Flagship Report

Development Progress

Leaving no one behind

A critical path for the first 1,000 days of the Sustainable Development Goals

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Contents

Acronyms	7
Acknowledgements	7
Executive summary	8
1. Introduction	14
1.1 Leave no one behind: a 1,000-day agenda	14
1.2 Structure of the report	15
2. Who is being left behind?	17
2.1 Defining 'leave no one behind'	17
3. The scale of the challenge, and why early action is so vital	19
3.1 SDG1: No poverty	20
3.2 SDG3: Good health and well-being	21
3.3 SDG4: Quality education	21
3.4 SDG8: Decent employment	22
3.5 SDG16: Peace, justice and strong institutions	22
3.6 The need to act now	23
4. What do people who have been left behind want?	24
4.1 Priority 1: Government spending on key services	26
4.2 Priority 2: Living in dignity without discrimination and shame	27
4.3 Priority 3: Institutional and legal reform	28
5. A critical pathway to leaving no one behind: early policies	30
5.1 A theory of change for leaving no one behind	30
5.2 Agency for marginalised people	31
5.3 Governments that choose to marginalise	31
5.4 Setting out the critical pathway	31
5.5 Key services	34

5.6 Raising public awareness: anti-discrimination policies and public	
information campaigns	40
5.7 Institutional and legal reform	41
6. Means of implementation: what is needed to deliver the change?	44
6.1 Data	44
6.2 Governance	45
6.3 Finance	46
7. Conclusion	49
References	51
Annex 1: Technical annex	57
Annex 2: List of countries used in the National Development Plans analysis in Box 5	59
Annex 3: Methodology for costings	60

List of tables, figures and boxes

Tables

Table 1: Annual rates of change needed in furthest behind regions, by year efforts begin, for different goal areas	9
Table 2: Annual rates of change needed to eliminate ultra poverty in the region furthest behind, by year efforts begin	10
Table 3: Annual rates of change needed in the region furthest behind, by year efforts begin	23
Table 4: Total annual cost of leaving no one behind in health, education and social protection (2014 \$ billion)	48
Table A1: Costs of providing universal health care (\$ million)	60
Table A2: Costs of providing education to those currently without (\$ million)	60
Table A3: Costs of filling national poverty gaps through cash transfers (\$ million)	61
Table A4: Revenues and aid potentially available (\$ million)	61
Table A5: Spending gap (\$ million)	61

Figures

Figure 1: Poverty reduction until 2015 as a share of the change needed to halve national poverty by 2030 (%)	20
Figure 2: Child mortality reduction until 2015 as a share of the change needed for its elimination by 2030 (%)	21
Figure 3: Annual rates of change needed in each region from 2015 to eliminate education poverty by 2030 (%)	22
Figure 4: Changes in birth registrations until 2015 as a share of the increase needed by 2030 (%)	23
Figure 5: Share of MY World respondents by education and gender (%)	26
Figure 6: Share of MY World respondents reporting 'support for people that cannot work' as a priority (%)	27
Figure 7: Country weighted average share of respondents who reported their area was not a good place to live for ethnic minorities (%)	28
Figure 8: Perceptions that it is very important women should have the same rights as men (%)	29
Figure 9: Perceptions that individual land rights should be strengthened (%)	29
Figure 10: Populations recognised as marginalised in national development plans (%)	32
Figure 11: National development strategy areas to reduce marginalisation of women (%)	33
Figure A1: Trajectories to 'get to zero' on under-five mortality rate by place of residence and wealth quintile, sub-Saharan Africa	58

Boxes

Box 1: Economic growth and leaving no one behind	16
Box 2: SDG implementation and inequality in developed countries	18
Box 3: Efforts needed to eliminate ultra poverty	21
Box 4: The reality of being left behind	25
Box 5: What policies are already in place to leave no one behind?	32
Box 6: In the first 1,000 days – universal health coverage	34
Box 7: Universal health coverage – Mexico's experience of the first 1,000 days	35
Box 8: In the first 1,000 days – universal access to quality education	36
Box 9: In the first 1,000 days – social protection	38
Box 10: In the first 1,000 days – energy	39
Box 11: In the first 1,000 days – connectivity	39
Box 12: In the first 1,000 days – roads	40
Box 13: In the first 1,000 days – raising (and changing) public awareness	41
Box 14: In the first 1,000 days – access to labour markets and minimum wage	42
Box 15: In the first 1,000 days – women's land ownership	43
Box 16: Inequality in child mortality and education outcomes – some middle-income countries are	
failing to allocate enough funding to the poorest	47
Box 17: How much will it cost to deliver the health services, education and social protection needed	
to leave no one behind?	48

Acronyms

AIDS	Acquired Immune Deficiency Syndrome	MENA	Middle East and North Africa
CEE	Complementary Elementary Education	MGNREGA	Mahatma Gandhi National Rural Employment
EAP	East Asia and the Pacific		Guarantee Act
ECA	Europe and Central Asia	MIC	Middle-income country
GDP	Gross Domestic Product	NEET	Not in education, employment or training
HIC	High-income country	NGO	Non-governmental organisation
HIV	Human Immunodeficiency Virus	ODA	Official development assistance
ICT	Information and communication technology	PPP	Purchasing Power Parity
IGME	Inter-Agency Group for Child Mortality Estimation	SC/ST	Scheduled Tribe/Caste
IL0	International Labour Organization	SDG	Sustainable Development Goal
IMF	International Monetary Fund	SSA	Sub-Saharan Africa
IVR	Interactive voice response	UHC	Universal health care
LAC	Latin America and Caribbean	UMIC	Upper-middle-income country
LDC	Least-developed country	UN	United Nations
LGBT	Lesbian, gay, bisexual and transgender	UNESCO	UN Educational, Scientific and Cultural Organization
LIC	Low-income country	UNICEF	UN Children's Fund
LMIC	Lower-middle-income country	WHO	World Health Organization
MDG	Millennium Development Goal	WIDE	World Inequality Database on Education

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Executive summary



Key messages

- The Sustainable Development Goals (SDGs) will not be met if the poorest and most marginalised people continue to be left behind by progress. Efforts to ensure that no one is left behind are vital in the first 1,000 days – or three years – of the SDGs: the longer governments take to act, the harder it will be to deliver on their promises by 2030.
- If sub–Saharan Africa (SSA) is to eliminate ultra poverty, for example – that is people living on less than just \$1 a day (2011 PPP), an estimate of the minimum survival level – by 2030, its current progress needs to be nearly twice as fast, rising to over three times as fast if no action is taken in the next six years. If nothing happens until 2024 or 2027, the region will need to speed up progress by factors of 4.5 and nearly 8 respectively – a formidable task.
- There is clear alignment between the leave no one behind agenda and what marginalised people say they want from their governments: better services such as universal health coverage and rural electrification; greater public awareness, such as creating environments

where all girls are expected to go to school; and institutional and legal reform, including the extension of a minimum wage to informal workers, or the introduction of women's land rights.

- The total cost of leaving no one behind in health, education and social protection across the 75 countries for which we have data is an annual average of \$739 billion. Of these, the 30 low-income countries (LICs) will require an additional \$70 billion each year to meet these costs. In the case of the 45 middle-income countries (MICs), governments are generating enough public revenues to meet these costs: the challenge is their allocation.
- The benefits of leaving no one behind include solid returns. Evidence suggests an additional dollar invested in high-quality pre-schools delivers a return of anywhere between \$6 and \$17 (Engle et al., 2011). Recent research by the World Bank (Olinto et al., 2014) and the International Monetary Fund (IMF) (Dabla-Norris et al., 2015) suggests a pro-poor growth agenda helps to improve overall growth levels.

Recommendations

- By the end of the first 1,000 days of the SDGs (September 2018), governments should identify their marginalised populations, develop a leave no one behind strategy, and begin its implementation. This could be overseen by a cross-ministerial leave no one behind working group. A high-level summit should be convened in September 2018 to share learning, change direction if necessary and monitor progress.
- The first 1,000 days are just the beginning. They need to be followed by sustained action until 2030 to address the systemic barriers to the progress of marginalised people. Progress could be monitored by a series of 'stepping stone' targets, set every three to five years, aiming to ensure that any disparities in progress are narrowing fast enough to leave no one behind.

Introduction

Nelson Mandela once said: 'A nation should not be judged by how it treats its highest citizens, but its lowest ones' (Mandela, 1995).

Leaving no one behind is the moral issue of our age, and is at the heart of an ambitious blueprint for action: the SDGs. One specific goal is 'ending poverty, in all its forms, everywhere', but the SDGs also aim to tackle marginalisation and meet the needs of all groups. The SDG outcome document specifies that the goals should be met for all segments of society, with an endeavour to reach those furthest behind first (UN, 2015).

Now the focus is on implementation, particularly at the national level, and this report not only makes the case for early action, it also quantifies its benefits. The report outlines the actions that governments can take in the first 1,000 days of the SDGs to respond to what poor people want, to deliver for the most marginalised people and groups, and serve as the foundation for the achievement of the 2030 agenda. The evidence shows that achieving the SDGs, and the ambition to leave no one behind, will become far more difficult, the longer governments delay. The report concludes, therefore, that early action is critical for the achievement of the SDGs.

The case for early action

In the era of the Millennium Development Goals (MDGs), some countries did not start implementation in earnest until 10 years after the goals were adopted (Sarwar, 2015). We have also learned from bitter experience that delayed action on global warming has compounded the policy challenge. The world simply cannot afford delays that threaten the chances of achieving the SDGs.

Looking at the SDGs of greatest relevance to the leave no one behind agenda, and for which data are available, this report calculates the consequences of delay. The results show that the amount of effort needed for every three years of inaction will increase exponentially.

In Africa, for example, our analysis shows that countries will need to reduce preventable child deaths at a rate of 7% a year between 2015 and 2030 to meet the SDG target. If they wait until 2018 before taking action, that rate increases to 9%, and if they wait until 2027, they will have to reduce child mortality more than four times (32%) faster than they would if they start to take action today – an impossible task.

We see a similar story for education. Our calculations show that African countries need to reduce the number of children attending school for less than four years at a rate of 15% each year between 2015 and 2030 to eliminate education poverty. If action is delayed until 2021, the rate increases to 23% per year.

Goal and target	Region furthest behind	Annual rate of c	hange needed	in region furth	est behind by yea	r efforts begin
		2015 **	2018	2021	2024	2027
SDG 1: Ending poverty Target: National poverty	Sub-Saharan Africa	4.5%	5.6%	7.4%	10.9%	20.6%
SDG3: Health Target: Under-five mortality	Sub-Saharan Africa	7.5%	9.3%	12.1%	17.7%	32.2%
SDG 4: Education Target: Education poverty	Sub-Saharan Africa	14.8%	18.2%	23.5%	33.0%	55.2%
SDG 8: Decent work and economic growth Target: Youth not in employment, education or training	South Asia*	12.6%	15.6%	20.2%	28.7%	49.2%
SDG 16: Peace, justice and strong institutions Target: Birth registration	Sub-Saharan Africa	5.9%	7.4%	10.0%	15.4%	33.1%

Table 1: Annual rates of change needed in furthest behind regions, by year efforts begin, for different goal areas

* Data are only representative for South Asia and LAC for this indicator. Education poverty is not an SDG target but a prerequisite for meeting the education targets in an equitable way.

** Note that 2015 data are the latest data available.

Target	Region furthest behind	Annual rate of change needed in region furthest behind by year efforts begin				ear efforts begin
		2015	2018	2021	2024	2027
Ultra poverty	Sub-Saharan Africa	10.4%	12.9%	16.8%	24.1%	42.4%

Table 2: Annual rates of change needed to eliminate ultra poverty in the region furthest behind, by year efforts begin

At present, nearly 16% of the population of SSA live below the 'ultra poverty' line – that is, on less than just \$1 a day (in 2011 PPP) – and the region is the furthest behind on this indicator. If SSA is to eliminate ultra poverty by 2030, it needs a reduction of over 10% (compounded yearly), far in excess of the 5.4% average rate of reduction recorded for 2000-2015.

If no action is taken until 2018, rates of progress would need to be 2.5 times faster than they are at present. If nothing is done until 2021, that rises to over three times faster. If nothing happens until 2024 or 2027, this would need to become 4.5 and eight times faster respectively – a formidable task.

Putting the individuals, countries and regions that are furthest behind first, known as progressive universalism, is not only morally right: it can have concrete benefits. On child mortality, for example, Save the Children analysis of disaggregated data for 87 countries finds that, far from slowing progress, a focus on disadvantaged groups is associated with progress that is 6% faster over 10 years, on average (Roche et al., 2015). There is no trade-off here between equity and the efficiency needed to drive progress.

Who is being left behind?

Those who have previously been excluded or overlooked by progress must now be included. While the answer to the question 'who is being left behind?' is different in different countries, it implies groups that are marginalised and/or poor because of their identity, such as women, older people and disabled people. It also refers to the income poor. While these are marginalised groups, this is far from being a marginal issue: in many countries, most people live in poverty. In Madagascar, 82% of the population lives below the \$1.90 a day extreme poverty line, while in Nigeria that figure is 52%.¹

The leave no one behind principle is challenging because it requires action on entrenched discrimination that is, in many countries, the result of political choices that have benefited ruling parties, majorities and elites.

Early action is possible

Delivering results by September 2018 may seem implausible, but many countries – including fragile states

 have invested significantly in their most marginalised people. Many reforms have started to improve people's lives while building foundations for longer-term progress.

While implementation may take far longer than three years, and fragile states will be more limited in what they can achieve, early action is essential for the achievement of ambitious change. Policy responses will differ from one country to another, but our examples demonstrate the feasibility of early action if governments are committed to act and focus on delivering results for those left behind.

- Viet Nam: in 2010, the prime minister approved a scheme to improve education outcomes for ethnic minorities. By 2013, ethnic minorities represented over 16% of all children enrolled in pre-school education, more than the percentage of the ethnic minority population (14%) in the total population of Viet Nam (UNESCO and Ministry of Information, 2015).
- Ethiopia: the Productive Safety Net Programme, launched in 2005 and the largest programme of its kind in SSA, was reaching 7.5 million poor people by 2009 (Wiseman et al., 2010).
- Senegal: the Rural Electrification Senegal project targeted 191 villages in rural areas of the country, increasing the number of people with access to electricity from 17,000 in 2010 to 90,000 in 2012 (Peracod, 2012).
- Ecuador: in 2007, the Vice-President of Ecuador made disability a priority for his office; by 2010, a law had been passed stipulating that 4% of public and private employees should be people with disabilities. From 2007 to 2011, annual government spending on programmes for those with disabilities leapt from \$2 million to \$150 million (Otis, 2013).
- Eritrea: in 2007 the Government, in conjunction with UNICEF, launched a programme to ensure the children of nomadic herders often excluded from formal education because of seasonal migration patterns attend primary school. Within two years, more than 5,000 children age 9-14 were enrolled in 57 specialised learning centres.²
- India: the *Bharat Nirman* flagship rural infrastructure programme initiated by the Government of India from 2005 to 2009 aimed to connect every community with 1,000 or more people (500 or more in hilly, tribal and

¹ World Bank, PovcalNet, http://iresearch.worldbank.org/PovcalNet/

² Azmera D., 'Complementary education programme puts children back to school in Eritrea', http://www.unicef.org/infobycountry/eritrea_56989.html

Leaving no one behind in sub-Saharan Africa The longer we wait, the harder it gets

Annual change needed to **halve national poverty** by 2030 if governments start in:

2015	2018	2021	2024	2027	2030
4.5%	5.6%				
		7.4%	10.9%		
				20.6%	

Annual change needed to reduce under-five mortality to threshold of 25 preventable deaths per 1000 live births by 2030

7.5%				
	9.3%			
		12.1%		
			17.7%	
				32.2%

Annual change needed to reach **universal birth registration** by 2030

5.9%				
	7.4%			
		10%		
			15.4%	
				00 10/
				33.1%

Annual change needed to eliminate ultra poverty by 2030

10.4%				
	12.9%			
		16.8%		
			24.1%	
				42.4%

Annual change needed to **eliminate education poverty** by 2030

14.8%				
	18.2%			
		23.5%		
			33%	
				55.2%

desert areas) with all-weather roads. By 2009, over 70% of target communities were connected (Government of India, 2010).

