**Disparities and Change**

* Identify and explain the changing patterns and trends of regional and global disparities of life expectancy, education and income.

Examine the progress made in meeting the Millennium Development Goals (MDGs) in poverty reduction, education and health.

Theories explaining the global development gap:

**Modernisation theory:**

Rostow’s model (Measurements of global and regional disparities)

An important part of this theory was the ‘take off’ stage, for which an initial stimulus was needed. Examples are:

* A rise in the rate of productive investment to over 10% of a nation’s income
* The development of one or more substantial manufacturing sectors with a high rate of growth

For Rostow, capitalism was essential for economic development, but as progress in developing nations was still very slow, criticism towards this theory grew.

**Dependency theory:**

An economist called Frank popularized ideas of this theory, in 1966. He believed that socialist systems provided a fairer society between and within countries than capitalism. His main points were:

* Poverty in developing nations was the consequence of, through colonialization, introduced capitalism
* The development in the rich world was achieved by exploiting raw materials of the developing world
* The developing world became dependent to the developed world through export agriculture
* The stronger the links to the developed world, the worse the level of development

His model shows a chain of exploitation from small peripheral towns to larger cities until finally the ‘metropolis’, the developed world, exploits the largest settlements. The intensity of poverty increases with the number of stages down the exploitation chain.

**World system / Core and Periphery theory:**

Wallerstein popularized the world system theory in the 1970’s.

The theory includes the point that capitalism has been in existence since the 16th century on, bringing more and more rather isolated societies into it from then on and increasing global interdependence.

* A number of core countries transformed a much larger external area into a periphery, with a semi-periphery developing in between
* Core countries became manufacturers, while peripheral countries were agricultural and raw material producers
* The terms of trade were heavily influenced in favor of the core
* The semi-periphery (NIC’s) forms the most dynamic part of the system, competing to reach core status

Patterns in life expectancy:

Variations of life expectancy are a key measure for government agencies, as a help of targets for development programs. It could also be an important measure for loans in banks, pension plans or insurance companies.

Global social and economic development has generally increased declining mortality levels and an increase in life expectancy. The world average life expectancy is 69 years (male 67, female 71). The difference between the developing world and the developed world is 10 years, and the developing world has a larger female-male gap.

According to the World Health Organization (WHO), life expectancy increased by an average of 23 years in the poorest 50% of countries and only by 9 years in the 50% richest between 1960 and 2000.

Rates of life expectancy have converged significantly between rich and poor countries during the last 50 years, despite the widening wealth gap and the life expectancy gap is expected to narrow even further in the future. However, AIDS has caused recent decreases in life expectancy in some Sub-Saharan African countries.

An effect of this is a widening disparity between per capita incomes in developed and developing countries.

Influences on life expectancy are:

* Infectious diseases, especially in the developing world
* Physical environmental conditions like natural hazards
* Human environmental conditions such as pollution, health and safety levels
* Personal lifestyle decisions

Patterns in Income:

Income inequality calculations are controversial and often inaccurate due to the difference of living cost between countries.

The 2009 World Development Report stated that the global GDP per capita gap:

* Widened between 1950 and 1970
* Narrowed from 1970 to 2005

However, it must be considered that the narrowing of this gap from 1970 on is largely due to the good performance of Asian nations. Other parts of the world have been left out of this process, such as the central African region, where per capita incomes decreased due to population growth.

Patterns in Education:

To be able to provide a high level of education to all sectors of a population, social inequalities, which influence an individual’s ability to compete, have to be eradicated.

There has been a consistent increase in education globally, however there are large differences between world regions, especially between low-income and high-income countries.

Low-income countries spend far more money on primary education, than high-income countries. As developing nations become more affluent, this pattern is expected to change towards the educational spending patterns of developed nations.

In developing countries, girls are seen as the least prioritized to go to school, however the educational gender gap has narrowed in most developing countries.

The number of schooling years generally has a very significant impact on the quality of life of an individual and the economic development of a community or country. There is a close link between poverty and low education due to decreased economic possibilities. In every world region there has been an increase in tertiary education enrolment, however the gap between rich and poor nations remains high.

