About the methodology

In this year's Social Watch report, we use three sets of tables to present our review of commitments made by governments at the World Summit for Social Development in Copenhagen and the Fourth World Conference on Women in Beijing. The first series of tables reviews the goals set at the Copenhagen summit, taking each commitment in turn. It includes a summary table, organised in alphabetical order, where progress and setbacks are grouped into six thematic areas. A second series of tables measures advances and setbacks with respect to gender inequality, increase in social spending, decrease in military expenditure, increase in development aid, availability of information, and ratification of key agreements. The third set of tables appears on the poster under the heading "Much ado...".

The sources

This year's edition of Social Watch employs the same criteria for selecting sources and calculating the evolution of variables used in last year's report. It also maintains the same format in the tables.

Although the initial difficulties we faced in obtaining and managing data still persist,[1] we have maintained the criteria employed in earlier editions. We therefore continue to use the most recent source provided by any of the most respected international organisations, on the assumption that their data is reliable, even if certain changes are surprising and could be interpreted differently, or be seen to result from a variety of causes.

- In cases where the most recent data were not found in these sources, we chose, from among the available alternative sources, those "secondary" sources whose data for previous years corresponded most closely to that published by the most respected sources;

- In cases where alternative sources were available, we chose whichever source was considered the best authority on the topic in question;

- In cases in which neither of the above two criteria applied, we chose the source offering data from the greatest number of countries.

Data management for calculating progress indexes

- When the only data available referred to a period (for example, 1990-1994) rather than a single year, we assigned the data to the year falling in the middle of the period (in this case, 1992), to allow us to calculate the rate of variation;

- In tables in which the data for each country corresponds to a specific year, the rate of variation was calculated on the basis of this data, on the understanding that the information is thus reflected more faithfully than in the alternative method based on periods;

- In cases where the goal was not defined numerically in the commitments, specific criteria—which are explained where relevant—were used to evaluate the goals and their follow-up;

- For the purposes of this index, all cases in which both data and goals relate to a reduction are considered as achievements (both data and goals), because we have opted for a less demanding or more generous system for rewarding advances, although conversely, it means a greater penalisation of setbacks;

- Finally, in the tables on the poster accompanying this edition, which show "progress" and "current situation", other evaluation instruments were employed. These only took into account the absolute value of the indicators, without relating them to the goals set. In these tables, the countries were ranked—with respect to both "situation" and "progress"—according to the distribution of values for each variable.

The goals set and their follow-up

As in past editions of Social Watch, the goals set by governments, as well as the progress made and setbacks encountered, are evaluated goal by goal in this year's report. We present a series of tables that illustrate the evolution of countries with respect to the commitments made by governments at the World Summit for Social Development and the Fourth World Conference on Women. There is also a summary table, in alphabetical order, where the indicators are grouped according to broad thematic areas.

Social Watch selected what we consider to be the thirteen most important commitments from among those that can be measured quantitatively. Again this year it has not been possible to monitor the thirteenth commitment —"Improve the availability of affordable and adequate housing for everyone, in line with the World Housing Strategy for the year 2000"— since once more the information available was inadequate. With respect to the other commitments, one or more indicators have been chosen, the relevance of which varies from case to case. From among the indicators corresponding most closely to the dimensions we wish to measure, we selected those that were available for a sufficient number of countries.[2] The tables, each relating to one commitment, have been updated and show the value of the indicator in the year 1990 (or the next closest year, if data was unavailable for 1990), the value in the last year for which data is available and the target set for the year 2000. In the case of those commitments for which goals were set for a later date, we chose to adjust all paths to correspond to the decade under consideration here (1990-2000).

For those commitments in which goals were not linked to specific targets, we took numerically defined goals from other summits where available.[3] In cases in which the desired outcome referred to universal access, the target was 100% access by the relevant population.

To establish the goals, the following variables were taken as reference: Goal 1a: Percentage of children reaching 5th grade; Goal 1b: Primary school enrolment rate (net); Goal 2: Life expectancy at birth; Goal 3a: Infant mortality rate (per 1,000); Goal 3b: Under five mortality rate (per 1,000); Goal 4: Maternal mortality rate (per 100,000 live births); Goal 5: Daily calorie intake; Goal 6: Percentage of under 5 suffering from severe and moderate malnutrition; Goal 7: Percentage of population with access to health services; Goal 8a: Pregnancies attended per 1,000 live births; Goal 8b: Percentage of births attended; Goal 9: Malaria cases (per 100,000); Goal 10: Percentage of children under 1 year totally immunised; Goal 11: Illiteracy rate; Goal 12a: Percentage of population with access to sanitation; Goal 12b: Percentage of population with access to safe water.