• Nepal: the country's interim constitution provided a legal basis to the rights of minorities and introduced quotas for members of lower castes and women. In the Constituent Assembly formed just one year later, one-third of seats were held by women (Paz Arauco et al., 2014).

Responding to what poor and marginalised people want

Governments developing their SDG implementation plan would be wise to listen to what poor people say about their lives and priorities.

Quantitative data from the MY World survey and the World Values survey, combined with qualitative data from focus group discussions by ODI in marginalised communities in Ghana, Pakistan and South Africa, suggest that poor people want action in three priority areas:

- 1. services that are available and accessible when they need them
- 2. a society that respects them and does not discriminate against them
- 3. institutions and laws that enshrine their rights.

These priorities map neatly on to the policies and programmes that are, according to the evidence, among the most effective in lifting people out of exclusion and entrenched poverty.

An agenda for the first 1,000 days

The data show that early action makes it feasible to achieve the aspiration to leave no one behind, while delay puts it further out of reach. But governments and others still need to choose the actions that are likely to be most effective to achieve different objectives in different contexts. This report sets out a critical pathway to leave no one behind, focusing on the policies needed to allow the poorest and most marginalised people to make their own progress.

The pathway is built on the evidence of what marginalised people say they want; what works to allow people to lift themselves out of extreme vulnerability; where the main policy gaps are; and what policies offer the best value for money. We then map the elements of a policy agenda that countries of 'lower' progress and 'higher' progress can deliver in the first 1,000 days of the SDGs. We suggest a sequence for reforms for different stages of development, as we assume that countries that have made more progress in a given area will already have the policies and programmes suggested for the lower progress countries. The policy areas that emerge speak to the integrated agenda of the SDGs, including economic, social and environmental issues.

Many policies to leave no one behind will take more than 1,000 days to implement fully, and will require sustained investment through to the SDG deadline of 2030. However, countries can make an important 'down payment' by September 2018.

The private sector, NGOs, and academia will also be responsible for delivering leave no one behind. But this report focuses on action by governments, as the players technically accountable for SDG implementation.

What is needed to deliver the change?

Determining the critical pathway is only part of the answer: governments need the means to implement the policies they want to prioritise.

Data are crucial to both identify where the need is greatest and monitor implementation. The first step would be for governments to identify their marginalised populations by expanding the response samples for major surveys to reach people who have been missed, and by making better use of 'big data'. There must also be an environment that responds to, and acts upon, the data gathered.

Financing models need to ensure that money goes where it is needed. Delivering the SDG agenda will require more resources, both domestic (including those generated by effective taxation) and official development assistance (ODA). According to ODI calculations, the cost of ensuring no one is left behind in health, education and social protection across 75 countries for which we have data is an annual average of \$739 billion. Of these, 30 low-income countries (LICs) will require another \$70 billion annually to meet these costs. In the 45 middle-income countries (MICs), governments are generating enough public revenues to meet these costs, but are not allocating enough to these basic services.

Effective governance needs to ensure that financing and policies are implemented as planned, and the political prioritisation and full inclusion of marginalised groups. There has to be explicit recognition of the interlinkages between economic, social and environmental challenges, and an institutional set-up that does not make policy in siloes. Where governments are marginalising people deliberately, a normative shift is needed to reverse entrenched attitudes. It is here that the global nature of the SDGs is vital: the international scrutiny and pressure that they bring makes it harder for governments to neglect the needs of a sizeable share of their citizens.

Finally, action needs to continue beyond the first 1,000 days of the SDGs. Governments could set rolling 'stepping stone' targets every three-five years, to ensure that enough progress is being made on closing the gaps between outcomes for different groups across the SDGs (Watkins, 2013).

Leave no one behind: the critical pathway

Lower progress countries

Higher progress countries

Make health services free at the point of delivery

Improve the inclusion and quality of universal health coverage

quality of universal health coverage Develop an integrated social policy,

Significantly improve inclusion and

to realise synergies between health, education and social protection

Create ways to enable previously excluded children to attend school

Build the pre-school system, with financial support for the poorest children, and introduce targeted measures to increase hours and teacher-child ratios

Significantly improve quality of primary and secondary education, and opportunities for the poorest children to progress through the system

Implement social protection pilots for scale up to national systems Develop a social protection strategy



Develop a unified national social protection database to an efficient and well-targeted system

Pilot insurance instruments for poor and marginalised people for asset loss, death, weather-related crises and ill health, evaluate and promote through private sector provider

Set and publicise inclusive targets for grid- and renewable-based electricity coverage, internet connectivity and rural roads, aiming to ratchet these up over time



Implement targets on grid- and renewablebased electricity coverage, internet connectivity, and rural roads

Conduct public information campaigns to change opinions or reduce discrimination and exclusion

Assess, discuss and pilot the policies and programmes that are most effective for marginalised groups to access labour markets and entrepreneurial opportunities

Criminalise discrimination

Provide information on service provision, particularly for marginalised communities such as migrants

Ensure balanced representation in key institutions, e.g. army, civil service, parliament, judiciary



Draft legislation to enable women to own land and inherit assets, supported by training and information campaigns to ensure implementation

Expand the minimum wage to the informal sector, provide discriminationfree employment through public works programmes, and reduce barriers to employment for the female labour force

Implement employment targeting

🗭 Health U Education 🕢 Social protection

Connectivity

(a) Institutional and legal reform

Raising public awareness and changing norms

1. Introduction



Leaving no one behind is a fundamental tenet of the new Sustainable Development Goal (SDG) agenda, agreed in September 2015. Not only are there specific goals on 'ending poverty, in all its forms, everywhere', and 'reducing inequality', but tackling marginalisation and responding to the needs of all groups are front and centre. The SDG Declaration (UN, 2015) is very specific on the importance of meeting the needs of children, women and girls, people with disabilities, older people – and other groups - by the 2030 deadline.

The Declaration states that nobody's 'race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth, disability or other status' should bar them from achieving their potential and their fair share in progress. It also stresses the importance of everyone being able to live their lives in dignity (UN, 2015).

If this vision becomes a reality by 2030, as planned, it will course-correct the current trajectory of development, which has been one of extraordinary progress but deepening inequality. Today, millions more people enjoy economic security, and are able to make their own progress on, for example, the education of their children and keeping – rather than selling – their livestock when hit by medical expenses or other emergencies. In the main, however, it has been the relatively better-off – although still poor – who have benefited (Vandemoortele, 2009). The poorest and most marginalised have, in many cases, been left behind.

Too great a focus on average progress at national level has masked major disparities within countries: between urban and rural areas, men and women, and ethnic, language and caste groups (UN ESCAP, 2013), among others. Clearly, this has obscured their true trajectories, and the ways in which these groups intersect, such as the multiple disadvantages faced by, for example, a disabled woman in a rural area.

1.1 Leave no one behind: a 1,000-day agenda

When they take office, national politicians often set out their plans for their first 100 days. The SDGs are longerterm and more ambitious commitments, so this paper sets out a 1,000-day – or three year – pathway for action on their fundamental commitment to leave no one behind. Drawing on evidence of what works and, most importantly, the views of marginalised people themselves, the report sets out the policies and implementation approaches that could deliver on the leave no one behind commitment, and what is possible within the next three years. It shows the scale of the challenge, but also practical proposals to meet it, demonstrating that early action by governments is both vital and feasible. The world cannot drag its feet as it did in the pursuit of the Millennium Development Goals (MDGs): it was 10 years before some governments started serious implementation (Sarwar, 2015), and it is likely that more goals could have been achieved if they had started earlier.

Putting those who are lagging furthest behind first, known as progressive universalism, is not only morally right. It has clear benefits for countries as well as individuals. In the health sector, for example, Save the Children analysis of disaggregated data from 87 countries on child mortality reduction finds that, far from slowing progress, a focus on disadvantaged groups is associated with progress that is, on average, 6% faster over a decade (Roche et al., 2015). Those excluded from health services have the greatest concentrations of ill health in the population. In the short term, therefore, universal health care policies that fail to prioritise the reduction of inequities from the outset may exacerbate rather than resolve them (Brearley et al., 2013).

Obviously, it will take more than 15 years to tackle barriers such as prejudice that block progress for the poorest and most marginalised people, but that is no excuse for inaction. Indeed, it should spur immediate action, because important milestones can be achieved in as little as three years, as this report shows.

Rather than assuming fast change is impossible, the literature on complexity theory suggests that, in fact, change is rarely gradual and proportionate; rather, small changes can have a big impact on complex systems (Walby, 2007). Nor is it necessary to wait for societal transformation to be able to reduce marginalisation (Norton et al., 2014).

1.2 Structure of the report

We start by setting out who is being left behind. Then we explore why urgent action is so vital, with projections demonstrating that the scale of change needed gets bigger for every year that passes without concrete action. The projections also show that sub-Saharan Africa (SSA) needs far more attention than other regions. What's more, rural areas lag behind urban areas across the board, and the gaps in household assets between families in the wealthiest and poorest quintiles are, as we might expect, even more acute than rural-urban gaps.

We go on to focus on perhaps the most important spur for action: marginalised people want action from their governments. We set out what they say they need to escape from their vulnerability, putting their views at the heart of solutions to their own problems. We use sources as varied as representative survey data (the Gallup World Poll and the World Values Survey); a survey that is unrepresentative but has been completed by one person in every thousand worldwide (MY World); and focus groups held in Ghana, Pakistan and South Africa.

We then showcase potential solutions, drawing on what governments have already achieved, assessing the policies that are most efficient and effective at lifting people – and keeping them – out of extreme poverty and the trap of marginalisation. Naturally, this depends on context, and our analysis contains assumptions and generalisations, with a mix of policy interventions and systems-change.

Countries need to decide their own priorities for leaving no one behind, in line with their national context. But by grouping countries by their starting points – the broad categories of 'lower' and 'higher' progress on particular policies – we have been able to set out a small number of policy areas that, if addressed, have the best change of ensuring countries deliver on their SDG promises.

Finally, we look at the enabling environment – what needs to be in place to enable governments to implement reforms. It will require money. It will also require changes to the way that finance – public finance in particular – is allocated and delivered. Governments will be the main players in mobilising, allocating and delivering finance to meet the leave no one behind agenda, although there is a clear role for development partners and non-governmental organisations (NGOs). Finally, changes in institutions are also critical, alongside more and better data.

'A nation should not be judged by how it treats its highest citizens, but its lowest ones.' – Nelson Mandela, 1995

Box 1: Economic growth and leaving no one behind

Economic growth is fundamental to ensure that no one is left behind, giving poor people the chance to benefit from increased economic activity. It also generates resources to invest in poverty reduction and other programmes to tackle marginalisation.

Inequality has, however, stopped the poor enjoying the full benefits of higher economic growth across developing countries (UNCTAD, 2015; Lakner and Milanovic, 2013; Ostry et al., 2014; Hoy and Samman, 2015). The eradication of extreme poverty depends not just on econonic growth but also on its distribution, but in China and India, for example, extraordinary rates of poverty reduction have been accompanied by a worsening distribution of the benefits. Similarly, the 2013 Africa Progress Report noted that Africa's growth delivered only modest poverty reduction, partly because the benefits have been so heavily skewed towards the richest quintiles. In Zambia, for example, the richest 10% saw their share of consumption rise from 33% to 43% between 2000 and 2005 (Watkins, 2013).

Better distribution of resources could, therefore, help to accelerate poverty reduction. The question is how. In addition to the critical role of social transfers, it is vital that there is growth in the agriculture and informal sectors where most people work, as well as wider structural transformation of the workforce from lower to higher productivity jobs (Watkins, 2013).

As poverty falls, addressing distribution becomes even more important: research by the World Bank (Olinto et al., 2014) uses survey data from 1980-2010 to show that, as countries become less poor, policies to reduce inequality become more effective for poverty reduction than policies to promote further economic growth. Analysis by the International Monetary Fund (IMF) also suggests that a pro-poor growth agenda helps to improve overall growth levels (Dabla-Norris et al., 2015).

Laurence Chandy of the Brookings Institution has explored the impact of small distributional shifts on global levels of extreme poverty. The shifts involved an annual redistribution of 0.25% of income in favour of either the poorest 40% or the richest 10% by 2030. In the first case, poverty incidence falls to 3%; in the second it rises to 9% – a difference of 470 million people. Chandy notes that although China has driven global progress on poverty over the past 20 years, with its poverty rate down to single digits, the baton is being passed to India, which could deliver sustained progress on global poverty reduction over the next decade with even modest amounts of equitable growth (Chandy et al., 2013).

2. Who is being left behind?



2.1 Defining 'leave no one behind'

The SDG outcome document defines the term 'leave no one behind' within and among countries and population groups (UN, 2015). Within countries, it is about accelerating progress explicitly for the people with the worst development outcomes. Paragraph 4 says:

'As we embark on this great collective journey, we pledge that no one will be left behind... we wish to see the Goals and targets met for all nations and peoples and for all segments of society. And we will endeavour to reach the furthest behind first.'

The document is also clear that 'the left behind' refers to particular people whose identity – their membership of one or more groups – means that they face specific discrimination, and lack both voice and power: 'We emphasize the responsibilities of all State ... to respect, protect and promote human rights and fundamental freedoms for all, without distinction of any kind as to race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth, disability or other status.'

It does not define what 'other status' could mean (this depends on national context), but it is clear that many minorities and other groups are considered excluded. These groups may also face multi-dimensional poverty, in that they have deprivations in health and living standards.

The leave no one behind concept is, therefore, about whether a person's characteristics (inherent or perceived) exclude them from the opportunities enjoyed by others. These characteristics may fuel each other. A woman with disabilities who lives in a rural area, for example, may well suffer from intersecting forms of inequality. Importantly, one of the groups identified as being left behind in the SDGs is the income poor. In some countries they account for far more than half the population, including Liberia, Malawi, Mozambique, Nigeria, Rwanda and Zambia. In Madagascar, 82% of the population lives below the \$1.90 extreme poverty line, according to 2011 purchasing power parity (PPP).³ In other words, marginalised populations are not always a few people at the extreme margins of society: they may well be the majority of the population.

In this report, we refer to poor and marginalised (or excluded) people to capture the above concepts, while recognising that not all marginalised people are poor.

The leave no one behind concept also includes leaving no country behind. A detailed discussion of this is beyond the scope of this report (see Samman, 2015), but, as with the broader SDG agenda, leaving no one behind also applies to high-income countries (HICs) too (Box 2).

Box 2: SDG implementation and inequality in developed countries

Although this paper focuses on developing countries, leaving no one behind is also a challenge for wealthy countries. A 2015 evaluation of rich countries' status against the forthcoming SDG targets showed that HICs faced a growing gap between the rich and poor. The average income of the richest 10% of the population in OECD countries was around nine times that of the poorest 10%.

Some HICS are rising to the challenge. Canada, for example, will spend CAN\$271 million in 2016 to 'support culturally-relevant mental wellness programs and activities' such as awareness education and crisis response to combat the high suicide rate among indigenous youth. In the Netherlands, 43 central municipalities receive funds from national government to support local homeless people and to prevent homelessness under the provisions of the Social Support Act of 2007.

Source: Kroll (2015); Santhanam, (2016); Planije and Tuynman, (2013).

Putting the individuals, countries and regions that are furthest behind first, known as progressive universalism, is not only morally right: it can have concrete benefits.

³ World Bank, PovcalNet, http://iresearch.worldbank.org/PovcalNet/

3. The scale of the challenge, and why early action is so vital



The SDG agenda is ambitious. In particular, the scale of the leave no one behind challenge requires immediate action: the more time that passes, the harder it will be to reach the goals by 2030.

