

Are Millennium Development Goals Relevant for Academic Research?

Social science research agendas and the objectives of the Millennium Development Goals are becoming intertwined. But it is debatable if these goals are relevant for research in the social sciences?

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The increasing intertwining of the social science research agenda with the objectives of the Millennium Development Goals (MDGs hereafter) is perhaps not a good thing. I hope to demonstrate here that not only are the MDGs irrelevant to academic research in the social sciences, academics should be expressly forbidden from working on anything that has the word “millennium” in it. I say the latter in all seriousness in the interest of academics’ sanity, quite apart from all the other reasons that I will come to for discouraging academic research on the MDGs themselves. I know my own head starts spinning every time I try to distinguish between the Millennium (M hereafter) Declaration, the M Summit, the M Project, the M Campaign, the MDG Task Forces, the MD Goals, the MD Targets, the MD indicators and so on.

Apart from the head-spinning aspect of these myriad Millennium activities, that the MDGs are irrelevant for academic scholarship and research at least partly because the areas encompassed by the MDG enterprise are already areas in which academics are extremely active such as poverty, child mortality, gender equality, environmental sustainability, are all already bread and butter topics of social science academic research; there is no reason at all for academics to now fit this research that they do to an explicit MDG agenda. In fact, I would go as far as to say that we need an explicit distancing of academic research from the MDG agenda for several reasons.

Very broadly, I would classify these

reasons into two categories – the abstract and the pragmatic.

Abstract Reasons

The abstract reasons have to do with the central mission of academia and of academics. The whole point of a university affiliation is that the academic can be an independent researcher whose research interests and output are not dictated by university administrators, politicians or corporations. This is a mission that is already severely eroded by what has been called the corporatisation of the university and of university research. Increasingly universities are being run like corporations, with cost-benefit calculations determining what will be taught and what will be researched. What the market wants, the university provides. This may take the form of patents in life sciences being handed over to private sector donors who fund research, often even when these patents are the result of publicly funded research (thanks to the Bayh-Dole Act of 1980, in the United States for example). Sometimes, the very findings of this research have to be vetted by these donors before publication. The corporatisation may also take the form of even the social sciences and humanities courses being tailored for the market, as the increasing number of Indian universities offering courses and even majors in “corporate sociology” demonstrates.

It is true that the social sciences do not have many commercially valuable patents to directly offer to industry. Nevertheless, it would be a mistake to think that working on something like the MDGs has no market value just because it is done at the behest of international organisations

and non-profit funding agencies. Acting on such behest is a form of corporatisation as well because, of course, these organisations and agencies have their own compulsions and larger agendas. These compulsions and agendas may well be benign and motivated by genuine concern for the well-being of the poor and dispossessed but all too often, these benign motives come with immense power to unilaterally decide what is good for others. And all too often, what we decide as being good for others turns out to be even better for ourselves. That is, at least partly, why what the MDGs seem to seek is just enough improvement in the material conditions of the poor to prevent unreasonable demands for a radical redistribution of power between or within countries.

All this is not to say that academics should not muddy their hands by engaging with the real world but that such an engagement does not need to be mediated by international organisations any more than it needs to be mediated by corporations, or even NGOs.

I think it is bad enough that the MDGs can claim a consensus of support for their rationale and their implementation. The 200 or so national governments that have signed off on them did not really have much say on their content, whatever the rhetoric to the contrary – the working committee that devised the goals did not have representatives from poor countries that these goals have been handed down to; all they were part of is a series of “consultations” and “negotiations” in which, for the most part, they knew better than to rock the boat. It is significant that non-government organisations (NGOs) were largely excluded from the process – their rabble-rousing capacities would, doubtless, have made it more difficult to introduce more radical goals for social change, even on matters, like reproductive health, that earlier UN conferences had already made legitimate.