The tables relating to goals present the situation of the country in 1990 or the next closest year (first column), the latest figure available from the selected source (second column),[4] the rate of progress according to the goal set (third column, "progress and regression"), and the goal set by the country's government for the year 2000 (final column). Given the delays in publication of data —in the year 2001 we still have no more recent figures than those for the year 1999— it is not yet possible to check whether the goals set for the year 2000 have, in fact, been achieved. The information available, which corresponds to previous years, allows us to establish each country's rate of variation or progress at the date for which the latest data is available. This is why the comments here still refer to goals for the year 2000 as if it had not been reached.

As has been explained in previous editions, any progress index of the type used here implies the adoption of a normative path, which serves as the "ideal" against which progress can be measured. As we have already pointed out, however, each of the specific indicators may follow different paths. These model paths should either be determined by specialist bodies or be inferred from some

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1 For example, the difficulty in obtaining information for the same year across the board or the significant differences that exist between statistics provided for the same year by different sources.

2 These indicators and the corresponding tables are the same as in last year's edition.

3 For example, in the case of the goal of nutritional security, we adopted the goals proposed at the 1996 World Food Summit

4 In some tables, two additional columns are used to indicate the date of the information selected.

previously existing study (for example, a longitudinal analysis). While it would be desirable to conduct our follow-up in this rigorous and exhaustive manner, we recognise that the majority of indicators associated with the commitments do not meet these conditions. Furthermore, since the number of observations over time required for the construction of more precise evolutionary models is lacking in many cases, the only alternative was to opt for a simple and straightforward way of evaluating progress toward the fulfilment of goals.

In order to calculate progress and setbacks in relation to the goals set, we chose to "impose" a simple, uniform evolutionary reference model that would prove least demanding when evaluating changes over time or when comparing the evolution of different countries. Given the limitations of the methodology adopted, the conclusions we arrive at are not, and cannot be, regarded as an exhaustive or definitive evaluation. They are merely an approximation or useful guide. Ultimately, the index of progress made classifies the actual value of the variable as ahead of schedule, on schedule or behind schedule, in relation to its projected value. For the follow-up of the goals set, we maintained this basic procedure, which provides a fulfilment index reflecting the degree to which countries have advanced toward achievement of the established goal. This index has been re-scaled in sections (we converted the progress indexes to a reference scale of 1 to 5). To make it easier to read and eliminate the false precision suggested by a numerical progress index, this index is represented, in the "Progress or Regression" column of the tables, by a series of symbols.

The re-scaling involved translating the numerical values into categories that according to the progress index, indicate:

⟵	**Significant regression.**
⟵	**Some regression.**
‖	**Stagnation.**
⟹	**Some progress.**
⟹	**Significant progress or goal already achieved.**

"Significant progress or goal already achieved" applies to countries that had already achieved the goal by 1990, have reached the goal subsequently, or will reach the goal on schedule if they continue at their current rate of progress.

"Some progress" applies to countries with positive indexes, but where progress is not rapid enough to reach the goal on schedule.

"Stagnation" applies to countries where no significant changes (or quantitatively insignificant changes) have been recorded in the period.

"Some regression" applies to countries that show a negative value below that which should have been achieved.

"Significant regression" applies to countries that show major setbacks.

Additionally, where relevant, icons are used in the "Progress or Regression" column for those countries that had reached the goal by 1990. The icons distinguish between three sub-groups: countries that had achieved the goal by 1990, countries that had achieved the goal by 1990 and continue to make progress, and countries that had achieved the goal by 1990 but are experiencing setbacks.

In the table showing "Progress and Setbacks in the Fulfilment of the Copenhagen Commitments", indicators are grouped in the following manner:
Goals 1a, 1b in the column headed Primary Education
Goals 3a, 3b and 10 in the column headed Child Health
Goals 5 and 6 in the column headed Food Security and Child Nutrition
Goals 8a and 8b in the column headed Reproductive Health
Goals 2 and 7 in the column headed Health and Life Expectancy
Goals 12a and 12b in the column headed Access to Drinking Water and Sanitation

Meeting goals: The situation in the year 2000

The delay in the publication of new data means that we are unable to present the year 2000 values for the indicators used in this follow-up. We have therefore chosen to continue reviewing the rate of progress or setbacks according to the latest available data, taking the year 2000 goal as the point of comparison.