This section illustrates the size of the challenge for selected SDGs and targets of particular relevance to the leave no one behind agenda. First, we compute the rates of change needed to meet selected targets (or related indicators) for and within each region,⁴ and, to the extent that the data permit, how these changes compare with past performance (since 2000). This lets us assess which regions are likely to be on or off track for each target, and where they are off track, how much additional effort is needed. Then, for the region furthest behind for each target, we assess how delayed action will amplify the amount of effort needed in the time remaining. This analysis quantifies why it is imperative to take early action to ensure that no one is left behind.

First, we focus on indicators that reflect priority areas of this report – income poverty (SDG1), child mortality (SDG3) and education poverty, defined as less than four years of education⁵ (SDG4) – important in themselves and

4 The idea for this exercise comes from Maria Quattri. We are very grateful for her suggestion.

⁵ This is not the actual SDG target (which specifies that girls and boys complete free, equitable and quality primary and secondary education – target 4.1); but education poverty is critical for the leave no one behind agenda.

because they are linked to the fulfilment of other SDGs. To this, we add indicators on employment (SDG8) – the share of youth that are not in employment, education or training (so-called NEETs) – and on building inclusive institutions (SDG16), namely the need for universal birth registration. This exercise, which is illustrative rather than comprehensive,⁶ reveals that SSA is the region furthest behind for all indicators except the share of NEETs – for which data are insufficient to compute an African average or to assess past change. For this target, South Asia is furthest behind.

This means that for SSA, annual progress between 2015 and 2030 will need to be around 1.5 and 5 times higher than past rates of change, depending on the indicator. If that time frame is compressed, the consequences for the furthest behind region are alarming. If no action is taken for six years, yearly rates of change would need to be 2 to 5 percentage points higher than if action starts in 2015.

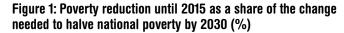
3.1 SDG1: No poverty

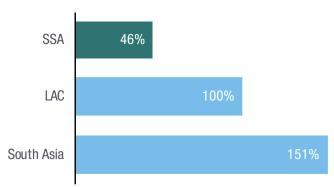
Target 1.2: By 2030, reduce at least by half the proportion of men, women and children of all ages living in poverty in all its dimensions according to national definitions.⁷

Current situation: One quarter of people in the developing world are poor according to national poverty lines. Data are representative across all regions, and indicate that the national poverty headcount ratio ranges from 14% of the people in East Asia and the Pacific (EAP), to nearly 1 in 3 people (28%) in South Asia to close to half (45%) of the people in SSA. Poverty rates are higher and the variation between countries is lower than under the \$1.90 poverty line – unsurprisingly, as national definitions ought to be aligned with a broad range of country realities – although Hoy (2016) notes that poverty lines in EAP are relatively low compared to those of other regions.

Effort needed to hit the 2030 target: Income poverty has fallen worldwide over the past three decades and present rates of change would be enough to halve national poverty ratios in every region except SSA,⁸ assuming income inequality does not worsen and poverty lines stay the same. In SSA, however, the available data suggest that the past rate of poverty reduction has been only half that needed to reach the 2030 target (Figure 1). While the \$1.90 a day poverty rate in SSA fell from 57% in 1990 to 43% in 2012, the number of poor people increased from 288 million to 389 million as a result of persistent high fertility (Beegle et al. 2015). In South Asia, the current rate is just enough to halve poverty – but poverty projections are very sensitive to growth forecasts because so many people in the region are clustered so close to the poverty line (Hoy and Samman, 2014).

On average, the rural-urban gap is 7.5 percentage points across the developing world, but it stretches to 22 points in SSA and 14 points in Middle East and North Africa (MENA).⁹ Almost a third of the people living in rural MENA and South Asia, and half of the rural population of SSA, are living under national poverty lines. While historic urban poverty reduction has been slightly higher than the national rate in SSA, it is still just 60% of what would be needed to meet the 2030 target. On the other hand, the rate of poverty reduction would have to more than double in the next 15 years in rural SSA to achieve this target. In South Asia, rural and urban areas are both on track, though rural areas have reduced their national poverty 2 points slower than urban areas.





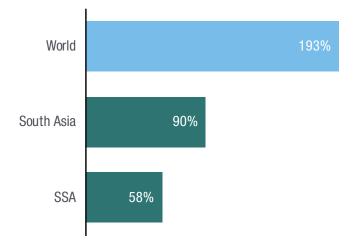
Note: The figure depicts annual progress since 2000 (data permitting) as a share of the annual progress needed to meet the 2030 target. Bars are green where past progress is insufficient to meet the target (i.e. past efforts are less than 100% of the effort needed).

- 6 A more comprehensive treatment is in Samman and Lynch (2016, forthcoming). See Technical Annex for more detail.
- 7 Data are from World Development Indicators (2015) excepting China, for which we use the same 2011 estimate as Hoy (2016).
- 8 There were not enough data to include the MENA or EAP region in this analysis.
- 9 Representative rural-urban data were not available for EAP, ECA and LAC.

Box 3: Efforts needed to eliminate ultra poverty

The first SDG target - which has received the most attention - aims to eliminate extreme income poverty as defined by the \$1.90 a day poverty line (in 2011 PPP) by 2030. We assessed the efforts that would be needed to eliminate poverty according to an even lower ultra poverty line of \$1.00 a day based on 2011 Purchasing Power Parity (PPP), to capture poverty approaching a minimum consumption floor.¹⁰ Globally just over 3% of people live on \$1.00 a day or less, but this ultra poverty measure is particularly relevant for SSA,¹¹ where nearly 16% of the population lives below it. To eliminate ultra poverty in SSA by 2030, a reduction of nearly 10.4% (compounded yearly) would be needed, nearly twice the 5.4% average rate of reduction recorded for 2000-2012. In fact, SSA's past progress amounts to just over half the progress needed by 2030 and improvements have been particularly slow over the past 15 years in the region's poorest and most populous countries.

Figure 2: Child mortality reduction until 2015 as a share of the change needed for its elimination by 2030 (%)



Note: The figure depicts annual progress since 2000 (data permitting) as a share of the annual progress needed to meet the 2030 target. Bars are green where past progress is insufficient to meet the target (i.e. past efforts are less than 100% of the effort needed).

3.2 SDG3: Good health and well-being

Target 3.2: By 2030, end preventable deaths of new-borns and children under five years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-five mortality to at least as low as 25 per 1,000 live births.¹²

Current situation: Globally, the child mortality ratio is 37 deaths per 1,000 live births. Latin America and the Caribbean (LAC), MENA and EAP have already exceeded the goal of 25 deaths per 1,000 live births, established as the level of preventable child deaths (IGME, 2015), as have the HICs. However, child mortality remains unacceptably high in South Asia (50 deaths per 1,000) and in SSA (80 deaths per 1,000), or two and three times the threshold level, respectively.

Effort needed to hit the 2030 target: Over the past 15 years, the global child mortality rate has fallen at a rate of 5.1% annually – in excess of the 2.6% annual reductions needed to reach the 2030 target. South Asia now needs a decrease of 4.6% annually, slightly above the region's 2000-2015 rate of 4%. But SSA needs to increase its rate of reduction from 4.3% to 7.5% each year – in other words, recent rates of reduction represent just over half (58%) of the effort needed (Figure 2).

On average in Europe and Central Asia (ECA), LAC, South Asia and SSA,¹³ the child mortality rate is 1.4 times higher in rural than in urban areas while the rate for the bottom wealth quintile is 2.4 times that of the top quintile. Reductions of 7.9% yearly are needed to meet the target in rural areas, compared with 5.5% in urban areas, and the respective figures for the bottom and top quintiles are 9.0% and 3.6% yearly.

3.3 SDG4: Quality education

Target 4.1: By 2030, ensure all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes.

We examine the share of people in education poverty:¹⁴ the share of 20-24 year olds with less than four years of education, which has been identified as the minimum needed for basic literacy (UNESCO, 2010). While this adjusted target will be a large underestimate of the actual effort needed to hit the 2030 target, it is crucial for meeting

- 10 Ravallion (2014) computed that \$0.67 (in 2005 PPP exchange rates) was the 'minimum consumption floor' experienced by the 'poorest stratum of society' one that has risen very little since the early 1980s, although mean consumption has risen. We recomputed this \$0.67 poverty line using the methodology described in Ravallion (2014) with updated data in 2011 PPP and reach a value of \$1.00 in 2011 PPP. Data are from World Bank's PovcalNet.org database.
- 11 The estimate of \$1.00 a day poverty is in excess of 3%, the threshold below which it is said to be eliminated.
- 12 Data are from WHO Health Equity Monitor.
- 13 Insufficient data are available to cover sub-national populations in EAP and MENA.
- 14 Data are from the UNESCO World Inequality Database on Education (WIDE).

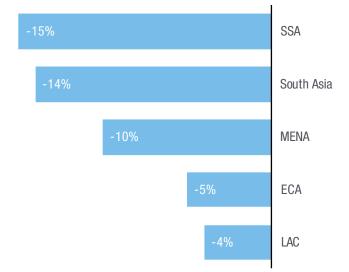


Figure 3: Annual rates of change needed in each region from 2015 to eliminate education poverty by 2030 (%)

the target equitably, given its emphasis on the situation of those with the least education.

Current situation: In the developing world, around one in six people (16%) are education-poor. Education poverty is no longer an issue in EAP but remains pertinent in the MENA, where nearly 1 in 5 people are in this situation, in South Asia (1 in 3) and in SSA (fully one-third).

Effort needed to hit the 2030 target: Significant efforts will be needed to 'get to zero' on education poverty in every developing region but EAP (Figure 3). In the developing world, reductions of the number of people living in education poverty of 11% each year will be needed from 2015, rising to 14-15% each year in South Asia and in SSA. The available data suggest that efforts over the past 15 years in SSA are just 22% of what would be needed to achieve this target by 2030. There are insufficient data available to assess how these rates compare with historical patterns of reduction in other regions.

On average, education poverty is 12 percentage points higher in rural than in urban areas, while the gap between the bottom and top wealth quintiles is 16 percentage points. Education poverty rates are 7 percentage points higher among young women than young men on average in the developing world and the gap is 12-15 percentage points in MENA, South Asia and SSA. In South Asia, where the gap is largest, reductions of nearly 15% yearly for women are needed to eliminate education poverty versus 12% for men.

3.4 SDG8: Decent employment

Target 8.6: By 2020, substantially reduce the proportion of youth not in employment, education or training (NEETs).¹⁵

Current situation: Data are available at a regional level only for LAC and South Asia. They suggest that 21% and 25% of the youth population, respectively, are NEETs.

Effort needed to hit the 2030 target: Reductions of 12-13% annually are needed to 'get to zero' on this indicator. Data are not available to assess how this compares with past rates of reduction.

The share of NEETs in LAC and South Asia is 14 and 4 percentage points higher in rural than urban areas – meaning that rural reductions of 15% and 13% each year, respectively, would be needed to eliminate the phenomenon.

3.5 SDG16: Peace, justice and strong institutions

Target 16.9: By 2030, provide legal identity for all, including birth registration.¹⁶ This is a vital goal for the leave no one behind agenda as it will provide data that is critical for policy implementation (see Section 4).

Current situation: Globally, just under three quarters of children under the age of five (72%) were registered at birth. In ECA, LAC and MENA, the share was 90% or higher, while in South Asia it was 72% and in SSA, just 42%. Data are not representative of EAP.

Effort needed to hit the 2030 target: On average, birth registrations would need to increase 2.2% each year worldwide through 2030 to meet the SDG target. In fact, the available data suggests they have risen about 8% yearly since 2000, well in excess of what is needed. This holds true for all regions except SSA, where growth of 6% yearly is needed to meet the target but recent increases have been in the order of 4% (Figure 4).

Around one-third of children have their births registered in rural South Asia and SSA compared with over half of urban children in these regions. Gaps between the top and bottom wealth quintile are more acute still – 35 percentage points or more in both South Asia and SSA. The gap between quintiles is so large in South Asia that increases for the top wealth quintile would need to be 3.6% yearly versus 11.1% for the bottom wealth quintile.

¹⁵ Data are from World Development Indicators (2015).

¹⁶ Data from UNICEF (2015) refer to the percentage of children under the age of five who were registered at the time of the survey.

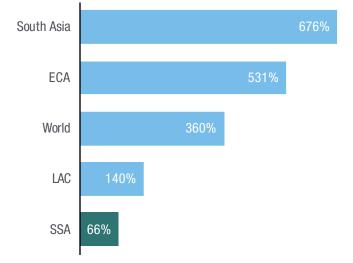


Figure 4: Changes in birth registrations until 2015 as a share of the increase needed by 2030 (%)

Note: The figure depicts annual progress since 2000 (data permitting) as a share of the annual progress needed to meet the 2030 target. Bars are green where past progress is insufficient to meet the target (i.e. past efforts are less than 100% of the effort needed). MENA is not included because birth registrations, although very high, have fallen recently, by -.4% yearly) so past efforts will include a reversal of trend.

3.6 The need to act now

Each three-year delay would have serious consequences: the amount of effort needed each year will increase exponentially for every year that passes before action is taken (Table 3). For example, if efforts to tackle ultra poverty in SSA began in 2015, yearly progress would need to be nearly twice as high as the progress seen between 2000 and 2015 to meet the 2030 target. If delayed six years, however, that progress would need to be 3 times higher. Similarly, if efforts to tackle education poverty in SSA began in 2015, yearly reductions of 15% annually would be needed for its elimination by 2030; if no action were taken for six years, it would then require reductions of 23% each year. And all these scenarios assume that progress is 'sticky' – i.e., that countries do not slip back.

This common-sense exercise shows how relatively small amounts of early change can build on each other to reduce deprivations significantly. For example, if efforts to achieve full birth registration do not start until 2021, annual increases in SSA would need to be over 4 percentage points higher each year through 2030 than if they started in 2014. On under-five mortality: if efforts in SSA stall until 2021, annual reductions would need to be over 10 percentage points higher. In short, early action is key to realising the vision of leaving no one behind.

Target	Region furthest behind	Annual rate of change needed in region furthest behind by year efforts begin					
		2015	2018	2021	2024	2027	
Ultra poverty	Sub-Saharan Africa	10.4%	12.9%	16.8%	24.1%	42.4%	
National poverty	Sub-Saharan Africa	4.5%	5.6%	7.4%	10.9%	20.6%	
Under-five mortality	Sub-Saharan Africa	7.5%	9.3%	12.1%	17.7%	32.2%	
Education poverty	Sub-Saharan Africa	14.8%	18.2%	23.5%	33.0%	55.2%	
Youth not in employment, education or training	South Asia ⁱ	12.6%	15.6%	20.2%	28.7%	49.2%	
Birth registration	Sub-Saharan Africa	5.9%	7.4%	10.0%	15.4%	33.1%	

Table 3: Annual rates of change needed in the region furthest behind, by year efforts begin

i. Data are only representative for South Asia and LAC for this indicator.

The world simply cannot afford delays that threaten the chances of achieving the SDGs.

4. What do people who have been left behind want?



Having set out the scale of the challenge, this report now looks at what marginalised people themselves want from their governments. It identifies priorities in three areas: key services; living in dignity without discrimination and shame; and institutional and legal reform. In reality, these categories are interlinked: in urban Pakistan, for example, focus group participants stressed the need for legal registration in the form of a national identify card. As well as seeing this as an end in itself, they wanted this card to access services and to curtail the discrimination to which they are subject.