By researching the MDGs, academics will be giving legitimacy to a “consensus” that is already using all other outlets for legitimacy, the mass media and money power in particular, to create a popular image of the MDGs as God’s gift to the poor. By the way, it is interesting that the word “Goals” is always written with a

capital G in MDG documents, making its connection with God (and its capital G) more explicit. But it is not the business of academics to be legitimising other people's consensus. It is their business to disinterestedly stand apart, to criticise, both constructively as well as destructively, and to seek to change a consensus when their research challenges the basis of it.

But in the case of the MDGs, there is no scope for academics to do any of these things. The MDGs are virtually set in stone. There is no tinkering or questioning allowed on any of the basic presumptions any more; all that academics can contribute are technical skills and the operations research needed to actually determine activities on the ground, not in terms of why but how and when. This is analogous to the back office work that the information technology industry does in Third World countries, while the serious hardware problems are left to the true geniuses at Microsoft and Bell. And surely academics, given their larger mission and given their bloated egos, object to becoming business process outsourcing (BPO) workers!

In any case, there is not even much by way of technician level skill that academics can offer. The Millennium Project report 'Investing in Development: A Practical Plan to Achieve the MDGs' confidently asserts that we already,

know how to prevent women from dying in pregnancy and childbirth, ... how to encourage girls to enrol in school and complete a full cycle, ... how to provide rural clinics with uninterrupted electricity, ... how to increase tree coverage in deforested areas... The same is true for the other Goals as well. So it seems that it is only a question of actually doing what we know how to do; there are no knotty problems of political economy involved, there are no knowledge barriers, only recalcitrant governments.

So there is not even much technical assistance that academics can usefully provide. While, in principle, academics are completely used to not being paid attention to, it still hurts when the dismissal is as blatant as the report implies it might be and academics should avoid further harm to their egos by not exposing themselves to such dismissal.

This kind of irrelevance of academic research represents a base motive for academics not to join the MDG fray. Another non-lofty reason is that, as academics, we are fortunately protected from the need to jump through hoops in the way that NGOs and poor-country

governments have to do because they depend on donor funding for their activities. So, although we do still keep doing this through sheer habit, we do not need to work on population control one day, then jump to reproductive health the next, and before we have said anything useful on that, change gears again and concentrate on HIV/AIDS, and within days, quickly learn to incorporate our AIDS work into an MDG framework. These changing whims have to be catered to by governments and NGOs. The slow and ponderous deliberations that we as academics are proud of cannot be accomplished if we too change so easily with the winds – we typically need a minimum of a decade to finish pontificating on a single theme. If the world rushes past as we pontificate, it is the rushing world's loss, not ours.

Yet another self-centred reason applies specifically to academic demographers. Surely we have not finished whining about the absence of our pet post-Cairo theme, reproductive health, from the MDG agenda. This personal insult should not be taken lightly. We need to take our revenge by stonily pretending that the MDG project does not exist.

All these abstract reasons for academics to not do research on the MDGs are depressingly self-flagellatory. So let me turn now to some practical reasons for academics to justify washing their hands of the MDGs.

Practical Reasons

Even if we want our research to be practical, policy oriented and useful, there are many reasons for us to give the MDG bandwagon a miss. I would broadly classify these reasons (my profession has made me an inveterate classifier) as those to do with political discomfort and those to do with cynicism. Since political discomfort is worse than cynicism, let me begin with some of the reasons that the MDG project should induce such discomfort in academics.

We know that the initiation, development and finalisation of the MDG agenda reflect an inherently political process; Barbara Crossette (*Studies in Family Planning*, 2005) has tried to describe this political process in the context of the absence of reproductive health and reproductive rights from the MDG goals; and some day, a political history of this process will be written, which will analyse the contingencies and motivations of the key players – individual, institutional and national –