Starting with the commitments in the area of education (**universalisation** and **completion of primary school**), the evolution between the two points of comparison once more reveal a range of diverse situations. With respect to the goal of universal primary school education, 20 countries show regression, which is significant in 9 of the cases. Rapid progress toward fulfilment of the year 2000 goal was evident in only 9 countries, while another 39 showed an insufficient rate of progress. In relation to the completion of primary school, the goal of 80% had already been achieved by more than 60% of the countries for which data was available in 1990, including countries in Europe, Latin America and South East Asia. In addition, 15 countries show significant progress and are on target to fulfil the goal. Setbacks—some more serious than others—can also be observed: Ethiopia and Guinea show a slight regression, while Congo, Malawi, Lesotho and Mauritania show a more significant regression. Values dropped in 20 countries that had already achieved the goal by 1990, in some cases falling below the 80% goal set.

The data relating to **life expectancy** shows more promising results. However, the goal of 60 years represents a "low" target for many countries, as is evident from the many countries that had already reached the goal by 1990 (170 of the 200 countries with information available). Indeed, even countries that began from critical situations, such as Bolivia, Comoros, Ghana, India, Myanmar and Pakistan, have progressed rapidly to achieve the goal of 60 years. Nineteen countries show alarming setbacks, and in 5 cases (Zimbabwe, Botswana, Kenya, Namibia and Lesotho) the rate of regression is drastic. Among these countries, the average life expectancy is 48 years, with minimum values of 42 years. In the period under consideration, setbacks of up to 10 years have been registered (Botswana). At the other end of the scale, at least 95 countries had already achieved life expectancy of over 70 years by 1998.

The data for **infant mortality** indicates that a significant number of countries (74% of the 180 countries for which information is available) have made progress in comparison with their 1990 values, although in only 21% (28 countries) is the rate of progress sufficient to meet the 2000 goal. Setbacks can be seen in 39 countries, in 15 of which the rate of regression is high. In some cases, these are countries with already low levels of infant mortality, so that, although these values show increases, they maintain their advantage vis-à-vis the other countries. However, among this group we also find countries where the situation is extremely worrying. At the beginning of the 1990s, Lesotho, Nigeria, Congo Dem. Rep, Mauritania, Angola and Niger already had high levels of infant mortality, on average more than 90 deaths per 1,000 live births; by 1999 the situation in these countries had deteriorated, with the average reaching 120 per 1,000.

The **mortality rate for children under five** has dropped significantly in most countries, although the progress made is not sufficient to fulfil the commitment in all countries (161 countries show progress, of which only 54 are on schedule to meet the 2000 goal). Fourteen countries show setbacks, among which the most serious are in Iraq, where the rate of regression is very high, and in the African countries of Zimbabwe, Kenya, Cameroon, the Côte d'Ivoire, Rwanda, Zambia and Burkina Faso, where the average rate has increased from 135 to 150 deaths per 1,000 live births.

The changes introduced in international statistics on how the **maternal mortality rate** is calculated mean that we are unable to calculate progress, since no comparable sets of data over time exist. Some indication of the situation is given, however, by the fact that the regional averages for maternal mortality range from 30 (for Europe and Central Asia) to 567 per 100,000 live births (for Sub-Saharan Africa). Eritrea, Mozambique and the Central African Republic show the most extreme values, exceeding the 1990 average of 1,000 deaths per 100,000 live births.

The table for **Goal 5** shows *per capita* **daily caloric intake**, as an indicator of food security. Although no fixed value was set for this goal, we used the FAO targets, which establish a specific value of calorie intake depending on the starting situation of the countries in 1990. Of the 162 countries for which information is available, 111 (69%) show progress, although 35 are not advancing rapidly enough to meet the 2000 goal. Of the 52 (32%) countries that show setbacks, almost half, including Iraq, Cuba and Kazakhstan, show significant regression, with a reduction of more than 500 calories in daily *per capita* intake.