Asking people themselves what they want for their own lives is an extraordinarily underperformed exercise. Arguably, the last large-scale attempts to do so in detail were carried out at the turn of the millennium and in 2009.¹⁷ The 2000 World Bank Study Voices of the Poor gathered the experiences of more than 60,000 poor people in rural areas of 15 countries. It found that people were more focused on assets than incomes, and that they prioritised employment, transport and water (Narayan and Patel, 2000).¹⁸

Moving out of Poverty (Narayan et al., 2009) was a large-scale comparative research effort focused on mobility out of poverty rather than on poverty alone. People who had moved out of poverty cited new jobs, new agricultural initiatives and new businesses. The study therefore suggested three priorities for the reduction of extreme poverty: expanding the scope for people in poverty to use their own agency; transforming markets to ensure that poor people can access and participate in them fairly;

17 Although there are plentiful qualitative studies carried out in various countries

¹⁸ See http://go.worldbank.org/H1N8746X10

and enabling the development of well-functioning local democracies that can help people move out of poverty.¹⁹

More recently, more than one person in every thousand, or more than 9.7 million people worldwide, have completed the MY World survey.²⁰ This asks respondents one simple question:²¹ which six out of 16 development priorities are most important to you and your family? Nearly 90% responses were collected via pen and paper – meaning that the survey reached a wide range of respondents, 35% of whom had only primary education or less. It was designed to be as open as possible to encourage responses; as a result, it does not use a rigorous sampling methodology and is not intended to be globally representative. But its demographic data on respondents – age, gender and education level – can be used to disaggregate population sub-groups.

This section combines quantitative data from the MY World survey, the World Values Survey, and the Gallup World Poll²² with qualitative data from a set of focus group discussions carried out by ODI in marginalised communities in Ghana, Pakistan and South Africa (Box 4).

Box 4: The reality of being left behind

This box highlights key deprivations cited by people in three focus groups carried out by ODI in rural and urban communities with high percentages of marginalised populations in Ghana, Pakistan and South Africa.

The remote village of Kontant in South Africa is populated mostly by older people caring for grandchildren while their children have migrated elsewhere for work. Kontant has no school, water supply or local health clinic. People must pay for transport or buy fuel whenever they need to see a doctor. There are no roads in the village, so they have to walk 15-20 minutes to the main road for public transport. The crèche has now closed and there are no local NGOs. When people run out of money they ask neighbours for a loan.

In Pakistan, people in the village of Basti Allah Wali, alongside the River Indus, have no gas and infrequent electricity and have had to rebuild since the 2010 floods. However, both men and the women were more worried about impending eviction. This will not be the first time: the government relocated them in 2005 and they are afraid the same thing will happen again. The villagers have not been told where they will be sent or how much compensation they will receive. They stressed their relationship with – and dependence on – the river:

'Wherever they resettle us, are they going to be able to give me this tree that's been growing here for year? Will they give me access to the water from the river? We are fisher folk, how are we going to survive away from the river? What amount of money will compensate this loss?' (female basket weaver)

In urban Pakistan another kind of exclusion emerged. Although migrants from Machar in Bangladesh have been settled in Karachi for around 50 years, none of the women has a national identity card. Some men now have their card, but often have to pay exorbitant amounts of money for this privilege to the local national registration office.

In Ghana, Dagomba communities were interviewed in rural and urban Tamale. The Dagomba are one of the main ethnic groups in the Northern region, which had the third highest poverty headcount in Ghana in 2015 (50.4%) and ranked fourth in terms of inequality (GSS, 2015). The urban area, Gbanyamni, has recently gained electricity but has no sanitation system or secondary school. Rural Sakpalua has no electricity, water or access to roads and is a 2.5 hour drive from Tamale. Tamale's urban community, meanwhile, is a melting pot of migrants from villages across northern Ghana. In its rural outskirts, bad roads mean that people cannot access markets with ease and traders have little incentive to reach them.

The more recent interaction female community members from Sakpalua had with the Government was about four years ago, when officials came to ask them for information to make national health insurance cards. They got cards for their children but not for themselves, either because they could not afford them or because they preferred to use local clinics or homeopathy.

However, they added that they did not rely on the government to meet all their needs: instead, they felt the community should be able to take care of most things themselves: 'we the people are the government, we in this village', said one man.

¹⁹ China, Ethiopia and Viet Nam have proven to be exceptions to this latter point.

²⁰ See http://vote.myworld2015.org/

²¹ It is available online in the six UN official languages, through mobile phones using SMS and toll-free phone using interactive voice response (IVR) and via offline surveys based on paper and pencil conducted by grassroots organisations, faith-based communities, youth groups, private sector bodies and NGO partners.

²² The Gallup World Poll includes nationally representative surveys that gather data on people's opinions from across the world.

4.1 Priority 1: Government spending on key services

The vast majority of respondents to the MY World survey agreed on their top priority: having a good education, selected by seven out of 10 respondents.

Tellingly, this was also the top priority for respondents from one marginalised group – people aged 15 years and above in low-income countries (LICs) who have not completed primary schooling.²³ In other words, the relatively better-off and the poor had similar priorities.

However, education-poor respondents – particularly women in LICs – were more likely than the average to prioritise infrastructure – better roads and transport, phone and internet access and reliable energy at home – and this holds true across all country income groups (Figure 5). Equally, a higher share of those people likely to have been left behind by past progress – identified as the education-poor – prioritised **support for people who cannot work**. While this is not one of the top priorities overall or within this sub-population, it was more likely to be selected by education-poor people than the average across all country income groups (Figure 6).

This finding that provision of services was a key priority tallies with our focus group discussions. In Kontant, South Africa, male participants prioritised government provision of fencing for grazing for their cattle and provision of water. Other priorities included roads and employment for young people. Women, however, prioritised water, followed by a local health centre with regular opening hours.

Women and men in the focus groups in rural Ghana all said that the most important thing the government could

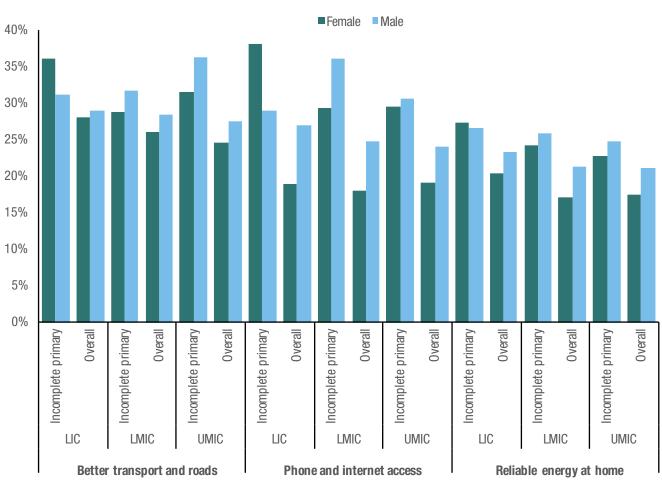


Figure 5: Share of MY World respondents by education and gender (%)

Source: MY World survey.

23 The MY World survey uses education level as a proxy for income/wealth.

do was **build roads**. Their access to the main hospital – where the national insurance cards are valid – is limited by roads of very poor quality:

'They [health workers] have taken pictures of children long ago but have not come back to give us the insurance cards because we are too far for them to come. There is no direct road to us.' (woman)

The male focus group in rural Ghana prioritised services overall, stressing the need for roads followed by electricity and then a local health centre.

4.2 Priority 2: Living in dignity without discrimination and shame

Our focus group participants in urban Pakistan, both men and women, experience discrimination and recognise that it pervades all aspects of their lives. The women rarely leave the community because they have 'little desire to in the face of discrimination'. One participant in the women's focus group in urban Pakistan spoke of always going to government offices in groups because of the verbal harassment her community endured. When asked what their biggest priority was from the government, the same woman spoke up:

'Can you just ask them why they hate us so much? We migrated so many years ago as did most of the people who live in this city. Why are we singled out? What have we done to the government that everything is a hassle for us, that our men are arrested for no reason every now and then, that we have to pay three times as much for our electricity which is officially installed and that they can never tell us why our bills are always so much higher when that's not the case for the people living next to our community who have fridges and air conditioners that we don't. What is it about being ethnically Bengali that is such a problem for everyone in this country?'

They felt that identity cards might help to counter that discrimination and help them access the labour market without the shame or humiliation that they currently face in their efforts to attain economic independence:

'You go up to them and you say you need an ID and you have proof and it's like they can read on your forehead that you are ethnically Bengali and start with a list of demands that the person in the queue in front of you didn't get and the person behind you is not going to get. So what if I'm Bengali, I live here don't I? I have married here, have kids here and they will get married here and have kids here... what more do they need?' (man)

'Do you know we need cards to work as fishermen? I mean we are next to the sea, we live here. I need a licence to take my boat out and for my licence I need to pay so much money to get my ID card. I don't even know if I would ever be able to work in a factory, who would employ you if you don't have a card?' (fisherman)

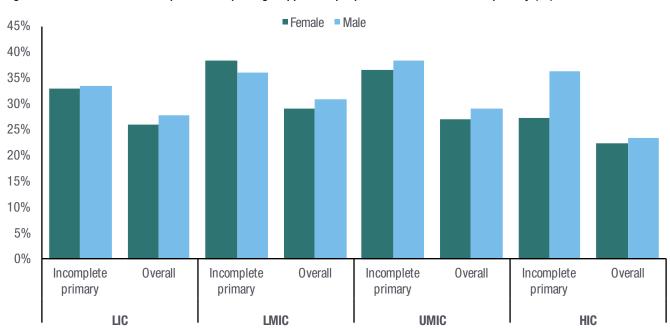


Figure 6: Share of MY World respondents reporting 'support for people that cannot work' as a priority (%)

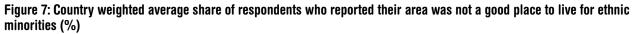
Source: MY World survey.

Significantly, testimonies for Voices of the Poor demonstrate people's attempts to avoid the humiliation and shame of being labelled as poor, because poverty is often associated with laziness, incompetence and criminality.

While both men and women in Gbanyamni, in urban Ghana, noted the importance of obtaining government subsidised health insurance for their children, they seemed reluctant to subscribe to it for their own health needs. Discussion seemed to indicate there was significant stigma associated with free health care at the point of delivery:

'You get treated worse at the hospital if you come in with the insurance card. They make you wait longer for an appointment and it is obvious and I would rather just go to a homeopath or somebody close by if it isn't that serious' (man in his thirties) When asked, many people even denied they were poor, describing themselves with terms such as 'in the middle,' 'close to poor' or 'underprivileged' (Narayan and Patel, 2000). Feelings of self-worth were often linked to upholding social norms such as being able to entertain guests, taking gifts to social occasions and providing large and extravagant weddings for family members. More recent research found that shame was widely associated with poverty in settings as diverse as China, Norway and Uganda (Walker et al., 2013).

Quantitative survey results also bring out the issue of discrimination. The Gallup World Poll, which conducts representative surveys in 120 countries, representing about 69% of the global population, asked respondents if where they lived was a good place for ethnic minorities. Across regions with representative data²⁴ a considerable share of respondents said it was not, peaking at more than 30% among the poorest quintile in SSA (Figure 7).





Source: Gallup World Poll (2010-2014)

4.3 Priority 3: Institutional and legal reform

In the Gallup World Poll, respondents across 73 countries were asked whether they agree or disagree with the statement that women and men should have equal legal rights. In all but one, Somaliland, most people agree with this statement – more than 8 out of 10 on average (and nearly as many across the bottom income quintile). These data are representative of MENA, South Asia and SSA, where the average across countries is at least 77% (and 74% or higher for the bottom income quintile). There is clear and overwhelming agreement with this statement among the income poor.

According to the same poll, nearly all respondents across 30 SSA countries (just over 9 in 10, on average) said that individual land rights should be strengthened. The share of respondents in the lowest income quintile who held this view was nearly the same as the average in most countries, and ranged from 82% in Congo (Kinshasa) to 99% in Malawi.

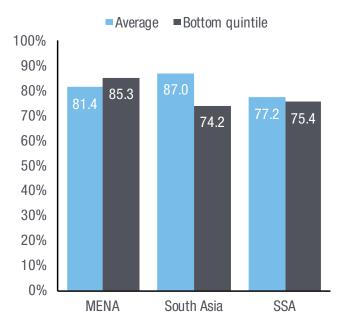
24 We consider the data to be representative of a region if they include countries accounting for at least two-thirds of the region's population – this applied to all world regions except EAP and MENA.

Although in some countries legal rights that promote equality exist on paper, there are significant barriers to poor people, particularly women, in ensuring their implementation. For instance in Tanzania, despite having the right to marital property after a divorce, most women avoid legal action (Narayan et al., 1999).

At a micro level, our focus group data from Pakistan reflected the importance of government action on land rights, as participants live under constant threat of eviction:

'In 2005 they came for us with bulldozers, they made an announcement and said you need to leave the house otherwise we will have to start the operation. There were a few who did not want to leave so kept standing but the bulldozer flattened their houses, everything in the house, cooking pot, pallets, everything was flattened. It used to be our village and then it was just rubble.' (fisherwoman)

Figure 8: Perceptions that it is very important women should have the same rights as men (%)



Source: Gallup World Poll (2009-2010)

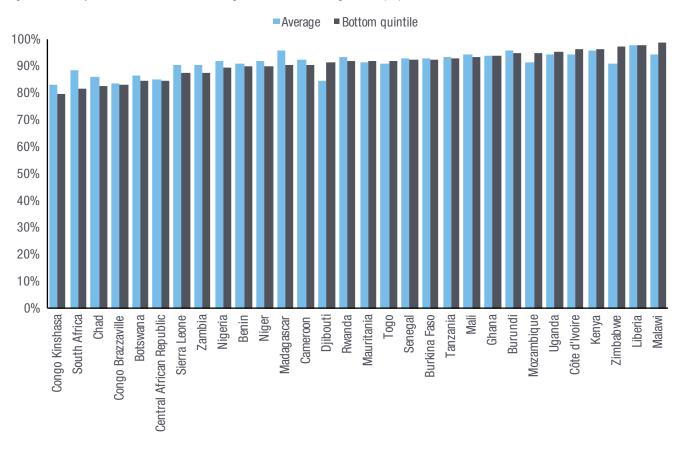


Figure 9: Perceptions that individual land rights should be strengthened (%)

Source: Gallup World Poll (2006-2010)

5. A critical pathway to leaving no one behind: early policies



This section sets out a theory of change for leaving no one behind, then suggests a pathway for the policies that we believe are the most likely to improve the lives of marginalised people.

5.1 A theory of change for leaving no one behind

In general, the policy making process includes many steps, from the idea that this issue matters and that action is needed; to mobilising political and public awareness and action; to legislation; and finally to impact (Stachowiak, 2013). Based on our analysis of case studies, 1,000 days is long enough to progress from idea to legislation or from legislation to implementation and impact, but rarely both. An ODI review of countries²⁵ that have made significant progress in addressing intersecting inequalities reveals five key factors:

- social movements that demand changes in the 'rules of the game'
- · political trajectories that allow such changes
- processes of constitutional reform that allow such changes
- greater political participation
- policies and programmes that are committed to reducing intersecting inequalities over time, such as social guarantees and affirmative action (Paz Arauco et al., 2014)

When talking about institutional reform in the context of his African Governance Initiative, former UK Prime

25 Country examples include Bolivia, Brazil, Ecuador, Ethiopia, India, Nepal and Pakistan (for more details see Paz Arauco et al., 2014).

Minister Tony Blair highlights the dangers of embarking on sweeping, long-term public service reform programmes that try to transform the performance of the whole system:

'The risk of this approach is that while it holds out the promise of sustainability, it is an illusion, because these programmes struggle to generate the momentum they need to overcome inertia and opposition... One big lesson from my time in office, and the work I have done since in Sierra Leone, Rwanda and Liberia, is that the best way to build effective institutions is to focus on a small number of priority projects, and drive the system to deliver these in a way that both ensures that they get done and strengthens its capacity to take on other projects in future.' (Blair, 2010)

Our step-by-step approach also tallies with lessons learnt from ODI's Budget Strengthening Initiative, which operates in some of the world's most fragile states, such as South Sudan and Democratic Republic of Congo. It has found that small steps are often preferable to giant leaps – and can generate important change (Williamson, 2015).

Finally, this approach is in line with complexity theory, which recognises that we cannot accurately predict the future, and policies may have unforeseen outcomes, but it is possible to make choices about where to focus. Policies and strategies should be regarded as experiments, and policy-makers should harvest the lessons learned so that they can adapt and modify their approaches (Boulton, 2010).