that led to this "consensus" document and to the frenzied industry of international and national activities devoted to the language of these goals, even if action on the ground leaves much to be desired. An important part of this history will surely document the closed and open door determination of the powerful to manipulate international organisations to "impose" a "consensus" document on the rest of the world that will salve consciences at the same time as it maintains the political status quo and the very unequal power distributions of the world today. Whatever happened to the United Nations' bold talk in the 1970s of things like a "new international economic order", talk that acknowledged not merely the high maternal mortality ratios in poor countries but also the highly unequal bargaining power that poor countries bring to any negotiating table? It is another matter that by the time this radical rhetoric was incorporated into a UN programme of action, it had become diluted into merely a basic needs programme. In today's MDG framework, there is not even a pretence of this kind of UN radicalism; a begging bowl for aid to reduce maternal mortality sounds suspiciously like a substitute for the demand for more fairness and social justice in international relations. All such political ideas about redistribution and ideas about "rights" – human, reproductive, to livelihoods, to decision-making, are conspicuous by their absence in MDG documents except in vague sentimental language with few concrete proposals for affecting these rights.

The MDG project does not really even ask for political change within countries, except for re-condemning such newly fashionable and supposedly exclusively Third World faults as bad governance and corruption. We know all about corruption in high places and low places – the former, in particular, are hardly the prerogative of the Third World. In any case, this emphasis is really merely an aside; the bulk of the MDG agenda is devoted to technical fixes that will hopefully lead to the low child mortality and the two square meals that will, in turn, quell both indigenous as well as cross-national protests against injustices in the distribution of resources and in the access to real power and agency. The goal of universal primary schooling exemplifies this status quoism most vividly to me. Far from granting empowerment, what universal primary education usually produces is a compliant and disciplined workforce that is trained to respect hierarchy, while at

the same time, technically able to contribute to rises in GDP as well as able to bring down its fertility and child mortality rates without much help from the state.

Not only is the MDG Project not disturbing the political status quo, many might read it as in fact reinforcing the neoliberal agenda. It is striking, for example, how frequently the word “trade” crops up in various MDG related documents. There is even an MDG task force on trade. Trade is hardly the first thing one thinks of when contemplating ways to reduce the miseries of poor countries. And certainly not trade in the way it was handled in the 2002 Monterrey Conference on Financing for Development, in which the trade related demands of developing countries were relegated to a vague paragraph, while the overwhelming emphasis was on ignoring the controversies on controversial matters like public-private partnerships and private foreign direct investment.

Academic political disillusionment must also arise from asking the simple question about the basis for zeroing in on this particular set of goals. Why are reproductive health and reproductive rights missing from the MDGs is a question that has already been asked. The same can be asked about unemployment levels as either a goal, target or an indicator of poverty and hunger reduction. Access to secure livelihoods surely makes a bigger or as much of a dent on poverty and hunger than food aid or cheap, subsidised exports of food from developed to developing countries. Not that employment is missing altogether; what is surprising is that it is part of the agenda of Goal 8, the one about global partnerships, in which also come controversial matters like collaboration with pharmaceutical companies.

Why too is there no mention of contraceptive access and user levels except in the context of AIDS prevention? And, while the fact that three of the goals are health related should please demographers in principle, one is left to wonder what kind of connection is being implied between health and poverty, the overarching goal of the MDG project, even if it mentioned as a separate goal in itself. Too often in recent years has good health been promoted as an instrumental good to relieve poverty, the argument being that poor health leads to poor economic outcomes. But there is much less of the old school of thought on the reverse direction of causality – that poverty leads to poor health outcomes. Whatever happened to that old phrase, “the diseases of poverty”?

Why do not rich societies and rich households in poor societies need insecticide treated bed nets? Is their blood not appetising enough for the finicky *Anopheles* mosquito?

My overall point is that these are all controversial matters that “consensus” documents only serve to raise further political suspicions about. How these controversies are not reflected in the consensus that developing countries seem to have so blithely signed off on is a question that needs to be asked, both to indict the weak spines of many third world governments as well as to grudgingly applaud the ramrod spines of the supposedly generous rich-country leadership.