The table corresponding to **Goal 6** presents changes in **malnutrition among children under five**. In this case, the rate of progress was calculated by comparing the values from 1990 or the next closest year, with the latest data available. Even so, we could only construct an index for a very limited number of countries (52), as in many cases the necessary information was lacking. Among the countries for which this goal could be evaluated, roughly half show progress, and half setbacks. Of those that are progressing, only a third (8 out of 29) are doing so at a sufficient rate. Among the countries showing setbacks (23), Algeria, Jamaica and Nepal have the highest annual rate of regression.

With respect to **Goal 7**, **access to health services**, the information available is out of date and scarce (available for only 55 countries). Here we see that of the 19 countries showing some progress, 13 are advancing rapidly and are on schedule to meet the target (Saudi Arabia, Cameroon, Guinea, Indonesia, Iran, Jordan, Malawi, Niger, Oman, Syria, Central African Republic, Senegal and Thailand). Eight countries (Benin, Colombia, Gabon, Madagascar, Maldives, Nigeria, Panama and Uganda) show setbacks. In some cases (Benin, Madagascar, Maldives and Uganda) more than 50% of the population lack access to health services.

The table for **Goal 8** presents the situation regarding **reproductive health**. The information available for 77 countries relating to pregnancies attended by health personnel shows no change in 10% of the countries. Of the remaining countries, 39 have made progress, although only 15 at a sufficient rate to reach the goal. Among the 27 countries where setbacks are registered, 6 show an alarming rate of regression (Bangladesh, Solomon Islands, Myanmar, Nicaragua, Nigeria, Pakistan). With respect to medical coverage of births, information is available for practically double the number of countries. Out of 151 countries, 46% have progressed, but only 7% (11) at a sufficient rate. In contrast, 36% show regression, which is significant in 2% of cases (China, Guinea-Bissau, Kuwait and Tunisia). A significant number of countries (30%) have already reached the goal.

Goal 9 refers to cases of **malaria**. Of the 58 countries for which information was available, 29 have made significant progress and only 4 are progressing at an insufficient rate to meet the 2000 goal. Among the countries registering setbacks, most show rapid regression (Saudi Arabia, Benin, Bolivia, Cambodia, Cameroon, Colombia, Guatemala, Guinea, Honduras, India, Peru, South Africa, Suriname, Turkey, Vanuatu and Venezuela).

Goal 10 relates to **control and eradication of diseases** through infant vaccination. The progress indicator reviews the situation with respect to 4 diseases: tuberculosis, diphtheria, polio and measles. The information presented shows that 130 (71%) of the 184 countries for which data is available have made progress in infant vaccination, and that 93 (50%) of them are advancing at a sufficient rate to achieve the 2000 goal. Of the 44 countries (24%) that show setbacks, 27 (15%) are regressing rapidly.

Regarding **Goal 11**, which specifies the **reduction of adult illiteracy** to half its 1990 rate, all countries have made progress, although only 3 have achieved a sufficient rate to reach the target set. Many countries had a starting level of almost universal rates of adult literacy (more than 95%): Latvia, Slovenia, Poland, Ukraine, Belarus, Lithuania, Russian Federation, Hungary, Tajikistan, Italy, Armenia, Moldova, Bulgaria, Guyana, Rumania, Croatia, Uruguay, Spain, Korea, Argentina, Dutch Antilles and Cuba.

With respect to **access to sanitation**, of the 110 countries for which information is available, we see that only 18 (16%) had reached the goal by 1990 and of these some 6 now show setbacks. During the period under consideration, 76 countries (69%) have made progress, but only 20 (18%) are on target to

meet the year 2000 goal. Among the 20 countries registering setbacks, 6 have alarming rates of regression and extremely low coverage rates for sanitation, among them Rwanda (8%) and Gabon (21%).

Finally, as regards **access to drinking water**, out of a total of 130 countries, we see that coverage has increased on average by 10%. The scenario is varied, however: 21 countries have already achieved the goal and 80 are making progress, although only 8 (4%) are doing so at a sufficient rate to meet the 2000 goal. Among the 28 (15%) countries showing setbacks, 4 display significant rates of regression, among them Micronesia, where in 1999 only 22% of the population had access to drinking water.

Overview of progress toward social development

An analysis of the information provided in the table **"Progress and setbacks in the fulfilment of the Copenhagen commitments"** provides a general overview of the performance of countries with respect to the six broad thematic areas in which the indicators were grouped. The table below allows us to review overall performance, taking the countries as the unit of analysis, with respect to the commitments made.