Of course, it will not be possible to complete an entire policy process from start to finish in three years so that policy implementation can begin. Some countries, particularly those that have made higher progress to date, will already have some or all of the key factors in place. Meanwhile, there are interventions and policies already in place (Box 5, overleaf) that can make an impact and trigger transformative change, and efforts to address intersecting inequalities need not wait for the complete transformation of entire societies (Norton et al., 2014).

The SDG outcome document implies a theory of change: governments set their own national level targets, and these include specific targets to focus on the needs of marginalised people. Like the rest of the SDG agenda, leaving no one behind is not a legally binding commitment, but it is expected that civil society groups will put public pressure on governments to fulfil their SDG commitments, and there will be national, regional and global monitoring.

Social accountability strategies such as public complaint and grievance mechanisms can help citizens voice their concerns and hold the government to account. However they must be designed so that people can use them and, of course, governments must be willing to listen and make changes accordingly. The role of power in politics needs to be acknowledged and incorporated into monitoring and evaluation systems if governments are to take account of the voices of poor and marginalised (McGee and Gaventa, 2011) (see discussion on institutions below). Political accountability is equally important – that is, voting (Khemani et al., 2016).

5.2 Agency for marginalised people

As well as needing better policies, marginalised groups such as women should be empowered to achieve their own independent transformative social and political change. Given that there is no automatic link between such transformative change and the presence of women in positions of leadership, there is a clear need for their greater access to power and resources. Examples of such movements include the Self-Employed Women's Association - a successful model of organising and empowering large numbers of women working in the informal sector. It incorporates features of a trade union with a workers' cooperative, aiming to secure workers' rights, gain proactive state support and provide needsbased services to members, as well as providing leadership and embedding democratic management structures and new legal forms of organisation to respond to the needs of poor people (Saini, 2007 in Domingo et al., 2015). Enabling marginalised groups to build such independent and self-governing coalitions is crucial for making their voices heard, as governments and their policies often fail to target these groups adequately from the outset (Samman et al., 2016).

5.3 Governments that choose to marginalise

It will be hard to change the entrenched attitudes and actions of governments that are marginalising people deliberately: it will require a normative shift. This is where the global nature of the SDGs is vital: their international scrutiny and pressure will make it harder for governments to neglect the needs of significant proportions of their citizens.

5.4 Setting out the critical pathway

In this section, we discuss the three clusters of policy areas that evidence suggests are most effective in leaving no one behind and that tally with the priorities of marginalised people set out in Section 2:

- key services
- raising public awareness, including anti-discrimination policies and public information campaigns
- institutional and legal reform.

The SDGs have a 15-year timeframe, so it is appropriate that the issues being tackled are the most difficult: alleviating the poverty and exclusion that have been entrenched for generations, as well as significant sustainability challenges.

Box 5: What policies are already in place to leave no one behind?

National development plans are important indicators of government priorities, setting benchmarks against which progress can be measured. In an illustrative sample of 39 low- and middle-income countries,²⁶ all recognised some groups as marginalised. This is a significant finding, as it is generally assumed that, for many governments, their least advantaged citizens are their least important constituency.

Common populations recognised as 'vulnerable' or 'marginalised' are, in order of frequency of reference, the rural poor (97% of countries), women (95%), children (92%), the elderly (82%), those with disabilities (79%), the poorest in terms of income (69%), people living with HIV/AIDS (67%), ethnic minorities and/or indigenous people (56%) and refugees (21%). Just 15% of countries recognised lesbian, gay, bisexual and transgender (LGBT) individuals as vulnerable, reflecting stigma and religious pressure against state support for these populations (Figure 10).

In some cases, countries have moved beyond the identification of vulnerable groups towards the identification of policies to reduce their marginalisation. For example, of the 39 countries that highlighted women as vulnerable, an impressive 90% go further to discuss strategies to overcome marginalisation. The most common commitments are to strategies to increase employment (57%), followed by those to increase the presence of women in decision-making (43%) in local communities, businesses and political structures.

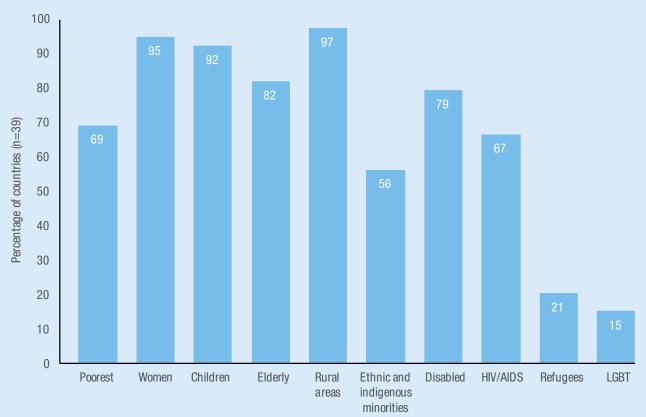
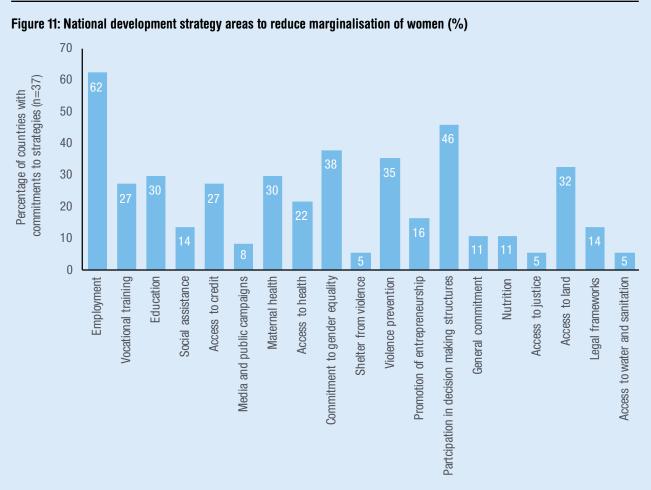




Figure 11 shows sectors where governments aim to improve the role of women. Most national planning documents, however, focus on one strategy area without referring to related sectors. For example, female employment requires child care, but planning departments that emphasise increasing female employment do not recognise the implications of lack of child care on the time of women.

²⁶ The low- and middle-income countries were identified to reflect a majority of the world's population and the selection constitutes over 65% of the world's population (as of 2010). The balance between geographic regions, income levels and poverty vulnerability status was also a consideration.



Surprisingly little attention is given to approaches that aim to change underlying sociocultural norms that subjugate women, such as the use of media and public campaigns that work with both men and women to increase awareness and demand for protection and justice (Raab and Rocha, 2011). In fact, among the interventions mentioned, the lowest profile is given to the provision of justice for women (5%) and ensuring their shelter from violence (5%).

Source: List of 39 countries available in Annex 2.

The evidence of what some countries have achieved in three years, explored in this section, shows that change is possible in such a short period of time. While full implementation of these reforms will take far longer than three years, the vital foundations can be laid in the first 1,000 days of the SDGs.

It is self-evident that a policy in a fragile state cannot achieve the same outcomes in as a policy in a MIC that has already made strong progress on poverty reduction. Therefore, we look at the loose categories of 'lower' progress and 'higher' progress countries, which allows the discussion of progress in relation to the specific policy area.

Our selection of possible priorities was driven by the following criteria:

- what marginalised people say they want
- policies that have been proven to be effective in tackling poverty and discrimination
- measures that have benefits across many goals
- first steps towards critical measures that have long-term impact
- policies that provide good value for money
- current policy gaps.²⁷

This is an illustrative exercise only: countries need to select their own priorities. Whether or not our proposed early actions are achievable will be determined by the specific political-economy context and by unpredictable shocks, such as the recent Ebola crisis. Of course,

²⁷ Based on the Poverty Eradication Policy Preparedness Index of the Chronic Poverty Advisory Network. The index is constructed from a basic analysis of policies, their implementation and whether they are evaluated in 26 of the 31 countries with 5 million or more extreme-poor people in 2011 (which includes over 90% of the world's extreme poor) (Shepherd and Bajwa, 2016).

immediate action is most likely in areas that already align with existing national development plans and priorities (Hinds, 2016).

5.5 Key services Universal health coverage (Box 6)

Every year, 100 million people are pushed into poverty by catastrophic health payments – that is, when families need to spend more than 30% of household income on health costs (Xu et al., 2007). Removing charges for health services, so they are free at point of delivery, is crucial to lowering barriers to access. Yates (2009) found that user fees exacerbated inequality, as poor people were the most affected, had less access to services and made the least use of exemption systems.

Around one billion people do not receive the health care they need each year (WHO, in Brearley et al., 2013). Those left behind are not a random group: health outcomes and access to services are skewed by wealth, education, urban/ rural location, gender, ethnicity and age (O'Neil and Piron, 2003).²⁸

Box 6: In the first 1,000 days – universal health coverage

The first steps on the critical pathway towards UHC will to be to launch health care reforms that provide universal free services, targeting the health needs of the most excluded.

Lower progress countries may be able to:

- reform funding mechanisms for health services, so they can be free at the point of delivery, including introducing or expanding targeted allowances to reduce costs of attending treatment
- deliver significant improvements, inclusion and quality of UHC, such as ensuring women have access to regular consultations during pregnancy and a trained, equipped midwife for all births.

For example: in April 2010, Sierra Leone introduced free health care for children under five and pregnant and lactating mothers. Planning for this started just six months earlier, with the launch of a strategy to guide the policy (Scharff, 2012). Key elements of the process were an audit of the health-worker payroll, which removed at least 850 ghost workers, hikes in health worker salaries and the recruitment of the extra 5,800 health workers needed to staff facilities. International donors provided most of the necessary funding – especially the UK Government, the World Health Organization (WHO), the Global Fund and the GAVI Alliance (Scharff, 2012) – although government health spending also increased to support the policy (Rodríguez Pose and Rabinowitz, 2014).

In May 2006, Burundi removed health user fees for pregnant women and children overnight.²⁹ Human Rights Watch claimed that Burundi's hospitals were, in effect, debtor prisons (Kippenberg, 2006). The President responded with a decree: immediately (and without any prior planning), there would be free health care for pregnant women and children. The result was a huge surge in demand, to which the World Bank responded by putting performance-based financing in place (WHO, 2013).

Higher progress countries may be able to:

• develop an integrated social policy, to realise the synergies between health, education and social protection.

Robert Yates, Project Director of the Centre on Global Health Security at Chatham House, says:

'This is actually really easy to do in three years. You start with a health needs assessment. The data is appalling but the main indicator you need to think about is: are poor people using health services, and if not, why not? Financial barriers are likely to be a problem, so one immediate policy reform should be to remove user fees. The focus should be on providing everything for free, and all medicines used should be generics – this should be publicly financed from the budget. Simultaneously, one should also increase the number of front-line health workers at the district level.' ³⁰

²⁸ Kelsall et al. (2016) highlight that progress towards universal health coverage (UHC) is typically stronger in 'dominant' political settlements – that is, where leaders or parties have consolidated their grip on power – and where policy strategies are aligned with the type of settlement. This is likely to mean that different countries will take incremental steps towards UHC, depending on a variety of sociopolitical factors. As a result, they may or may not achieve full UHC.

²⁹ It should be noted that these policies, as with others referenced in this paper, have not always been fully implemented, or without problems. See Nimpagaritse and Bertone (2011) on the difficulties caused by the suddenness of the announcement in Burundi, for example.

³⁰ Source: authors' interview with Robert Yates.

Box 7: Universal health coverage - Mexico's experience of the first 1,000 days

When Julio Frenk took office as Minister for Health in Mexico in 2000, more than half the population, including 2.5 million of the poorest families, had to pay for any health care beyond basic community and preventative health. This meant that 4 million households – most of them poor and uninsured – were devastated by health costs each year. The Government was spending two to three times more on the health of the insured than on the uninsured, even though the latter represented 55% of the population in 2002. There was also a serious regional imbalance: the per capita contribution to health spending in 2002 was 115 times higher in the state with the highest expenditure than in the lowest.

Over the course of the next three years, Frenk introduced Seguro Popular, a public insurance system that was one of the largest health reforms seen in any country over the past two decades. So how did he do it? He identifies three key stages to the reform.

First, he built a system of national health accounts, which identified the inequities in health spending, as he explained:

'It was vital to document this in a credible way. There was a problem that was not visible, and it was that the dominant form of spending was out of pocket. Before we got the data, people thought that it was a mostly publicly funded system.'

Next, in 2003, a law was passed that enshrined the principle of progressive universalism in the new system:

'The law was very specific that it would help the rural, indigenous and poor first, before anyone else. It also set out that this was an ethical obligation as well as a political one.'

The law created incentives for states to implement it, including a new allocation formula based on numbers enrolled:

'It's hard to persuade people to enrol, so we needed to make it the state's job to reach out to them. The third element was monitoring.

'There was an obligation to present reports every six months to the legislature at the national level, and to the public. An annual citizen's health forum was set up. The outside pressure on the government to deliver was very high. This meant there was always an additional incentive to keep adding those who had been excluded.'

Subsequent analysis found the programme was linked to a 23% reduction in catastrophic health spending, and that Seguro Popular was reaching the poor and marginalised. Frenk feels it is possible to set up a nascent universal health coverage system in other contexts within 1,000 days.

'It's possible to create health registries in three years – what's important is to use platforms that already exist, or any ways in which people are already counted, for example the voting card. Also, most countries have data from income or expenditure surveys. Then it is achievable to do pilot studies.'

'In fact, it is preferable to introduce the system gradually so that you can evaluate and improve as you go along. And, you can also ensure you start with the poor. But don't get stuck in the pilot stage – you need to subsequently refine it, then go to scale in a gradual way.'

Sources: Gakidou (2006); Horton (2006); King (2014, in Stuart et al., 2015); King et al. (2009); Gakidou et al. (2006); interview with Julio Frenk.

Universal access to quality education (Box 8)

A focus on pre-school, aiming to include children previously excluded from primary and eventually secondary school, is a key step on the critical pathway in education. Investing in young children through early childhood development programmes, such as preschools, is an effective (and cost-effective) way to address inequality, interrupt the intergenerational transmission of poverty and improve outcomes later in life (World Bank, 2015b). Pre-schooling improves school performance, ensuring that children are ready for primary school; addressing early gaps in cognitive, linguistic and socio-emotional skills; and laying the foundations for life-long learning. In the process, it helps poor and marginalised children make their way through the school system (Haque et al., 2013).

There is a strong value-for-money argument: evidence from both developed and developing countries suggests that every additional dollar invested in high-quality pre-schools delivers a return of between \$6 and \$17 (Engle et al., 2011). However few countries have high levels of coverage or good-quality pre-schools accessible to poor children (Shepherd and Bajwa, 2016).

Once countries have a pre-school system in place, the emphasis can shift to improving the quality of primary and secondary schooling – another area that needs urgent attention. Pauline Rose, Professor of International Education at Cambridge University says:

'A decent metric of quality would need, at a minimum, for all children after three years of education being able to read a sentence and do basic subtraction – which many are currently unable to achieve. Unless gaps in learning in the early years of schooling are narrowed, millions will continue to be left behind in later years.' ³¹

Box 8: In the first 1,000 days - universal access to quality education

Lower progress countries may be able to:

• deliver mechanisms enabling children who were previously excluded to attend school.

For example, in 2007 the Eritrean Government, in conjunction with UNICEF, launched a programme to ensure that children of nomadic herders attend primary school. These children tend to be excluded from the formal education system as their seasonal migration is out of step with the school calendar, and because they don't speak the majority language. Within two years more than 5,000 children aged 9 to 14 were enrolled in 57 Complementary Elementary Education (CEE) learning centres benefited around the country.³² There are now 100 CEE centres in Eritrea, and around 30,000 children have benefitted from them, just under half of whom are girls.³³

• build the pre-school system, with financial support for the poorest children.

