database. Statistics Division Internet site <a href="http://millenniumindicators.un.org">http://millenniumindicators.un.org</a> .  ESCWA Statistics Division

Indicator 1.2.12 Share of firms	with female ownership, in percentage
Rational and Gender Issues	Despite the numerous social changes the world community has encountered, women are still in danger of being deprived of their proper ownership in comparison to men. While ownership of firms affords females with the opportunity to control economic resources and ensure a fixed source of income, their numbers are constantly being small
Definition	Share of a country's firms with some or full female ownership is measured as the percentage of firms with a woman among the principal owners or with full ownership
Description and method of computation	Share of firms with women participating in ownership  = Firms with some or full female ownership *100  Total number of firms  Unit of measure in percentage
Sources and data collection	Official Administrative records from trade registry
Reference	ESCWA Statistics Division

Indicator 1.2.13 Ac	cess of women and men to microfinance, in percentage
Rational and Gender Issues	Microfinance is the provision of savings, credit and/or other financial products in small amounts to primarily poor customers conventionally believed not to have the capacity to save as well as considered unwilling and unable to pay the high interest rate required to cover credit transaction costs. Gendered microfinance means to take into account the needs and constraints of both men and women when designing and delivering finance. The objective of a gender-sensitive approach is to ensure that the finance provided is just as attractive to women as it is to men. Designing an inclusive microfinance institution means finding the lowest common denominator of the targeted customers. For example if women are not allowed to leave their village for cultural reasons then finance has to be provided in the village so that women are included as potential customers. Also, it must not be assumed that microfinance institutions that reach many women with credit are gender-sensitive to the needs and constraints of women. What it means is that there are no insurmountable barriers for women to access this credit which for women is often title to land to offer as collateral. However, given the choice women may prefer different credit terms and conditions, different delivery mechanisms and even different financial products (savings products, insurance, etc.).  Increasing women's access to micro-finance is assumed to initiate a series of 'virtuous spirals' of economic empowerment, increased well-being for women and their families and wider social and political empowerment. The underlying assumption is that these mutually reinforcing spirals of empowerment can occur following women's access to micro-finance without explicit support for women to increase their incomes, to defend their interests within the household or for wider social and political changes in gender or class relations. However, conditions of micro-finance delivery affect women's ability to use micro-finance to increase incomes and control these incomes.
Definition	It is the proportion of women or men having access to provisions of savings, credit and/or other financial products to total population provided with savings, credit and / or other financial products.
Description and method of computation	The indicator is calculated by dividing the number of women or men having access to credit by the total population provided with credit  Access of women and men to credit indicator  = Number of women / Men having credit x 100  Total number of persons having credit  The unit of measure is in percentage Disaggregation: By age, localities, income groups.
Sources and data collection	Administrative records from financial enterprises (private and government credit and microfinance institutions)
Reference	http://www.gdrc.org/icm/wind/binns-4.html

Indicator 1.2.14 Gender pay gap in monthly earnings, by occupation		
	Male earnings are generally higher than female rates. It is an evident and documented fact that men earn higher wages than women, even after checking both for observable characteristics related to their productivity and the overall wage structure.	
Rational and Gender Issues	The differences in the pay levels of women and men can in part be a reflection of the objective differences relating to the individual concerned (age, level of education, experience acquired), the job (profession, type of contract or working conditions) or the company (economic sector or company size).	
	For instance, experience usually counts for more in the workplace. If men have more experience, on average, than women, then their pay will also be higher than average. In spite of this, discrimination can still exist and be directed at workers because of their sex. Some women with a level of experience equal to that of men are sometimes paid less than men for the same work as a result of deliberate discrimination.	
	Gender pay gap refers to the difference in earnings of men and women: what women on average take out of employment in monetary terms relative to men. It is calculated as the difference between average earnings of men and women as a percentage of average earnings of men.	
Definition	Being an average, the gender pay gap can only provide an overall picture of gender inequality in total pay for employment. It does not say if women and men with the same (or similar) jobs receive different compensations. It does not explain in itself why wage differences between men and women exist.	
	To understand the gender pay gap and to better inform policy-makers, it is necessary to disaggregate the gender pay gap according to various associated factors and possible causes, such as by level of education, occupation and seniority. (2)	
Description and method of computation	The gender pay gap (as measured by the average monthly pay excluding overtime of full-time employees). It is the relative difference in the average monthly earnings of women and men within the economy as a whole, as a percentage of average monthly earnings of male earnings (with and without overtime of full-time paid employees)	
	Gender pay gap = Monthly wages of men – Monthly wages of women  Monthly wages of men  *100	
	The unit of measure is in percentage  Disaggregation:  By occupation (at a level of education and seniority) with/without overtime	
Sources and data collection	Data are obtained from labour force surveys, Working conditions surveys, enterprise censuses and surveys, administrative records.  For comparability purposes one type of survey should by used, such as either LFS or only ES.	
Reference	(1) http://ec.europa.eu/employment_social/news/2007/jul/genderpaygap_en.pdf	
	(2) http://www.unece.org/stats/video/genderpaygap.htm	
	(3) http://www.womenlobby.org/SiteResources/data/MediaArchive/policies/gender%20equality/EWL% 20Roadmap%20implementation%20report%202007_EN.pdf (old 3.1.4)	
Priority Issues	Eliminating the gender pay gap Closing the gender pay gap requires a multifaceted approach including setting concrete targets, implementing equal pay legislation and equal opportunities policies and gender-sensitive wage policies. The existence of	

Policy recommendations	<ul> <li>affordable, accessible and high-quality care services for all dependants, gender-sensitive leave arrangements, strong incentive for men and women to share family responsibilities equally should be part of the efforts to close the pay gap.</li> <li>A. Concrete targets and definite timelines for Member countries to reduce the pay gap should be introduced in the Integrated Guidelines or Growth and Jobs.</li> <li>B. Legal measures on obligatory equal pay audits based on indicators should be adopted.</li> <li>C. Leave-time and career breaks related to reproduction and caring responsibilities should be made positive components of pay.</li> <li>D. Equality bodies and labour inspectorates should oblige employers to submit data relevant to pay gap disputes otherwise inaccessible to employees, while employers should be engaged in exploring the underlying issues contributing to the gender pay gap.</li> </ul>
	E. The impact of the 'flexicurity' concept on the gender pay gap should be assessed.

Male earnings are generally higher than female rates. It is an evident and documented fact that men earn higher wages than women, even after checking both for observable characteristics related to their productivity and the overall wage structure.  The differences in the pay levels of women and men can in part be a reflection of the objective differences relating to the individual concerned (age, level of education, experience acquired), the job (profession, type of contract or working conditions) or the company (economic sector or company size).  For instance, experience usually counts for more in the workplace. If men have more experience, on average, than women, then their pay will also be higher than average. In spite of this, discrimination can still exist and be directed at workers because of their sex. Some women with a level of experience equal to that of men are sometimes paid less than men for the same work as a result of deliberate discrimination.  International agreed definition: At the 81st Session of the International Labour Conference in 1994, the ILO defined "part-time workers" as "an employed person whose normal hours of work are less than those of comparable full-time workers". Thus, the demarcation point is left to the individual countries to define. Some countries use worker interpretation of their own employment situation for distinguishing time wersus part-time work; that is, survey respondents are classified according to how they perceive their work contribution. Other countries use a cut-off point based on weekly hours usually or actually worked. Dividing lines are typically somewhere between 30 and 40 hours a week. For this indicator, a standardized cut-off point was designated at 30 hours per week.  The employed comprise all persons of working age who during a specified brief period, such as one week or one day, were in the following categories: a) paid employment (whether at work or with a job but not at work); or b self-employment, or persons who during the reference period performed	Indicator 1.2.15 Proportion of employed working part-time, by sex		
higher wages than women, even after checking both for observable characteristics related to their productivity and the overall wage structure.  The differences in the pay levels of women and men can in part be a reflection of the objective differences relating to the individual concerned (age, level of education, experience acquired), the job (profession, type of contract or working conditions) or the company (economic sector or company size).  For instance, experience usually counts for more in the workplace. If men have more experience, on average, than women, then their pay will also be higher than average. In spite of this, discrimination can still exist and be directed at workers because of their sex. Some women with a level of experience equal to that of men are sometimes paid less than men for the same work as a result of deliberate discrimination.  International agreed definition: At the 81st Session of the International Labour Conference in 1994, the ILO defined "part-time worker" as "an employed person whose normal hours of work are less than those of comparable full-time workers" as "an employed person whose normal hours of work are less than those of comparable full-time workers." Thus, the demarcation point is left to the individual countries to define. Some countries use worker interpretation of their own employment situation for distinguishing full-time versus part-time work; that is, survey respondents are classified according to how they perceive their work contribution. Other countries use a cut-off point based on weekly hours usually or actually worked. Dividing lines are typically somewhere between 30 and 40 hours a week. For this indicator, a standardized cut-off point was designated at 30 hours per week.  The employed comprise all persons of working age who during a specified brief period, such as one week or one day, were in the following categories: a) paid employment (whether at work or with a job but not at work); or b) self-employment (whether at work or with an enterprise but not at	maicator 1.2.15 Propo	ortion of employed working part-time, by sex	
relating to the individual concerned (age, level of education, experience acquired), the job (profession, type of contract or working conditions) or the company (economic sector or company size).  For instance, experience usually counts for more in the workplace. If men have more experience, on average, than women, then their pay will also be higher than average. In spite of this, discrimination can still exist and be directed at workers because of their sex. Some women with a level of experience equal to that of men are sometimes paid less than men for the same work as a result of deliberate discrimination can still exist and be directed at workers because of their sex. Some women with a level of experience equal to that of men are sometimes paid less than men for the same work as a result of deliberate discrimination can still exist and be directed at workers because of their sex. Some women with a level of experience equal to that of men are sometimes paid less than an experience of their sex. Some women with a level of experience equal to that of men are sometimes paid less than those of comparable full-time workers". Thus, the demarcation point is left to the individual countries to define. Some countries use a cut-off point based on weekly hours usually or extually worked. Dividing lines are typically somewhere between 30 and 40 hours a week. For this indicator, a standardized cut-off point was estimated at 30 hours per week.  The employed comprise all persons of working age who during a specified brief period, such as one week or one day, were in the following categories: a) paid employment (whether at work or with a job but not at work); or b) self-employment (whether at work or with an enterprise but not at work). The concept at work refers to persons who during the reference period performed some work for wage or salary, in eash or in kind (for self-employment). For operational purposes, the notion "some work" may be interpreted as work for at least one hour. For more detailed information, please refe		higher wages than women, even after checking both for observable characteristics related to their productivity and the overall wage structure.	
than women, then their pay will also be higher than average. In spite of this, discrimination can still exist and be directed at workers because of their sex. Some women with a level of experience equal to that of men are sometimes paid less than men for the same work as a result of deliberate discrimination.  International agreed definition: At the 81st Session of the International Labour Conference in 1994, the ILO defined "part-time worker" as "an employed person whose normal hours of work are less than those of comparable full-time workers". Thus, the demarcation point is left to the individual countries to define. Some countries use worker interpretation of their own employment situation for distinguishing full-time versus part-time work; that is, survey respondents are classified according to how they perceive their work contribution. Other countries use a cut-off point based on weekly hours usually or actually worked. Dividing lines are typically somewhere between 30 and 40 hours a week. For this indicator, a standardized cut-off point was designated at 30 hours per week.  The employed comprise all persons of working age who during a specified brief period, such as one week or one day, were in the following categories: a) paid employment (whether at work or with a job but not at work); or b) self-employment (whether at work or with an enterprise but not at work). The concept at work refers to persons who during the reference period performed some work for wage or salary, in cash or in kind (for paid employment), or persons who during the reference period performed some work for wage or salary, in cash or in kind (for paid employment), or persons who during the reference period performed some work for wage or salary, in cash or in kind (for paid employment), or poperational purposes, the notion "some work" may be interpreted as work for at least one hour. For more detailed information, please refer to the Resolution concerning statistics of the economically active population (Source: ILO)  Thirteenth Inte	Rational and Gender Issues	relating to the individual concerned (age, level of education, experience acquired), the job (profession, type of	
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employed working less than 30 hours a week as a percentage of the total employed population. (Source:ILO)  — Importance of the indicator in addressing gender issues and its limitation: The proportion of employed working less than 30 hours a week is a crucial indicator in the study of working conditions of the employed since it can convey important information on issues such as underemployment, working time arrangements (and in particular part-time work), level of attachment to the job and labour market integration. Regarding women, in addition to economic considerations, there are social and cultural aspects at the national level that will determine their level of integration and attachment to the labour market. Having statistics on the proportion of employed working less than 30 hours a week (both voluntarily and involuntarily) by sex is essential to reveal women's situation in terms of underemployment and weak job attachment and thus allow for policies to address these issues specifically. (Source:ILO)  Statistics on employment by hours worked and sex are collected annually through a specialized questionnaire for the ILO's statistics database ILOSTAT sent directly to the official national authorities (labour ministries, national statistical offices, etc.) in all member States and Territories. Statistics are also gleaned from official national publications and websites when data are not reported directly by national authorities. In principle, the data are not adjusted, as they are collected through a standard questionnaire, and reported in line with the	Definition	defined "part-time worker" as "an employed person whose normal hours of work are less than those of comparable full-time workers". Thus, the demarcation point is left to the individual countries to define. Some countries use worker interpretation of their own employment situation for distinguishing full-time versus part-time work; that is, survey respondents are classified according to how they perceive their work contribution. Other countries use a cut-off point based on weekly hours usually or actually worked. Dividing lines are typically somewhere between 30 and 40 hours a week. For this indicator, a standardized cut-off point was designated at 30 hours per week.  The employed comprise all persons of working age who during a specified brief period, such as one week or one day, were in the following categories: a) paid employment (whether at work or with a job but not at work); or b) self-employment (whether at work or with an enterprise but not at work). The concept at work refers to persons who during the reference period performed some work for wage or salary, in cash or in kind (for paid employment), or persons who during the reference period performed some work for profit or family gain, in cash or in kind (for self-employment). For operational purposes, the notion "some work" may be interpreted as work for at least one hour. For more detailed information, please refer to the Resolution concerning statistics of the economically active population, employment, unemployment and underemployment, adopted by the Thirteenth International Conference of Labour Statisticians (October 1982): http://www.ilo.org/global/statistics-and-databases/standards-andguidelines/resolutions-adopted-by-international-conferences-of-labourstatisticians/	
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indicated with notes. (Source:ILO)	Sources and data collection	for the ILO's statistics database ILOSTAT sent directly to the official national authorities (labour ministries, national statistical offices, etc.) in all member States and Territories. Statistics are also gleaned from official national publications and websites when data are not reported directly by national authorities. In principle, the data are not adjusted, as they are collected through a standard questionnaire, and reported in line with the international classifications. All deviations from the international standard definitions and classifications are	
eference (Source:ILO) (old 3.1.4)	Reference	(Source:ILO) (old 3.1.4)	

Indicator 1.2.16. Empl living in the household	oyment rate of persons aged 25-49 with (a) a child under age 3 living in a household and (b) with no children
Rational and Gender Issues	
Definition	
Description and method of computation	
Sources and data collection	
Reference	

Indicator 1.2.17. Proportion of children under age 3 in formal care by mother's employment status		
Rational and Gender Issues		
Definition		
Description and method of computation		
Sources and data collection		
Reference		

## 1.3 Child Labor

Indicator 1.3.1	Proportion of children, girls and boys (5 to 14 years old) employed in productive activities, in percentage.
Rational and Gender	The available data indicate that boys are more likely to be economically active than girls. Girls are more often engaged in unpaid household services.
	Reliable estimates of child labour are difficult to obtain. In many countries child labour is assumed not to exist and therefore is excluded from official statistics.
	Some estimates cover only children ages 10–14. Others cover children ages 5–14. Still others cover different age ranges. Not all work is harmful to a child's development.
Issues	The International Labour Organization has addressed this concern, for example, by differentiating acceptable work from unacceptable labour. The United Nations Children's Fund sometimes also distinguishes between different types of work and different ages of children.
	There are probably more girls engaged in productive activities than boys the indicator should decrease more (or increase less) for girls than for boys. On the other side, there are probably more boys who are engaged in employment than girls, or in worst forms of child labour
Definition	Refers to children who are employed in an economic activity for pay, profit or family gain. Economic activity covers the production of goods and services for pay or profit or for use by own household, falling within the general production boundary as defined in the System of National Accounts (SNA); they are children in employment and children in other productive activities i.e., in unpaid household services
	Children engaged in child labour include all persons aged 5 to 14 years who, during a specified time period, were engaged in one or more of the following categories of activities: (a) worst forms of child labour, (as described in paragraphs 17–30); (b) employment below the minimum age, (as described in paragraphs 32 and 33); (c) hazardous unpaid household services, (as described in paragraphs 36 and 37), applicable where the general production boundary is used as the measurement framework.
	A decrease indicates that less children are engaged in productive activities
	Proportion of working girls aged 5-14 years old =
	Number of working girls aged 5-14 years x100 Children aged 5-14 years
Description	Proportion of working boys aged 5-14 years old =
and method of computation	Number of working boys aged 5-14 years x100 Children aged 5-14 year
computation	The unit of measure is in percentage.
	Disaggregation:
	Girls and boys in rural/urban, disabled, by age and education.
Sources and data collection	The main data sources for from household surveys (labour force surveys, Time use surveys ) or population censuses are unavailable, administrative records might be an alternative
Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx
	http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdfhttp://www.ilo.org/public/english/standards/ipec/
	http://www.ilo.org/wcmsp5/groups/public/dgreports/integration/stat/documents/normativeinstrument/wcms_112458.pdf

## 1.4 Hunger

Indicator 1.4.	1 Prevalence of underweight children under-five years of age, in percentage
Rational and Gender Issues	Child malnutrition, as reflected in body weight, is selected as an indicator for several reasons. Child malnutrition is linked to poverty, low levels of education and poor access to health services. Malnourishment in children, even moderate, increases their risk of death, inhibits their cognitive development, and affects health status later in life. Sufficient and good quality nutrition is the cornerstone for development, health and survival of current and succeeding generations. Healthy nutrition is particularly important for women during pregnancy and lactation so that their children set off on sound developmental paths, both physically and mentally. Only when optimal child growth is ensured for the majority of their people will Governments be successful in their efforts to accelerate economic development in a sustained way.
	The under-five underweight prevalence is an internationally recognized public health indicator for monitoring nutritional status and health in populations. Child malnutrition is also monitored more closely than adult malnutrition.
	Prevalence of (moderately and severely) underweight children is the percentage of children aged 0-59 months whose weights for age are less than two standard deviations below the median weight for age of the international reference population. The international reference population, often referred to as the NCHS/WHO reference population, was formulated by the National Center for Health Statistics (NCHS) as a reference for the United States and later adopted by the World Health Organization (WHO).
Definition	The NCHS/WHO reference standard represents the distribution of height and weight by age and sex in a well-nourished population. In a well-nourished population, 2.3 percent of children fall below minus two standard deviations.  A new standard reference population, the WHO Child Growth Standards, was released in April 2006 and is also being used to estimate underweight prevalence (see Comments and Limitations below).  Percentage of children under five that are underweight = (Number of children under age five that fall below minus two standard deviations from the median weight for age of the NCHS/WHO standard (moderate and severe))*100/ Total number of children under age five that were weighted.
	The weights of children under five years of age are compared with the weights given in the NCHS/WHO standard reference population for each age group. The percentage of children whose weights are less than 2 standard deviations below the median weight for age are then aggregated to form the total percentage of children under five who are underweight.
Description and method of computation	Percentage of children under five that are underweight $= \frac{\text{Number of children under age five that fall below minus two standard deviations from the median weight for age of the NCHS/WHO standard (moderate and severe)}{\text{Total number of children under age five that were weighed}} *100$
computation	
	Unit of measure is in percentage.  Disaggregation: Distributed by months 0-3m, 4-6m, 7-12m, 1-2 yr, 2-3yr, 4-<5yr, by sex, income group, disabled, and by rural/urban (moderate and severe)
Sources and data collection	At the national level, data are generally available from national household surveys, including Demographic and Health Surveys, Multiple Indicator Cluster Surveys and national nutrition surveys.  For international comparisons and global or regional monitoring, the United Nations Children's Fund (UNICEF) and WHO compile international data series and estimates based on data from national surveys.
Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf World Bank Metadata for Indicators 2009

Indicator 1.4.2	2 Women and men below minimum level of dietary energy consumption , in percentage	
	This indicator measures an important aspect of the food insecurity of a population and the capacity for sustainable development which demands efforts to reduce poverty, including finding solutions to hunger and malnutrition. Alleviating hunger is a prerequisite for sustainable poverty reduction since under-nourishment seriously affects, among other things, labour productivity, health and learning capacity and hence earning propensity. The indicator ranges from 0 (no undernourished population) to 100 (the entire population is undernourished). The higher the indicator is, the more people suffer from undernourishment (food deprivation) in a given country. Common undernourishment categories for a population are:	
Rational and	<ul> <li>Less than 5 per cent – Not a significant level of undernourishment</li> <li>From 5 to 9 per cent – Low level of undernourishment</li> <li>From 10 to 19 per cent – Moderate level of undernourishment</li> <li>From 20 to 34 per cent – High level of undernourishment</li> <li>35 per cent and above – Very high level of undernourishment.</li> </ul>	
Gender Issues	Progress toward reducing hunger for the MDGs is monitored by comparing the proportion of undernourished people in the latest three-year period for which data are available to the proportion prevailing in the bench-mark period 1990-92. The MDG target is to reduce the bench-mark proportion by half. Changes in the indicator guide governments and the international organizations in formulating policies and implementing actions towards improving food availability and access by the population; decreasing the negative impact of increasing income inequalities on food access; and coping with trends in food needs generated by the impact of population policies.	
	Intra-household access to food may show disparities by gender. Also, cultural patterns of distribution and nutritional taboos may affect women's nutrition. Women's higher requirements for iron during pregnancy and breast-feeding may result in iron deficiency anemia, which affects the result of pregnancy and may increase women's susceptibility to diseases. Therefore, whenever household survey food consumption data are available by sex, efforts should be made to conduct gender-based undernourishment analyses, including analyses of iron available in diets.	
	The proportion of women and men below the minimum level of dietary energy consumption, referred to as the proportion of <i>undernourished</i> people, is the percentage of women and men in a population who suffer from hunger or food deprivation.	
Definition	<i>Undernourishment</i> refers to the condition of people whose food consumption is continuously below a minimum dietary energy requirement for maintaining an acceptable minimum body size, a healthy life and carrying out light physical activity.	
	The estimate of the proportion of undernourished people is a measure of food deprivation based on the following three parameters that are estimated for each country and for each year:	
Description and method of computation	<ul> <li>The three-year average amount of food available for human consumption per person per day;</li> <li>The level of inequality in access to that food; and</li> <li>The minimum dietary energy required for an average person expressed in kilo-calories per day.</li> </ul> The average food available for human consumption is calculated by summing domestically produced food products and imported food products, and then subtracting food exports, food withdrawn from stocks for purposes other than consumption and food losses during a three-year period. The estimated total quantity of food available for human consumption is then converted into dietary energy terms expressed in kilo-calories and divided by the total population and the number of days to come up with the average dietary energy consumption per person per day. The level of inequality in access to food is measured by the coefficient of variation of dietary energy consumption due to income differences. The other component of inequality is measured by the coefficient of variation of dietary energy consumption due to biological factors. The former is derived from food consumption and income data collected in household surveys while the latter is derived from anthropometric survey data on attained height by sex and age, standards on energy requirements and data on the country sex-age population structure. Both sources of variation comprise the total inequality of dietary energy consumption and change very little over time within a given	

variation comprise the total inequality of dietary energy consumption and change very little over time within a given country. Inequality in access to food due to income differences may be affected by changes in economic, sociopolitical and environmental factors such as physical availability of food and food prices; however, individuals of a given sex and age typically consume dietary energy within a range compatible with biological constraints. Inequality

in access to food due to biological factors then reflects sex and age ranges in the total population. Biologically based inequalities in access to food are affected by the maturation rate of populations.