Other Reasons

To move on from these political anxieties, let us turn now to a few of the many “cynicism” related reasons for academics to not throw themselves into MDG research. This has to do with justified academic cynicism about the potential effectiveness of the MDG agenda. All these reams of paper with instructions about goals and targets and indicators is enough to make the academic dizzy, can you imagine what they must do to frazzled Third World country bureaucrats and even more so to intellectually unsophisticated low level field functionaries who are now being told to implement a confusing mix of so-called bold initiatives, in the drafting of which they have had absolutely no say? The confusion on the ground is very real, as anyone who has visited local bureaucratic institutions can testify. MDG is a neat acronym for a not-so-neat bundle of new duties that are being imposed on workers who have not the faintest idea of what all the fuss is about.

The wary academic researcher will also be cynical about the tired use and reuse of the word “sustainable” in the MDG agenda. Besides being rightly concerned about the implications of this use for poor household livelihoods, poverty and hunger (remember Goal 1) as their governments rush to protect the environment (Goal 7, target 9 and indicators 25 to 29), there should also be doubts about the meaning of “sustainable” access to water and sanitation (Goal 7, target 10, indicators 29 and 30).

There should be even more doubts about the few cases in which the word sustainable is missing, in the targets for immunisation for example. As the woeful experience of the World Health Organisation’s (WHO) expanded programme of immunisation of

the 1980s warns us, even if the year 2015 finds 100 per cent of infants immunised against measles (i.e., indicator 15), this will not at all predict 100 per cent immunisation levels in 2018 or 2020. This is because one shot mass immunisation campaigns can work by addressing what anthropologists call the “passive acceptance” of poor populations of such aggressive mass campaigns but to sustain these results without such ongoing expensive and tiresome hype, one needs to build a climate of “active demand” to replace this passive acceptance, so that immunisation is actually perceived to be desirable and effective, whether or not it actually is. Too often, the misconceptions and promises that often accompany mass immunisation campaigns raise false hopes which, when they are dashed and children die from a variety of illnesses, only lead to a disenchantment with immunisation in general.

As researchers, academics must also be uncomfortable with the “one size fits all” approach of the MDG agenda, even from the relatively narrow perspective of health, let alone more context-specific matters like poverty and education. There is no attempt at prioritisation and it is not clear at all that national governments will be allowed to prioritise either – they all have the same motley, somewhat eccentric, collection of targets and indicators, which seem to have their roots in political expediency (for example, the need to flow from the UN Millennium report or the need not to offend conservative constituencies) rather than a considered analysis of individual country needs. At this stage of the game, the only room for contextual understanding is in the design of interventions, not in the explication of the MDGs to begin with. And even this appraisal of the context for technical purposes is unlikely to do much more than hire a token anthropologist on planning teams.

But we know, for example, that while gender disparities in primary and secondary education (Goal 3) may be important for south Asia and west Asia, they are far from being the major issue in other parts of the developing world and that a focus on them will unnecessarily divert attention from more pressing gender related problems, even in education. Similarly, by universalising the MDGs, there is nothing in them to address important country-specific problems like caste-based oppression, sex selective abortions, internal displacement of populations thanks to new modernisation projects, farmer suicides

– all these problems are stark examples of which the newspaper throws at urban Indian every morning and make a mockery of the country's claims to becoming an economic superpower. In addition, there are the sharp and growing regional inequalities in poverty and health that will remain sharp if MDGs are judged by "national" averages, as the current plan is – average infant and maternal mortality rates can be halved by focusing on the more easily approachable relatively better off poor, leaving rates for the worst off groups unchanged. Given all this, worrying about MDGs at the level demanded by the MDG programme can only reduce academic research to tremendously wasted intellectual resources.

Besides context, social scientists these days are very hung up about looking at the whole picture, about not missing the wood for the trees. But that is exactly what the stand-alone interventions of the MDG project do – encourage, no, impose, vertical programmes that can show measurable results in MDG indicators by the 2015 deadline. One wonders for example, if the trio of HIV/AIDS, malaria and tuberculosis has been selected for special attention (Goal 6) more for their presumed susceptibility to such-stand alone interventions than for their epidemiological supremacy all over the developing world. But this kind of selective attention usually comes at a cost as resources are diverted from broader health programmes and towards specific diseases. Examples of such reckless diversion abound. In Haiti, the HIV prevention campaign has succeeded in halving HIV prevalence from 6 per cent to 3 per cent between 2000 and 2006 but all other health indicators have worsened in this period.