For example, in 2010, Viet Nam's Prime Minister approved a scheme to increase investment in school infrastructure and teacher training for ethnic minorities.³⁴ By 2012-2013, ethnic minority children represented 16.3% of all school-age children enrolled in pre-school education, a higher percentage than that for the ethnic minority share of the country's total population (14%) (UNESCO and Ministry of Information, 2015). During this period, 218 communes gained access to pre-schools for the first time.

• introduce targeted measures to increase hours and teacher:children ratios at pre-schools. Some countries have provided additional financial incentives in the education sector, with good results, although the evidence suggests these incentives have to be quite high to attract good teachers (UNESCO, 2010).

For example, in The Gambia, a special allowance was introduced in 2006 to attract and retain teachers in schools more than 3km from a main road, representing 30-40% of an average salary. By 2007, 24% of teachers in several regions had requested a transfer to hardship posts, with negligible numbers requesting transfers in the opposite direction (Mulkeen, 2009, in UNESCO, 2010).

Higher progress countries may be able to:

• deliver significant improvements in the quality of primary and secondary education, and in opportunities for the poorest children to progress through the system.

³¹ Source: authors' interview with Pauline Rose.

³² http://www.unicef.org/infobycountry/eritrea_56989.html

³³ Source: authors' correspondence with UNICEF.

³⁴ https://luatminhkhue.vn/en/decision/decision-no-2123-qd-ttg-dated-november-22--2010-of-the-prime-minister-approving-the-scheme-on-education-development-for-very-small-ethnic-minorities-in-the-2010-2015-period.aspx

Social protection (Box 9)

A wealth of evidence has been generated over the past 15 years on the role of various social protection programmes in reducing poverty and the vulnerability of the poorest people. Recent research confirms that social assistance and labour market programmes have a mass of positive impacts. These include increasing household expenditure on food and other basic needs, better diets, improving access to health care and education (particularly family investment in girls' education), and reducing child labour, as well as improving household productivity and labour market participation (Glewwe and Maralidharan, 2015; Mathers and Slater, 2014; Bastagli et al., 2016, forthcoming).

There is now a growing focus on the broader effects of social protection and its role in addressing the structural inequalities that affect the most marginalised. While evidence is still limited, emerging research suggests that the context-specific factors that drive marginalisation need to be fed explicitly into social protection programme objectives, design and implementation and that linkages from social protection to other sectors are crucial (Babajanian et al., 2014). For example, programmes targeted at women that tackle their social and economic vulnerabilities through an integrated approach (e.g. raising awareness on women's rights, as well as transferring cash) can support women's economic empowerment and start to dismantle discriminatory social norms (Holmes and Jones, 2013).

One of the first building blocks for the development of effective national social protection is adequate data on poverty and vulnerability, as well as data on the availability and effectiveness of existing services and functioning of markets to ensure that the choice of social protection tools responds to real needs. Advancing social protection policy also depends on political willingness to finance social protection initiatives, and reaching the poorest and most marginalised requires close scrutiny of design features, as well as investment in implementation capacity.

Social protection encompasses social assistance, social insurance and labour market instruments and is an effective policy approach to reduce poverty and vulnerability. In this section we focus on social assistance (including transfers of food, cash or agricultural inputs) and labour market instruments (including programmes for public works and labour-market integration) as these tend to reach the poorest. Social assistance programmes provide a basic safety net for the poorest by smoothing consumption: protecting household income and preventing households from falling further into poverty. Using modelling techniques, Thome et al. (2016) find that unconditional cash transfer programmes can produce anywhere between \$1.27 (Malawi) to \$2.52 (Ethiopia) for the local economy for every dollar distributed through a particular programme.

Connectivity

Energy (Box 10). Unequal access to energy has reinforced wider inequalities linked to wealth, gender and the rural/ urban divide that have accompanied economic growth over the past 15 years. Two in every three people in Africa – around 621 million in total – have no access to electricity. In Nigeria, an oil-exporting superpower, 93 million people lack electricity. Access to clean, non-polluting cooking facilities is even more restricted. Almost four in five rely on solid biomass for cooking, mainly fuel wood and charcoal and 600,000 people in the region die each year as a result of household air pollution. Almost half are children under the age of five (APP, 2015).

Africa's poorest households are the unwitting victims of one of the world's greatest market failures. An estimated 138 million households whose members live on less than \$2.50 a day are spending \$10 billion annually on products such as charcoal, candles, kerosene and firewood. That is the equivalent of around \$10/kWh on lighting – about 20 times the amount spent on lighting by high-income households with a connection to the grid. In stark contrast, the average cost for electricity per kWh in the US is just \$0.12; in the UK it is \$0.15 (APP, 2015). In rural South Africa, electrification alone was found to have increased women's labour-market participation by 9% (Elborgh-Woytek et al., 2013)

In terms of value for money, current energy sector bottlenecks and power shortages cost Africa 2-4% of gross domestic product (GDP) annually (APP, 2015).

Internet access (Box 11). Almost seven in 10 of the poorest 20% of households have a mobile phone – indeed, they are more likely to have access to mobile phones than to toilets or clean water. However, for every person connected to high-speed broadband, five more are not. Worldwide, around 4 billion people do not have any Internet access, nearly 2 billion do not use a mobile phone and almost half a billion live outside areas with a mobile signal (Peña-López, 2016).

While the gaps in the proportion of those who have mobile phones are narrowing between the poorest 40% and the wealthiest 60% and between rural and urban populations, they are widening in terms of Internet access. In Africa, the so-called 'digital divide' across demographic groups remains considerable. Women are less likely than men to use or own digital technologies. Gaps are even larger between youth and those more than 45 years old (Peña-López, 2016).

New technologies help women participate in the labour market, as e-commerce entrepreneurs, in online work or in business-process outsourcing. The world's 1 billion people with disabilities – 80% of whom live in developing countries – can lead more productive lives with the help of text, voice and video communication. In rural Niger, agricultural price information obtained through mobile phones reduces search costs by 50%. In rural Peru, access to mobile phones boosted household real consumption by 11% between 2004 and 2009, reducing poverty

Box 9: In the first 1,000 days - social protection

Lower progress countries may be able to:

• start small-scale social protection programmes to learn lessons and generate political support. Even fragile states may be able to carry out social protection pilots for scale-up to national systems. Other countries may be able to roll out implementation more quickly.

For example, Ethiopia's Productive Safety Net Programme is the largest programme of its kind in SSA and combines public works and a direct transfer (for those unable to work). Launched in 2005, by 2009 the programme was reaching 7.5 million people.

• develop a social protection strategy

Higher progress countries may be able to:

- develop a unified national database to enable governments to administer an efficient and well-targeted system that responds to the multiple risks faced by individuals and households
- pilot insurance instruments for poor and marginalised people for asset loss, death, weather-related crises and ill health, with evaluation and promotion through private-sector providers.

For example, South Africa's Financial Sector Charter of 2003 laid out product standards to meet the specific insurance needs of the country's low-income population (Chamberlain et al., 2011). Under this, insurers cover a minimum of 6% of low-income households with short-term insurance (related to property) and 23% with long-term insurance (related to life events). The Charter prompted commercial insurers to offer micro-insurance schemes to the low-income market (Kirsten, 2006) with the majority focused on funeral insurance to cover expenses that would otherwise drive households into debt and poverty (Case et al., 2013). This has resulted in a rise in insurance cover: in 2004, 15% of adults in South Africa had formal funeral cover. By 2006, that figure had risen to 23% (Smith, 2011).

• introduce and scale up multi-pronged poverty reduction programmes, whose elements are mutually reinforcing. This might involve providing a social protection package (combining social assistance, social insurance and labour market programmes) with linkages to other social and economic programmes.

For example, in 2002, Chile Solidario, which combines social transfers with a household support worker to address vulnerabilities in education, health, employment, household dynamics, income, housing and registration, started to provide intensive support to 225,000 of the country's poorest households. Selected families are accompanied by social workers for two years and receive cash transfers for five. By September 2005, 86.9% of eligible households had been contacted and 51,441 had exited the programme, having achieved a set of minimum conditions for empowerment, including civil registration and insertion into employment programmes. The main impacts have been to drive up employment of the second adult in two-parent families and reduce extreme poverty (Scarlato et al., 2015).³⁵

by 8 percentage points and extreme poverty by 5.4 percentage points (Peña-López, 2016).

More broadly, it has been estimated that extreme poverty rates could decline as much as 30% in Africa and per capita income would increase as much as \$450 if internet penetration reached the levels already achieved in more developed regions (Deloitte, 2014). However, it is also clear that access alone is not enough to reduce existing inequalities and may even exacerbate them – widening the digital divide.

Roads (Box 12). Access to roads emerged as policy priority among our focus-group participants. Similarly, Bryceson et al. (2006) use comparative data from Ethiopia, Viet Nam and Zambia to conclude that people in rural areas have a strong preference for improved accessibility to services and economic markets.

35 Based on a study evaluating gender impact, focusing on labour market outcomes for participants between 2004 and 2006. The paper finds a 1% variation in treatment increases participation in the regular labour market by 0.44% for the full sample.

Box 10: In the first 1,000 days - energy

Arunabha Ghosh, Chief Executive Officer of the Council on Energy, Environment and Water in India, says that, once the necessary data have been collected, the critical pathway to ensuring connectivity for those left behind is to develop a regulatory framework that enables the multiple actors providing and managing energy access to work together. This should be done in a way that supports a low-carbon transition while boosting growth and expanding power generation (APP, 2015). He adds that energy subsidies need to be better targeted: 'Women are the most energy deficient in access to energy and need to be prioritised. Governments should also ensure that subsidies reach poor farmers rather than richer farmers.'

Lower performing countries may be able to:

- set and publicise inclusive plans and targets for grid- and renewable-based electricity coverage, aiming to ratchet these up over time
- develop a regulatory framework for multiple actors working together.

Higher performing countries may be able to:

• implement those plans and targets.

For example, the Government of Senegal has been committed to increasing access to electricity in the country as part of its energy plan: Lettre de Developpement du Secteur de l'Energie. In 2011, access to electricity across Senegal was estimated at 40% nationwide, 70% in urban areas and just 22% in rural areas (IRENA, 2012). One notable example of progress has been the Rural Electrification Senegal project, which targeted 191 target villages in rural areas. Within a three-year period the number of people with access to electricity in these villages increased more than five-fold, from 17,000 in 2010 to 90,000 in 2012 (Peracod, 2012).

Box 11: In the first 1,000 days - connectivity

Lower performing countries may be able to:

• set and publicise inclusive plans and targets for digital connectivity in each region, aiming to ratchet these up quickly over time.

Higher performing countries may be able to:

• implement those plans and targets.

For example, Myanmar has made rapid strides in access to information and communication technologies (ICTs): Internet usage increased from 1.2% in 2013 to 15% in 2015 (ITU, 2015 cited in A4AI, 2015), primarily in response to the 2013 Telecommunications Law, which created a competitive market, in place of the state-owned monopoly.

In 2014, private-sector mobile operators began to enter this new market and the cost of accessing mobile broadband services has declined sharply: the cost of mobile SIM cards fell from approximately \$150 in 2013 to just \$1.50 in 2015 (A4AI, 2015). Even the poorest now have access to mobile services, given the gradual decline in the cost of mobile SIM cards from \$5,000 in 2000. An estimated two million new subscribers joined mobile networks within the first month of the providers entering the market. Operators have also been mandated to ensure that 10 million of the country's new subscribers are women. Furthermore, the Government is expected to introduce a Universal Service Fund to support the roll-out of services and infrastructure to underserved rural areas (A4AI, 2015).

There is also clear evidence that improving access to roads for rural areas provides a good return on investment: in rural Ethiopia for example, improving access to allweather roads was shown to increase consumption by 16% in the short-term and reduce the incidence of poverty by 6.7% (Dercon et al., 2009). In rural Bangladesh, the upgrading and expansion of the road network increased labour supply and incomes for women (Elborgh-Woytek et al., 2013). Mobility of rural populations is enhanced when roads are accompanied by greater access to motorised or wheeled transport. All of this can, in turn, reduce poverty when the time saved and distances travelled provide either greater economic opportunities or better access to social services or useful social contacts (Hine et al., 2015).

5.6 Raising public awareness: anti- discrimination policies and public information campaigns (Box 13)

For some individuals and groups, discrimination bars the way to a host of public goods and services, including health care, education, employment, justice and the expression of political voice. Discrimination can hold them in poverty and skew their engagement with markets and society. A paper on anti-discrimination legislation found that its strongest impact could be seen in labour market policies (Marcus et al., 2016).

Discriminatory gender norms pose huge barriers to women's economic empowerment, notably by limiting their access to and control over financial resources and assets at household level. They also have undermined women's labour force participation (Hunt and Samman, 2016, forthcoming).

While de jure discrimination can be repealed through laws, the elimination of de facto discrimination requires additional strategies and positive action. For example, while larger restructuring efforts such as labour-market reform in some countries may be required and achievable (see below), other countries may also need public awareness campaigns that aim to reduce discrimination and exclusion.

In some contexts, more subtle changes in discriminatory social norms may be necessary over time to build the capacities of marginalised groups. In Nepal, for example, women who act as role models for younger girls in communities have been identified as critical for changing norms (Ghimire and Samuels, 2014). The ways in which these embedded challenges are tackled will vary across contexts and gains are most likely to be incremental in the absence of radical reforms.

Box 12: In the first 1,000 days - roads

Lower performing countries may be able to:

• set and publicise inclusive plans and targets for rural roads in each region, aiming to ratchet these up over time.

Higher performing countries may be able to:

• implement those plans and targets.

For example, Bharat Nirman was a flagship rural infrastructure programme initiated by the Government of India to promote inclusive and equitable growth for under-resourced rural areas. The aims of the programme, which ran from 2005 until 2009, included the connection of every community of 1,000 or more people (500 or more in hilly, tribal and desert areas) with all-weather roads by 2009. The programme was successful: 72% of the intended population was covered and the scheme helped to increase the income of beneficiaries by cutting transport costs and improving accessibility to markets (Government of India, 2010). In Gujarat state, people employed in the agricultural sector reported their annual income increased by more than 60%.

When they take office, national politicians often set out their plans for their first 100 days. The SDGs are longer-term and more ambitious commitments, so this paper sets out a 1,000-day – or three year – pathway for action on their fundamental commitment to leave no one behind.

Box 13: In the first 1,000 days - raising (and changing) public awareness

Lower performing countries may be able to:

• where the legal system is weak or access is poor, deliver public information campaigns that seek to change opinions and reduce discrimination and exclusion. This could be coupled with work with local leaders and groups to shift attitudes incrementally. Even fragile states may be able to do this.

For example, the Welcome to School Initiative in Nepal led to a net increase in enrolment of 470,000 children, 57% of whom were girls, within a year of the programme's implementation in 2005 (UNICEF, 2006). This initiative, promoted by UNICEF, included an enrolment drive focusing on girls and disadvantaged groups and a push to improve teaching/learning environments so that children would complete primary school. Mechanisms involved community-level mobilisation, economic incentives (school supplies and scholarships) and expansion of capacity to meet demand (Shanker et al., 2014).

Higher performing countries may be able to:

• where there is a functioning and accessible legal system, criminalise discrimination, ensuring legislation is worded to be specific, and then implement, monitor and enforce this legislation, ensuring that racial (and other) dividing lines are not hardened in the process (Marcus et al., 2016).

For example, Lenin Moreno, Vice-President of Ecuador since 2007, has been a paraplegic since being shot in 1998. He made disability a focus of his time in power, launching programmes to research disability causes and numbers across the country. After three years, a 2010 law was passed stipulating that 4% of public and private employees (in companies with more than 25 employees) should be people with disabilities. Employers that fail to comply face a monthly fine (Perez, 2010). According to a close Moreno aide, annual government spending on people with disabilities leapt from \$2 million to \$150 million between 2007 and 2011(Otis, 2013). People with severe disabilities receive \$300 in monthly stipends from the Government, wheelchair ramps have been installed in the capital, Quito, and other main cities (Ibid.) and government figures show that 430,289 people with disabilities have been provided with wheelchairs, special mattresses, canes and diapers while 17,876 have received hearing aids and 4,000 have been provided with prosthetic limbs (Watts, 2013).