The minimum level of dietary energy requirements, or cut-off point, is derived using energy standards established by the Food and Agriculture Organization, World Health Organization, and United Nations University (FAO/WHO/UNU) for different sex and age groups performing sedentary physical activity and with a minimum acceptable body-weight for attained heights. Since a large adult needs almost double the dietary energy of a three-year-old child, the minimum energy requirement per person for each country should take into account its mix of age, gender and body sizes. In this sense, the cut-off point, which is used only for the purpose of estimating undernourishment, is calculated nationally as a population per person per day average value, based on dietary energy needed by different age and gender groups and the proportion of the population represented by each age group for a given year.

As it is not feasible to determine the precise energy consumption of individuals, the estimate of the proportion of **women and men** with insufficient energy consumption is defined within a probability distribution framework, as follows:

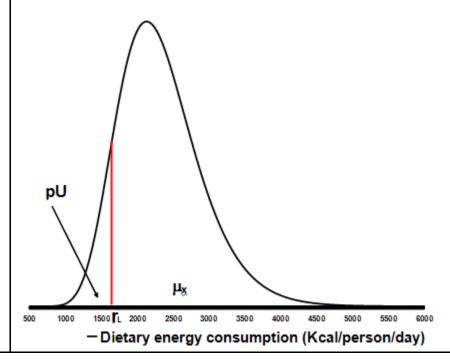
$$P(U) = P(x < r_L) = \int_{x < r_L} f(x) dx = F_x(r_L)$$

Where:

- P(U) is the proportion of undernourished women/men in various population groups at sub-national levels, and total population;
- (x) refers to the dietary energy consumption or intake;
- rL is a cut-off point reflecting the minimum acceptable dietary energy consumption;
- f(x) is the density function of dietary energy intake; and,
- Fx is the cumulative distribution function.

The graph below illustrates the methodological framework for estimating the proportion of the women and men who are undernourished based on the assumption that dietary energy consumption follows a log normal distribution. The curve depicts the proportion of the population corresponding to different per person per day dietary energy consumption levels (x) represented by the horizontal line. The area under the curve up to the minimum acceptable dietary energy consumption (rL) represents the proportion of the population below the minimum level of dietary energy consumption or the proportion of the population undernourished, i.e. the proportion of people with food deprivation, pU.

### Distribution of dietary energy consumption



#### Disaggregation:

In assessing food insecurity, it is important to consider geographical areas that may be particularly vulnerable (such as areas with a high probability of major variations in food production or supply, or areas that are subject to natural disasters or are not well connected to markets) and the population groups whose access to food is precarious or sporadic (due to structural or economic vulnerabilities), such as particular ethnic or social groups. Gender differences may also be more pronounced in some social and ethnic groups.

To support disaggregated estimates, food consumption data collected through National Household Budget Surveys are used to estimate the proportion of undernourished people in various population groups at sub-national levels (defined geographically or by household or household member characteristics), disabled, and by age. The unit is in percentage.

Data are usually produced by national statistical offices, ministries of agriculture and other national institutions that prepare national food balances or are engaged in national food security. Data on food production and trade are generally available on a yearly basis; food production data are compiled in accordance with the agricultural calendar and trade data are compiled in accordance with the business calendar. Undernourishment estimates are derived for three-year periods to account for the difference between these calendars.

The necessary data for the calculation of this indicator are from the following sources.

- Food production is compiled by the Ministry of Agriculture, Ministry of Industry, etc. on an annual basis;
- Food trade is compiled by the Ministry of Trade, Industry and Commerce and the Customs Department on an annual basis;
- Private and public sector food balance sheets which estimate food availability for human consumption;
- Mean per person per day dietary energy consumption (private consumption) by income or total expenditure levels (deciles of per person income or total expenditure) is derived from National Household Surveys that collect food consumption data. Such surveys are conducted on a less frequent basis by National Statistics Organizations to estimate inequality in access to food due to income;
- Mean heights attained by sex and age-group are derived from National Anthropometric Surveys to derive
  inequality in access to food due to biological factors. Such surveys are available on an occasional basis
  from National Statistics Organizations or Ministries of Health; and
- Population and sex and age population structure data are from national censuses conducted by National Statistics Organizations.

The accuracy of dietary energy consumption estimates varies from country to country. Evaluation of accuracy is through consistency checks, based on complete revisions of all related information (concepts, definitions and methods).

Country data on changes in the variance of the distribution of dietary energy consumption due to income variations in the population have been limited during the last three decades. This is because food consumption data collected in national household surveys need to be converted to dietary energy consumption in order to be utilized. Also, data on height secular trends by sex and age-groups are scarce since countries don't usually conduct regular anthropometric surveys in the total population.

Data on population structure by sex and age group are updated periodically. Changes in the age-sex structure of the population impact both minimum dietary energy consumption and the variance of dietary energy consumption. Therefore, these changes need to be taken into account.

### Reference

http://mdgs.un.org/unsd/mdg/Metadata.aspx

http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf

## Sources and data collection

## 1.5 Property Rights

Indicator 1.5.1 Gender Parity Index in farm ownership by area, and proportion of farms jointly held		
Rational and Gender Issues	The indicator is used to monitor the gender gap in ownership of agricultural land. Women owners of lands are usually less than that of men. Women usually own smaller area farms than men.  Governments usually have technical assistance programmes for small farmers, and these are an important source of access to technology, and sometimes to credit. Among the most common are the agricultural extension programmes sponsored by official bodies. However, women ownership does not necessarily mean access to these assistance programmes.	
Definition	The ownership of farms is calculated on the basis of the farms ownership.  A first level of equality is attained when women own 50% of farms, and a second level when they own 50% of farmland by area.  The gender Parity Index (GPI) in house ownership defines the differentials between women and men ownership of farmlands. Equality or Parity is reached ie equals one when the number of farms owned by women are same as the number of farms owned by men.	
	A GPI above one means there are more women than men, while a GPI below one means fewer women than men.  Gender equity indicators can make it easier to identify changes over time, and to monitor trends.	
	The GPI is the ratio of individual ownership women to men, calculated on the basis of land ownership, but if only producers are registered, this information can be used instead; the category used and the date of the source should be stated.  GPI in farm = Number of farms owned individually by women ownership Number of farms owned individually by men	
Description and method of computation	Proportion of farms owned = Number of farms owned by both women & men x 100  Jointly by both Total number of all farms in individual & joint ownership  Women and men  Calculate the same indicator by area size of farms, dividing them in accordance with national standards into small, medium-sized and large.	
	Disaggregation: This indicator can be generated in rural areas and by age, disabled, marital status, level of education and source of asset (bought, inherited, etc)	
Sources and data collection	Agricultural censuses may have information on who the owners are, or may only record the identity of those who work the farms or are responsible for administering them.	
Reference	http://www.eclac.org/publicaciones/xml/4/4334/women1.htm http://laborsta.ilo.org/applv8/data/c4e.html FAO WCA 2010 Guidelines, Tabulation classes for Item 0003 (Sex of holder)	

Indicator 1.5.2 Gender Parity Index in house ownership, and proportion of houses jointly held, in percentage		
	The indicator consists of a brief summary of legal and administrative obstacles that prevent women in general taking up ownership of housing.	
Rational and Gender Issues	Equality/Parity in this area is achieved when the gender situation of women does not constitute an obstacle to their owning property.	
	Another objective is genuinely equal access to home ownership in the poorest sectors. To monitor this, the following result indicator is recommended.	
	The ownership of houses are calculated on the basis of the houses ownership Equality is attained when women own 50% of houses.	
Definition	The Gender Parity Index (GPI) in house ownership defines the differentials between women and men ownership of houses.	
Definition	A GPI above one means there are more women than men, while a GPI below one means fewer women than men. Gender parity indicators can make it easier to identify changes over time, and to monitor trends.	
	GPI in house = Number of houses owned individually by women ownership Number of houses owned individually by men	
	%Houses owned = Number of houses owned by women x 100 by women Total number of houses in individual ownership	
Description and method of computation	%Houses owned = Number of houses owned by men x 100 by men Total number of houses in individual ownership	
Computation	%Houses owned = Number of houses owned by both women & men x 100  Jointly by both Total number of all houses in individual & joint ownership  Women and men	
	The unit is in percentage.	
	Disaggregation: This indicator can be generated in rural areas and by age, disabled, marital status, level of education and source of asset (bought, inherited, etc)	
Sources and data collection	The main data source for the ownership of houses are: censuses, household surveys and administrative records	
Reference	http://www.eclac.org/publicaciones/xml/4/4334/women1.htm	

## **Goal 2: Achieve Universal Primary Education**

## 2.1 Education

Indicator 2.1.1 Candar Darity Inday in advantion in three levels of advantion (a) and a discount (b) and a discount (c) tarti-			
mulcator 2.1.1 Gende	Indicator 2.1.1 Gender Parity Index in education in three levels of education (a) primary, (b) secondary, (c) tertiary.		
Rational and	Despite improvements in enrolment levels at the primary, secondary and tertiary levels, many countries have a long way to go to achieve gender equality. Some of reasons are lack of trained teachers; a lack of female teachers; inadequate school materials; classroom environments not conducive to girls; families living far from schools; the social perception of girls being of less value and parents consequently having limited ambitions for them, in addition to lack of security in some conflict stricken countries.		
	Gender Parity Index (GPI) is the ratio of girls to boys, measured in terms of school enrolment, is a measure of both fairness and efficiency. Education is one of the most important aspects of human development. Eliminating gender disparity at all levels of education would help to increase the status and capabilities of women. Female education is also an important determinant of economic development.		
Gender Issues	This indicator measures progress towards equity in education for girls in relation to that for boys. It also measures a presumed outcome of attending school and is a key indicator of empowerment of women in society.		
	In situations of limited resources, families make difficult choices about sending their children to school. They may perceive the value of education differently for boys and girls. Girls are more likely than boys to suffer from limited access to education, especially in rural areas. However, where basic education is widely accepted and overall enrolment is high, girls tend to equal or outnumber boys at the primary and secondary levels. The pattern is similar in higher education, but with larger differences between the two genders.		
	The ratio of girls to boys in primary, secondary or tertiary education, or Gender Parity Index, is the ratio between the Gross Enrolment Ratio (GER) of girls and that of boys, for each level of education.		
Definition	Primary education, according to the International Standard Classification of Education (ISCED97), normally consists of programmes designed on a unit or project basis to give pupils a sound basic education in reading, writing and mathematics along with an elementary understanding of other subjects such as history, geography, natural science, social science, art and music.		
	Secondary education is divided by ISCED97 into lower secondary education and upper secondary education. Lower secondary education is generally designed to continue the basic programmes of the primary level but with more subject-focused teaching, requiring more specialized teachers for each subject area. In upper secondary education, instruction is generally organized even more along subject lines and teachers typically need an even higher or more subject-specific qualification.		
	Tertiary education is defined by ISCED97 as programmes with an educational content more advanced than what is offered at the secondary level. The first stage is composed of largely theoretically based programmes intended to provide sufficient qualifications for gaining entry into advanced research programmes and professions with high skill requirements; and programmes that are generally more practical, technical and/or occupationally specific. The second stage of tertiary education comprises programmes devoted to advanced study and original research, which lead to the award of an advanced research qualification.		
	The Gender Parity Index (GPI) is another term used to describe the ratio of girls to boys in primary, secondary or tertiary education. The GPI is calculated based on the Gross Enrolment Ratio for a given level of education.		
	The Gross Enrolment Ratio (GER) is the total enrolment in a specific level of education, regardless of age, expressed as a percentage of the eligible official school-age population corresponding to the same level of education in a given school year.		

Description and method of computation	The GPI is calculated by dividing the female GER by the male GER for a given level of education. To calculate the GER it is first necessary to determine the official school age population for each level of education. Then, then the number of students enrolled in each level of education is divided by the official school age population for that level of education, and the result is multiplied by 100. GERs for boys and girls are calculated separately. $ \begin{aligned} \mathbf{GER}_h^t &= \frac{\mathbf{E}_h^t}{\mathbf{P}_{h,a}^t} * 100 \\ \end{aligned} $ Where: $ \begin{aligned} \mathbf{Gross} &= \mathbf{E}_h^t \\ \mathbf{P}_{h,a}^t &= 100 \end{aligned} $ Where: $ \begin{aligned} \mathbf{Gross} &= \mathbf{E}_h^t \\ \mathbf{P}_{h,a}^t &= 100 \end{aligned} $ Where is Gross Enrolment at the level of education $h$ in school year $t$ . Population in age group $a$ which officially corresponds to the level of education $h$ in school year $t$ . Note: For example, if the entrance age for primary education is 7 years with a duration of 6 years, then $a$ is (7-12) years. $ \begin{aligned} \mathbf{GER}_h^t &= \frac{\mathbf{E}_h^t}{\mathbf{P}_{h,a}^t} \times 100 \\ \mathbf{W}here: \\ \mathbf{GER}_h^t &= \mathbf{Gross} &= \mathbf{E}_h\mathbf{I} \\ \mathbf{E}_h^t &= \mathbf{E}_h\mathbf{I} \end{aligned} $ and the level of education $\mathbf{E}_h^t = \mathbf{E}_h\mathbf{I} \end{aligned} $ and the level of education $\mathbf{E}_h^t = \mathbf{E}_h\mathbf{I} \end{aligned} $ and $\mathbf{E}_h^t = \mathbf{E}_h\mathbf{I} \end{aligned} $ and $\mathbf{E}_h^t = \mathbf{E}_h\mathbf{I} \end{aligned} $ by the population in age group a which officially corresponds to the level of education $\mathbf{E}_h^t = \mathbf{E}_h\mathbf{I} \end{aligned} $ and $\mathbf{E}$
Sources and data collection	School register, school survey or census for data on enrolment by level of education. Population censuses or household surveys.
Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf UNITED NATIONS (2003). Millennium Indicators Database. Statistics Division Internet site http://millenniumindicators.un.org. http://www.uis.unesco.org/file_download.php?URL_ID=5202&filename=10526426091UIS_education_indic ator_definitions_EN.pdf&filetype=application%2Fpdf&filesize=139152&name=UIS_education_indicator_de finitions_EN.pdf&location=user-S/

Indicator 2.1.2 Propo	ortion of girls and boys starting grade 1 who reach last grade (survival rate), in percentage
mulcator 2.1.2 r topo	ortion of girls and boys starting grade 1 who reach fast grade (survival fate), in percentage
Rational and Gender Issues	The indicator measures an education system's success in retaining students from one grade to the next as well as its internal efficiency. Various factors account for poor performance on this indicator, including low quality of schooling, discouragement over poor performance and the direct and indirect costs of schooling. Students' progress to higher grades may also be limited by the availability of teachers, classrooms and educational materials. Frequency and dropout patterns vary between girls and boys. Reasons for leaving school also differ for girls and boys and by age. Families' demand on children's time to help in household-based work is an important factor and is often greater for girls. Also important for girls are security, the proximity of school facilities and the availability of adequate sanitation and other services in schools.
Definition	The proportion of pupils (girls/boys) starting grade 1 who reach last grade of primary education, known as the Survival Rate to last Grade of primary, is the percentage of a cohort of pupils (girls/boys) enrolled in grade 1 of the primary level of education in a given school year who are expected to reach the last grade of primary school, regardless of repetition.  Primary education is defined by International Standard Classification of Education (ISCED97) as programmes normally designed on a unit or project basis to give pupils a sound basic education in reading, writing and mathematics along with an elementary understanding of other subjects such as history, geography, natural science, social science, art and music.
Description and method of computation	The indicator is typically estimated from data on enrolment and repetition by grade for two consecutive years, in a procedure called the reconstructed cohort method. This method makes three assumptions: drop-outs never return to school; the promotion, repetition and drop-out rates observed in the last two years remain constant over the entire period in which the cohort is enrolled in school; and the same rates apply to all pupils enrolled in a given grade, regardless of whether they previously repeated a grade. This method requires data by sex on the number of enrolments and repeaters in each grade of primary education in two consecutive school years.
Sources and data collection	Data on education are usually recorded from educational records and are available on a yearly basis. For countries for which administrative data are not available, household survey data may be used. Among international surveys, the Multiple Indicator Cluster Survey and Demographic and Health Surveys provide school attendance data
Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf UNITED NATIONS (2003). Millennium Indicators Database. <a href="http://millenniumindicators.un.org">http://millenniumindicators.un.org</a> .

Indicator 2.1.3 Net enrolment ratio in (a) primary and (b) secondary education

### Rational and Gender Issues

The indicator is used to monitor progress toward the goal of achieving universal primary education (UPE), identified in both the Millennium Development Goals and Education for All initiatives. Net enrolment refers only to pupils of official primary school age, whereas gross enrolment includes pupils of any age. Net enrolment rates below 100 per cent provide a measure of the proportion of primary school age children who are not enrolled in primary school. Values below 100 alert policy makers to the need for policies that increase primary school enrolment in order to achieve the goal of UPE. Policies can target different populations of children depending on the characteristics of unenrolled children. Some children may have entered school and then dropped out in subsequent years requiring policies to increase retention rates. Other children may never have entered school requiring policies that increase the economic, social or physical accessibility of schools.

Families may perceive the value of education differently for boys and girls. In situations of limited resources, girls are more likely to suffer from limited access to education, especially in rural areas. However, where basic education is widely accepted and overall enrolment is high, girls' enrolment tends to be equal or higher than boys' enrolment. In order to highlight and monitor these differences, it is important to disaggregate the indicator by sex. It is also important to consider disaggregation by geographical areas and social or ethnic groups and sex, since gender differences may be more pronounced in some groups.

#### Definition

Net primary (or secondary) enrolment rate in primary (or secondary) education is the number of children of official primary school age (according to ISCED97¹) who are enrolled in primary (or secondary) education as a percentage of the total children of the official school age population. The adjusted net primary enrolment rate also includes children of primary school age enrolled in secondary education. Where more than one system of primary education exists within the country the most widespread or common structure is used for determining the official school age group.

<sup>1</sup>International Standard Classification of Education (ISCED 97). Primary education is defined by ISCED97 as programmes normally designed on a unit or project basis to give pupils a sound basic education in reading, writing and mathematics along with an elementary understanding of other subjects such as history, geography, natural science, social science, art and music.

# Description and method of computation

To calculate the indicator one must first determine the population of official school age by reference to the theoretical starting age and duration of ISCED97 Level 1 (primary education) as reported by the country.

Then, the number of pupils enrolled in primary (or secondary) education who are of the official primary school age is divided by the population for the same age-group and the result is multiplied by 100. This method requires information on the structure of education (i.e. theoretical entrance age and duration of ISCED97 Level 1), enrolment by single years of age and population of the age-group corresponding to the given level of education.