		BASIC EDUCATION	CHILDREN'S HEALTH	REPRODUCTIVE HEALTH	HEALTH AND LIFE EXPECTANCY	FOOD SECURITY AND INFANT NUTRITION	SAFE WATER AND SANITATION
		%	%	%	%	%	%
Significant progress or goal already achieved	➡	6	21	26	11	7	8
Some progress	➡	30	55	26	31	17	51
Significant regression	⬅	4x	1	12	1	2	3
Some regression	⬅	7	9	12	11	10	11
Stagnation	❚❚	14	14	9	18	2	10
Goal met before 1990	◉	6		1	17	2	13
Goal already met before 1990 and still progressing	◉▶	13		10	9	54	1
Goal met before 1990 but going backwards	◂◉	20		5	3	6	3
TOTAL		100	100	100	100	100	100
Total countries for which data is available		122	190	163	152	190	140
SUMMARY OF PROGRESS ◉ + ◉▶ + ➡ + ➡		55	76	63	67	79	74
SUMMARY OF REGRESSION ⬅ + ⬅ + ◂◉		31	10	28	14	18	16
GOAL ACHIEVED OR ON TARGET ◉ + ➡ + ◉▶		25	21	37	36	63	22

At first glance, this summary table shows that if we compare progress with setbacks at the most general level, there has been an overall improvement in all areas. This means that in all thematic areas more countries are making progress than are regressing. Things look less promising, however, if we consider the countries' rate of progress toward achieving the goals set. Here we see that countries that have already reached the target, or are on schedule, comprise less than a quarter in three of the thematic areas (Primary Education, Child Health and Drinking Water and Sanitation). In Food Security and Reproductive Health, just over a third of countries have achieved the goals set. Only in the areas of Health and Life Expectancy have a significant number of countries already achieved the goals or are on target to do so. Unfortunately, even this cannot be regarded as a huge step forward. If we look closely at the table, we see that of the 119 countries that have advanced in this respect, 103 had already reached the goal at the start of the period. As we have already pointed out, this is because 60 years is a very low target for life expectancy, since a large number of countries had already exceeded that figure some time ago.

In short, in all areas the rate of progress is patently insufficient.

If we analyse the information on setbacks provided in the table, we see that the area of education shows the highest rate of regression, since of the 122 countries for which information is available, 38 (31%) have regressed with respect to their starting points. Another disturbing fact is that, in relation to food security, 28% of countries show a drop in the nutritional levels of their populations, over the period under study.

Gender Inequality, Social and Defence Expenditure and Official Development Aid

The changes that have taken place since 1990 in the Situation of Women, Social and Defence Expenditure, and Official Development Aid (ODA) are presented in three tables.

The first table is based on three indicators: women's life expectancy, female illiteracy and net enrolment of girls in primary education. The annual rate of variation in the indicators was considered. The result was three broad groups corresponding to three groups of countries showing no change, progress or regression.

The second table is based on state spending on health and education as a percentage of the Gross National Product (GNP) and on defence spending, also as a percentage of GNP. Given that no specific goal was set in these cases, we chose to classify countries on the basis of relative progress and regression. The following criteria were used to produce this table: for Social Spending (education and health) countries were regarded as showing "significant regression" if the reduction in expenditure was equal to or more than 1% of GNP; reductions up to 1% were classified as "some regression"; those which showed no change or a change of one tenth of a decimal point were classified as "stagnation"; "some progress" applies to countries where healthcare spending increased by up to 1%; and, finally, countries showing an increase of over 1% were classed as making "significant progress". For Defence Spending, the criterion used was exactly the opposite, in other words, reductions in military spending as a proportion of GNP were classified as progress.

The third table measures progress and setbacks in Official Development Aid (ODA) *vis-à-vis* the goal set by developed countries to assign 0.7% of their GNP to aid. In the case of this variable, the table shows the changes in real terms in the proportion of aid between 1994 and 1999.

With respect to the **situation of women**, we can see, first of all, that the vast majority of countries (81%) show improvements in women's life expectancy for the period 1990-1998, although there has been a worrying regression in 28

countries (15%). In relation to female illiteracy, the information available for the 1990-1995/1999 period shows that 79% of countries made some progress, while 12% (14 countries) registered an increase in female illiteracy. The most negative situation is that regarding net rates of female enrolment in primary school for the 1990-1995/1999 period. In this respect, only just over half the countries (55%) managed to make some progress, whereas 33% showed setbacks and the situation in 12 remained unchanged.