- deliver public awareness campaigns to make citizens, employers and public servants aware of the legal rights of groups facing discrimination (Marcus et al., 2016).
- introduce affirmative action programmes.

For example, in 2012, the Brazilian Government passed a law mandating quotas for entry to non-whites to all of the country's 59 federal universities and 38 federal technical schools to improve racial equality in the education system. By the end of 2016, half of all places in federal institutions will be reserved for applicants from state schools. Of these, half must go to students from families with incomes below BRL R\$1017 (around \$500) a month per person – a cut-off that is much higher than the Brazilian average. Each federal institution must allocate quota places to black, mixed-race and Amerindian students in proportion to their share of the local population (80% in Bahia in the north-east; 16% in Santa Catarina in the south).³⁶

• provide access to information about service provision in schools, hospitals and on social protection systems, particularly for marginalised communities such as migrants.

5.7 Institutional and legal reform

Access to labour markets and minimum wage

The poorest people are the most reliant on their own labour, and policies that encourage labour-intensive economic activities – manufacturing or services – will lift them most quickly out of persistent or deep poverty (Bulla et al., 2014). In Latin America, increased employment led to progress on reducing income inequality (World Bank, 2011). Specifically, women's labour force participation has increased sharply in all sub-regions of Latin America, particularly for low- and medium-educated groups.

Wider progress is being made: in 2014-2015, 94 legal reforms that increased women's economic opportunities

³⁶ http://www.economist.com/blogs/americasview/2013/04/affirmative-action-brazil

took place across 65 countries (World Bank, 2015c), and evidence has also confirmed the positive impact of previous reforms. Survey data from Ethiopia following the revision of its Family Code in 2000 shows increases in women's labour force participation and work outside the home, and women being more likely to work full-time and in higherskilled jobs (Hallward-Driemeier and Gajigo, 2010, cited in World Bank, 2015c).

In terms of value for money, in Bangladesh the World Bank has estimated that if investments to improve female participation in the labour market from its current level of 34% to match the level for males (82%), the country would see 1.8% GDP growth each year and achieve middle-income status (World Bank, 2015b).

It is also important to provide legal aid to marginalised groups to ensure they can seek redress in cases of violation of labour market legislation, including discrimination (Beqiraj and McNamara, 2016).

Finally, while the introduction of a minimum wage in the formal sector may result in a matching (or even

Box 14: In the first 1,000 days - access to labour markets and minimum wage

Lower performing countries may be able to:

• develop analysis, catalyse public discussion and pilot what will be most effective to give discriminated groups access to labour markets.

Higher performing countries may be able to:

- provide legal aid for marginalised groups
- expand the minimum wage, including to the informal sector.

For example, in 2002, South Africa introduced a (relatively high) minimum wage for domestic workers, who comprise around one in five women in the country. Just 16 months later, wages increased by 20% and the probability of an employee having a formal contract had doubled, with no discernible negative impact on the number of hours worked or employment rates, even though enforcement mechanisms were seen to be weak (Dinkelman and Ranchhod, 2010).

• provide discrimination-free employment through public works programmes.

For example, in 2006 the Government of India implemented the Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA). This established a national public works programme to ensure employment creation and construction of productive assets in rural areas. MGNREGA prioritised development of irrigation facilities on land owned by households that belonged to minority Scheduled Castes (SC) and Scheduled Tribes (ST). By 2009, 20% of MGNREGA works supported the provision of irrigation facilities on land owned by SCs/STs, double that of 2007. In addition, while SCs and STs account for 14% and 8% of the population in India, respectively, their representation in MGNREGA is almost 20% (Holmes et al., 2010).

• reduce barriers to employment for the female labour force.

For example, the Government of Uruguay established a Tripartite Commission on Equal Opportunities and Treatment in Employment in 1997. Three years later the CTIOTE's National Plan for Equal Opportunities and Treatment in Employment was being used by companies to inform provisions on gender equality in the workplace (Oelz et al., 2013). There has since been a significant increase in the gender provisions incorporated in collective agreements³⁷ made between employer and worker organisations (Espino and Pedetti, 2011).

• implement employment targeting

For example, more than a dozen countries have employment targets of some form (UNDP, 2015). In its Mid-term Development Plan, Indonesia set a target to reduce unemployment from 7.6% to 5-6% (Indonesia Investments, 2013). In 2014, the rate was down to 5.9%, but it climbed back to 6.2% in the third quarter of 2015.³⁸

³⁷ Agreements are between employers' and workers' organisations for each economic sector and include clauses to develop opportunities for female workers, and reconcile work and family life, for both men and women.

³⁸ http://www.tradingeconomics.com/indonesia/unemployment-rate

greater) increase in wages in the informal sector (Khamis, 2008), this is not necessarily the case. To achieve higher wages in the informal sector – where most marginalised and poor people work – it may be more effective to introduce a minimum wage into the informal sector directly, even though monitoring and enforcement may be weak (Dinkelman and Ranchhod, 2010).

Women's land ownership

Access to (and control of) land for agricultural production is critical for the livelihoods and well-being of developing country rural households, as well as providing an important safety net for many urban households. Children whose mothers own land are up to 33% less likely to be severely underweight (Allendorf, 2007). Women who own land are more likely to invest in it to such an extent that returns are up to 35% greater (Peterman, 2011). Broadly speaking, however, women tend to hold secondary or derived rights to land, and men usually mediate their access (Polack et al., 2014). One long-term goal for leave no one behind is legal reform to enable women to both own and inherit land. Much progress has already been made here: a review of women's land rights in 100 countries showed that 57 countries had made reforms to improve women's economic rights by 2010, and of these, 28 countries had eradicated the barriers to land ownership and were associated with greater equality for women (Hallward-Driemeier et al., 2013).

Nevertheless, even when a legal system becomes more socially progressive in its application of the law, courts in some countries still uphold discriminatory cultural norms in relation to male inheritance and land ownership (Scholz and Gomez, 2004). Changes in the law, therefore, need to be supported by training for the judiciary and public information campaigns to ensure implementation.

Box 15: In the first 1,000 days - women's land ownership

Lower progress countries may be able to:

• publicly discuss the need for legal reform in land ownership.

Higher progress countries may be able to:

• pass the legislation.

For example, in 2003, Ethiopia introduced joint land-title certification issued in the names of both spouses, giving recognition to the land rights of both men and women (Yeboah, 2012). By the end of 2005, the programme had made considerable advances, registering about 20 million plots by some 5.5 million households (Deininger et al., 2011). The reforms have contributed to the increased involvement of women in land-related decision-making (Holden and Bezu, 2014).

In 2014, the Indian state of Odisha introduced a policy that landless single women with an annual income below \$615 should be registered as a separate household and are eligible for a plot of government-owned land similar to the size of a tennis court. Women can receive the land grant if they are living alone and independently. In just one district, Mayurbhanj, 3,000 single women have received land titles in the three years since the programme was launched.³⁹

In Brazil, the National Documentation Program for Rural Women Workers helps rural female workers obtain the necessary documentation to get access to land, credit and government services. This resulted in an increase in the share of women who own land titles from 13% to 56% between 2003 and 2007 (SIGI, 2012).

• train their judiciary and develop a public information campaign to influence opinion.

39 https://www.yahoo.com/news/why-land-means-hope-indias-vulnerable-single-women-115816594.html?ref=gs&utm_content=buffer0caad&utm_medium=social&utm_source=twitter.com&utm_campaign=buffer

6. Means of implementation: what is needed to deliver the change?



Selecting the critical pathway is only part of the answer: governments need resources if they are to implement their chosen policies. Data are crucial for this: essential both to identify where the need is greatest and to monitor implementation. However, there must be an environment that will actually act on these data. Financing models that channel money to priority needs are also vital, alongside a governance structure that implements financing and policies as planned, and that prioritises marginalised groups. Finally, there has to be explicit recognition of the interlinkages between economic, social and environmental challenges, and an institutional set-up that ensures policy is not made in siloes.

6.1 Data

Governments rarely have adequate data about who is marginalised, their characteristics, how their marginalisation is manifested, or their needs and priorities (Stuart et al., 2015; Radcliffe, 2015). Assessments of progress towards development goals are based primarily on household surveys. However, these generally omit the homeless, people in institutions, and mobile, nomadic or pastoralist populations by design. In practice, they often under-represent people living in urban slums, dangerous places and transient households, as well as others such as people with disabilities. In all, as many as 350 million people worldwide may be missed by household surveys (Carr-Hill, 2013).

In some cases, the data exist, but are not consistent across years, which makes it difficult to monitor the progress of groups over time (Bhatkal et al., 2015; Beegle et al., 2015). Demographic Health Surveys show consistent trend data on ethnicity (or a sufficient proxy) for only 16 of 90 countries over the past decade (Lenhardt and Samman, 2015). In some cases this may be because asking questions about ethnicity is prohibited in a particular country.

If they are to answer questions about outcomes for different groups, household surveys need to include

responses from more people than just the heads of households, extend survey coverage to people who do not live in traditional household units, and ask appropriate questions of all age groups. Additional questions are required on issues of relevance to the specific needs of marginalised groups, such as questions on women's land ownership, and additional modules are needed on, for example, disability (Stuart et al., 2015).⁴⁰ In some cases, groups with a smaller number of members – such as women with disabilities living in rural areas – need to be oversampled to gather enough responses to be representative. All of this will, of course, make household surveys more expensive (Samman and Roche, 2014).

There have been improvements in gathering data on marginalised groups, however. In Latin America, for example, there has been remarkable progress on the availability of data on indigenous people; 17 out of 20 countries in the region included questions on indigenous people in the 2010 census round (Nicolai et al., 2016).

In the case of health, governments could quickly and relatively easily use outpatient attendance records, which are usually of high quality at the level of the clinic, and sometimes aggregated nationally (they are not collected internationally because donors do not use them).⁴¹

In the case of education targets, the learning of children within a selected age group should be tracked to include those both in and out of school. Most existing assessments test only children attending school and this fails to capture the most marginalised children, who are the least likely to be in school. Some attempts have been made to combine data from learning assessments with enrolment data from administrative sources or household surveys to gain a fuller picture of the extent of learning inequalities (Spaull and Taylor, 2015, in Rose and Alcott, 2015).

Next, non-official data are needed to complement official data to provide the necessary coverage and level of disaggregation. These could be data gathered through participatory research that listens to what marginalised communities say about their own needs – or communitybased monitoring systems and panel and perceptions data. However, the quality of data from non-official sources needs to be verified, and any gaps or limitations made clear.

In India, the Council on Energy, Environment and Water held a survey on energy needs in 2014/5, including questions on electrification (connections, affordability, reliability, duration, voltage) and cooking energy (consumption in terms of access to modern fuel, affordability, quality of fuel and reliability in terms of supply chain networks that deliver the fuel). CEO Arunabha Ghosh says: 'We collected 2.5 million data points in 18 months and found a huge discrepancy between what is intended and achieved in government policy from the perspective of the household.'

Big data may also help provide the necessary coverage. Even the poorest national statistics offices use satellite data on light emissions as proxy poverty measures. This can become less effective once the penetration of electric lighting approaches saturation (Stuart et al., 2015), but advances are happening all the time.

Finally, it is possible to establish national registration systems quickly where they do not yet exist to ensure that all data can be 'ground-truthed'. According to South Africa's outgoing Statistician-General, Pali Lehohla, it should take countries no more than a year from a standing start to develop functioning civil registration and vital statistics. In South Africa, this cost just \$0.20 per capita (in Stuart et al., 2015).

6.2 Governance

Leaving no one behind requires changes to governance setups in developing (and developed) countries: prioritising marginalised populations is a political process in each country and needs different strategies that will emerge nationally.

There are, however, three elements of governance reform that are likely to apply across all country types. These are (1) moving away from the siloed approach of different ministries that are responsible for 'their' sector of policy change (Radcliffe, 2015); (2) an increase in the inclusivity of political institutions; and (3) establishing a monitoring process to track outcomes.

The first of these is a change needed to deliver the entire SDG agenda, with its implied systems change to integrate social, economic and environmental policy planning and delivery. It requires much tighter coordination across different line ministries, and some lessons can be learned from implementation under the MDGs.

Kenya's MDG Project Implementation Unit, for example, was established in the Ministry of State for Planning, National Development and Vision 2030 to mainstream the MDGs into policy, planning and budget processes (Roche et al., 2015). An ODI case study on Ethiopia's success in poverty reduction found that interconnected policy making was key to the country's progress (Lenhardt et al., 2015).

Second, institutions, such as political assemblies, the civil service and government advisory bodies, need to be more inclusive if they are to realise the vision of leave no one behind.

41 Source: authors' conversation with Robert Yates.

⁴⁰ This is already happening in some countries. The Washington Group disability questionnaire is currently administered in 42 countries (conversation with Nora Groce, Director of the Leonard Cheshire Disability and Inclusive Development Centre).

Even severely conflict-affected countries can increase the participation of marginalised groups. In 2007, Nepal's interim constitution provided a legal basis to the rights of minorities, granted equal status to women and men while acquiring citizenship, and introduced a law that criminalised discrimination on the basis of 'untouchability', caste and class. As a result of new quotas for members of lower castes and women in the civil service, the police and the army, women held one-third of seats in the Constituent Assembly formed just one year later, including traditionally marginalised Tarai Dalit women (Paz Arauco et al., 2014). As of November 2015, 29% of Constituent Assembly members were women (176 out of 598) (*Kathmandu Post*, 2016).⁴²

There are other models. The experiences of countries that have made progress in tackling intersecting inequalities reflect two main types of political trajectories:

- governments with a strong inclusive and redistributive agenda, combined with class-based social mobilisation. In Brazil and Ecuador, for example, governments developed linkages with social movements that had strong constituencies in marginal ethnic groups as a strategy to build electoral support.
- multi-ethnic countries in which movement-based governments emerge from identity-group mobilisation. In Bolivia, for example, the excluded ethnic majority of indigenous people managed to have one of their leaders elected as president. There are a variety of ways in which governments can support identity group mobilisation and support from civil society actors within countries, and from international organisations is crucial to amplify the voices of marginalised populations.

These two trajectories are not exclusive or deterministic. However, political arrangements that enable the implementation of equitable and inclusive policies are most likely to be achieved when governments develop broad consensus around progressive policies, when they are supported by a coalition of political parties and social movements to implement those policies and when they keep opening spaces for civil society (Norton et al., 2014).

Finally, monitoring. Giving governments incentives to act in the interest of their poorest citizens is often challenging, and the introduction of laws is only the beginning: they need to be implemented at all levels. Ensuring that data on progress are easily accessible helps to hold governments to account and allows monitoring of outcomes for the poorest (see previous section on data). Nigeria's MDG Information System, for example, is an online platform that uses geo-referenced data collected via mobile phones to provide location-specific information on government facilities, water points, environmental challenges, and more. Similar mechanisms for the collection of such data can be used to monitor their work over time, and are crucial for building an evidence-base of what works in different political contexts (Wild et al., 2013) that allows feedback and course correction.

6.3 Finance

This section discusses two sources of public finance for the leave no one behind agenda: domestic resource mobilisation and aid.

Domestic resource mobilisation

Structuring a taxation system to leave no one will behind is not all about raising money to finance policies. The design of individual taxes, and decisions on the appropriate mix of taxes, should balance the goal of raising revenue with the goals of building a social compact and ensuring an appropriate spread of the tax burden across society.

Recent research has found that 40% of the poor in Brazil paid more in taxes than the benefits they received from public spending (Higgins and Lustig, 2015). It has also been found that in Bolivia, El Salvador, Ethiopia, Guatemala and Peru the poor are (on average) net payers to the fiscal system (Lustig, 2015).