A high Net Enrolment Rate (NER) denotes a high degree of enrolment in education by the official school-age population. The NER is the number of pupils of the theoretical school-age group for a given level of education, expressed as a percentage of the total population in that age group. The theoretical maximum value is 100%. Total NERs below 100 percent provide a measure of the proportion of primary school age children who are out of school. When the NER is compared with the Gross Enrolment Rate (GER) the difference between the two ratios highlights the incidence of under-aged and over-aged enrolment. The GER is the number of pupils enrolled in a given level of education, regardless of age, expressed as a percentage of the population in the theoretical age group

	for the same level of education.  Net Enrolment Rates may exceed 100% due to inconsistencies between population and enrolment data. In this case the indicator is adjusted by the Unesco Institute for Statistics (UIS) using a capping factor so that the Gender Parity Index¹ of the new set of values remains the same as for the original values but setting the higher of the male and female NERs to 100% and adjusting the other values proportionately.  Administrators may report exaggerated enrolments, especially if there is a financial incentive to do so. Children's ages may be inaccurately estimated or misstated. Census data may be out of date or unreliable.
Sources and data collection	Data on school enrolment are usually recorded by the ministry of education or derived from surveys and censuses. If administrative data are not available, household survey data may be used, although household surveys usually measure self-reported attendance rather than enrolment as reported by schools. Also, household survey data may not be comparable between surveys. A serious problem with household survey data is also the inaccurate recording of pupils' ages, depending on the time of the year that the survey is conducted. Later in the school year, some younger children may appear to be of primary school age when in fact they are not. It can also happen that older children appear to be of secondary school age when in fact they were of primary age at the start of the school year.  Data should be organized according to the levels of education defined in ISCED97 to ensure international comparability of resulting indicators.  When using administrative data, population estimates are used in the denominator. The use of different population estimates in the denominator is often at the origin of differences between national and international data for this indicator, as international population estimates generally differ from those available at the national level.
Reference	http://www.uis.unesco.org

Rational and Gender Issues	The indicator provides a measure of access to primary education by the eligible population of primar school-entrance age. The intake to primary education is instrumental to the achievement of the objective of universal primary education. It reflects efforts made by governments to achieve universal entrance to primary education of the eligible population of the official primary school entrance age. A value of 100% indicates theoretically that the system has reached all children of the official primary school entrance age and accomplished an important step toward achieving the Universal Primary Education (UPE) goal. This value reflects also implicitly the achievement of equal gender access to primary education of the population of the official entrance age.
	In situations of limited resources, families make difficult choices about sending their children to school They may perceive the value of education differently for boys and girls. Girls are more likely than boy to suffer from limited access to education, especially in rural areas. Late entry to primary education may be more prevalent amongst girls and may affect their ability to progress well in school or encourage their early exit. (Source:UIS)
Definition	Net intake rate is the number of new entrants in the first grade of primary education who are of official primary school entrance age, expressed as a percentage of the population of the corresponding age.  The percentage of the population of the official entrance age to primary education who are enrolled in primary school. (Source:UIS)
Description and method of computation	Divide the number of children of official primary school-entrance age who enter the first grade of primary education for the first time by the population of the same age, and multiply the result by 100.  Enrolments in primary education of the official entrance age to primary are divided by the population of the same age, the result is then multiplied by 100. (Source:UIS)
Sources and data collection	School register, school survey or census for data on new entrants by age; population census or estimates for school-entrance age population.
Reference	http://www.uis.unesco.org

Indicator 2.1.5 (a) P	rimary and (b) secondary completion rates, in percentage
muicatoi 2.1.3 (a) F	rimary and (0) secondary completion rates, in percentage
	This proxy measure of primary / secondary completion also reflects the impact of policies shaping the early grades of primary / secondary school can impact the final grade of this education level. It also indicates the capacity of the education system to provide primary completion for the theoretical entrance age population to the last grade of primary.
	In many developing countries the number of girl drop out is higher than boys.
	The indicator, which monitors education system coverage and student progression, is intended to measure human capital formation and school system quality and efficiency.
Rational and Gender Issues	The indicator focuses on the share of children who ever complete the cycle; it is not a measure of "on-time" primary / secondary completion. Various factors may lead to poor performance on this indicator, including low quality of schooling, discouragement over poor performance and the direct and indirect costs of schooling. Students' progress to higher grades may also be limited by the availability of teachers, classrooms and educational materials.
	The primary completion rate is a proxy measure of current outcomes of primary education. In practice, it is a measure of those entering the last grade of primary for the first time. The assumption is that the vast majority will reach the end of that last grade and thus complete the primary cycle. As a measure of the effectiveness of the primary education system, it is often seen as a proxy measure of social progress and economic achievement. Reasons for failing to reach the last grade may include non-attendance, low quality of schooling, difficulties in attending school or dropping out at an earlier stage of the primary cycle. Differences in primary completion rates between girls and boys will often reflect inequalities at other stages of the education process though once in school, girls can progress more quickly than boys and may be more likely to complete primary education. (Source:UIS)
Definition	Total number of new entrants in the last grade of primary / secondary education, regardless of age, expressed as a percentage of the population at the theoretical entrance age to the last grade of primary/ secondary.
	To calculate the indicator, one must first determine the population of the theoretical entrance age to the last grade of primary by reference to the theoretical starting age and duration of primary education (ISCED Level 1) as reported by the country. Then, the number of new entrants in the last grade of primary education, irrespective of age, is divided by the population of the theoretical entrance age to the last grade of primary, and the result is multiplied by 100. This method requires information on the structure of education (i.e. theoretical entrance age and duration of ISCED Level 1), enrolment and repeaters in the last grade of primary education, and population of the theoretical entrance age to the last grade of primary. (Source:UIS)
Description and method of computation	Divide the number of new entrants in last grade of primary/ secondary, irrespective of age, by the population of theoretical entrance age to the last grade of primary / secondary, and multiply the result by 100.
	$GIRLG' = \frac{NE'_{l}}{P'_{a}} *100$
	Where:  GIRLG Gross Intake Ratio in the Last Grade of primary in school year t
	$N\!E_l^{ m f}$ Number of new entrants in the last grade l of primary education, in school year ${ m t}$
	$P_a^t$ Population of theoretical entrance age $a$ in the last grade of primary, in school year $t$
	N.B.: When data on new entrants are not separately reported, they can be derived by subtracting the number of repeaters from enrolment in the last grade.
Sources and data collection	School register, school survey or census for data on new entrants. Population census or estimates for population of the theoretical entrance age in the last grade of primary.
Reference	http://www.uis.unesco.org http://mdgs.un.org/unsd/mdg/Metadata.aspx

Indicator 2.1.6 Gross grade	uation ratio from lower secondary education, in percentage
Rational and Gender Issues	This indicator measures the potential for human capital development beyond the primary level. In the globalized economy, countries need human capital at a level that goes beyond basic readings and writings. Moreover, individuals who achieve secondary or tertiary education generally benefit from steeper wage profiles throughout the rest of their life.
	The lower secondary gross graduation ratio is a broad measure of current outcomes of lower secondary education which in many countries marks the end of compulsory education. As a measure of the effectiveness of the primary and secondary education systems, it is often seen as a proxy measure of social progress and economic achievement. Reasons for failing to graduate from lower secondary education may include non-attendance, low quality of schooling, difficulties in attending school, failing to transfer from primary to secondary education or dropping out at an earlier stage of the education cycle. Differences in lower secondary gross graduation ratios between girls and boys will often reflect inequalities at other stages of the education process. (Source:UIS)
Definition	Gross graduation ratio from lower secondary education is the total number of graduates from the last grade of lower secondary education, regardless of age, expressed as a percentage of the population at the theoretical graduation age for lower secondary.
Description and method of computation	Divide the number of lower secondary graduates, irrespective of age, by the population of theoretical lower secondary graduation, and multiply the result by 100.
Sources and data collection	School register, school survey or census for data on graduates; population census or estimates for population of the theoretical graduation-age in the last grade of lower secondary.
Reference	http://www.uis.unesco.org

Indicator 2.1.7 Effective tra	nsition rate from primary to secondary education (general programmes), in percentage
Rational and Gender Issues	To convey information on the degree of access or transition from one cycle or level of education to a higher one. Viewed from the lower cycle or level of education, it is considered as an output indicator, viewed from the higher educational cycle or level, it constitutes an indicator of access. It can also help in assessing the relative selectivity of an education system, which can be due to pedagogical or financial requirements.
	High transition rates indicate a high level of access or transition from one level of education to the next. They also reflect the intake capacity of the next level of education. Inversely, low transition rates can signal problems in the bridging between two cycles or levels of education, due to either deficiencies in the examination system, or inadequate admission capacity in the higher cycle or level of education, or both.
Definition	The number of new entrants to the first grade of secondary general education in a given year expressed as a percentage of the pupils enrolled in the last grade of primary education in the previous year who do not repeat that grade the following year. It measures the probability that that a pupil in the last grade of primary education makes the transition to secondary general education. (Source:UIS)
Description and method of computation	The number of enrolments minus repeaters in grade 1 of secondary general education in year t divided by the number of enrolments in the last grade of primary education in year t-1 minus the repeaters in the last grade of primary education in year t. The result is multiplied by 100. (Source:UIS)
Sources and data collection	School register, school survey or census.
Reference	http://www.uis.unesco.org

Indicator 2.1.8. Education a	attainment of the population aged 25 and older, in percentage
Rational and Gender Issues	To show the educational composition of the population aged 25 years and above, hence the stock and quality of human capital within a country, so as to gauge needs and establish policies for upgrading it. This indicator also reflects the structure and performance of the education system and its accumulated impact on human capital formation.
	A relative high concentration of the adult population in a given level of education reflects the capacity of the educational system in the corresponding level of education. Educational attainment is closely related to the skills and competencies of a country's population, and could be seen as a proxy of both the quantitative and qualitative aspects of the stock of human capital.
	Educational attainment of the population aged 25 years and older reflects access to primary, secondary and tertiary education over the previous decades. Educational attainment is a measure of the human capital of individuals and entire nations. Reasons for low educational attainment include nonattendance and exit from the education system before completion of higher levels of education. Differences ir levels of attainment of women and men reflect inequalities in access to formal education during previous decades and persisting inequalities in adult life and the world of work. (Source:UIS)
Definition	Percentage distribution of the population aged 25 years and older according to the highest level of education attained or completed. (Source:UIS).
Description and method of computation	Divide the number of persons aged 25 years and older with respect to the highest level of education completed by the total population of the same age group and multiply the result by 100. The levels of education used for this indicator are those defined in the International Standard Classification of Education (ISCED). (Source:UIS)
Sources and data collection	Mainly national population census; household and/or labour force surveys.
Reference	http://www.uis.unesco.org

Indicator 2.1.9 Drop-out rate	es for girls and boys in (a) primary and (b) secondary, in percentage
	The gender gap in the upper echelons of secondary school and indications of an increasing overall dropout rate pose key challenges for education in developing countries.
Rational and Gender Issues	Frequency and dropout patterns vary between girls and boys. Reasons for leaving school also differ for girls and boys and by age. Families' demand on children's time to help in household-based work is an important factor and is often greater for girls. However, in many countries boys drop-out occurs largely when they are needed to work and assist their families early in their childhood
Definition	Dropouts are defined as individuals in a specific age group who are not enrolled in and have not completed a level of education.
	It is the percentage of the total population of students of girls/boys for a certain education level who withdrew from school during the previous summer and during the school year. This rate is known as the "event rate" and represents the percentage of students who drop out during a single year. It is calculated as follows:
	Step 1:  The number of total population of students in primary/ secondary enrolled from July 1 to June 30 of previous year (Not December 1 students).
	<u>Divided by</u>
	The number of students enrolled from July 1 to June $30 + number$ of students that dropout
Description and method of computation	Step 2:  Then the number derived is deducted from 100 percent to get the percent of dropouts for current year.
	Example: 20 special education students enrolled for grades $9-12$ . 2 students dropout during the calendar year and do not return in fall enrollment. 20 divided by $(20 + 2) = .090$ $.90 * 100 = 90\%$ $100 - 90\% = 10\%$ of students dropout
	The measure of unit is in percentage.
	Disaggregation: by sex, level of education, disabled, grade, urban/rural, income group
Sources and data collection	School register, school survey or census for data on enrolment by level of education. Population census, household, fertility and labour force surveys.
Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx
	http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf  UNITED NATIONS (2003). Millennium Indicators Database. Statistics Division Internet site <a href="http://millenniumindicators.un.org">http://millenniumindicators.un.org</a> .

Indicator 2.1.10 Out-of-pri	imary-school children, in percentage
Rational and Gender Issues	To identify the size of the population in the official primary school age range who should be targeted for policies and efforts in achieving universal primary education.  The higher the number of out-of-school children, the greater the need to focus on achieving universal primary education. Some children of primary school-age who have never been in school may or may not eventually enrol as late entrants. Other children may have initially enrolled but dropped out before reaching the 'official' age of primary completion. When disaggregated by geographical location, this indicator can identify areas needing the greatest efforts. Policies can also focus efforts on priority population groups or a particular gender.
Definition	Children in the official primary school age range who are not enrolled in either primary or secondary schools
Description and method of computation	Subtract the number of primary school-age pupils enrolled in either primary or secondary school from the total population of the official primary school age range.  Example: The primary school-age range in a country is from 6 to 11 years. Of 100 children aged 6 to 11, 80 are enrolled in primary education and 5 are enrolled in secondary education. 85 children of primary school age are in school and 15 are out of school. The primary out-of-school rate is then 15/100=15%.
Sources and data collection	School register, school survey or census for enrolment; population census or estimates.
Reference	http://www.uis.unesco.org

Indicator 2.1.11: Proportion	on of repeaters in (a) primary and (b) secondary levels, by grade, in percentage
Rational and Gender Issues	This is one of the key indicators for analysing and projecting pupil flows from grade to grade within the educational cycle. High values reflect serious problems of grade repetition or the internal efficiency of the education system.
	Research studies indicate that repetition is a strong predictor of dropout and that there is a strong correlation between repetition and dropout. Repetition rates in developing countries often are quite high.
	The low achievement patterns of grade repeaters tend to be associated with poverty indicators, at both the school and the family levels. Schools in poor areas (especially remote rural areas) often feature limitations: short school years, frequent teacher absence, limited supplies, poorly qualified teachers, large classes, multi-age classes, or double shifts. Grade repeaters are more likely to come from families that rank lower on measures of socioeconomic status and related variables (income, parental years of education completed, etc.). Their parents are less likely to be involved with the school and to advocate effectively for their children. Consequently, within any given school, students from the poorest families are more at risk for repetition because their home backgrounds leave them less well prepared to succeed and because they are likely to miss more school days.
	In general, repetition is higher among male learners than female learners.
Definition	Proportion of pupils from a cohort enrolled in a given grade at a given school year who study in the same grade in the following school year.
Description and method of computation	Divide the number of repeaters in a given grade in school year t+1 by the number of pupils from the same cohort enrolled in the same grade in the previous school year t.
	It can be calculated for the whole level of education by dividing the sum of repeaters in all grades of the given level by the total enrolment of that level of education.
Sources and data collection	School register, school survey or census for data on enrolment and repeaters by grade.
Reference	http://www.uis.unesco.org

## 2.2 Literacy

Indicator 2.2.1 Literacy rate for youth and adults, in percentage	
Rational and Gender Issues	"Investing in girls' education delivers well-known returns. When girls' are educated, they are more likely to earn higher wages and obtain better jobs, to have fewer and healthier children and to enjoy safer childbirth." 11 July 2009, The Secretary-General Message on World Population Day, Statement of United Nations Secretary-General Ban Ki-moon.
	Literacy represents a potential for further intellectual growth and contribution to economic-socio-cultural development of society. Illiteracy rates indicate the extent of need for policies and efforts in organizing adult literacy programmes and quality primary education.
	Adult literacy rate (15+ years) shows the accumulated achievement of primary education and literacy programmes in imparting basic literacy skills to the population, thereby enabling them to apply such skills in daily life and to continue learning and communicating using the written word.
	The youth literacy rate (15-24 years) reflects the outcomes of primary education over the previous 10 years or so. As a measure of the effectiveness of the primary education system, it is often seen as a proxy measure of social progress and economic achievement.
	The literacy gender parity index measures progress towards equity in literacy and learning opportunities for women in relation to those for men. It also measures a presumed outcome of attending school and is a key indicator of empowerment of women in society. Literacy is a fundamental skill that empowers women to take control of their lives, to engage directly with authority, and to gain access to the wider world of learning.
	Higher illiteracy rates for women are the result of lower school enrolment and early dropouts. Moreover, because women generally have less access to information and training and literacy programmes, estimates based on enrolments may overestimate literacy for girls.
	The Youth Literacy Rate reflects the outcome of primary education over the previous decade. As a measure of the effectiveness of the education system, it is often seen as a proxy measure of social progress and economic achievement. Reasons for failing to achieve the literacy standard may include nonattendance, low quality of schooling or dropping out before completion of primary education. Differences in literacy levels between young women and men will often reflect recent inequalities in access to formal education and persisting inequalities in adult life and the world of work. (Source:UIS)
Definition	Literacy is defined as the ability to both read and write with understanding a short simple statement on everyday life. The definition of literacy sometimes extends to basic arithmetic and other life skills.
	Youth Literacy rate of 15-24 years old is defined as the percentage of the population aged 15-24 years who can both read and write with understanding a short simple statement on his/her everyday life.
	Adult Literacy rate is defined as the percentage of the population aged 15+ years who can both read and write with understanding a short simple statement on his/her everyday life.
	Gender parity index is the ratio of female to male values of a given indicator. A GPI of 1 indicates parity between sexes.

Description and method of computation	Literacy rates are computed by dividing the number of people (females/males) in specific age group who are literate by the total population (female and males) in the same age group, the result is then multiplied by 100. $LR_a^t = \frac{L_a^t}{P_a^t} * 100 \qquad \text{or} \qquad lR_a^t = \frac{IL_a^t}{P_a^t} * 100$ Where: $LR_a^t = \text{Literacy rate of age group }_s \text{ in year }_t \qquad lR_{15+}^t = \text{Illiteracy rate of age group }_s \text{ in year }_t$ $L_a^t = \text{Literate population of age group }_s \text{ in year }_t \qquad lL_{15+}^t = \text{Illiterate population of age group }_s \text{ in year }_t$ $P_a^t = \text{Population of age group }_s \text{ in year }_t$ and: $LR_a^t + ILR_a^t = 100\%$
	The ratio of literate women to men aged 15–24 years (Literacy Gender Parity Index) is the ratio of the female literacy rate to the male literacy rate for the age group 15–24.  Literacy Gender Parity Index (15-24) = women literacy rate (15–24) men literacy rate (15–24)  The unit of measure is in percentage  Disaggregation: This indicator is to be calculated by geographical location (region, urban/rural) and may be disaggregated
Sources and data collection	by five-year age-groups: 15-19; 20-24; 25-29; 30-34; 35-39; 40-44; 45-49; 50-54; 55-59; 60-64; 65+.  Population census, household, fertility and labour force surveys  Population censuses are the primary source of basic literacy data. These data are usually collected together with other population and household characteristics concerning an individual's educational, demographic and socio-economic status. The literacy status is generally based on proxy-declaration (i.e. one person, usually the head of the household, indicates whether each member of the household is literate or not). The literacy definition may vary from one country to another. National sample surveys are a second source of literacy data and involve the use of a literacy variable in a household or individual sample survey.  These surveys are often designed to meet immediate data needs and do not always include systematic strategies for repeated data collection in future years and therefore they may not be a consistently reliable data source over time. International sample surveys, such as UNICEF's Multiple Indicator Cluster Surveys (MICS) or the Demographic and Health Surveys (DHS), are a third source and involve the use of a literacy variable in a household or individual sample survey. These surveys are designed to meet commonly agreed upon international data needs while also providing data for national policy purposes. These surveys are implemented on a regular basis in selected countries. They aim to assure cross-national comparability although they often integrate national modules to suit specific country data needs. Modules from international surveys are sometimes added to other on-going national sample surveys. The UIS conducts internal consistency checks in order to ensure the accuracy of the data provided. This is done by comparing literacy data for a country from different sources, across different years, and across countries in the same region. (Source:UIS)
Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf UNITED NATIONS (2003). Millennium Indicators Database. Statistics Division Internet site: http://millenniumindicators.un.org. UNESCO, Education Indicators, Technical Guidelines: http://www.uis.unesco.org/file_download.php?URL_ID=5202&filename=10526426091UIS_education_indicator_definitions_EN.pdf&filetype=application%2Fpdf&filesize=139152&name=UIS_education_indicator_definitions_EN.pdf&location=user-S/

## 2.3 Training

Indicator 2.3.1 Proportion o Training programmes, in per	f girl and boy students enrolled in scientific and Technical and Vocational Education and reentage
Rational and Gender Issues	There is a need for monitoring and reporting on the persistent marginalization of women from certain educational domains and specializations, especially, scientific and Technical and Vocational Education and Training (TVET) programmes and unequal access to educational opportunities in these domains.
Definition	The proportion of girl/boy students enrolled in scientific programmes at a given level of education in a given school-year.
	The indicator is calculated by dividing the total number of girl/boy students enrolled in a specialized scientific and Technical and Vocational Education and Training programmes by the total number of students (girls and boys) enrolled in the same specialized scientific education programme in a given school-year, and multiply it by 100.
	Percentage of girl/boy students enrolled in a specialized scientific programme =
Description and method of	Girl/boy students enrolled in a specialized scientific programme @ given level x100 All students enrolled in the same scientific programme @ given level
computation	Percentage of girl/boy pupils in TVET programmes =
	Number of girl/boy pupils in TVET programmes x100 Total number of pupils in TVET programmes
	The unit of measure is in percentage.
	Disaggregation: This indicator maybe disaggregated by specialty, disabled, and type of enrolment (part/full-time students, distance learning).
Sources and data collection	School register, school survey or census for data on enrolment by level of education. Population census, household, fertility and labour force surveys.
Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf UNITED NATIONS (2003). Millennium Indicators Database. Statistics Division Internet site http://millenniumindicators.un.org.

nale graduates from fields of science, engineering and manufacturing at tertiary level
This indicator measures the extent to which female students participate and complete higher education in fields that are (i) of critical importance to technological progress and hence economic growth and (ii) often not easily accessible to women. In a broader interpretation, this indicator can be seen as a measure of women empowerment and gender equality.
Number of female graduates from ISCED fields of science, engineering and manufacturing education in tertiary education, expressed as a percentage of the total number of graduates from the fields of science, engineering and manufacturing education in tertiary education.
Science include: Life Sciences, Physical Sciences, Mathematics and statistics according to ISCED 5B ( <a href="http://www.uis.unesco.org/Education/Documents/isced-2011-en.pdf">http://www.uis.unesco.org/Education/Documents/isced-2011-en.pdf</a> ).
Engineering, manufacturing and construction include: Engineering and engineering trades, Manufacturing and production process, Architecture and Building according to ISCED 5A ( <a href="http://www.uis.unesco.org/Education/Documents/isced-2011-en.pdf">http://www.uis.unesco.org/Education/Documents/isced-2011-en.pdf</a> ).
Divide the number of female tertiary students graduating from a specified ISCED level by the total number of students (male plus female) graduating from that level in a given academic-year, and multiply the result by 100.
Census, surveys or records of tertiary educational institutions and programmes.
http://www.uis.unesco.org

Indicator 2.3.3 Proportion of females and males among tertiary education teachers or professors , in percentage	
Rational and Gender Issues	The indicator shows the gender composition of the teaching force. It helps also in assessing the need for opportunities and/or incentives to encourage women to participate in teaching activities at the tertiary level of education. Attracting and maintaining effective teachers are challenges for education systems worldwide. Conditions, such as class size, working hours and salaries, affect the supply of teachers and the quality of the teacher pool, as well as the overall cost of education.  Policies that successfully balance youth, experience and gender within a teaching force can have a positive impact on both access to education and the quality of provision.
Definition	The number of female and male teachers at the tertiary level of education expressed as a percentage of the total number of teachers in a given school year.
Description and method of computation	Divide the total number of female/male teachers at the tertiary level of education by the total number of teachers (female + male) in a given school year, and multiply by 100.  Disaggregate by year, level, field, etc
Sources and data collection	Teachers' records.
Reference	http://www.uis.unesco.org

### Goal 3: Promote gender equality and empower women

#### 3.1 Public Life

Indicator 3.1.1 Proportion of seats held by women and men in national parliament, in percentage

The indicator measures the degree to which women have equal access to take part in parliamentary decision making. Women's participation in parliaments is a key aspect of women's opportunities in political and public life, and is therefore linked to women's empowerment.

The proportion of women in parliament ranges from 0% (no women in parliament) to nearly 60%. Equal numbers of women and men in lower chambers would give an indicator value of 50%.

A stronger presence of women in parliament allows new concerns to be highlighted on political agendas; and new priorities to be put into practice through the adoption and implementation of policies and laws. The inclusion of the perspectives and interests of women is a prerequisite for democracy and gender equality, and contributes to good governance. A representative parliament also allows the different experiences of men and women to affect the social, political and economic future of societies.

Changes in the indicator have been tracked over time. Although the international community has supported and promoted women's participation in political decision-making structures for several decades, women's increased access to parliament has been slow. This has led to the introduction of special policy measures to increase women's shares of parliamentary seats in several countries. Those countries that have adopted special measures have, on average, 6% greater representation of women in parliament than countries without special measures.

The involvement of women in setting political priorities delivers a stronger and more representative democracy and results in better outcomes for citizens. While parliaments vary in terms of the number of women members, it is apparent that the efforts of women have resulted in more gender policies that are of benefit to them and the communities in which they are based. Women parliamentarians are likely the most ardent promoters and defenders of women and have redefined political priorities to include gender issues. But the role does not fall exclusively to women and more needs to be done to forge a partnership between men and women. How men can further support gender issues requires further attention.