Concluding Remarks

Many of these criticisms and concerns about the usefulness and implementability of the MDGs have already been made in scattered places in literature. I repeat them here for two reasons: one, to reiterate my plea that academic research not be guided by blind faith in the MDGs; and two, to underline that, in spite of the public nature of these critiques, they have been totally unable to actually inform the MDG agenda. This agenda seems to be dismissive of the first rules of research that we teach our students – the importance of flexibility, adaptability, stepping back, re-evaluation of goals; in other words scepticism about all received wisdom. From our demographers' perspective, one

might also give the failed example of the arduous efforts made by a group led by the head of the International Planned Parenthood Federation to have reproductive health included as a ninth MDG in a revised listing after the 2005 UN review of progress.

There is one more cause for cynicism that I have not seen in the literature but that is heavily informed by my own experience as a demographer. This is to do with the whole business of "targets" and especially "quantitative" targets. It is ironic that the entire MDG programme is built around much touted and celebrated quantifiable targets; indeed even funding agencies like the Department for International Development now require project proposals submitted to them to specify quantitative outcomes.

But those of us who lived and worked through the years leading up to the International Conference on Population and Development (ICPD) remember well the stringent critiques of the "target" approach in family planning that heavily informed the ICPD programme of action. I would propose that many of these criticisms of fertility and family planning targets are also applicable to targets for supposedly benign and beneficial goals like health outcomes. Health targets too can lead to "unhealthy" (I use this word advisedly) curtailments of individual agency; to going after wrong "cases", to fudging of statistics, to a withdrawal of resources from activities that are necessary for long-term population health but for which results are not immediate (remember that 2015 deadline) and not measurable in numbers. And to an obsession with viewing people as numbers rather than as individuals with individual problems and fears.

Recall also that past family planning programmes which focused on numerical targets often misfired because human ingenuity knows no bounds, whether it is the ingenuity of the family planning workers forcibly sterilising old men or the ingenuity of pressurised women accepting contraceptive pills or condoms only to throw them away or use them as balloons respectively. Such ingenuity is not lacking in the use of health technology either. For example, the indicator of proportion of births attended by a trained professional probably needs rethinking in India when it is complemented with the growing number of studies that record that the practice of injecting oxytocin to hasten labour has become an integral part of the impatient-trained-attendant and impatient-pregnant-woman combination. Perhaps it

is this subversion of technology that explains the fact that between the second and third national family health surveys in India, maternal mortality rates have dropped even though institutional deliveries have not increased markedly – maybe it is institutional or professionally attended deliveries that constitute the new maternal mortality hazard and we need a less target oriented approach to understanding and dealing with these unexpected perversion.

Academics can also take consolation from the fact that at the "global" level, at least some of the MDGs will be met, regardless of adherence to the mind-boggling array of interventions that even the more limited list of "quick wins" included in the Millennium Project report. Partly, this will be because of the disproportionate contribution of India and China to the denominator in any global calculations and because these two countries are the new "economic" giants as the media never fails to remind us – such gianthood comes with many unpleasant correlates, including an exacerbation of inequalities but it will also come with greatly reduced numbers of the absolute poor. East and south-east Asia have already more than achieved their poverty reduction targets well ahead of schedule, and it is difficult to attribute this achievement to a clear MDG-oriented plan of action.

I want to end with another reason for academics or the less developed world not to feel guilty about ignoring the MDGs. I think it is the developed world that should feel guilty – the only goal for which there are no numerical targets, no time frame, is Goal 8, to do with the global partnership. All extracted commitments here are vague and non-binding.

The good news is that I must be preaching to the converted, at least in the field of demography. Neither the last annual conference of the Population Association of America New York (2007) nor the last General Conference of the International Union for the Scientific Study of Population had a single session on the MDGs. So it appears that academics in these fields are already doing what I have recommended here – consider the MDGs irrelevant to their research and scholarship. [FW](mailto:ab54@cornell.edu)

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