In a considerable number of countries (46%) there has been an increase in **education expenditure**, and in 18% this increase has reached significant levels. Among the 50% of countries that reduced their spending, most (38%) did so by more than 1% of GNP. With respect to **health expenditure**, more countries made progress (57%) than register setbacks (32%). In almost 20% of countries the increase in spending exceeded 1% of GNP. Countries registering notable improvements include Paraguay, Tajikistan and Belarus, which have increased health spending by more than 2% of GNP. Significant regression can be observed in a small number of countries (10%), with the most drastic reductions, over 1.7% of GNP, taking place in Antigua, Barbados, Georgia and Mongolia. The rest of the countries show limited progress or regression or no change at all.

With respect to **defence expenditure**, the results appear to be more promising, as two-thirds of the 101 countries for which information is available show reductions in their military budgets. In 29% of the cases (29 countries) spending has decreased by more than 1% of GNP and of these, 12 countries (Kuwait, Russia, Oman, Ethiopia, Mozambique, Israel, Mongolia, Sudan, South Africa, United States, Bulgaria and Seychelles) register reductions exceeding 2% of GNP.

Finally, in terms of **Official Development Aid (ODA)**, the table shows that the majority of donor countries have regressed with respect to the target of 0.7% of GNP. Even the rates for Denmark, Norway and Sweden, which had achieved this goal by 1994, show a relative regression, although their contribution remains above the 0.7% goal set. Three countries (Japan, Ireland and New Zealand), which in 1994 assigned only a minimum part of their GNP to ODA, have made increases worthy of mention. The Netherlands has already reached the goal but continues to increase its contributions.

Much ado….

Countries ranked according to their current situation and the progress or regression they have registered over the last 10 years.

This year's report once again includes a poster with a third set of tables showing the progress—or regression—toward fulfilment of the measurable commitments established in 1995 at the World Summit for Social Development in Copenhagen and the Fourth World Conference on Women in Beijing.

The indicators used to produce these two tables are grouped in nine areas, each of which combine more than one indicator: "Basic Education" (percentage of children reaching fifth grade and net rate of primary school enrolment); "Children's Health" (mortality rate among infants under one, mortality rate of children under five and percentage of children under one who are fully vaccinated); "Food Security and Infant Nutrition" (daily *per capita* calorie intake and percentage of children under five suffering from serious or moderate malnutrition); "Reproductive Health" (percentage of pregnancies and births attended by health personnel); "Health and Life Expectancy" (life expectancy and percentage of population with access to healthcare); "Safe Water and Sanitation" (percentage of population with access to sanitation and percentage of population with access to drinking water); "Reduction in Military Expenditure" (military spending as a percentage of GNP); "Official Development Aid" (ODA in relation to GNP); and "Gender Equity in Literacy" (male and female literacy rates).

The table "Steps forward, steps back" presents the countries in the order of those showing the greatest progress to those showing the most serious levels of regression. The way in which progress and setbacks were calculated reflects recent changes (from 1990 to the most recent date for which information was available) with respect to those key indicators for the commitments made. Each variable was placed on a scale ranging from significant progress to significant regression, taking into account the distribution of differences registered between 1990 and the latest available date.[5] The difference between this table and the table entitled "Progress and regressions in the fulfilment of the Copenhagen commitments" is—in addition to the fact that it includes three new areas—that it presents the linear progress made between the initial and final situations of countries for each thematic area, apart from the extent to which they came closer to reaching the 2000 targets.

A second table, "The haves and the have-nots: The situation of each country" shows the current situation in each country relative to the whole series of indicators that represent the goals established at the WSSD. This table reflects the situation of social development based on the most recent data available. In other words, it shows how near or far the countries are on average from achieving the targets, without indicating whether they are progressing or regressing. In the construction of the ranking for this second table, the same columns were used as in the previous table. The ranking was constructed by taking into account the distribution of values for each variable and organizing them into

four categories: the highest corresponds to countries whose situation regarding the indicator in question is the best, and vice versa for the lowest category. In this way, the countries were classified in order, ranging from those showing the best performance to those with the worst record. The values assigned are as follows: 1) Close or beyond targets; 2) Above average; 3) Below average; 4) Critical situation.[6]

In short, the table "Steps forward, steps back" reflects the rate of progress, while the table "The haves and the have-nots" provides a "snapshot" of the countries' current situation. The two tables are designed to complement each other. A small advance in a country with a high level of social development is not the same as a small advance in a country that still has a long way to go.