Rational and Gender Issues

The indicator measures the degree to which women have equal access to take part in parliamentary decision making. Women's participation in parliaments is a key aspect of women's opportunities in political and public life, and it is therefore linked to women's empowerment. A stronger presence of women in parliament allows new concerns to be highlighted on political agendas; and new priorities to be put into practice through the adoption and implementation of policies and laws. The inclusion of the perspectives and interests of women is a prerequisite for democracy and gender equality, and contributes to good governance. A representative parliament also allows the different experiences of men and women to affect the social, political and economic future of societies. Changes in the indicator have been tracked over time. Although the international community has supported and promoted women's participation in political decision-making structures for several decades, women's increased access to parliament has been slow. This has led to the introduction of special policy measures to increase women's share of parliamentary seats in several countries. Those countries that have adopted special measures have on average greater representation of women in parliament than countries without special measures. Parliaments can vary in their capacity to engage in law making, oversight of government and representation of the electorate. In terms of measuring women's political decision-making power, this indicator may be limited because many women still face obstacles in fully and efficiently carrying out their parliamentary mandate. Different constraints may come into play: women parliamentarians may find that they do not have the support of their peers or that the gender-based policies they advocate are at odds with the policies of the political parties they represent. Numbers do matter however, and women's increased presence in parliament does, at a minimum, facilitate the articulation of women's concerns and alter the gender dynamics in parliament. The role of women parliamentarians needs to be considered alongside other actors such as the executive and in the government, the national gender machinery and women's groups in civil society. The involvement of women in setting political priorities delivers a stronger and more representative democracy and results in better outcomes for citizens. While parliaments vary in terms of the number of women members, it is apparent that the efforts of women have resulted in more gender policies that are of benefit to them and the communities in which they are based. Women parliamentarians are the most ardent promoters and defenders of women and have redefined political priorities to include gender issues. But the role does not fall exclusively to women and more needs to be done to forge a partnership between men and women. How men can further support gender issues requires

	further attention. (Source:IPU)
Definition	The proportion of seats held by women in national parliaments is the number of seats held by women members in single or lower chambers of national parliaments, expressed as a percentage of all occupied seats. Seats refer to the number of parliamentary mandates, or the number of members of parliament. Seats are usually won by members in general parliamentary elections. Seats may also be filled by nomination, appointment, indirect election, rotation of members and by-election. (Source:IPU)  Seats refer to the number of parliamentary mandates, also known as the number of members of parliament. Seats are usually won by members in general parliamentary elections. Seats may also be filled by nomination, appointment, indirect election, rotation of members and by-election.  National parliaments can be bicameral or unicameral. This indicator covers the single chamber in unicameral parliaments and the lower chamber in bicameral parliaments. It does not cover the upper chamber of bicameral parliaments.
Description and method of computation	Proportion of seats held by women and men in national calculated by dividing the number women/men by the total number of parliament seats multiplied by 100.
Sources and data collection	The data come from the records of national parliaments. At the Global level national data are disseminated by the Inter-Parliamentary Union (IPU) secretariat.
Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf

Indicator 3.1.2 Shar	re of women and men in ministerial positions, in percentage
Rational and Gender Issues	While women can be appointed as ministers in the majority of Arab countries, some receive portfolios as secretaries of State or junior ministers, and are typically not given strong institutional mandates with significant human or financial resources. Their participation is generally limited to agencies of the State that work on women's issues and to the ministries, in sub-ministerial positions, that deal with social affairs, including health, environment and labour. In addition, some appointments are based on family relations and not on merit or personal accomplishments.  Women participation in national politics can have a significant impact on women's and families' welfare.  The proportion of women in decision-making positions is an indicator of the degree of gender-sensitivity of political processes and actors. Recent efforts have focused more importantly on facilitating women's access to parliament. Women in the Executive have been the subject of less attention though recently several political leaders have committed to ensuring parity in government. While women in decision making positions cannot be held solely responsible for the advancement of gender equality, their level of participation contributes to setting different priorities, bringing in women's points of views and changing the way politics are made. (Source:IPU)
Definition	Women's share of government ministerial positions is the proportion of women in ministerial positions out of the total of men and women in ministerial positions.  A man or woman at the head of two or more ministries or holding several ministerial positions is counted only once. The total includes Deputy Prime Ministers and Ministers. Prime Ministers/Heads of Government are also included when they hold ministerial portfolios. Vice- Presidents and heads of governmental or public agencies have not been included. (Source:IPU)
Description and method of computation	Women's share of ministerial positions is derived by dividing the total number of women occupying a ministerial position by the total number of men and women occupying a ministerial position multiplied by 100. (Source:IPU)
Sources and data collection	Data are obtained from the administrative records of foreign ministry.  Data is obtained through diplomatic missions, based on a questionnaire sent by the IPU. In the absence of a response, data is obtained either through national parliaments, national agencies or public sources. (Source:IPU)
Reference	IPU, ESCWA Statistics Division

Indicator 3.1.3 Share of women and men ambassadors, in percentage	
Rational and Gender Issues	Women's political participation is a Millennium objective in its own right. Empowering women in the political arena has the potential to change societies. Their involvement in international political arena provides them with the opportunity to be involved with women's issues at the global level.  Women participation in international politics can have an immediate impact on women's empowerment.
Definition	Share of women and men ambassadors compares the situation of women to that of men in the political representation of a country and their contributing and effort in the diplomatic field.
Description and method of computation	Share of women and men ambassadors is calculated by dividing the number of women/men ambassadors by the total number of ambassadors multiplied by 100.
Sources and data collection	Data are obtained from the administrative records of foreign ministry.
Reference	ESCWA Statistics Division

Indicator 3.1.4 Share of women and men in local government bodies, in percentage	
Rational and Gender Issues	Empowering women in the political arena has the potential to change societies. Their involvement in local political arena provides them with the opportunity to be involved with women's issues at the sub-national and national level.  Women participation in national politics can have an immediate impact on women's empowerment.
Definition	Share of women and men in local government bodies compares the situation of women in local government bodies to men in local government bodies. It shows the extent in which women are contributing to political effort in the country at the subnational level.
Description and method of computation	Share of women and men in local government bodies is calculated by dividing the number of women/men in local government bodies by the total number of women and men in local government bodies.  Disaggregation Indicators can be disaggregated by geographical areas and rural/urban.
Sources and data collection	Data are obtained from the administrative records of the local government
Reference	ESCWA Statistics Division

## 3.2 Decision Making

Indicator 3.2.1 Share of women and men in managerial positions	
Rational and Gender Issues	This indicator provides information on the proportion of women who are employed in decision-making and management roles in government, large enterprises and institutions. Although it provides some insight into women's power in decision making and in the economy, its principle limitation is that it does not reflect differences in the levels of responsibility of women in these high and middle level positions or the importance of the enterprises and organizations in which they are employed. (Source:ILO)
Definition	Occupations are classified according to the International Standard Classification of Occupations (ISCO), which organizes jobs into a clearly defined set of groups according to the tasks and duties undertaken in the job. The employed comprise all persons of working age who during a specified brief period, such as one week or one day, were in the following categories: a) paid employment (whether at work or with a job but not at work); or b) self-employment (whether at work or with an enterprise but not at work). The concept at work refers to persons who during the reference period performed some work for wage or salary, in cash or in kind (for paid employment), or persons who during the reference period performed some work for profit or family gain, in cash or in kind (for self-employment). For operational purposes, the notion "some work" may be interpreted as work for at least one hour. For more detailed information, please refer to the Resolution concerning statistics of the economically active population, employment, unemployment and underemployment, adopted by the Thirteenth International Conference of Labour Statisticians (October 1982): <a href="https://www.ilo.org/global/statistics-and-databases/standards-and-guidelines/resolutions-adoptedby-statisticians/WCMS_087481/lang-en/index.htm">https://www.ilo.org/global/statistics-and-databases/standards-and-guidelines/resolutions-adoptedby-statisticians/WCMS_087481/lang-en/index.htm</a> (Source:ILO)
Description and method of computation	The proportion of females in total employment in senior and middle management corresponding to the ISCO-88 categories 11 (legislators and senior officials) and 12 (corporate managers). ISCO-88 Sub-major group 13—general managers—is not included in the calculation of this indicator, as this group mainly includes managers of small enterprises. (Source:ILO)
Sources and data collection	Statistics on employment by occupation from (labour ministries, national statistical offices, etc.)
Reference	ILO

Indicator 3.2.2 Share of ministerial gender units (or focal points), in percentage	
Rational and Gender Issues	In many countries women's equality is undermined by historical imbalances in decision-making power and access to resources, rights, and entitlements. Gender mainstreaming in public policies seeks to foster cooperation in the field of gender equality, and to promote gender issues in policies. Governments that institutionalize inter-ministerial relations in policy areas by gender mainstreaming have been proactive towards achieving equality and empowering women.
Definition	This indicator measures the share of gender units established in ministries. A proportion of "100%" indicates a ratio of one gender unit per ministry, while a proportion of "0%" indicates that gender units are non existence in all ministries.
	Share of ministerial gender units, is measured by dividing the number of gender units in ministries by the number of ministries, and multiplied by 100.
Description and method of computation	Share of ministerial gender = Number of gender units in ministries x 100 units Total number of ministries
	Unit of measure in percentage
Sources and data collection	Administrative records, Ministry of Planning, Ministries.
Reference	ESCWA Statistics Division

## 3.3 Empowerment

Indicator 3.3.1 Shar	Indicator 3.3.1 Share of female and male police officers, in percentage	
Rational and Gender Issues	Many women in the Arab countries enlist in the police force, however Arab women face gender discrimination in bar examinations, access to employment, training and internships. In addition, women face an unofficial barrier, a glass ceiling, and are rarely promoted despite rules and regulation that base promotion on seniority and merit.  Arab women's participation in decision-making is minimal. It is therefore essential to highlight this discrepancy in order to take measures to ensure women's equal access to, and full participation in, power structures, and increase their capacity with regard to participating in public life leadership. Unfair civil and family legislation and biased/patriarchal legal systems, gender violence and other gender issues of concern will be effectively addressed when 'victims' are placed in leadership positions.	
Definition	Share of female and male police officers compares the situation of women lawyers to situation of men in the police force. It shows the extent in which women are contributing to police enforcement in the country.	
	Share of female and male police officers is the proportion of female/male police from total number of police multiplied by 100.	
Description and method of computation	Share of female police officers = Number of female police officers x 100  Total number of police officers	
	Unit of measure in percentage	
Sources and data collection	Data are obtained from administrative police records.	
Reference	ESCWA Statistics Division	

Indicator 3.3.2 Shar	re of female and male judges, in percentage
Rational and Gender Issues	Many women in the Arab countries practice law, however Arab women face gender discrimination in access to employment, training and internships. In some countries women are rarely promoted to district attorneys and judges despite rules and regulation that base promotion on seniority and merit.  Arab women's participation in decision-making is minimal. It is therefore essential to highlight this discrepancy in order to take measures to ensure women's equal access to, and full participation in, power structures, and increase their capacity with regard to participating in public life leadership. Unfair civil and family legislation and biased/patriarchal legal systems, gender violence and other gender issues of concern will be effectively addressed when 'victims' are placed in leadership positions.
Definition	Share of female and male judges compares the women situation to the men situation in the judiciary system; judges and supreme court. It shows the extent in which women are contributing to judicial effort in the country.  Share of female judges = Number of female judges x 100  Total number of judges  Unit of measure in percentage
Description and method of computation	Share of female and male judges is calculated by dividing the number of women/ men by the total of women and men appointed as judges and those appointed in the supreme court multiplied by 100.
Sources and data collection	Data are obtained from judiciary administrative records
Reference	ESCWA Statistics Division

Indicator 3.3.3 Share of female and male lawyers, in percentage		
Rational and Gender Issues	Many women in the Arab countries practice law, however Arab women face gender discrimination in bar examinations, access to employment, training and internships. In addition, women face an unofficial barrier, a glass ceiling, and are rarely promoted despite rules and regulation that base promotion on seniority and merit.  Arab women's participation in decision-making is minimal. It is therefore essential to highlight this discrepancy in order to take measures to ensure women's equal access to, and full participation in, power structures, and increase their capacity with regard to participating in public life leadership. Unfair civil and family legislation and biased/patriarchal legal systems, gender violence and other gender issues of concern will be effectively addressed when 'victims' are placed in leadership positions.	
Definition	Share of female and male lawyers compares the situation of women lawyers to situation of men lawyers. It shows the extent in which women are contributing to legal profession in the country.	
Description and method of computation	Share of female and male lawyers are the proportion of women/men lawyers from total number of lawyers for both women and men multiplied by 100.  Share of female lawyers = Number of female lawyers x 100  Total number of lawyers  Unit of measure in percentage	
Sources and data collection	Data are obtained from administrative records for lawyers associations.	
Reference	ESCWA Statistics Division	

# **Goal 4: Reduce Child Mortality / Girl-Child**

## **Child Health**

Indicator: 4.1.1 Under-five mortality rate for girls and boys, per 1,000 live births		
	U5MR is useful because it relates directly to the MDG target of reducing the under-five mortality rate by two-thirds. In addition, the indicator reflects the social, economic and environmental conditions in which children (and others in society) live, including the quality of health care. Data on disease incidence and prevalence (morbidity data) are frequently unavailable, so mortality rates are often used to identify vulnerable populations. It is used to identify high-mortality settings of a large proportion of all deaths that occur before age 5. In fact, the under-five mortality rate captures more than 90 per cent of global mortality among children under the age of 18.	
Rational and Gender Issues	U5M levels are influenced by poverty and low levels of education, particularly of mothers; by the availability, accessibility and quality of health services; by environmental risks including access to safe water and sanitation; and by nutrition.	
	U5MR are higher for boys than for girls in countries without significant parental gender preferences. Under-five mortality better captures the effect of gender discrimination than infant mortality, as nutrition and medical interventions are more important in this age group, while biological differences have a higher impact during the first year of life. There may be gender-based biases in the reporting of child deaths.	
	U5MR is the probability of a child born in a specified year dying before reaching the age of five if subject to current age-specific mortality rates.	
Definition	A live birth is the complete expulsion or extraction from its mother of a product of conception, irrespective of the duration of the pregnancy, which, after such separation, breathes or shows any other evidence of life—such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles—whether or not the umbilical cord has been cut or the placenta is attached. Each product of such a birth is considered a live birth.	
	U5MR is calculated by dividing the number of deaths of children under five in the indicated year by the number of live births in the same year.	
Description and method of computation	U5MR = Death under the age of 1 year after live birth in a given year x 1000  No of Live births in same year	
	This indicator is expressed in units of mortality per 1,000 live births.	

The methods used to calculate the under-five mortality rate (U5MR) depend on the type of data available. Age-specific mortality rates are calculated from data on births and deaths in vital registration systems, sample registration systems, national population censuses and/or household surveys.

When data collected via vital registration systems are of good quality, the U5MR can be directly estimated by observing the survival status of different cohorts through time and for specific ages from the moment of birth, as is done in Demographic and Health Surveys (DHS). Alternatively, data can be obtained indirectly (using the Brass method, as in Multiple Indicator Cluster Surveys (MICS)).

The direct method uses the birth histories of women of childbearing age to calculate the probability of dying before age five for children born alive to these women during the five year period before the survey (0-4, 5-9, etc.). Direct methods require each child's date of birth, survival status, and date or age at death. This information is typically found in vital registration systems and in household surveys that collect complete birth histories from women of childbearing age. Birth histories include a series of detailed questions on each child a woman has given birth to during her lifetime, including the date the child was born, whether or not the child is still alive, and, if the child has died, the age at death.

The indirect method uses the Brass method which converts the proportion of reported dead children ever born to women in age groups 15-19, 20-24,... and 45-49 into estimates of the probability of dying before attaining certain ages. Brass's method assumes that the age of the mother can serve as a proxy for the age of her children and thus for how long the children have been exposed to the risk of dying.

The indirect method requires minimal data collection efforts since the required data are available from censuses and general surveys, including the total number of children to which a woman has given birth, the number who survive and the woman's age (or the number of years since she first gave birth). However, indirect methods present challenges because they require model life tables to adjust the data for the age pattern of mortality in the general population. Finding an appropriate model life table can be difficult, since the Coale and Demeny model life tables that are usually used are derived largely from the European experience.

Under-five mortality generally shows large disparities across geographical areas and between rural and urban areas. Under-five mortality may also vary across socioeconomic groups. Children in some ethnic groups might be at higher risk of malnutrition, poorer health and higher mortality. Gender differences may be more pronounced in some social and ethnic groups and in rural areas.

It is also useful to disaggregate the under-five mortality rate into separate rates referring, respectively, to the probability of dying before age 1 and the probability of dying between ages 1 and 4.

#### Sources and data collection

The first step in the data collection process is to proactively seek out all possible sources of data, including vital registration systems, national censuses, household surveys conducted by global programmes, and multi-purpose surveys conducted without international sponsorship.

At the national level, the best source of data is a complete vital statistics registration system—one covering at least 90 per cent of vital events in the population. Such systems are uncommon in developing countries, so estimates are also obtained from sample surveys or derived by applying direct and indirect estimation techniques to registration, censuses or survey data. A wide variety of household surveys, including MICS and DHS, are used in developing countries.

#### Reference

http://mdgs.un.org/unsd/mdg/Metadata.aspx

http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf

Indicator: 4.1.2 Infant mortality	rate for girls and boys, per 1,000 live births	
Rational and	Although the MDG target of reducing the under-five mortality rate by two-thirds relates specifically to under-five mortality, infant mortality is useful for monitoring the target since it represents an important component of under-five mortality. Infant mortality rates are also important because they reflect the social, economic and environmental conditions in which children (and others in society) live, including the quality and accessibility of their health care. In addition, data on disease incidence and prevalence (morbidity data) are frequently unavailable, so mortality rates are often used to identify vulnerable populations.	
Gender Issues	Girls have a survival advantage over boys during the first year of life, largely based on biological differences. This is especially so during the first month of life when perinatal conditions are most likely to cause or contribute to death. While infant mortality is generally higher for boys than for girls, in some countries girls' biological advantage is outweighed by gender-based discrimination. However, under-five mortality better captures the effect of gender discrimination than infant mortality because nutrition and medical interventions are more important for preventing mortality after age one.	
	The infant mortality rate (IMR) is the probability of a child born in a specified year dying before reaching the age of one, if subject to current age-specific mortality rates.	
Definition	A live birth is the complete expulsion or extraction from its mother of a product of conception, irrespective of the duration of the pregnancy, which, after such separation, breathes or shows any other evidence of life—such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles—whether or not the umbilical cord has been cut or the placenta is attached. Each product of such a birth is considered a live birth	
	The indicator is calculated by dividing the number of deaths of infants under one year of age in the indicated year by the number of live births in the same year.	
	IMR = Death under the age of 1 year after live birth in a given year x 1,000  No of Live births in same year	
	A measure of the yearly rate of deaths in children less than or at exact age one year.  • The sum of the neonatal mortality rate + the post-neonatal mortality rate  • Neonatal mortality: children born alive but died before the age of 28 days.  • Post neonatal mortality: children that were alive after 27 days but died before the age of one year	
	This indicator is expressed in units of mortality per 1,000 live births.	
	The methods used to calculate the infant mortality rate (IMR) depend on the type of data available. Data are obtained from vital registration systems, sample registration systems, national population censuses, and/or household surveys.	
Description and method of computation	When data collected via vital registration systems are of good quality, the IMR can be directly estimated by observing the survival status of different cohorts through time and for specific ages from the moment of birth, as is done in Demographic and Health Surveys (DHS). Alternatively, data can be obtained indirectly (using the Brass method, as in Multiple Indicator Cluster Surveys (MICS)). The direct method uses the birth histories of women of childbearing age and to calculate the probability of dying before age one for children born alive to these women during the five year period before the survey (0-4, 5-9, etc.). Direct methods require each child's date of birth, survival status, and date or age at death. This information is typically found in vital registration systems and in household surveys that collect complete birth histories from women of childbearing age. Birth histories include a series of detailed questions on each child a woman has given birth to during her lifetime, including the date the child was born, whether or not the child is still alive, and if the child has died, the age at death.  The indirect method uses the Brass method which converts the proportion of reported dead children ever born to women in age groups 15-19, 20-24, and 45-49 into estimates of the probability of dying before attaining certain childhood ages. Brass's method assumes that the age of the mother can serve as a proxy for the age of her children and thus for how long the children have been exposed to	
	the risk of dying.  The indirect methods requires minimal data collection efforts since the required data are available	

	from censuses and general surveys, including the total number of children to which a woman has given birth, the number who survive and the woman's age (or the number of years since she first gave birth). However, indirect methods present challenges because they require model life tables to adjust the data for the age pattern of mortality in the general population. Finding an appropriate model life table can be difficult since the Coale and Demeny model life tables that are usually used are derived largely from the European experience.
Sources and data collection	The first step in the data collection process is to proactively seek out all possible sources of data, including vital registration systems, national censuses, household surveys conducted by global programmes, and multi-purpose surveys conducted without international sponsorship.  The best source of data is a complete vital statistics registration system—one covering at least 90 per cent of vital events in the population. However, such systems are uncommon in developing countries, so estimates are also obtained from sample surveys or derived by applying direct and indirect estimation techniques to registration, censuses or survey data. A wide variety of household surveys, including MICS and DHS, are used in developing countries.
Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf

Indicator: 4.1.3 Measles immunization coverage for girls and boys of 1-year-olds, in percentage		
Rational and Gender Issues	The indicator provides a measure of the extent of coverage and the quality of child health care systems in a country. Immunization is an essential component for reducing under-five mortality rates. Governments in developing countries usually finance immunizations against measles and diphtheria, pertussis (whooping cough) and tetanus (DPT) as part of their basic health package. Among these vaccine-preventable childhood diseases, measles is the leading cause of child mortality. Health and other programmes targeted at measles are one practical means of reducing child mortality. Vaccination coverage for measles needs to be above 90 percent to stop transmission of the virus. When coverage is high and the denominator has been underestimated, coverage estimates can exceed 100%.  Immunization programmes are generally free of charge and should not discriminate between boys and girls. However, in some countries girls' immunization rates are lower than boys', probably due to cultural rather than economic reasons.	
Definition	The proportion of 1 year-old children immunized against measles is the percentage of children (by sex) under one year of age who have received at least one dose of measles-containing vaccine. Children under one year of age who have received a measles vaccine are estimated as the percentage of children ages 12–23 months who received at least one dose of measles vaccine any time before the survey or before the age of 12 months.  Measles-containing vaccines are live attenuated viral measles vaccines consisting of one dose given by the intramuscular or subcutaneous route, with the opportunity for a second dose at least one month after the first. It is generally recommended for children to be immunized against measles at the age of 9 months.	
Description and method of computation	Immunization coverage is calculated by dividing the total number of vaccinations received by girls/boys by the number of children in the target population and multiplying by 100.  Girls/boys' Measles Immunization Coverage of 1 year-olds  For most vaccines, the target population is the national annual number of births or number of surviving infants (this may vary depending on a country's policies and the specific vaccine).  Disparities in vaccination coverage are generally along the lines of residence and economic status. Therefore, data disaggregated by those characteristics are the most useful. In most countries, there are not significant differences in vaccination coverage between sexes.  While administrative data can be broken down at subnational levels, such data are not commonly reported in disaggregated form. Large-scale surveys, such as MICS and DHS, routinely provide findings disaggregated by sex, residence (i.e., urban vs. rural), age group, parents' educational levels, and wealth quintiles.	
Sources and data collection	The two data sources available at the national level are reports of vaccinations performed by service providers (administrative data), and household surveys containing information on children's vaccination histories (coverage surveys).  The main types of surveys used as sources of information on immunization coverage are Expanded Programme on Immunization (EPI)-30 cluster surveys, Multiple Indicator Cluster Surveys (MICS) and Demographic and Health Surveys (DHS). Routine administrative data are compiled by national EPI programme managers.  EPI 30–cluster surveys are frequently conducted by national EPI staff and designed specifically for measuring immunization coverage. These surveys are simple to administer and easy to conduct but have a precision level of plus or minus 10% points at 50% coverage. The MICS and DHS are more extensive surveys which cover a variety of indicators, have a more rigorous design, and typically have a higher degree of precision. However, they are more expensive, logistically more complex and the questionnaire is longer and more difficult to administer.  When determining the vaccination coverage rate, credence is given to administrative and official country reports rather than surveys unless there is a reason to believe they are inaccurate. Immunization coverage surveys are frequently used in connection with administrative data.	
Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx,http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf	