An effect of globalization has been the increased number of students studying abroad.

The Millennium Development Goals:

Established by the UN in 2000 by international agreement to reduce extreme poverty. The goals are basically human rights and should be reached by 2015.

1. **Eradicate extreme poverty and hunger**
	1. Halve, between 1990 and 2015, the proportion of people whose income is less than $1 a day.
	2. Achieve full and productive employment and decent work for all, including women and young people.
	3. Halve, between 1990 and 2015, the proportion of people who suffer from hunger.
2. **Achieve universal primary education**
	1. Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling.
3. **Promote gender equality and empower women**
	1. Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015.
4. **Reduce child mortality**
	1. Reduce by ⅔, between 1990 and 2015, the under-five mortality rate
5. **Improve maternal health**
	1. Reduce by ¾, between 1990 and 2015, the maternal mortality ratio.
	2. Achieve, by 2015, universal access to reproductive health.
6. **Combat HIV/AIDS, malaria and other diseases**
	1. Have halted by 2015 and begun to reserve the spread of HIV/AIDS
	2. Achieve by 2010, universal access to treatment for HIV/AIDS for all those who need it.
	3. Have halted by 2015 and begun to reserve the incidence of malaria and other major diseases
7. **Ensure environmental sustainability**
	1. Integrate the principles of sustainable development into country policies and programs and reverse the loss of environmental resources
	2. Reduce biodiversity loss, achieving by 2010 a significant reduction in the rate of loss.
	3. Halve, by 2015, the proportion of population without sustainable access to safe drinking water and basic sanitation.
	4. By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers.
8. **Develop a global partnership for development**
	1. Address the special need of the least developed countries, landlocked countries and small island developing states.
	2. Develop further an open, rule-based, predictable, non-discriminatory trading and financial system
	3. Deal comprehensively with developing countries’ debt.
	4. In cooperation with the private sector, make available the benefits of new technologies, especially information and communication.

The Millennium Development Report 2009:

Progress towards reaching most targets by 2015 has generally been to slow. Problems with reaching the targets are:

* Slow or even negative economic growth
* Diminished resources
* Fewer trade opportunities for developing countries
* The increasing effects of climate change
* Possible reduction in aid of donor nations

Poverty reduction:

Worldwide, the number of people in the extreme poverty sector (income less than 1$ a day PPP) fell from 1.8 billion in 1990 to 1.4 billion in 2005.

The most significant fall was achieved in Eastern Asia due to rapid economic growth in China.

However, the economic crisis has slowed down the process of reducing extreme poverty. Higher food prices and reduced aid assistance have also decreased progress in eradicating hunger.

In some of the most vulnerable and low-growth economic countries in Sub-Saharan Africa and Southern Asia, the number of people in poverty is expected to increase.

The 2009 report concludes that the target of reducing the poverty rate by half by 2015 will probably be reached but may not in some regions.

Education:

Globally, the primary education enrolment has increased from 83% in 2000 to 88% in 2007, with most progress made in the poorest regions. This progress is due to increased national spending on education, however this spending might decrease due to the economic crisis.

Globally the 2009 report states that 2015 targets may not be reached.

In the gender gap in education, there were improvements but only 18 from 13 countries are likely to reach the 2015 goal.

In tertiary enrolment however, there have been significant improvements.

Health:

Infant and maternal mortality:

Significant improvements have been recorded in child mortality, however only little progress in Sub-Saharan Africa and Southern Asia.

In some developing regions there have been major improvements, which could further reduce child mortality (such as vitamin A supplementation).

Maternal mortality still remains a huge problem in the developing world with 85% of maternal mortality found in Sub-Saharan Africa and South Asia.

HIV/AIDS:

HIV infection has been falling, however the number of infected people has increased in some regions. There are increased treatment opportunities for developing nations but accurate knowledge of the disease is still very low.

Malaria:

95% of the deaths in 2006 occurred in Sub-Saharan Africa, with children being the majority.

Significant progress has been made to decrease malaria-related deaths.