As can be seen in the table "The haves and the have-nots", although the developed countries tend to appear at the top of the scale, many are situated in positions below other countries that are less developed in relative terms. This is the case with Austria, Italy, Japan, Canada, Australia, France and Belgium, which, although they rank among the first 50 places, are placed relatively low because of their poor performance in relation to development aid. Likewise the United States, which is positioned even further down the scale. Among those countries that appear to be enjoying better social conditions toward the end of the millennium, we find countries in Latin America, South East Asia and the former Soviet bloc. The five countries with the worst record in social conditions, as measured by the chosen indicators, are Afghanistan, Angola, Ethiopia, Yemen and Guinea-Bissau. The situation is critical in many African countries and some Asian countries.

In the table "Steps forward, steps back", in contrast, the order of countries is completely different, because the criterion used to construct the table ranked the countries in accordance with the progress and setbacks registered in absolute terms, over the period under consideration. As is clear from the table, this method of assessment "rewards" those relatively less-developed countries that show progress in the chosen indicators. As a result, countries like Bolivia, Ecuador, Guinea, Cambodia or Laos appear among the first places. Likewise, note that the starting point for the countries with respect to their social indicators has an effect on how their achievements are measured: countries starting from a very poor situation can, over the time period under study, make very considerable progress. In contrast, in countries starting with better social conditions, the advances made will inevitably be smaller. This, therefore, explains why Sweden, Belgium, Cuba, Spain, Italy and France are located low on the scale. The advantage of this form of assessment is that, with respect to relatively less-developed countries, it effectively distinguishes between those that have advanced most in social development and those that, under similar conditions, have made no progress or experienced setbacks. ∎

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5 The following points system, based on distribution of variables, was used to construct the ranking for "Steps forward, steps back": *Percentage of children reaching 5th grade*: 5) progressing by more than 10%; 4) progressing between 1% and 10%; 3) no change (registering less than 1% progress or regression); 2) regressing by up to 10%; 1) regressing by more than 10%. *Net primary enrolment rate*: 5) progressing by more than 10%; 4) progressing between 2% and 10%; 3) no change (registering less than 2% progress or regression); 2) regressing between 2% and 5%; 1) regressing by more than 5%. *Life expectancy*: 5) increasing by two or more years; 4) increasing by less than two years and more than one; 3) no change (increasing or regressing by less than one year); 2) regressing between 1 and 2 years; 1) regressing by more than 2 years. *Infant mortality rate*: 5) reduced by more than 10 per 1,000; 4) reduced by more than 1 and less than 10 per 1,000; 3) no change (reduced or increasing by less than 1 per 1,000); 2) increasing between 1 and 5 per 1,000; 1) increasing by more than 5 per 1,000. *Mortality rate for children under 5*: 5) reduced by more than 10 per 1,000; 4) reduced by between 3 and 9 per 1,000; 3) no change (reduced by less than 2 per 1,000 or increasing less than 1 per 1,000); 2) increasing by more than 1 and less than 10 per 1,000; 1) increasing by more than 10 per 1,000. *Daily per capita calorie intake*: 5) increasing by more than 100 calories per year per capita; 4) increasing between 50 and 100 calories; 3) no change (increasing or reduced by 50 calories or less); 2) reduced between 50 and 100 calories; 1) reduced by more than 100 calories. *Percentage of children suffering from malnutrition*: 5) reduced by more than 5%; 4) reduced by more than 1% and less than 5%: 3) no change (reduced by less than 1% or increasing up to 2%); 2) increasing between 2% and 5%; 1) increasing by more than 5%. *Access to health services*: 5) coverage increased by 10% or more; 4) coverage increased between 2% and 10%; 3) no change (coverage increased or reduced by less than 2%); 2) coverage reduced between 2% and 10%; 1) coverage reduced by more than 10%. *Percentage of pregnancies attended per 1,000 live births*: 5) coverage increased by more than 100 per 1,000; 4) coverage increased between 50 and 100 per 1,000; 3) no change (coverage increased or reduced by less than 50 per 1,000); 2) coverage reduced between 50 and 100 per 1,000; 1) coverage reduced by more than 100 per 1,000. *Percentage of births attended*: 5) coverage increased by more than 10%; 4) coverage increased between 2% and 10%; 3) no change (coverage increased or reduced by less than 2%); 2) coverage reduced between 2% and 10%; 1) coverage reduced by more than 10%. *Adult illiteracy*: 5) illiteracy reduced by 5% or more; 4) illiteracy reduced between 2% and 5%; 3) no change (illiteracy reduced by less than 2%); 2) no growth in adult illiteracy. *Access to sanitation*: 5) access increased by 10% or more; 4) access increased by more than 2% and less than 10%; 3) no change (access increased or reduced by less than 2%); 2) access reduced by more than 2% and less than 10%; 1) access reduced by 10% or more. *Access to drinking water*: 5) access increased by 10% or more; 4) access increased by more than 2% and less than 10%; 3) no change (access increased or reduced by less than 2%); 2) access reduced by more than 2% and less than 10%; 1) access reduced by more than 10%. *Reduction in military expenditure*: 5) reduced by more than 2.5%; 4) reduced between 1.5% and 2.5%; 3) no change (reduced or increased up to 1.4%); 2) increased between 1.5% and 2%; 1) increased by more than 2%. *Official Development Aid*: 5) increased by more than 0.1%; 4) increased between 0.05% and 0.1%; 3) no change (increased or reduced by less than 0.05%); 2) reduced between 0.05% and 0.1%; 1) reduced by more than 0.1%. *Gender equity in literacy*: 5) female/male ratio improved by more than 0.1; 4) improved between 0.1 and 0.08; 3) no change (improved by less than 0.08 or regressed by less than 0.1); 2) regressed between 0.1 and 0.2; 1) regressed by 0.2 or more.