Indicator: 4.1.4 Adolescent birth rate for 15-19 year-olds, per 1,000 adolescent women.		
Indicator. 1111 Parisocent of the 101 15-17 year olds, per 1,000 adolescent women.		
	The adolescent birth rate is an essential indicator for the design of policies aiming to achieve an overall improvement of maternal health. Maternal mortality for younger adolescent women (ages 15 and 16 tends to be much higher than for older women or older adolescents (ages 18 and 19). When the overall maternal mortality for adolescent women is high, reducing adolescent fertility contributes to improving maternal health by reducing overall maternal mortality rates.	
Rational and Gender Issues	Very early motherhood not only increases the risk of dying in childbirth, it jeopardizes the well-being of mothers and their children. Young mothers frequently forego education and socio-economic opportunities; and children born to adolescent mothers are at greater risk of dying in infancy or childhood and, if surviving, have fewer opportunities to participate in education.  Levels of the adolescent birth rate range from less than 2 to approximately 230 births per 1000 adolescent women. Values of 50 or more per 1000 women are considered high and values of 10 per 1000 women or less are regarded as low. Higher values of the adolescent birth rate might indicate an unmet need for family planning among young women, many of whom may want to delay their pregnancies.	
	A high adolescent birth rate is frequently associated with high maternal mortality. Also, women who become mothers very early frequently miss out on education and socio-economic opportunities. Thus, high adolescent birth rates may contribute to a large gender gap in education. High adolescent birth rates also indicate a prevalence of early marriages among women, and are often a sign of a social structure in which women are expected to affirm their adulthood by assuming their social role as mothers as early as possible. As such, declining adolescent birth rates can indicate increasing gender equality and women's empowerment.	
Definition	The adolescent birth rate measures the annual number of births to adolescent women per 1,000 adolescent women.  The adolescent birth rate is also referred to as the age-specific fertility rate for women aged 15-19.  Adolescent women include women 15 to 19 years of age.  Data on births by age of mother are usually obtained from civil registration systems, as long as those cover 90 per cent or more of all live births. Census or survey estimates can supplement registry data for periods when civil registration data are not available. In countries lacking a civil registration system or where the coverage is lower than 90 percent, the adolescent birth rate can be obtained from household survey and census data. In countries with multiple survey programmes, large sample surveys conducted on an annual or biennial basis are given precedence.	
	The adolescent birth rate is calculated as the number of live births to women 15 to 19 years of age divided by the total number of adolescent women in the same age group.	
Description and method of computation	Adolescent birth rate, 15-19  Number of live births to adolescent  women, 15-19 year-olds  Number of adolescent women, 15-19  year-olds  x 1000  year-olds	
Sources and	Data on births by age of mother are usually obtained from civil registration systems, as long as those cover 90 per cent or more of all live births. Census or survey estimates can supplement registry data for periods when civil registration data are not available. In countries lacking a civil registration system or where the coverage is lower than 90 percent, the adolescent birth rate can be obtained from household survey and census data. In countries with multiple survey programmes, large sample surveys conducted on an annual or biennial basis are given precedence.	
data collection	Surveys from which the data can usually be obtained are: Demographic and Health Surveys (DHS), CDC-assisted Reproductive Health Surveys (RHS), Multiple Indicator Cluster Surveys (MICS) and other nationally sponsored surveys. When estimates are available in a survey report, they should be extracted directly. Otherwise, if microdata are available, estimates should be produced using an appropriate method of calculation. For census data, the estimates should be the same as in census reports, including any adjustment undertaken by the national statistical office.	
Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf	

## **GOAL 5: Improve Maternal Health**

## **5.1 Reproductive Health**

Indicator: 5.1.1 Total fertility ra	ate for aged 15 to 49, births per woma	an (child per woman)
	underdevelopment. Third world cou acute problem, which tends to nulli	ulation is considered to be one of the most basic causes of intries in Asia, Africa and Latin America are now dealing with this ify most of the efforts to encourage development. Fertility rates in In some countries in the relationship between women's education is 'Number One Problem'.
Rational and Gender Issues	education and contraceptive use. acquisition of knowledge regardin The role of schooling becomes r	rumented positive and significant relationships between female Female education affects the use of contraception through the ag contraception and through increased spousal communication. more apparent in terms of detailed knowledge: the number of nethods, known; the correct use of a particular method; and from equired.
Definition	lifetime if current age-specific fertil	e number of children a woman would bear over the course of her lity rates remained constant throughout her childbearing years and 49). The current total fertility rate is usually taken as an a women are having at the present.
	reproductive ages. It may be interpr	cility, calculated by summing age-specific birth rates over all reted as the expected number of children a woman who survives to a will have during her lifetime if she experiences the given age-
Description and method of computation	Total fertility rate is calculated as the total female population aged 15	ne number of live births to women 15 to 49 years of age divided by to 49 as the denominator.
	Total fertility rate, 15-49 = year-olds	Number of live births to women, 15-49 year-olds
		Number of women, 15-49 year-olds
Sources and data collection	Population censuses, health surveys	s, DHS and PAPFAM, administrative records
		tility and Mortality Data (2003), United Nations
Reference	http://www.eubios.info/EJ124/ej124	4i.htm

Indicator: 5.1.2 Maternal mortality ratio, per 100,000 live births		
	This indicator monitors deaths related to pregnancy and childbirth. It reflects the capacity of health systems to	
	provide effective health care in preventing and addressing the complications occurring during pregnancy and childbirth.  Indicator values range from less than 10, as in most developed countries, to over 2,000, with an average of around 400 per 100,000 live births in developing countries. Values above 1,000 however are found in a relatively small group of countries and are to be considered extremely high. According to 2005 global estimates, 14 countries had maternal mortality ratios above 1,000 and, of these; one had a ratio above 2,000. The larger the indicator value, the higher the maternal mortality is in a country.	
Rational and Gender Issues	Estimating maternal mortality, in particular when there are problems with data quality, results in wide ranges of uncertainty bracketing the produced estimates. It is therefore, advisable to interpret the maternal mortality ratio within the context of other reproductive health-related information including presence of skilled health personnel at delivery, antenatal care, and levels of fertility.	
	The low social and economic status of girls and women is a fundamental determinant of maternal mortality in many countries. Low status limits the access of girls and women to education, good nutrition and family planning - key determinants of too early, too many, and risky pregnancies - as well as to the necessary health services to prevent and/or treat complications of pregnancy and childbirth.	
	The maternal mortality ratio (MMR) is the annual number of maternal deaths from any cause related to or aggravated by pregnancy or its management (excluding accidental or incidental causes) during pregnancy and childbirth or within 42 days of termination of pregnancy, irrespective of the duration and site of the pregnancy, per 100,000 live births, for a specified year.  This indicator is expressed in units of deaths per 100,000 live births.	
Definition	Maternal deaths can be divided into two groups, namely direct and indirect obstetric deaths. Direct obstetric deaths result from obstetric complications of the pregnant state (pregnancy, labour and puerperium); from interventions, omissions or direct treatment; or from a chain of events resulting from any of these. Indirect deaths result from previously existing diseases, or diseases that developed during pregnancy, which were not directly due to obstetric causes, but were aggravated by the physiological effects of pregnancy.	
	A live birth is the complete expulsion or extraction from its mother of a product of conception, irrespective of the duration of the pregnancy, which, after such separation, breathes or shows any other evidence of life—such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles—whether or not the umbilical cord has been cut or the placenta is attached. Each product of such a birth is considered a live birth.	
Description and method of computation	The maternal mortality ratio is calculated by dividing recorded (or estimated) maternal deaths by total recorded (or estimated) live births in the same period and multiplying by 100,000. The measurement requires information on pregnancy status, timing of death (during pregnancy, during childbirth, or within 42 days of termination of pregnancy), and cause of death.    Maternal	
	Primary sources of data include vital registration systems, household surveys, reproductive age mortality	
Sources and data collection	studies, disease surveillance or sample registration systems, special studies on maternal mortality, and national population censuses. Complete vital statistics registration systems with accurate cause of death estimations are the most reliable data source for calculating maternal mortality and monitoring change over time. However, these are rare in developing countries. Official data are usually available from health service records, but few women in rural areas have access to health services. Therefore in developing countries, survey data, especially those from the Demographic and Health Surveys (DHS) and similar household surveys constitute the most common source of data on maternal mortality.  Because maternal mortality is a relatively rare event, large sample sizes are needed if household surveys are used. This is very costly and may still result in estimates with large confidence intervals. Due to the large confidence intervals, maternal mortality is generally only measured in household surveys once every ten years. The sisterhood method, used in DHS surveys, reduces sample size requirements by asking survey respondents	

	about the survivorship of sisters. Respondents are asked four simple questions about how many of their sisters reached adulthood, how many have died and whether those who died were pregnant at the time of death. However, the disadvantage of this survey technique is that the reference period for the estimate is at least 10-12 years before the survey.  Due to the large margins of uncertainty surrounding these estimates, maternal mortality ratios are presented at the national level only. Disaggregation is not recommended.
Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf

Measuring maternal mortality accurately is notoriously difficult, except where there is comprehensive registration of deaths and causes of death. Several process indicators have been proposed for tracking programs toward improving maternal death, such as attendance of professional care during pregnancy and childbirth, which is particularly important for the management of complications. Assistance by properly trained leading personnel is key to lowering maternal deaths, and the proportion of women who give birth with the assistance of a medically trained health care provider is the most widely used process indicator.  Rational and Gender Issues  Rational and Gender Issues  Rational and Gender Issues  The class of the developed regions. Values of less than 20 per cent are found in settings where health care is very poor and maternal mortality is a major public health problem. The proportion of births attended by skilled health personnel should be closely followed together with a set of related indicators disagragated by sociol economic characteristics to identify target populations and plan policy measures accordingly.  The low accellations of moment in some countries limits their access to reconomic resources and basic education and thus their ability to make decisions related to health and nutrition. Some women are denied access to contributing to high maternal mortality.  This indicator is the proportion of total live births attended by a skilled birth attendant trained in providing life saving obstetric care.  A live birth is the complete expulsion or extraction, from its mother, of a product of conception, irrespective of the duration of the pregnancy, which, after such separation, breathes or shows any other evidence of life—such as beating of the heart, pulsation of the umbilical cord, to definite movement of voluntary muscles—whether or not the umbilical cord has been cut or the placenta is attached.  A live birth is the complete expulsion or extraction, from its mother, of a product of conception, irresp	Indicator: 5.1.3 Birth	s attended by skilled health personnel, in percentage
Perintion and Gender Issues  of the developed regions. Values of less than 20 per cent are found in settings where health care is very poor and material montality is a major public health problem. The proportion of births attended by skilled health personnel should be closely followed together with a set of related indicators disaggregated by socio-economic characteristics to identify target populations and plan policy measures accordingly.  The low social status of women in some countries limits their access to economic resources and basic education and thus their ability to make decisions related to health and nutrition. Some women are denied access to care when it is needed either because of cultural practices of seclusion or because decision-making is the responsibility of other lamily members. Lack of access to or use of essential obstetric services is a crucial factor contributing to high maternal mortality.  This indicator is the proportion of total live births attended by a skilled birth attendant trained in providing life saving obstetric care.  A live birth is the complete expulsion or extraction, from its mother, of a product of conception, irrespective of the duration of the pregnancy, which, after such separation, breathes or shows any other evidence of life—such as bean got the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles—whether or not the umbilical cord has been cut or the placenta is attached.  A skilled birth attendant is an accredited health professional - such as a midwife, doctor or nurse - who has been educated and trained to profliciency in the skills needed to manage normal (uncomplicated) pregnancies, childbirth and the immediate postnatal period; and in the identification, management and referral of complications in women and newborns. Traditional birth attendants to a scale that we have a such as a midwife, doctor on rurse - who has been educated and trained to profliciency in the skilled health personnel (doctors, nurses or midwives) divided by th		registration of deaths and causes of death. Several process indicators have been proposed for tracking progress toward improving maternal health, such as attendance of professional care during pregnancy and childbirth, which is particularly important for the management of complications. Assistance by properly trained health personnel is key to lowering maternal deaths, and the proportion of women who give birth with the assistance of
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Sources and data collection  A live birth is the complete expulsion or extraction, from its mother, of a product of conception, irrespective of the duration of the pregnancy, which, after such separation, breathes or shows any other evidence of life—such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles—whether or not the umbilical cord has been cut or the placenta is attached.  A skilled birth attendant is an accredited health professional - such as a midwife, doctor or nurse - who has been educated and trained to proficiency in the skills needed to manage normal (uncomplicated) pregnancies, childbirth and the immediate postnatal period; and in the identification, management and referral of complications in women and newborns. Traditional birth attendants (TBA) either trained or not, are excluded from the category of skilled health workers.  Traditional birth attendants are traditional, independent (of the health system), non-formally trained and community-based providers of care during pregnancy, childbirth and the postnatal period.  Births attended by skilled health personnel is calculated as the number of births attended by skilled health personnel (doctors, nurses or midwives) divided by the total number of births in the same period.  Number of births attended by skilled health personnel  Total number of live births  The indicator is expressed in units of percentage.  Disaggregation:  The indicator can be disaggregated by urban and rural areas, age of mother, and by levels of social and economic status would help assess the basis of different degrees of access to reproductive health care and inform the necessary policies and interventions.  Data are collected through national-level household surveys, including Multiple Indicator Cluster Surveys (MICS) and Demographic Health Surveys (DHS). These surveys are generally conducted every 3-5 years by the national statistical office or ministry of health.  In order to facilitate interpretation of trends and differ		and thus their ability to make decisions related to health and nutrition. Some women are denied access to care when it is needed either because of cultural practices of seclusion or because decision-making is the responsibility of other family members. Lack of access to or use of essential obstetric services is a crucial factor
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skilled health personnel (doctors, nurses or midwives) divided by the total number of births in the same period.  Births attended by skilled health personnel  Description and method of computation  The indicator is expressed in units of percentage.  Disaggregation:  The indicator can be disaggregated by urban and rural areas, age of mother, and by levels of social and economic status would help assess the basis of different degrees of access to reproductive health care and inform the necessary policies and interventions.  Data are collected through national-level household surveys, including Multiple Indicator Cluster Surveys (MICS) and Demographic Health Surveys (DHS). These surveys are generally conducted every 3-5 years by the national statistical office or ministry of health.  In order to facilitate interpretation of trends and differentials based on survey data, it is useful to report confidence intervals together with estimates.  In the absence of survey data, some countries may have health facility data. However, it should be noted that these data may overestimate the proportion of deliveries attended by a skilled professional because the denominator presumably excludes women who give birth outside of health facilities.  Reference  Reference	Definition	the duration of the pregnancy, which, after such separation, breathes or shows any other evidence of life—such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles—whether or not the umbilical cord has been cut or the placenta is attached.  A skilled birth attendant is an accredited health professional - such as a midwife, doctor or nurse - who has been educated and trained to proficiency in the skills needed to manage normal (uncomplicated) pregnancies, childbirth and the immediate postnatal period; and in the identification, management and referral of complications in women and newborns. Traditional birth attendants (TBA) either trained or not, are excluded from the category of skilled health workers.  Traditional birth attendants are traditional, independent (of the health system), non-formally trained and
inform the necessary policies and interventions.  Data are collected through national-level household surveys, including Multiple Indicator Cluster Surveys (MICS) and Demographic Health Surveys (DHS). These surveys are generally conducted every 3-5 years by the national statistical office or ministry of health.  In order to facilitate interpretation of trends and differentials based on survey data, it is useful to report confidence intervals together with estimates.  In the absence of survey data, some countries may have health facility data. However, it should be noted that these data may overestimate the proportion of deliveries attended by a skilled professional because the denominator presumably excludes women who give birth outside of health facilities.  http://mdgs.un.org/unsd/mdg/Metadata.aspx	method of	skilled health personnel (doctors, nurses or midwives) divided by the total number of births in the same period.  Births attended by skilled health personnel  Number of births attended by skilled health personnel  Total number of live births  The indicator is expressed in units of percentage.  Disaggregation: The indicator can be disaggregated by urban and rural areas, age of mother, and by levels of social and
(MICS) and Demographic Health Surveys (DHS). These surveys are generally conducted every 3-5 years by the national statistical office or ministry of health.  In order to facilitate interpretation of trends and differentials based on survey data, it is useful to report confidence intervals together with estimates.  In the absence of survey data, some countries may have health facility data. However, it should be noted that these data may overestimate the proportion of deliveries attended by a skilled professional because the denominator presumably excludes women who give birth outside of health facilities.  http://mdgs.un.org/unsd/mdg/Metadata.aspx		inform the necessary policies and interventions.
Reference		(MICS) and Demographic Health Surveys (DHS). These surveys are generally conducted every 3-5 years by the national statistical office or ministry of health.  In order to facilitate interpretation of trends and differentials based on survey data, it is useful to report confidence intervals together with estimates.  In the absence of survey data, some countries may have health facility data. However, it should be noted that these data may overestimate the proportion of deliveries attended by a skilled professional because the
nttp://mdgs.un.org/unsd/mdg/kesources/Attach/indicators/HandbookEnglish.pdf	Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf

Indicator: 5.1.4	Antenatal care coverage (at least one visit and at least four visits), in percentage
	The antenatal period presents opportunities for reaching pregnant women with interventions that may be vital to their health and wellbeing and to that of their infants. The World Health Organization (WHO) recommends a standard model of four antenatal visits based on a review of the effectiveness of different models of antenatal care. WHO guidelines are specific on the content of antenatal care visits, which should include:  - a clinical examination; - blood testing to detect syphilis & severe anemia (and others such as HIV and malaria as necessary according to epidemiological context); - estimations of gestational age and uterine height; - taking blood pressure; - recording maternal weight / height; - performing a detection of symptomatic STIs Urine test (multiple dipstick); - requesting blood type and Rh; - giving tetanus toxoid; - providing iron / Folic acid supplementation: and
Rational and	providing recommendations for emergencies / hotlines for emergencies.
Gender Issues	It is important to note that the MDG indicators do not capture these components of care. The indicators of antenatal care (at least one visit and at least four visits) are based on a standard question that simply asks if the health of the woman was checked during pregnancy. Thus, it should not be assumed that women received all of the components listed above.  The indicator values range from 0 to 100, with 100 being the ideal situation in which all pregnant women between 15 and 49 years have seen a doctor at least once – or four timesduring their pregnancy. For ANC 1+, indicator values generally fall between 50 and 100 per cent. For ANC 4+, values tend to be lower, often substantially. ANC coverage figures should be closely followed together with a set of other related indicators, such as proportion of deliveries attended by a skilled health worker or deliveries occurring in health facilities, and disaggregated by background characteristics, to identify target populations and plan policy actions accordingly.
	The low social status of women in some countries limits their access to economic resources and basic education and thus their ability to make decisions related to health and nutrition. Some women are denied access to care when it is needed either because of cultural practices of seclusion or because decision-making is the responsibility of other family members.
	Antenatal care coverage (at least one visit) is the percentage of women aged 15-49 with a live birth in a given time period that received antenatal care provided by skilled health personnel at least once during their pregnancy.  Antenatal care coverage (at least four visits) is the percentage of women aged 15-49 with a live birth in a given time period that received antenatal care four or more times during their pregnancy.
	A live birth is the complete expulsion or extraction from its mother of a product of conception, irrespective of the duration of the pregnancy, which, after such separation, breathes or shows any other evidence of life—such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles—whether or not the umbilical cord has been cut or the placenta is attached.
Definition	Antenatal care (ANC) constitutes screening for health and socioeconomic conditions likely to increase the possibility of specific adverse pregnancy outcomes; providing therapeutic interventions known to be effective; and educating pregnant women about planning for safe birth and emergencies during pregnancy and how to deal with them.
	Skilled health personnel are accredited health professionals - such as a midwifes, doctors or nurses - who have been educated and trained to proficiency in the skills needed to manage normal (uncomplicated) pregnancies; childbirth, and the immediate postnatal period; and in the identification, management and referral of

childbirth and the immediate postnatal period; and in the identification, management and referral of complications in women and newborns. Both trained and untrained traditional birth attendants (TBA) are

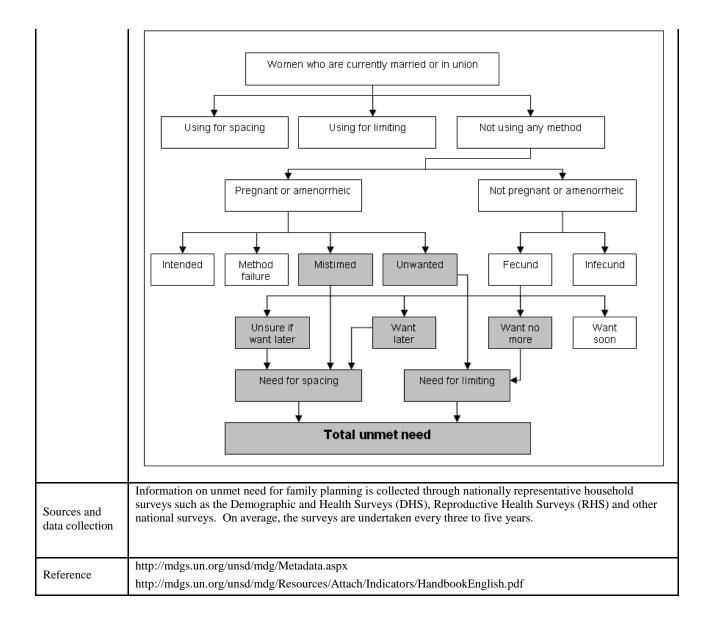
Traditional birth attendants are traditional, independent (of the health system), non-formally trained and

excluded.

	community-based providers of care during pregnancy, childbirth and the postnatal period.
Description and method of computation	The percentage of women aged 15-49 with a live birth in a given time period that received antenatal care provided by skilled health personnel at least once during their pregnancy (ANC 1+) is calculated by dividing the number of women attended at least once during pregnancy by skilled health personnel for reasons related to the pregnancy by the total number of women with a live birth and multiplying by 100.  The percentage of women aged 15-49 with a live birth in a given time period that received antenatal care four or more times during pregnancy (ANC 4+) is calculated by dividing the number of women attended at least four times during pregnancy by any provider for reasons related to the pregnancy by the total number of women with a live birth and multiplying by 100.  Unlike ANC 1+, ANC 4+ includes care given by any provider, not just skilled health personnel. This is because key national level household surveys do not collect information on type of provider for each visit.  The disaggregation of this indicator by geographical area and population groups provides an indication of the wide differences in access to reproductive health care in different areas and by different socio-economic groups. Further analyses are needed to understand the reasons of such differences in order to plan actions to overcome them.
Sources and data collection	Household surveys should be used as the main data sources for the antenatal care indicator. Possible surveys include Demographic and Health Surveys (DHS), Multiple Indicator Cluster Surveys (MICS), Fertility and Family Surveys (FFS), Reproductive Health Surveys (RHS) and other surveys based on similar methodologies. Surveys are normally conducted at 3 to 5 year intervals.  In order to facilitate interpretation of trends and differentials based on survey data, it is useful to report confidence intervals together with estimates.
Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf

1	
mat afte retu posi	alth services provided to mothers after delivery constitute an essential component of the package of ternal and child health (MCH) services in any population. A woman's body undergoes several changes or delivery. This includes the shrinking of the uterus, shedding of the uterine lining, closing of the cervix, arning of the vagina to it normal size, etc. Mothers are also prone to psychological changes during the structure period. For these reasons, postpartum care services are of utmost importance in preventing adverse alth outcomes for mothers and their babies.
Rational and fact	search indicates that disparities in care based on ethnicity, income, and immigration status, among other tors, as major contributors to the maternal health care crisis. Other barriers to maternal health care include guage barriers, restricted appointment hours, and a shortage of facilities with adequately trained fessionals (in both rural areas and inner cities).
pos	s important to note that the MDG indicators do not capture these components of care. The indicators of stpartum are based on a standard question that simply asks if the health of the woman was checked after ivery up to 42 days.
The birth The edu acco	e indicator values range from 0 to 100, with 100 being the ideal situation in which all women who gave the between 15 and 49 years have seen a doctor at least once during the first 42 days after their delivery. The low social status of women in some countries limits their access to economic resources and basic acation and thus their ability to make decisions related to health and nutrition. Some women are denied ess to care when it is needed either because of cultural practices of seclusion or because decision-making is responsibility of other family members.
Pos give	stpartum care coverage (at least one visit) is the percentage of women aged 15-49 who gave live birth in a en time period that received postpartum care provided by skilled health personnel at least once during the t 42 days after delivery.
the such	ive birth is the complete expulsion or extraction from its mother of a product of conception, irrespective of duration of the pregnancy, which, after such separation, breathes or shows any other evidence of life—h as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles—ether or not the umbilical cord has been cut or the placenta is attached.
beer chil com	lled health personnel are accredited health professionals - such as a midwifes, doctors or nurses - who have en educated and trained to proficiency in the skills needed to manage normal (uncomplicated) pregnancies; ldbirth and the immediate postnatal period; and in the identification, management and referral of implications in women and newborns. Both trained and untrained traditional birth attendants (TBA) are cluded.
	ditional birth attendants are traditional, independent (of the health system), non-formally trained and nmunity-based providers of care during pregnancy, childbirth and the postnatal period.
Description and method of computation	e percentage of women aged 15-49 with a live birth in a given time period that received postpartum care vided by skilled health personnel at least once in the first 42 days after delivery is calculated by dividing number of women with access to postpartum at least once in the first 42 days after delivery, by skilled alth personnel for reasons related to delivery by the total number of women with a live birth and litiplying by 100. The disaggregation of this indicator by geographical area and population groups provides an indication of the de differences in access to reproductive health care in different areas and by different socio-economic
_	ups. Further analyses are needed to understand the reasons of such differences in order to plan actions to ercome them.
Sources and data collection include Fan met In collection	usehold surveys should be used as the main data sources for the postpartum care indicator. Possible surveys lude Demographic and Health Surveys (DHS), Multiple Indicator Cluster Surveys (MICS), Fertility and mily Surveys (FFS), Reproductive Health Surveys (RHS) and other surveys based on similar thodologies. Surveys are normally conducted at 3 to 5 year intervals. order to facilitate interpretation of trends and differentials based on survey data, it is useful to report indicator intervals together with estimates.
Reference http	o://intqhc.oxfordjournals.org/content/14/5/393.full

Indicator: 5.1.6 U	Indicator: 5.1.6 Unmet need for family planning, in percent		
Rational and Gender Issues	The concept of unmet need points to the gap between women's reproductive intentions and their contraceptive behaviour. The indicator is useful for tracking progress towards the target of achieving universal access to reproductive health. Information on unmet need for family planning complements the indicator of contraceptive prevalence. The sum of contraceptive prevalence and unmet need provides the total demand for family planning.  This indicator provides a measure of the extent of unmet need for family planning at a particular time. When unmet need is measured in a comparable way at different dates, the trend indicates whether there has been		
	progress towards meeting women's needs in this regard. It should be noted that, even when contraceptive prevalence is rising, unmet need for family planning may sometimes fail to decline, or may even increase. This can happen because the demand for family planning increases due to declines in the desired number of children. Changes in the desired spacing of births or changes in the percentage of women who are at risk of pregnancy can also influence the trend in demand for family planning, independently of trends in contraceptive prevalence.		
Definition	The percent with an unmet need for family planning is the number of women with unmet need for family planning expressed as a percentage of women of reproductive age who are married or in a union. Women with unmet need are those who are fecund and sexually active but are not using any method of contraception, and report not wanting any more children or wanting to delay the birth of their next child.		
	The majority of estimates of unmet need for family planning follow the procedure adopted in the Demographic and Health Surveys (DHS), which is regarded as the standard method of computation.		
	The indicator includes in the numerator:		
	All pregnant women (married or in a union) whose pregnancies were unwanted or mistimed at the time of conception.		
Description and	All postpartum amenorrheic women (married or in a union) who are not using family planning and whose last birth was unwanted or mistimed.		
method of computation	All fecund women (married or in a union) who are neither pregnant nor postpartum amenorrheic, and who either do not want any more children (want to limit family size), or who wish to postpone the birth of a child for at least two years or do not know when or if they want another child (want to space births), but are not using any contraceptive method.		
	Excluded from the numerator are infecund women1 as well as pregnant and postpartum amenorrheic women who became pregnant unintentionally due to contraceptive method failure, when that information is available. The diagram2 below offers a visual aid for the computation of the indicator.		
	Diagram below offers a visual aid for the computation of the indicator.		



Indicator: 5.1.7 Contraceptive prevalence among women 15-49, in percentage		
Rational and Gender Issues	The indicator prevalence of contraceptive use serves as a proxy measure of access to reproductive health services, is useful for tracking progress towards the target of achieving universal access to reproductive health, especially when the indicator is considered in conjunction with information about women's knowledge of family planning or accessibility, and the quality of family planning services. Information on contraceptive prevalence complements the indicator of unmet need for family planning. The sum of contraceptive prevalence and unmet need determines the total demand for contraception. Unlike the unmet need indicator, contraceptive prevalence does not take into account whether women or couples do or do not desire additional children. This makes the indicator more difficult to interpret than unmet need because contraceptive prevalence rates vary across societies with vastly different preferred family sizes. For the same reason, it is difficult to specify the desired target for contraceptive prevalence rates.  Statistics on contraception prevalence rates are based primarily on women. This is mostly for pragmatic reasons, because the majority of contraceptive methods are female-based. But it can also be argued that the degree to which women control their reproduction is an indicator of the degree to which they control their own lives in general, thereby converting the contraceptive prevalence rate into an indicator of women's empowerment. Recent surveys have also interviewed samples of men about contraceptive use.	
	The contraceptive prevalence is the percentage of women of reproductive age who are currently using, or whose sexual partner is currently using, at least one contraceptive method, regardless of the method used.	
Definition	Women of reproductive age include all women of reproductive age (15-49) who are married or in consensual union.  Contraceptive methods include modern and traditional methods. Modern methods of contraception include female and male sterilization, oral hormonal pills, intra-uterine devices (IUD), male condoms, injects, implants (including Norplant), vaginal barrier methods, female condoms, and emergency contraception. Traditional methods of contraception include the rhythm method (periodic abstinence), withdrawal, lactation amenorrhea method (LAM) and folk methods.	
	Prevalence of contraceptive use $ = \frac{\text{Women (15-49) using a contraceptive }}{\text{method}} \times 100 $ Women of reproductive age (15-49)	
Description and method of computation	Contraceptive use may vary significantly across socioeconomic groups and regional and geographical areas. For policy purposes, information on contraceptive prevalence should be disaggregated, at a minimum, by age and current marital status. This information is important because it allows monitoring of differences in access to contraceptive methods for more vulnerable groups such as adolescents and unmarried women.	
	Disaggregation: Contraceptive use can be disaggregated by other social or economic characteristics, such as the woman's level of educational attainment, urban or rural residence, and number of own children as relevant for the policy needs of each country or area.	
Sources and data collection	The indicator is calculated from nationally representative surveys with questions on current use of contraception. Surveys that commonly include this information are: Demographic and Health Surveys (DHS), Fertility and Family Surveys (FFS), Reproductive Health Surveys (RHS) conducted with assistance of the United States Centers for Disease Control and Prevention, Multiple Indicator Cluster Surveys (MICS) and other national surveys.  Surveys gather information on contraceptive prevalence through direct questions to women. These questions often include two parts: a general question asking women if they are currently using a method of contraception and a follow-up question regarding the type of contraceptive method currently used. In order to obtain an accurate measure of contraceptive prevalence, it is desirable for the survey interviewer to provide a description or a list of the specific methods of family planning. If this is not done, the level of contraceptive use may be significantly underreported, especially where the use of traditional methods such as withdrawal or calendar rhythm, or use of contraceptive sterilization, is common. In some surveys, such as the DHS, the methods are described in a series of "probe" questions about methods the respondent has heard about, before the respondent is asked about current use of contraception. In highly literate populations, the interviewer might provide the respondent with a printed list of the methods.  In recording data on the type of contraceptive method used, it is important to keep in mind that some respondents may use more than one method at a time. In such cases, a selection is either made a posteriori by the survey enumerator based on the effectiveness of the methods used or by respondents based on their own assessment of	

	the method they used most frequently. Identifying only one method or combination of methods per respondent allows contraceptive prevalence to be computed as the sum of levels of use of each method. If more than one method or combination of methods is recorded per respondent and no selection criteria are employed, the sum of the various methods used may exceed the overall level of contraceptive prevalence.  It is also important to note that contraceptive prevalence is measured at the time of interview. There is, however, a lag, generally between one and two years, between the date of an interview and the diffusion of the survey report. On average, the surveys are undertaken every three to five years.
Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx
1101010100	http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf

Indicator: 5.1.8 Incidence of breast cancer among women (35 yrs and over) diagnosed, in 1,000 women		
Rational and	Cancer is a generic term for a large group of diseases that can affect any part of the body. Other terms used are malignant tumours and neoplasms. One defining feature of cancer is the rapid creation of abnormal cells that grow beyond their usual boundaries, and which can then invade adjoining parts of the body and spread to other organs. This process is referred to as metastasis. Metastases are the major cause of death from cancer.  Breast cancer is a leading cause of women death worldwide and accounted for 460 000 deaths (2008).	
Gender Issues	Ageing is a fundamental factor for the development of cancer. The incidence of cancer rises dramatically with age, most likely due to a build up of risks for specific cancers that increase with age.	
	Cancer mortality can be reduced if cases are detected and treated early.	
Definition	This indicator is defined as the proportion of women aged 35 years and over with breast cancer at a given point in time.	
	Prevalence of breast cancer among women (number of women aged 35 and over diagnosed for every 1,000 women aged 35 and over)	
Description and method of computation	Prevalence of breast cancer among women = Number of women aged 35 years and over with breast cancer = x 1000	
Computation	Aged 35+ years  Total number of women aged 35 years old and over	
Sources and data collection	Data are collected through household surveys, in particular Demographic and Health Surveys and Multiple Indicator Cluster Surveys, and censuses, in addition to the administrative records	
Reference	http://www.who.int/mediacentre/factsheets/fs297/en/	

Indicator: 5.1.9 Incidence of cervical cancer among women (35 yrs and over) diagnosed, in 1000 women		
Rational and Gender Issues	Cervical cancer, which is caused by Human Papilloma Virus, is a leading cause of cancer death among women in low-income countries. Knowledge about the causes of cancer, and interventions to prevent and manage the disease is extensive. Cancer can be reduced and controlled by implementing evidence-based strategies for cancer prevention, early detection of cancer and management of patients with cancer.  Cancer mortality can be reduced if cases are detected and treated early.	
Definition	Proportion of women aged 35 years and over with cervical cancer in the past 12 months	
Description and method of computation	This indicator is calculated as the women aged 35 and over in the pas  Incidence of cervical cancer among women	Number of women aged 35 years and over
Sources and data collection	Data are collected through household surveys, in particular Demographic and Health Surveys and Multiple Indicator Cluster Surveys, and censuses, in addition to the Administrative records.	
Reference	http://www.who.int/mediacentre/factsheets/fs297/en/	

Indicator: 5.1.10 Proportion of women aged 35 years and over who undergo a cervical cancer screening examinations (coverage)		
annually by health systems, in percentage		
	Cervical cancer, which is caused by Human Papilloma Virus, is a leading cause of cancer death among women in low-income countries. Knowledge about the causes of cancer, and interventions to prevent and manage the disease is extensive. Cancer can be reduced and controlled by implementing evidence-based strategies for cancer prevention, early detection of cancer and management of patients with cancer.	
Rational and Gender Issues	Cancer mortality can be reduced if cases are detected and treated early.	
	The cytology screening for cancer of the cervices has been effective in reducing the incidence of mortality from the disease. Screening programmes are especially effective for frequent cancer types that have a screening test that is cost-effective, affordable, acceptable and accessible to the majority of the population at risk.	
Definition	This indicator is defined as the percentage of women who conducts the cervical cancer screening examination in a year of total population of women aged 35 years and over.	
Description and method of computation	The proportion of women aged 35 + years who undergo a cervical cancer screening examinations (coverage) annually by health systems divided by the number of women aged 15 and over (percentage)  Proportion of Women 35+years with cervical cancer coverage  Number of women aged 35+ screened for cervical cancer cancer coverage  Total number of women aged 35 years old and over	
Sources and data collection	Data are collected through household surveys, in particular Demographic and Health Surveys and Multiple Indicator Cluster Surveys, and censuses, in addition to the administrative records	
Reference	http://www.who.int/mediacentre/factsheets/fs297/en/	

## Goal 6: Combat HIV/AIDS, Malaria and other Diseases

## **6.1 General Health**

Indicator: 6.1.1 Incidence and death rates associated with tuberculosis, for women and men, in percentage		
Rational and Gender Issues	At younger ages, the prevalence of infection is similar in boys and girls. At older ages, a higher prevalence has been found in men; in most of the world, more men than women are diagnosed with tuberculosis and die from it. However, recent analyses comparing infection and disease rates suggest that the propensity to develop the disease after infection with mycobacterium tuberculosis (the progression rate) may be greater among women of reproductive age than among men of the same age. A recent review of socio-economic and cultural factors relating to the suggested differences called for further research to clarify such differences in the epidemiology of tuberculosis. Tuberculosis is nevertheless a leading cause of death from infectious disease among women. Since tuberculosis affects women mainly in their economically and reproductively active years, the impact of the disease is also strongly felt by their children and families.	
Definition	The tuberculosis death rate indicator refers to the estimated number of deaths due to tuberculosis (TB) in a given time period. In this database, the indicator reflects the number of deaths per 100,000 population per year. Deaths from all forms of TB are included. Deaths from TB in people with HIV are included.  TB is an infectious bacterial disease caused by Mycobacterium tuberculosis, which most commonly affects the lungs. It is transmitted from person to person via droplets from the throat and lungs of people with the active respiratory disease. In healthy people, infection with Mycobacterium tuberculosis often causes no symptoms, since the person's immune system acts to "wall off" the bacteria. The symptoms of active TB of the lung are coughing, sometimes with sputum or blood, chest pains, weakness, weight loss, fever and night sweats. Tuberculosis is treatable with a six-month course of antibiotics.  Human Immunodeficiency Virus (HIV) is a virus that weakens the immune system, ultimately leading to AIDS, the acquired immunodeficiency syndrome. HIV destroys the body's ability to fight off infection and disease, which can ultimately lead to death	
Description and method of computation	Vital registration data are used where available (however, few countries with a high burden of TB have complete vital registration systems with good coverage). Elsewhere, mortality is estimated from incidence.  Estimates of TB mortality are based on a consultative and analytical process led by WHO and are published annually. Details of the methods used to estimate TB mortality are provided in the references, listed below.  Country-specific estimates of TB mortality are, in most instances, derived from estimates of incidence (for additional details, please refer to the TB incidence indicator metadata), combined with assumptions about the case fatality rate. The case fatality rate is assumed to vary according to whether the disease is smear-positive or not; whether the individual receives treatment in a DOTS programme, a non-DOTS programme, or is not treated at all; and whether the individual is infected with HIV.  The TB mortality rate is calculated from the product of incidence and case fatality (proportion of incident cases that ever die from TB).  Morality = incidence x proportion of incident cases that die	
Sources and data collection	A standardized data collection form is distributed to all countries on an annual basis. Estimates are made using these data as well as country-specific analyses of TB epidemiology based on the published literature and consultation with national and international experts.  Every year, WHO requests information from the National Tuberculosis Control Programmes (NTPs) or relevant public health authorities. NTPs that respond to WHO are also asked to update information for earlier years where possible. As a result of such revisions, the data (case notifications, treatment outcomes, etc.) presented for a given year may differ from those published previously.  Completed forms are collected and reviewed at all levels of WHO, by country offices, regional offices and at headquarters. An acknowledgement form that tabulates all submitted data is sent back to the NTP correspondent in order to complete any missing responses and to resolve any inconsistencies. Then, using the complete set of data for each country, a profile is constructed that tabulates all key indicators, including epidemiological and financial data and estimates, and this too is returned to each NTP for review. In the WHO European Region only, data collection and verification are performed jointly by the regional office and a WHO collaborating centre, EuroTB (Paris). EuroTB subsequently	

	publishes an annual report with additional analyses, using more detailed data for the European Region www.eurotb.org
	The details of estimation are described in publications in peer-reviewed journals. Because accurate measurement is crucial in the evaluation of epidemic trends, a recent paper provides methodological guidance, based on a review by the WHO Task Force on TB Impact Measurement. This paper can be read in conjunction with the list of countries that have done, or are planning, infection (tuberculin) and disease prevalence surveys, and with the set of countries that now register deaths by cause and provide these data to WHO (including TB).
Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf

Indicator 6.1.2 Proportion o	of tuberculosis cases detected and cured under directly observed treatment short course
	Since tuberculosis is an airborne contagious disease, primary control is effected through finding and treating infectious cases and thus limiting the risk of acquiring infection. The recommended approach to primary control is the DOTS strategy, an inexpensive strategy that could prevent millions of tuberculosis cases and deaths over the coming decade.
Rational and	DOTS is a proven system based on accurate diagnosis and consistent treatment with a full course of a mixture of anti-tuberculosis drugs (isoniazid, rifampicin, pyrazinamide, streptomycin and ethambutol). DOTS requires government commitment, careful detection, consistent treatment, uninterrupted supply of anti-tuberculosis drugs and a monitoring and reporting system to evaluate treatment outcomes for each patient.
Gender Issues	At younger ages, the prevalence of infection is similar in boys and girls. At older ages, a higher prevalence has been found in men; in most of the world, more men than women are diagnosed with tuberculosis and die from it. However, recent analyses comparing infection and disease rates suggest that the propensity to develop the disease after infection with mycobacterium tuberculosis (the progression rate) may be greater among women of reproductive age than among men of the same age. A recent review of socio-economic and cultural factors relating to the suggested differences called for further research to clarify such differences in the epidemiology of tuberculosis. Tuberculosis is nevertheless a leading cause of death from infectious disease among women. Since tuberculosis affects women mainly in their economically and reproductively active years, the impact of the disease is also strongly felt by their children and families.
	The proportion of new smear-positive TB cases registered under DOTS in a given year that successfully completed treatment, whether with bacteriologic evidence of success ("cured") or without ("treatment completed").
	At the end of treatment, each patient is assigned one of the following six mutually exclusive treatment outcomes: cured; completed; died; failed; defaulted; and transferred out with outcome unknown. The proportions of cases assigned to these outcomes, plus any additional cases registered for treatment but not assigned to an outcome, add up to 100% of cases registered.
	Tuberculosis, or TB, is an infectious bacterial disease caused by Mycobacterium tuberculosis, which most commonly affects the lungs. It is transmitted from person to person via droplets from the throat and lungs of people with the active respiratory disease. In healthy people, infection with Mycobacterium tuberculosis often causes no symptoms, since the person's immune system acts to "wall off" the bacteria. The symptoms of active TB of the lung are coughing, sometimes with sputum or blood, chest pains, weakness, weight loss, fever and night sweats. Tuberculosis is treatable with a six-month course of antibiotics.
Definition	Smear-positive is defined as a case of TB where Mycobacterium tuberculosis bacilli are visible in the patient's sputum when examined under the microscope. A new case of TB is defined as a patient who has never received treatment for TB, or who has taken anti-TB drugs for less than 1 month.
	DOTS is the internationally recommended approach to TB control, which forms the core of the Stop TB Strategy (WHO, 2006b). The five components of DOTS are:
	Political commitment with increased and sustained financing;
	Case detection through quality-assured bacteriology;
	Standardized treatment with supervision and patient support;      An offsetive drug supply and management systems and
	<ul> <li>An effective drug supply and management system; and</li> <li>A monitoring and evaluation system, and impact measurement.</li> </ul>
	In countries that have adopted the DOTS strategy, it may be implemented in all or some parts of the country, and by all or some health-care providers. Only those TB patients notified by health-care facilities providing DOTS services are included in this indicator.