6 Points awarded to countries in accordance with the latest value of the indicator in the table "The haves and the have-nots": *Percentage of children reaching 5th grade*: 4) 80% or more; 3) 75% to 80%; 2) 60% to 75%; 1) less than 60%. *Primary enrolment rate (net)*: 4) 95% or more; 3) 85% to 95%; 2) 75% to 85%; 1) less than 75%. *Life expectancy*: 4) over 70 years; 3) 60.1 to 70 years; 2) 50.1 to 60 years; 1) 50 years and under. *Mortality rate among infants under one (per 1,000 live births)*: 4) less than 10; 3) 10 to 30; 2) 31 to 46; 1) more than 46. *Mortality rate for children under 5*: 4) less than 15; 3) 15 to 40; 2) 41 to 70; 1) more than 70. *Daily per capita calorie intake*: 4) more than 3,200 calories a day per capita; 3) 2,700 to 3,200 calories; 2) 2,300 to 2,700 calories; 1) less than 2,300 calories. *Percentage of children under five suffering from serious or moderate malnutrition*: 4) up to 6%; 3) 6% to 10%; 2) 10% to 15%; 1) 15% or more. *Percentage of population with access to health care*: 4) up to 75%; 3) 75% to 85%; 2) 86% to 95%; 1) over 95%. *Percentage of pregnancies attended for every 1,000 live births*: 4) more than 900; 3) 851 to 900; 2) 750 to 850; 1) less than 750. *Percentage of deliveries attended*: 4) more than 95%; 3) 85% to 94%; 2) 76% to 85%; 1) 75% or less. *Percentage of children under 1 fully immunised*: 4) more than 95%; 3) 85% to 95%; 2) 75% to 85%; 1) less than 75%. *Adult illiteracy*: 4) less than 5%; 3) 5% to 10%; 2) 10% to 20%; 1) more than 20%. *Percentage of population with access to sanitation*: 4) more than 95%; 3) 81% to 95%; 2) 68% to 80%; 1) less than 68%. *Percentage of population with access to drinking water*: 4) more than 95%; 3) 80% to 95%; 2) 70% to 80%; 1) less than 70%. *Female literacy*: 4) more than 90%; 3) 62% to 90%; 2) 34% to 62%; 1) less than 34%. *Official Development Aid (as percentage of GNP)*: 4) close to or having already reached the target of more than 0.7%; 2) below average, 0.69% to 0.3%; 1) critical situation, less than 0.3%. *Military expenditure*: 4) 0% to 1%; 3) 1% to 2%; 2) 2% to 2.5%; 1) more than 2.5%.