Description and method of computation	Treatment success rates are calculated from cohort data (outcomes in registered patients) as the proportion of new smear-positive TB cases registered under DOTS in a given year that successfully completed treatment, whether with ("cured") or without ("treatment completed") bacteriologic evidence of success.
Sources and data collection	The treatment outcomes of TB cases registered for treatment are reported to WHO using a standardized data collection form, which is distributed to all countries on an annual basis. The treatment outcomes of TB cases reported by countries follow the WHO recommendations on definitions of outcomes, therefore, they are internationally comparable and there is no need for any adjustment.
Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf

Rational and Gender Issues	The prevalence of current tobacco smoking among adults is an important measure of the health an economic burden of tobacco, and provides a baseline for evaluating the effectiveness of tobacco control programmes over time.
	Use of tobacco among adults is increasing and currently direct tobacco smoking is responsible for the death of 5 million people across the world each year.
	Globally, rates of tobacco use and tobacco-attributable mortality are higher in men than women. I many low-income countries, tobacco is almost exclusively used by males. Of concern, however, are that accelerating rates of tobacco use among women.
Definition	Current smoking of any tobacco product prevalence estimates, resulting from the latest adult tobaccuse survey (or survey which asks tobacco use questions), which have been adjusted according to the WHO regression method for standardising described in the Method of Estimation below.
	"Tobacco smoking" includes cigarettes, cigars, pipes or any other smoked tobacco products.
	"Current smoking" includes both daily and non-daily or occasional smoking. (Source:WHO)
Description and method of computation	WHO has developed a regression method that attempts to enable comparisons between countries: data are partly missing or are incomplete for a country, the regression technique uses data available for the region in which the country is located to generate estimates for that country. The regression models are run at the United Nations sub-regional level 3 separately for males and females in order to obtain age-specific prevalence rates for that region. These estimates are then substituted for the country falling within the sub-region for the missing indicator. Note that the technique cannot be use for countries without any data: these countries are excluded from any analysis.
	Age-standardized prevalence: Tobacco use generally varies widely by sex and across age group. Although the crude prevalence rate is reasonably easy to understand for a country at one point in time comparing crude rates between two or more countries at one point in time, or of one country a different points in time, can be misleading if the two populations being compared have significantly different age distributions or differences in tobacco use by sex. The method of age-standardization commonly used to overcome this problem and allows for meaningful comparison of prevalence between countries. The method involves applying the age-specific rates by sex in each population to one standard population. The WHO Standard Population, a fictitious population whose age distribution was artificially created and is largely reflective of the population age structure of low- an middle-income countries, was used. The resulting age-standardized rate, also expressed as percentage of the total population, refers to the number of smokers per 100 WHO Standar Population. As a result, the rate generated using this process is only a hypothetical number with n inherent meaning in its magnitude. It is only useful when contrasting rates obtained from one country to those obtained in another country, or from the same country at a different points in time
	In order to produce an overall smoking prevalence rate for a country, the age-standardized prevalence rates for males and females must be combined to generate total prevalence. Since the WHO Standar Population is the same irrespective of sex, the age-standardized rates for males and females at combined using population weights for males and for females at the global level from the U population data for 2006. For example, if the age-standardized prevalence rate for tobacco smoking

	adults is 60% for males and 30% for females, the combined prevalence rate for tobacco smoking in all adults is calculated as $60 \times (0.51) + 30 \times (0.49) = 45\%$ , with the figures in brackets representing male and female population weights. Thus, of the total smoking prevalence (45%) the proportion of smoking attributable to males is $66.7\%$ [= $(30 \div 45) \times 100$ ] and to females $33.3\%$ [= $(15 \div 45) \times 100$ ]. (Source:WHO)
Sources and data collection	Preferred data sources: Household surveys Other possible data sources: Specific population surveys and surveillance systems
Reference	WHO Global InfoBase

Rational and Gender Issues	Once considered a high-income country problem, overweight and obesity are now on the rise in low- and middle-income countries, particularly in urban settings.  Excess bodyweight is an important risk factor for mortality and morbidity from cardiovascular diseases, diabetes, cancers, and musculoskeletal disorders. National, subnational, and multicentre studies have shown that adiposity, as measured by body-mass index (BMI), has increased in recent decades in many populations. Reliable information about these trends is needed to assess the implications of rising BMI on population health, set policy priorities, and evaluate their success. (Source:WHO)
Definition	The indicator on proportion of adults who are obese, by sex is defined as proportion of people who are of age 20 and over and who have a body mass index (BMI) of 30 kg/m2 and over. (Source:WHO)
Description and method of computation	BMI is calculated as weight (in kilograms) divided by the square of height (in meters). BMI is calculated based on measured, rather than self-reported height and weight, to avoid systematic reporting biases. (Source:WHO)
Sources and data collection	Data are obtained based on a study carried out by WHO extracting information from national health examination surveys, epidemiological studies, multicentre studies, a review of published articles, and unpublished data identified through the WHO Global InfoBase. Only BMI data from measured weight and height are used because self-reported measures are systematically biased. (Source:WHO)
Reference	WHO Global InfoBase

Indicator: 6.1.5 Life expectancy at (a) birth and at (b) age 60, by sex, in years		
mulcator: 6.1.5 Life expectance		
	It is well known that women live longer than men. In most countries, there are additional differences in life expectancy based on race, class, and other social-status differences.	
Rational and Gender Issues	The importance of the gender difference in life expectancy is obvious: if women live longer than men then there will be moreolder women than older men. This has several implications for individual women as well as for society. For individual women, it is likely to mean outliving one's spouse, living alone, and poorer economic conditions, as fewer resources are used to cover more years. These gender differences in life expectancy also lead to inquiries about what older men and women are dying from.	
	In addition, although women generally experience lower death rates than men, they suffer from higher rates of several chronic conditions, including arthritis, high blood pressure, cataracts, chronic sinusitis, hay fever, varicose veins, chronic bronchitis, asthma, hemorrhoids, frequent indigestion, and migraines. Men, on the other hand, are more likely to experience hearing impairments, heart conditions, orthopedic impairments, diabetes, visual impairments, tinnitus, and dermatitis	
	Women tend to live longer than men in all regions of the world. In nearly all countries of the world, female life expectancy at age 60 is higher than that of males; however, there are differences in the gap between female and male life expectancy by development group or geographical areas. At the world level, females have a life expectancy of 21.1 years in 2005-2010, compared to 18.2 years for males. The female advantage is considerably larger in the more developed regions (4.0 years) than in the less developed regions (2.3 years). The gap between male and female life expectancy is particularly narrow in the least developed countries (1.1 years). The indicator reflects possible gender differences in determinants of health and mortality at ages above 60, including prevalence of smoking, obesity, limited physical activity or ability of older women and men to access health care, among others. There are significant gender differences in the causes of deaths above age 60. Life expectancy at age 60 is an outcome indicator and to understand gender differences in health and mortality in this age group more detailed study of gender differences needs to be carried. (Source:UNPD)	
	Life expectancy at a specific age is the average number of additional years a person of that age could expect to live if current mortality levels observed for ages above that age were to continue for the rest of that person's life.  In particular, life expectancy at birth is the average number of years a newborn would live if current age-specific mortality rates were to continue.	
Definition	<ul> <li>Highly influenced by the infant mortality rate</li> <li>Differences between both sexes may be significant</li> <li>Good indicator of health and socio-economic development</li> </ul>	
	Life expectancy at age 60 is the average number of remaining years of life expected by a hypothetical cohort of males or females alive at age 60 who would be subject during the remaining of their lives to the age- and sex-specific mortality rates of a given period. It is expressed as years. (Source:UNPD)	
	The average additional number of years a person (male/female) would live if current mortality trends were to continue. Life expectancy is commonly measured at the time of birth.  Calculation derived from Life Table	
	Type of indicator: Index Measure Units: Years	
Description and method of computation	Age- and sex-specific mortality rates are used to construct mortality life tables, from which life expectancies at specific ages are derived. For further reference see: United Nations (2002): Methods for estimating adult mortality. Available at: http://www.un.org/en/development/desa/population/publications/pdf/mortality/estimating-adultmortality.  pdfUnited Nations (2011): Mortality estimates from major sample surveys: towards the design of a database for the monitoring of mortality levels and trends. Available at: http://www.un.org/en/development/desa/population/publications/pdf/technical/TP2011-2_MortEstMajorSampSurv.pdfUnited Nations (2013): World Population Prospects 2012: Extended	

	gap between female and male life expectancy at birth using WPP2012 estimates. Available at: http://esa.un.org/unpd/wpp/LifeExpectancy_figures/interactive-figures_e0-MFGap.htm (Source:UNPD)
Sources and data collection	Vital registration systems are the preferred source of data on life expectancy at birth because they collect information prospectively and cover the entire population. However, many developing countries lack fully functioning vital registration systems that accurately record all births and deaths. Thus, household surveys, such as Demographic and Health Surveys (DHS) and Multiple Indicator Cluster Surveys (MICS), have become the primary source of data on life expectancy in developing countries; but there are some limits to their quality. Estimates obtained from household surveys have attached confidence intervals that need to be considered when comparing values along time or across countries. Similarly, these estimates are often affected by no-sampling errors.
Reference	http://medicine.jrank.org/pages/687/Gender-Life-expectancy-death-rates.html

Indicator 6.1.6 Adult mortality rate for age groups (a) 15-39 and (b) 35-59 years, by sex and cause, in percentage

### Rational and Gender Issues

Disease burden from non-communicable diseases among adults - the most economically productive age span - is rapidly increasing in developing countries due to ageing and health transitions. Therefore, the level of adult mortality is becoming an important indicator for the comprehensive assessment of the mortality pattern in a population.

In all regions and virtually all countries, adult mortality rate for males are higher than for females.

For adult ages (15-59) and at global level, the top causes of death are different for women than for men. The three top causes of death for adult women are infectious and parasitic diseases; cancers; and cardiovascular diseases. The three top causes of death for adult men are injuries; cardiovascular diseases, and infectious and parasitic diseases. Adult men have higher mortality rates than adult women for all these causes of death with the exception of cancers, where male and female rates are similar. Across regions and countries, there are variations in the ranking of the causes of death and the gender gap in adult mortality due to specific causes of death. For example, in Africa, the number one cause of death for both women and men is HIV/AIDS and women have a higher adult mortality rate from this cause than men. The second most prevalent cause of death is other infectious and parasitic diseases, where adult men have a higher mortality rate than adult women. The third cause of death is injuries for men and maternal and nutritional conditions for women. As another example, in low and middle income countries of the Americas, the leading cause of death for adult women is cancers, from which they have a higher mortality rate than men. For adult men, the number 1 cause of death is injuries, from which their rate of mortality is several times higher than women's. (WHO, 2011. Mortality estimates by cause, age and sex for the year 2008) (Source:WHO)

#### Definition

The indicator on adult mortality by cause and age groups is calculated as the age-standardized mortality rates per 100,000 mid-year population by selected underlying cause of deaths, for two age groups 15-34 and 35-59. The Causes of death are all those diseases, morbid conditions or injuries which either resulted in or contributed to death and the circumstances of the accident or violence which produced any such injuries. The underlying cause of death, rather than direct or intermediate antecedent cause, is the one recommended as the main cause for tabulation of mortality statistics. It is defined as (a) the disease or injury which initiated the train of events leading directly to death, or (b) the circumstances of the accident or violence which produced the fatal injury. (Source:WHO)

# Description and method of computation

Adult mortality rate is the probability of dying between 15 and 60 years per 1000 population. The probability of dying between the ages of 15 and 60 years (per 1 000 population) per year among a hypothetical cohort of 100 000 people that would experience the age-specific mortality rate of the reporting year.

The method involves applying the age-specific rates by sex in each population to one standard population. The WHO Standard Population, a fictitious population whose age distribution was artificially created and is largely reflective of the population age structure of low- and middle-income countries, was used. Data are limited to countries or areas that meet the criterion that cause-of-death statistics are classified to the ninth or tenth revisions of the ICD. The denominator (population by age and sex) is obtained from the World Population Prospects 2012 (http://esa.un.org/unpd/wpp/index.htm). Only countries with the estimate of population size of 90,000 and above are included in the compilation. (Source:WHO)

Sources and data collection	Civil registration system, which is the continuous, permanent, compulsory and universal recording of the occurrence and characteristics of vital events pertaining to the population as provided through decree or regulation in accordance with the legal requirements of a country. Medical certificate of cause of deaths is crucial in defining the underlying cause of deaths to be used in this indicator. Other sources such as household surveys, sample registration systems could be used as alternatives, although is not advisable
Reference	WHO Global InfoBase

### **6.2. HIV AIDS**

Indicator 6.2.1 Share of women population aged 15-49 living with HIV/AIDS, in percentage

Rational and Gender Issues HIV and AIDS has become a major public health problem in many countries and monitoring the course of the epidemic and impact of interventions is crucial. Both the Millennium Development Goals (MDG) and the United Nations General Assembly Special Session on HIV and AIDS (UNGASS) have set goals of reducing HIV prevalence.

Women are more likely to acquire HIV from men during sexual intercourse than vice versa. In addition to this physiological disadvantage, the unequal social status of women throughout the world places them at a higher risk of contracting HIV. Women are at a disadvantage when it comes to accessing information about HIV prevention, the ability to negotiate safe sexual encounters and access to treatment for HIV/AIDS once infected. As a result of these inequities and epidemic dynamics, the proportion of women among people living with HIV/AIDS has been rising in many regions.

Gender inequalities and harmful gender norms are important drivers of the HIV epidemic and hamper women's ability to protect themselves from HIV and/or to assert healthy sexual decision making, as well as reduce access to essential HIV and sexual and reproductive health services.Limitations of the indicator: Improved methods, enhanced data and new estimation tools are enabling a better understanding of the degrees of uncertainty that surround HIV and AIDS estimates. This is part of an ongoing process of improving estimates and developing appropriate ranges—all of which are vital for effective HIV planning and programming at national and regional levels. Because the quality of data varies from country to country, the ranges of uncertainty surrounding estimates can widen or narrow depending on the country. The ranges reflect the degree of uncertainty associated with estimates and define the boundaries within which the actual numbers lie. Four factors determine the extent of the ranges around the HIV estimates:(i) The HIV prevalence level - Ranges tend to be smaller when HIV prevalence is higher. Thus the bounds around the best estimate of adults living with HIV in Zambia are relatively small (1,100,000 – 1,200,000) while they are much wider in a lower prevalence country such as Djibouti (3,900 – 31,000).(ii) The quality of the data – Countries with better quality data have smaller ranges than countries with poorer quality data. The ranges for Asia and the Pacific are comparatively broad—which reflects the fact that HIV surveillance of key populations (such as injecting drug users, sex workers and men who have sex with men) is relatively poor in most countries in that region, hence resulting in more uncertainty. In general, the ranges for sub-Saharan Africa are narrower, because of recent improvements in the collection and interpretation of HIV data in that region (including the availability of a national survey for most countries).(iii) The number of steps or assumptions used to arrive at an estimate – The more steps and assumptions, the wider the uncertainty range is likely to be (since each step introduces additional uncertainties). For example, ranges around estimates of adult HIV prevalence are smaller than those around estimates of HIV incidence among children, which require additional data on the probability of mother-to-child HIV transmission. The latter are based on prevalence among pregnant women, the probability of mother-to-child HIV transmission, and estimated survival times for HIV-positive children. There is therefore greater uncertainty in these estimates than for adult prevalence alone.(iv) The type of epidemic (generalized or lowlevel/ concentrated)- Ranges tend to be wider in countries with low-level or concentrated epidemics than in countries with generalized epidemics because in low-level or concentrated epidemics, one needs to estimate both the numbers of people in the groups at higher risk of HIV infection and HIV prevalence rates. Assumptions, methodologies and data used to produce the estimates are gradually changing as a result of ongoing enhancement of our knowledge of the epidemic; hence comparisons of recent estimates with those published in previous years is liable to yield misleading conclusions. (Source:UNAIDS)

Definition	The estimated number of women aged 15-49 years with HIV infection, whether or not they have developed symptoms of AIDS, expressed as per cent of total population in that age group with HIV infection.  The percentage of the HIV female population aged 15-49 of the total HIV population in the same age group. (Source:UNAIDS)
	Human Immunodeficiency Virus (HIV) is a virus that weakens the immune system, ultimately leading to Acquired Immuno Deficiency Syndrome (AIDS). HIV destroys the body's ability to fight off infection and disease, which can ultimately lead to death. Without treatment, median survival from the time of infection is about 10.5 years for males and 11.5 years for females. Access to treatment is uneven, and no vaccine is currently available.
Description and method of computation	Share of women population aged 15-49 living with HIV/AIDS  = Number of women aged 15-49 years with HIV infection x 100 Total population aged 15-49 years with HIV infection
Sources and data collection	Household surveys and surveillance systems.
Reference	WHO Global InfoBase http://mdgs.un.org/unsd/ USAIDS

Indicator 622 Proportion	n of individuals with access to anti-retroviral drug, by say, in percentage
Rational and Gender Issues	As the HIV epidemic matures, increasing numbers of people are reaching advanced stages of HIV infection. ART has been shown to reduce mortality among those infected and efforts are being made to make it more affordable to all of those in need. This indicator assesses progress toward providing ART to all eligible people.
	Equity in treatment access for women living with HIV has been a concern, given the general social and economic inequities between women and men, as well as the greater biological risk of HIV infection that women face relative to men. Available data suggest that overall women are not disadvantaged in access to antiretroviral therapy. For example, data from 109 countries reveal that, in 2010, 58 per cent of adults receiving antiretroviral therapy were female, even though women represented 53 per cent of the people in need.
	Most countries do not report gender breakdowns for the under 15 age group.
Definition	The proportion of eligible adults and children living with HIV currently receiving antiretroviral therapy is defined as the percentage of adults and children who are currently receiving antiretroviral therapy (ART) of all adults and children who are eligible for ART.
	The percentage of adults and children currently receiving antiretroviral therapy according to nationally approved treatment protocols (or WHO/Joint UN Programme on HIV and AIDS standards) among the estimated number of people eligible for treatment. The numerator (the number of people receiving antiretroviral therapy) is derived from national programme reporting systems, aggregated from health facilities or other service delivery sites. The denominator (the total number of people eligible for antiretroviral therapy) is generated using a standardized statistical modeling approach. The human immunodeficiency virus (HIV) is a virus that weakens the immune system, ultimately leading to acquired immunodeficiency syndrome (AIDS). The number of HIV-infected adults with a CD4 count less than 350 cells/mm3 are considered to be eligible for treatment (for 2012 coverage values). WHO issued new recommendations in June 2013 encouraging all countries to initiate treatment in HIV-infected adults with a CD4 count less than 500 cells/mm3. (Source:WHO)
	Antiretroviral therapy (ART) consists of the use of at least three antiretroviral (ARV) drugs to maximally suppress HIV and stop the progression of HIV disease.
	Eligible for ART are those with advanced HIV infection requiring antiretroviral therapy. This is based on recommendations by WHO which were updated in 2010. For example, WHO recommended in 2010, based on new evidence, that the CD4 threshold at which antiretroviral therapy is deemed necessary for adults to be changed from 200 cells per mm3 to 350 cells per mm3. Eligibility criteria for initiating antiretroviral therapy among infants and children are in accordance with WHO treatment guidelines for infants and children.
Description and method of computation	Antiretroviral therapy coverage (%) is calculated by dividing the number of adults and children in need for ART who receive it by the total number of adults and children with HIV eligible for ART and multiplying by 100.
Sources and data collection	Numbers of adults and children receiving antiretroviral therapy are derived from national programme reporting systems, aggregated from health facilities or other service delivery sites. Health facility reports compile data from facility registers and/or reports from drug supply management systems.
Reference	http://mdgs.un.org/unsd/ WHO

# **GOAL 7: Ensure Environmental Sustainability**

## 7.1 Women and the Environment

Indicator: 7.1.1 Share of	of women and men with sustainable access to an improved water source, in percentage
Rational and	Women are more often users, providers and managers of water and responsible for household hygiene
Gender Issues	maintenance and therefore more likely to be effected if water systems break down
Definition	The proportion of the population using an improved drinking water source, total, urban, and rural, is the percentage of the population who use any of the following types of water supply for drinking: piped water into dwelling, plot or yard; public tap/standpipe; borehole/tube well; protected dug well; protected spring; rainwater collection and bottled water (if a secondary available source is also improved). It does not include unprotected well, unprotected spring, water provided by carts with small tanks/drums, tanker truck-provided water and bottled water (if secondary source is not an improved source) or surface water taken directly from rivers, ponds, streams, lakes, dams, or irrigation channels. Definitions and a detailed description of these facilities can be found at the website of the WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation at www.wssinfo.org.
Description and method of computation	The indicator is computed as the proportion of the number of people, by sex, who uses an improved drinking water source to the total population, expressed as a percentage.  The same method applies for the urban and rural breakdown. Coverage estimates are based on data from nationally representative household surveys and national censuses, which in some cases are adjusted to improve comparability among data over time. Survey and census data for urban and rural areas are then plotted on a time scale from 1980 to present. A linear trend line, based on the least-squares method, is drawn through these data points to estimate urban and rural coverage for the baseline year 1990 and for the year of most recent estimate. A linear regression line is drawn only if at least two survey data points are available, and they are spaced five or more years apart.  The linear regression line may be extrapolated up to two years after, or before, the latest or earliest survey data point. Outside of these time limits, the extrapolated regression line is flat for up to four years, as necessary. If the extrapolated regression line would reach 100% coverage or beyond, or 0%, a flat line is drawn from the year prior to the year where coverage would reach 100% (or 0%). Total coverage estimates are computed from the urban and rural coverage estimates using the latest population estimates and distribution of urban and rural population provided by the United Nations Population Division http://www.un.org/esa/population/unpop.htm More information on this methodology is available at http://www.childinfo.org and http://www.wssinfo.org.
Sources and data collection	Primary data sources used for international monitoring include nationally representative household surveys, including Multiple Indicator Cluster Surveys (MICS), Demographic Health Surveys (DHS), World Health Surveys (WHS), Living Standards and Measurement Surveys (LSMS), Core Welfare Indicator Questionnaires (CWIQ), (Pan Arab Project for Family Health Surveys (PAPFAM), and population censuses. Most of the survey data can be downloaded from the organizations that supported these surveys through the Internet. Census data are often obtained directly from National Statistics Offices.  The use of drinking water sources and sanitation facilities is part of the wealth-index used by household surveys to divide the population into wealth quintiles. As a result, most nationally representative household surveys include information about water and sanitation.  To seek out these national data sources that might otherwise be overlooked, UNICEF conducts an annual exercise called the Country Reports on Indicators for the Goals (CRING). CRING gathers recent information for all indicators regularly reported on by UNICEF, including the water supply and sanitation indicators. Surveys found through CRING include Household Budget Surveys, Reproductive Health Surveys, Labour Force Surveys, and Welfare Monitoring Surveys, etc.  The WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation (JMP) is charged with international monitoring of the MDG drinking water and sanitation target. When the JMP receives new survey or census data, its staff assesses the validity of the data by review, using a set of objective criteria. New survey data are entered into the JMP database only when the accompanying survey documentation is available to JMP. Provider-based (reported) data are only used when there are no survey or census data available for a country for the period going back to 1980.  The survey questions and response categories pertaining to access to drinking water are fully harmonized between MICS and DHS — which make up over
Reference	www.wssinfo.org. http://mdgs.un.org/unsd/mdg/Metadata.aspx http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf

Rational and	n and men with access to improved sanitation, in percentage  Women are more often users, providers and managers of water and responsible for household hygiene
Gender Issues	maintenance and therefore more likely to be effected if water systems break down.
Definition	The proportion of the population using an improved sanitation facility, total, urban, rural, is the percentage of the population with access to facilities that hygienically separate human excreta from human contact. Improved facilities include flush/pour flush toilets or latrines connected to a sewer, septic tank, or -pit, ventilated improved pit latrines, pit latrines with a slab or platform of any material which covers the pit entirely, except for the drop hole and composting toilets/latrines. Unimproved facilities include public or shared facilities of an otherwise acceptable type, flush/pour-flush toilets or latrines which discharge directly into an open sewer or ditch, pit latrines without a slab, bucket latrines, hanging toilets or latrines which directly discharge in water bodies or in the open and the practice of open defecation in the bush, field or bodies or water. Definitions and a detailed description of these facilities can be found at the website of the WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation at www.wssinfo.org.
Description and method of computation	The indicator is computed as the proportion of the number of people, by sex, using improved sanitation facilities, to the total population, expressed as a percentage. The same method applies to the rural and urban estimates.  Coverage estimates are based on data from nationally representative household surveys and national censuses, which in some cases are adjusted to improve comparability among data over time. Survey and census data for urban and rural areas are then plotted on a time scale from 1980 to present. A linear trend line, based on the least-squares method, is drawn through these data points to estimate urban and rural coverage for the baseline year 1990 and for the year of most recent estimate. A linear regression line is drawn only if at least two survey data points are available, and they are spaced five or more years apart. The linear regression line maybe extrapolated up to two years after, or before, the latest or earliest survey data point. Outside of these time limits, the extrapolated regression line is flat for up to four years, as necessary. If the extrapolated regression line would reach 100% coverage or beyond, or 0%, a flat line is drawn from the year prior to the year where coverage would reach 100% (or 0%).  Total coverage estimates are computed from the urban and rural coverage estimates using the latest population estimates and distribution of urban and rural population provided by the United Nations Population Division http://www.un.org/esa/population/unpop.htm  More information on this methodology is available at http://www.childinfo.org and http://www.wssinfo.org.
Sources and data collection	Primary data sources used for international monitoring include nationally representative household surveys, including Multiple Indicator Cluster Surveys (MICS), Demographic Health Surveys (DHS), World Health Surveys (WHS), Living Standards and Measurement Surveys (LSMS), Core Welfare Indicator Questionnaires (CWIQ), (Pan Arab Project for Family Health Surveys (PAPFAM), and population censuses. Most of the survey data can be downloaded from the organizations that supported these surveys through the Internet. Census data are often obtained directly from National Statistics Offices. The use of drinking water sources and sanitation facilities is part of the wealth-index used by household surveys to divide the population into wealth quintiles. As a result, most nationally representative household surveys include information about water and sanitation. To seek out these national data sources that might otherwise be overlooked, UNICEF conducts an annual exercise called the Country Reports on Indicators for the Goals (CRING). CRING gathers recent information for all indicators regularly reported on by UNICEF, including the water supply and sanitation indicators. Surveys found through CRING include Household Budget Surveys, Reproductive Health Surveys, Labour Force Surveys, and Welfare Monitoring Surveys, etc.  The WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation (JMP) is charged with international monitoring of the MDG drinking water and sanitation target. When the JMP receives new survey or census data, its staff assesses the validity of the data by review, using a set of objective criteria. New survey data are entered into the JMP database only when the accompanying survey documentation is available to JMP. Provider-based (reported) data are only used when there are no survey or census data available for a country for the period going back to 1980.  The survey questions and response categories pertaining to access to drinking water are fully harmonized between MICS and DHS – which make up over 70
Reference	and can be found at www.wssinfo.org.  http://mdgs.un.org/unsd/mdg/Metadata.aspx  http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf

# **Goal 8: Develop a Global Partnership For Development**

## **8.1 Information Technologies**

Indicator: 8.1.1 Proportion of i	ndividuals using the Internet, by sex, in percentage
Rational and Gender Issues	Indicator is an important tool for monitoring progress towards Goal 8, because effective communication among those involved in the development process is not possible without the necessary infrastructure. Personal computers and telephones allow people to exchange experiences and learn from each other, enabling higher returns on investment and avoiding problems of duplication or missing information. The use of information and communication technologies can make Governments more transparent, thereby reducing corruption and leading to better governance. It can help people in rural areas find out about market prices and sell their products at a better price. It can also overcome traditional barriers to better education by making books available online and opening the door to e-learning.
Definition	The Internet is a linked global network of computers in which users at one computer, if they have permission, can get information from other computers in the network.
Description and method of computation	The indicator is measured by dividing the number of Internet users, women/men, by the country's population and multiplied by 100.
	A growing number of countries are measuring the number of Internet users through regular surveys. Surveys usually indicate a percentage of the population for a certain age group (e.g., 15-74 years old). The number of Internet users in this age group should be supplied and not the percentage of Internet users in this age group multiplied by the entire population.
	In situations where surveys are not available, an estimate can be derived based on the number of subscribers. Countries are requested to provide the methodology used to estimate the number of Internet users, including reference to the frequency of Internet use (e.g., in the last month).
Sources and data collection	ITU collects its data through an annual questionnaire that is sent to the government agency in charge of telecommunications/ICT, usually the Ministry or the regulatory agency. In some cases (especially in countries where there is still only one operator), the questionnaire is sent to the incumbent operator. The data are verified to ensure consistency with previous years' data. When countries do not reply to the questionnaire, ITU carries out research and collects missing values from government web sites, as well as from Annual Reports by operators. For most developed and some larger developing nations, Internet user data are based on methodologically sound user surveys conducted by national statistical agencies or industry associations. These data are either directly provided to the ITU by the country concerned or the ITU does the necessary research to obtain the data. For countries where Internet user surveys are not available, and where countries do not provide their own estimate, the ITU calculates estimates based on average multipliers for the number of Internet users per subscriber.  Data are usually not adjusted but discrepancies in the definition, reference year or the break in comparability in between years are noted in a data note. For this reason, data are not always strictly.
	comparability in between years are noted in a data note. For this reason, data are not always strictly comparable
Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf International Telecommunication Union (2003). World Telecommunication Indicators Database. Geneva. Available from http://www.itu.int/ITU-D/ict/publications/world/world.html. International Telecommunication Union (annual). Yearbook of Statistics. Geneva. Available from <a href="http://www.itu.int/ITU-D/ict">http://www.itu.int/ITU-D/ict</a> .

Indicator: 8.1.2 Proportion of in	ndividuals using a mobile-cellular telephone, by sex, in percentage
Rational and Gender Issues	Indicator is an important tool for monitoring progress towards Goal 8, because effective communication among those involved in the development process is not possible without the necessary infrastructure. Personal computers and telephones allow people to exchange experiences and learn from each other, enabling higher returns on investment and avoiding problems of duplication or missing information. The use of information and communication technologies can make Governments more transparent, thereby reducing corruption and leading to better governance. It can help people in rural areas find out about market prices and sell their products at a better price. It can also overcome traditional barriers to better education by making books available online and opening the door to e-learning
Definition	A mobile cellular subscriber refers to the use of portable telephones subscribing to a public mobile telephone service and provides access to Public Switched Telephone Network (PSTN) using cellular technology. It includes postpaid and prepaid subscribers and includes analogue and digital cellular systems. This should also include subscribers to IMT-2000 (Third Generation, 3G). Subscribers to public mobile data services or radio paging services not included
Description and method of computation	The indicator is measured by dividing the number of women/men mobile cellular subscribers by the country's population and multiplied by 100
Sources and data collection	ITU collects its data through an annual questionnaire that is sent to the government agency in charge of telecommunications/ICT, usually the Ministry or the regulatory agency. In some cases (especially in countries where there is still only one operator), the questionnaire is sent to the incumbent operator. Data for about 90 percent of countries, either through their reply to ITU questionnaires or from information available on the Ministry/Regulator website. For another 10 percent of countries, the information can be aggregated through operators' data (mainly through annual reports) and complemented by market research reports.
	The data, which are mainly based on administrative records, are verified to ensure consistency with data from previous years. When countries do not reply to the questionnaire, ITU carries out research and collects missing values from government web sites, as well as from Annual Reports by operators. Data are usually not adjusted but discrepancies in the definition, reference year or the break in comparability in between years are noted in a data note. For this reason, data are not always strictly comparable
	http://mdgs.un.org/unsd/mdg/Metadata.aspx
Reference	http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf

Indicator: 8.1.3. Proportion of l	households with access to mass media (radio, TV, Internet), by sex of household head
Rational and	
Gender Issues	
Definition	
Description and method of	
computation	
_	
Sources and data collection	
Sources and data concerton	
Reference	
L .	

## 8.2 Media

Indicator 8.2.1 Share of won percentage.	nen and men in technical managerial positions at national newspapers and television channels, in
Rational and Gender Issues	The issue of gender and the media can broadly be categorized on two levels, both implicating and affecting each other: the first relates to the participation of women in decision-making and expression in the media; the second is the portrayal of women and gender stereotyping in the media.
Definition	The number of women/men mangers in media expressed as a percentage of total number of managers working in media.  Percentage of women managers approaching 50% indicates gender parity in the composition of the managers. A value of greater than 50% reveals more opportunities and/or preference for women managers to work in national newspapers and television channels.
Description and method of	The indicator is calculated by dividing the number of women/men mangers at national newspapers and television channels by the total number of managers (women and men) in newspapers and television channels, multiply by 100.
Description and method of computation	Share of women/men managers in media =  Number of women/men managers in media x100  Total number of mangers (women and men)
Sources and data collection	Administrative records. Population census, household, fertility and labour force surveys
Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf

Indicator 8.2.2 Proportion of gi	rls and boys graduating from media institutes, in percentage
Rational and Gender Issues	The issue of gender and the media can broadly be categorized on two levels, both implicating and affecting each other: the first relates to the participation of women in decision-making and expression in the media; the second is the portrayal of women and gender stereotyping in the media.
	The number of women graduating from media institutes expressed as a percentage of total number of graduates from media institutes from both sexes.
Definition	Percentage of women graduating from media institutes approaching 50% indicates gender parity in the composition of the graduates. A value of greater than 50% reveals more opportunities and/or preference for women to enroll in media institutes to work in national newspapers and television channels.
	The indicator is calculated by dividing the number of women/men media graduates by the total number of graduates (women and men) from media institutes, multiply by 100.
Description and method of computation	Proportion of women/men graduates from media =
	Number of women/men media graduates x100  Total number of graduates (women and men) from media institutes
Sources and data collection	Administrative records. Population census, household, fertility and labour force surveys
Reference	http://mdgs.un.org/unsd/mdg/Metadata.aspx http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/HandbookEnglish.pdf

# Goal 9: Human Rights (women and girl child)

## 9.1 Harmful practices

Indicator 9.1.1 Prevalence of female genital mutilation/cutting, in percentage	
Rational and Gender Issues	This indicator is very important in addressing gender issues since it represents a violation of girls' and women's human rights and has important implications for their health and well-being. The indicator only covers girls and women of reproductive age. Also, statistics are based on self-reports which should be treated with caution for several reasons. Women may be unwilling to disclose having undergone FGM/C either because of sensitivity of the topic or the illegal status of the practice in the country. In addition, girls and women may be unaware that they have been cut or the extent of the cutting, especially if FGM/C was performed at an early age. (Source: UNICEF)
Definition	Percentage of girls and women 15-49 years old who have undergone FGM/C (Source: UNICEF)
Description and method of computation	Female genital mutilation/cutting: The percentage of women (over the total number of women) subjected to female genital mutilation/cutting. This indicator should be disaggregated by age.  Number of girls and women 15-49 years old who have undergone FGM/C divided by number of girls and women 15-49 years old (Source: UNICEF)  Proportion of women subjected to FGM = Women subject to FGM (15-49 yrs) x100  Women (15-49 yrs)female genital
Sources and data collection	Data are obtained from specialized surveys at the national level, or designed modules within other surveys, (on the condition that these surveys comply confidentiality and security for the interviewers; Administrative records: Primarily police, judicial and health records, as well as all services that provide attention to victims
Reference	UNICEF

Indicator 9.1.2 Proportion of women aged 20-24 years who were married or in a union before (a) age 15 and before (b) age 18, in percentage	
Rational and Gender Issues	This indicator is very important in addressing gender issues since it represents a violation of girls' and women's human rights and has important implications for women's education and other aspects of their well-being including reproductive health and exposure to sexually transmitted diseases and domestic violence. (Source: UNICEF)  Girls married before they turn 15 or 18 are less educated, have more children and are marries to men who are significantly older. Women who married as girls are more likely to experience domestic violence and believe that in some cases a man is justified in beating his wife.
Definition	Percentage of women 20-24 years old who were first married or in union before they were 15 /18 years old (Source: UNICEF)
Description and method of computation	Early marriage: Number of women 20-24 years old who were first married or in union before they were 18 years old divided by the number of women 20-24 years old (Source: UNICEF)  Proportion of women whose age at marriage is below 18 years (or below 15 years)  = Number of women 20-24 first married at age below 18 years/15 years x100  Number of women 20-24 years old
Sources and data collection	Data are obtained from specialized surveys at the national level, or designed modules within other surveys, (on the condition that these surveys comply confidentiality and security for the interviewers; Administrative records: Primarily police, judicial and health records, as well as all services that provide attention to victims
Reference	UNICEF

### 9.2 Violence against women

### Indicator Friends of the Chair VAW Indicators Indicator 9.2.1: Proportion of ever-partnered women subjected to (a) physical and/or (b) sexual violence by a current or former intimate partner, in the last 12 months Indicator 9.2.2: Proportion of women subjected to (a) physical and/ or (b) sexual violence by persons other than an intimate partner, since age 15 Indicator 9.2.3 Proportion of ever-partnered women subjected to psychological violence in the past 12 months Indicator 9.2.4 Proportion of ever-partnered women subjected to economic violence in the past 12 months As in many societies, social, traditional and cultural norms have contributed, in some Arab countries, to a lack of recognition of women and girls' rights as human rights. Sexual violence, domestic violence and Rational and sexual harassment are also major issues of concern. Moreover, honor killing and harmful practices such as Gender Issues female genital mutilation and early marriages of girls are areas of concern in the Arab region, including violence inflicted on domestic workers. Gender-based violence against women is "violence that is directed against a woman because she is a woman, or violence that affects women disproportionately. It includes acts that inflict physical, mental or sexual harm or suffering, threats of such acts, coercion and other deprivations of liberty." It also includes practices such as honor killing and harmful practices such as female genital mutilation and early marriages of girls. ever-partnered women with current or former intimate partner (first two indicators are 48 49 UNSD 15-49 yrs) by 5 year age group for 15 to 64 years old. SEVERITY: (moderate/severe) Physical: - Threatened with or actually used a gun, knife or other weapon against you - Hit you with his fist or with anything else that could hurt you - Slapped you or thrown something at you that could hurt you - Pushed you hard or pulled your hair - Kicked you, dragged you or beat you up - Choked or burnt you on purpose - You had cuts, scratches, bruises or aches Definition - You had deep wounds, broken bones, broken teeth, internal injuries, or any other similar injury - You had injuries to eye or ear, sprains, dislocations or burns - You had a miscarriage Psychological: - Expected you to ask his permission before seeking health care for yourself - Verbally threatened to hurt you or someone you care about - Done things to scare or intimidate you on purpose - Belittled or humiliated you in front of other people - Insulted you or made you feel bad about yourself - Gets angry if you speak with another man - Insists on knowing where you are at all times - Tries to restrict contact with your family of birth - Tries to keep you from seeing your friends - Ignores you and treats you indifferently - Is often suspicious that you are unfaithful

not want to

- Did your (current/most recent) husband/partner ever force you to have sexual intercourse when you did

- Did you ever have sexual intercourse you did not want to because you were afraid of what your (current/most recent) husband/partner might do
- Did your (current/most recent) husband/partner ever force you to do something else sexual that you did not want or that you found degrading or humiliating

#### Economic:

- Refuses to give you enough money for household expenses, even when he has money for other things
- Wants to know exactly what you spent the money on
- Takes from your account
- Takes a loan in your name
- Withdraws from your credit card
- Manages your own property
- prevents you from working
- other

RELATIONSHIP TO PERPETUATOR:(intimate/other relative/other known/ stranger/ state authority)

FATHER/STEPFATHER

**MOTHER** 

MOTHER IN LAW

OTHER MALE FAMILY MEMBER

OTHER FEMALE FAMILY MEMBER

SOMEONE AT WORK - MALE

SOMEONE AT WORK - FEMALE

FRIEND/ACQUAINTANCE - MALE

FRIEND/ACQUAINTANCE - FEMALE

RECENT ACQUAINTANCE -MALE

RECENT ACQUAINTANCE - FEMALE

COMPLETE STRANGER - MALE

COMPLETE STRANGER - FEMALE

TEACHER - MALE

TEACHER - FEMALE

DOCTOR/HEALTH STAFF - MALE

DOCTOR/HEALTH STAFF – FEMALE

**RELIGIOUS LEADER - MALE** 

POLICE/ SOLDIER - MALE

FIANCE / NOT CONSUMATED MARRIAGE

OCCUPYING FORCES

OTHER (specify incl. sex)

Total rate: Proportion of women aged 15 and over subjected to physical/sexual violence over the total number of women aged 15 and over. This rate may be presented as a fraction (e.g. 1 out of 10) or as a percentage (e.g. 10 per cent of total).

Age-specific rate: Proportion of women of a certain age subjected to physical/sexual violence over the total number of women of the same age (5-year age groups starting at 15 years of age). This rate may be presented as a fraction (e.g. 1 out of 10) or as a percentage (e.g. 10 per cent of total).

# Description and method of computation

Total and specific rates for intimate partner violence: Proportion of women aged 15 and over subjected to physical or sexual violence by current or former partner over the total number of women aged 15 and over who have or had an intimate partner.

#### Denominators

- ❖ 1-4: all women
- ❖ 5-8: ever partnered

### Physical violence

Total rate = women15+yrs subjected to physical violence x100

Total women aged 15+

	Age-specific rate = women 15-49 yrs subjected to physical violence x100  Total women 15-49 yrs
	(age groups 15-19, 20-24, 25-29, 45-49, 50-45, 55-59, 60-64)
	breakdown required by:     severity     relationship to perpetrator     frequency
	Sexual violence
	Total rate = women15+yrs subjected to sexual violence x100 Total women aged 18+
	Age-specific rate $=$ women 15-49 yrs subjected to sexual violence x100 Total women 15-49 yrs
	breakdown required by:  relationship to perpetrator frequency
Sources and data collection	Data are obtained from specialized surveys at the national level, or designed modules within other surveys, (on the condition that these surveys comply confidentiality and security for the interviewers; Administrative records: Primarily police, judicial and health records, as well as all services that provide attention to victims
Reference	Friends of the Chair on VAW and Statistics Division ESCWA

Indicator 9.2.5. Annual rate of	femicides (including honor killing and gender-based killing)
Rational and Gender Issues	
Definition	
Description and method of computation	
Sources and data collection	
Reference	

## 9.3 Conflict and War

	9.3.1 Number of programmes currently in operation that are designed specifically to provide protection, assistance and training to refugee women, by type of organization responsible	
Rational and Gender Issues	An estimated 58 percent of the world's 10.5 million refugees now reside in cities. They often have few assets, limited support networks, and are constrained by legal, cultural and linguistic barriers. Access to basic services and control of assets shape the economic strategies that refugees employ to achieve self-reliance, that is, food and income security. Displacement destroys livelihoods and forces people to adopt new strategies to support themselves. Refugees often arrive with no safety net, they usually flee with few resources and little preparation and, at times, become separated from or lose family members. Without access to basic services and assets, men and women, girls and boys often rely on risky activities to survive.  Many vulnerable refugees live in extreme poverty. When they are unable to pay for their needs, they are evicted, double up in crowded rooms, sleep on the street, eat less frequently and engage in negative economic strategies. These strategies tend to increase their risk to gender-based violence, and can adversely affect their children, who may be sent to live with a relative or pulled out of school and expected to work. The social safety net available to the most vulnerable refugees is the church and mosque, where they sleep or access minimal food assistance. Levels of vulnerability differ by nationality.	
Definition	This indicator measures the number of programmes run by type of organizations that are targeting refugee women to provide protection, assistance and training.	
Description and method of computation	The number of programmes currently in operation that are designed specifically to provide protection, assistance and training to refugee women, by type of organization responsible	
Sources and data collection	Administrative records, Refugee organizations, Human Rights, United Nations High Commissioner for Refugees (UNHCR)	
Reference	ESCWA Statistics Division Women's Refugee Commission, The Living Ain't Easy: Urban Refugees in Kampala,	

9.3.2 Proportion o percentage	f public officials trained annually in human rights and humanitarian law for women and men, in
Rational and Gender Issues	Violence against women and girls is one of the most widespread violations of human rights. It can include physical, sexual, psychological and economic abuse, and it cuts across boundaries of age, race, culture, wealth and geography. It takes place in the home, on the streets, in schools, the workplace, in farm fields, refugee camps, during conflicts and crises. It has many manifestations — from the most universally prevalent forms of domestic and sexual violence, to harmful practices, abuse during pregnancy, so-called honour killings and other types of femicide. International and regional legal instruments have clarified obligations of States to prevent, eradicate and punish violence against women and girls.  More officials trained in human rights and humanitarian law for women and men would create a culture of rights and responsibilities in accordance with the Universal Declaration of Human Rights. Trained officials would be more responsive to their own communities, leading to community empowerment and better management of legal problems.
Definition	This indicator measures the number of state/public officials trained annually in human rights and humanitarian law for women and men.
Description and method of computation	Number of national officials trained annually in human rights and humanitarian law for women and men divided by the total number of officials in state ministries multiplied by 100.
Sources and data collection	Administrative records, National Institute of Human Rights and Humanitarian Law, etc
Reference	ESCWA STATISTICS DIVISION <a href="http://www.unifem.org/gender-issues/violence-against-women/">http://www.unifem.org/gender-issues/violence-against-women/</a>

### **Goal 10: Qualitative indictors**

#### **Economy**

### 1 Economic structures, participation in productive activities and access to resources

- 1a Extent of country commitment to gender equality in employment 1a Whether or not ratified ILO Convention No. 100 on equal remuneration for women and men
- 1b Whether or not ratified ILO Convention No. 111 on discrimination in employment and occupation

### 2 Extent of country commitment to support reconciliation of work and family life

- 2a Whether or not ratified ILO Convention No. 156 on workers with family responsibilities
- 2b Whether or not ratified ILO Convention No. 175 on part-time work
- 2c Whether or not ratified ILO Convention No. 177 on home work
- 2d Whether or not ratified ILO Convention No. 183 on maternity protection

### 3 Length of maternity leave

### 4 Percentage of wages paid during maternity leave

### Public life and decision-making

- 5 Presence of a gender quota for parliament (reserved seats and legal candidate quotas)
- 6 Presence of a gender quota for parliament (voluntary party quotas)
- 7 Existence of law on gender statistics

### Human rights of women and girl children

- 8 Whether or not reservation to article 16 (Marriage and Family Life) of the Committee on the Elimination of Discrimination against Women
- 9 Existence of laws on domestic violence
- 10 Whether or not inheritance rights discriminate against women and girls
- 11 Legal minimum age at marriage, by sex