Among taxes, research has identified income and other direct taxes as strongly progressive – people with higher incomes pay higher rates of tax on their incomes – although exemptions and evasion can undermine this (Bastagli et al., 2012). One factor that contributes to their progressive nature is that the poorest people often earn a living in the informal sector and, as a result, their incomes lie outside the purview of the tax authorities (Younger et al., 2015). It is important to note, however, that this also limits the revenues that can be mobilised from income in many developing countries, as their formal sectors are relatively small.

Expanding tax revenues from income in these countries means extending the reach of income taxes to informal and often poorer economic actors. Policies, therefore, need to be designed with care to ensure they do not undermine efforts to reduce poverty and leave no one behind. Ethiopia's agricultural income tax, for example, is levied according to landholding size, which is not always an accurate reflection of a household's income from agriculture. As a result, this tax is regressive and is linked to the fact that 9% of Ethiopian households are impoverished (either made poor or poorer) when incidence of taxes and public spending are fully accounted for (World Bank, 2015a).

It is, however, possible to expand tax revenues in a short period of time. Evidence shows that, even in the poorest

⁴² Note, however, that political representation of the country's various population groups is still far from being fair and equal. Given their geographical concentration, Madhesis have been able to secure a level of representation higher than their share of the total population (Paz Arauco et al., 2014).

countries in SSA, it is possible to increase tax revenues by 0.5-2% in one to three years (and by 2-3.5% over periods of five to 10 years). Only three countries out of 28 in the region have not been able to do so (Drummond et al., 2012). Domestic taxes could, for example, cover almost half the financing gap in SSA to expand power generation and finance energy for all (APP, 2015).

Finally, expanding tax revenues will also mean preventing tax avoidance by multinational enterprises, which costs developing countries around \$100 billion per year in revenues (UNCTAD, 2015).

Aid

Donors are an important source of funding for these sectors, particularly in LICs. An ODI analysis of the resources needed to fund UHC, education and social assistance compared to potential government revenues found that, while many MICs could fund these sectors themselves, LICs – particularly the least-developed countries (LDCs) – face a large financing gap (see Greenhill et al., 2015).

There is a significant and growing mismatch between the pattern of allocations of official development assistance (ODA) across countries and sectors and the financing needs that must be met to leave no one – and no country – behind. The volume of ODA from OECD-DAC members to LDCs – the most vulnerable group of countries – peaked in 2011, when almost half of their ODA directed at specific countries went to LDCs – and has since fallen by 15% in nominal terms (equivalent to around 46% of their country allocated ODA.

This mismatch between countries' needs and ODA allocations is confirmed by an analysis of current levels of ODA per person living in extreme poverty across country groupings. This illustrates that the average LIC receives about one-third as much ODA per person living in extreme

Box 16: Inequality in child mortality and education outcomes – some middle-income countries are failing to allocate enough funding to the poorest⁴³

If the goal is to leave no one behind, how financing is allocated is just as important as the amount being spent. Is financing directed at those most in need?

Half of the countries with the highest levels of inequality in child mortality between the rich and the poor are middle-income and, as such, they should have the resources to provide universal health coverage. Nigeria leads the ranks, but India and Pakistan are also in the top 10. In these three countries, child mortality rates among households in the poorest 20% of the population are at least two to three times as high as those in the richest 20%. Pakistan's GDP is more than twice that of Ethiopia's, yet its disparities in child mortality are 30% greater between the poorest and the richest households.

A closer look at India shows that while the country's policies on child health demonstrate ambition, public spending on health does not. The National Policy for Children (2013) reinforces the inalienable right to life, health and nutrition of every child. The Janani Shishu Suraksha Karyakram policy aims to eliminate out-of-pocket expenses by providing free transport, drugs, diagnostics, and food to all sick newborn babies and infants (Government of India, 2015a). Yet public spending on health in India remains very low (Government of India, 2015b; World Bank, 2015a): 75% of total health spending in India is private, not public, and out-of-pocket spending accounts for 65% of total health spending and 90% of private health spending (World Bank, 2015a).

MICs such as Nigeria and Pakistan also appear in the global top 10 for education inequality. Again, Nigeria exhibits the greatest inequality in education poverty,⁴⁴ with Pakistan in third place. Educational disparities in Nigeria are slightly higher than in Madagascar, even though the former has a GDP seven times higher than the latter. In Pakistan, public education systems are failing the poorest of the poor at several levels: a rural child is 32% less likely to go to school and 50% more likely to be illiterate than a child from an urban area. Female children from rural areas are doubly disadvantaged: they are 47% less likely to go to school than their urban counterparts.

Even though Pakistan's Constitution guarantees compulsory education for all children aged 5 to 16 on paper, and it committed to spending at least 4% of its GDP on education to meet the MDGs, the reality is that public spending on education as a proportion of GDP has stood at around 2.5% since the 1990s (World Bank, 2015a). What's more, there is a lack of basic facilities: only 65% of public schools have a water supply, 60% have latrines and boundary walls, and 40% have electricity (GoP, 2012 and MHHDC, 2012).

⁴³ Data are from WHO covering the period from 1990-2015 and the World Inequality Database on Education (WIDE) on education poverty covering the period 2000-2014. GDP data have been extracted from the World Bank data on GDP per capita (current US\$) for 2014.

⁴⁴ Education poverty refers to the percentage of those aged 20-24 years with less than four years of education.

poverty as the average lower-middle-income country (LMIC). Most LICs are also afflicted by conflict and classified as fragile states, a group particularly neglected by current ODA allocations (Greenhill et al., 2015).

ODA also needs to be better targeted at the sectoral level. At present, for example, it is not adequately targeted

at education, health or social protection overall, and there is a need for donors to channel more intensive support to particular areas of education and especially health, particularly primary/basic service provision.

Box 17: How much will it cost to deliver the health services, education and social protection needed to leave no one behind?

Here we take the methodology developed in Greenhill et al. (2015), which costs delivery of the SDGs on health, education and social protection, and add in costs to ensure that no one is left behind.

For the health costings, we focus on the people who are not currently receiving health coverage, but we add a premium to reflect the likelihood that they will require higher per capita spending.⁴⁵

Similarly, for education, we focus on children who do not have access to education, and add in a cost to reflect the higher cost per student of providing education to marginalised groups.⁴⁶ These costs are calculated for each stage of education (i.e. pre-primary, primary and secondary).

We have also updated the social assistance figures to reflect national poverty lines. It is important to note, however, that these costings focus only on the 75 LICs and MICs for which financing and poverty data exist.⁴⁷

Group	Total cost	
Low-income Countries (LICs)	121,228	
Middle-income Countries (MICS)	617,984	
Total	739,212	

Table 4: Total annual cost of leaving no one behind in health, education and social protection (2014 \$ billion)

One-third of these total costs are for upper-middle-income countries (UMICs) and 85% are for MICs. It is important, however, to recognise that MICs have, in general, higher revenue capacity than LICs and can finance these costs themselves. The challenge facing MICs in achieving universal access to health, education and social protection is, therefore, to allocate higher shares of their public spending to these services.

In the case of the 30 LICs for which we have data, even if they could maximise their revenue capacity and allocate 50% of their public spending to health, education and social protection (see Greenhill et al. 2015 for this methodology) they still require an additional \$70 billion to meet these costs. This requires either require additional ODA (an increase of roughly 50% on current aggregate ODA levels) or a reallocation away from higher-income countries.

The main message is that LICs should be the main focus of external support to meet these resource requirements, especially from ODA.

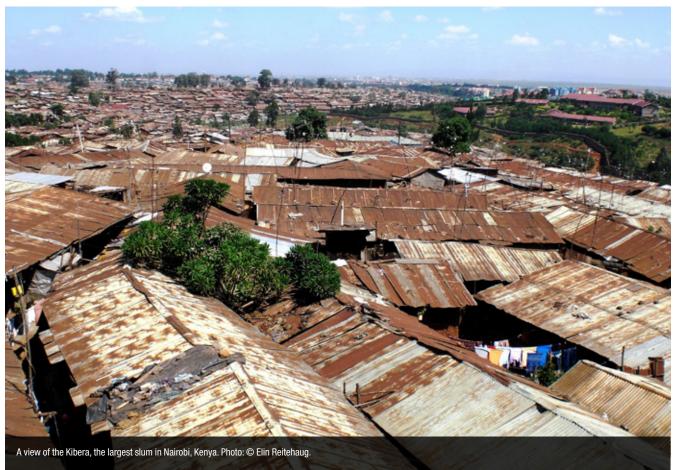
There are insufficient data to cost all the policy areas outlined in Section 3. It would be expected that legislative reforms – such as ensuring equal representation in parliament and making discrimination illegal – would be relatively cost-neutral. Infrastructure costs, of course, dwarf the costs of service provision, although much of this does not come from the public sector. Yepes (2008) suggests the transport sector requires the second largest investment (2.3% of GDP), after providing for a functioning electricity network (3.0% of GDP).

⁴⁵ Based on analysis published in *The Lancet* (Carrera et al., 2012), an extra 27% was applied to the average cost of providing health care because there are higher costs involved in reaching those who are currently left behind.

⁴⁶ We assumed here that all children who do not have access to education currently are 'marginalised' and will, therefore, require additional financing to access education. This may not be strictly true, but we do not have adequate data to assess the proportion of the out-of-school population that is marginalised.

⁴⁷ The countries in the sample account for a total population of 5 billion (out of the global estimate of 7.3 billion) (DESA, 2015), meaning that it includes the vast majority of the developing world's population. The sample does not include: countries with populations of less than a million or with very low levels of extreme poverty (less than 1%) as countries below these cut-offs are unlikely to need significant amounts of international public finance (Greenhill et al, 2015); HICs; countries without poverty data between 2000-2011; former-USSR and Eastern European states.

7. Conclusion



The SDGs will stand or fall by whether they can deliver a new future for the world's most disadvantaged people.

Implementing the SDG agenda in its entirety is bound to involve prioritisation and trade-offs. This report has aimed to inform that process, setting out a critical pathway for different groups of countries to follow in the first 1,000 days – or three years – of the SDGs. This pathway could lead to the realisation of the ambition of leaving no one behind in 2030. It has set out policies, or parts of policies, that countries have been able to develop in a similar timeframe, and that have been proven to deliver the best value for money in generating outcomes for marginalised people.

As stated repeatedly, however, priorities depend on the national context, and reflect its starting points, political realities and domestic needs. It is also clear that the starting point for each country will have a major influence on its future progress (Rodriguez Takeuchi and Samman, 2015).

This report has also shown that if countries are not travelling along this critical pathway, it may already be too late to reach the SDGs for all their citizens. In SSA, for example, countries already need to reduce preventable child deaths at a rate of 7% each year between 2015 and 2030 to meet the global target. If they wait until 2018, that rate increases to 9%, and if they wait until 2027 they will have to reduce child mortality more than four times faster than if they act today – an impossible task.

We see a similar story for education. African countries need to reduce education poverty at a rate of 15% each year between 2015 and 2030 to meet the global target. If action is delayed until 2018, the rate increases to 18% per year, and if they wait until 2027 to start, that rises to an extraordinary 55%.

Of course, policies alone are not enough to ensure that no one is left behind. The report has also set out the necessary – or at least ideal – ingredients to maximise the likelihood of policies being implemented effectively, from data to institutional set-ups and finance. Governments need to invest initially in data to identify the groups furthest behind on their priority targets. This means expanding the respondents for traditional household surveys to include non-traditional households and others overlooked by current surveys, as well as embracing big data analytics. Marginalised groups – or at least their concerns and priorities – need to be reflected in both the workplans and composition of government institutions (e.g. civil service and parliament) and tighter coordination across ministries is essential, as well as adequate and well-targeted finance.

Ultimately, it is people themselves that need the opportunity and agency to change their own lives. However, evidence suggests this is not possible without the reforms outlined in this report. They have been identified time and again by marginalised populations as their top priorities and underline their widely expressed desire to gain skills, secure employment and build an asset base to protect themselves against life-cycle shocks.

While this report has focused on government action, donors also need to change the way they provide financing to catalyse policy implementation. NGOs have a vital role to play that goes beyond holding governments to account. They can also share their knowledge of marginalised communities and data; build and amplify the voice of excluded groups; represent their interests and priorities where appropriate; and support service delivery by, for example, promoting basic health care knowledge and raising awareness of citizens' rights to access to broader services.

The private sector is part of this picture: supporting innovation and digital inclusion, and ensuring that its value chains are responsible – for example by not employing children. Regulatory efforts are important to catalyse the private sector's contribution to leaving no one behind, and this report includes examples: South Africa, where the government has incentivised insurance packages for low-income households; Ecuador, where there is now a mandate to include people with disabilities in the workforce.

Heads of state and ministers from Colombia, Costa Rica, Liberia, and Tanzania, among others, have gone public on their engagement in the leave no one behind agenda.⁴⁸ Governments need to commit to uphold the rights and opportunities of all their citizens and to counter vested interests that might block progress among the poorest and most marginalised people.

By the end of the first 1,000 days of the SDGs, in September 2018, every government, rich or poor, should have set out a leave no one behind strategy with clear equity targets, priorities, and strategies for delivery, and efforts to deliver on that strategy should be underway. There should be a high-level event to allow countries to share learning and discuss course-correction, as well as monitor progress.

The first three years is just the start of the effort needed to leave no one behind. It must be followed by sustained action through to 2030 to address the systemic barriers that block the progress of the marginalised, and regular reviews should determine whether change is happening as quickly as it needs to. These could be framed as 'stepping stones' towards leaving no one behind across the different SDGs. Above all, however, our analysis confirms change needs to start now.

Many policies to leave no one behind will take more than 1,000 days to implement fully, and will require sustained investment through to the SDG deadline of 2030. However, countries can make an important 'down payment' by September 2018.

48 See http://www.odi.org/events/4148-leaving-no one-behind-tackling-inequalities-post-2015-development-agenda

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Annex 1: Technical annex

Change needed to meet a target

This annex details the method used to develop the projections in Section 2. For a given target, for the latest year available, we compute average levels of achievement for each country for which there are data, and for subpopulations, where feasible - i.e., the bottom and top quintile, rural and urban populations, males and females. These data are used to construct (population-weighted) averages for geographic regions and the world (or developing world) as a whole. Our estimates are close to but may not correspond precisely with official figures. Then, we compute the compound rate of growth that would be needed to achieve universal coverage of a positive outcome, or to eliminate a negative outcome, or to reach a threshold specified in a target. Because it is technically impossible to reach a lower bound of zero (and using a threshold very close to zero introduces distortions in mapping trajectories), we impose a lower bound threshold of 3%, which is similar to that proposed by the World Bank to signify the elimination of extreme poverty (World Bank, 2013). For positive outcomes, the upper threshold is 100%. Where the data permit, we compare the annual rate of change needed to 'leave no one behind' on a given outcome with the average annual rate of progress for that indicator over the past 15 years (or for whatever subperiod for which data are available).

Comparing past progress with change needed

To see at a glance how past progress compares with the change needed, we compute a summary statistic of the effort needed relative to past effort. This is the ratio of (annualised) change for a given indicator since 2000, compared with the annual rate of change needed to meet a target. For example, we know that child mortality in SSA declined at a rate of 4.3% yearly between 2000 and 2015, whereas reductions of 7.5% yearly would be needed to reach the threshold of 25 deaths per 1,000 live births by 2030. The ratio of effort needed relative to past effort is, therefore, 58%. In other words, a continuation of past efforts could realise just over half of the progress needed by 2030. Historical data are often not comprehensive and may give only a partial picture, but we include where they meet our coverage threshold.

Coverage of countries and sub-populations

A population-weighted average is computed whenever 60% or more of the population within a group is covered by the data. For many indicators, more data are available at the country level than for sub-populations within countries (i.e., by quintile and by place of residence). To make the best use of data, we compute averages for groups and for sub-populations using all the data available for that group, once the 60% threshold is passed. One consequence is that the national averages may not be strictly comparable with the averages for rural/urban areas and for quintiles because data for only a sub-set of countries may be available for the sub-population computations. The rural urban and quintile disaggregation may be derived from slightly different sets of countries and may not be fully comparable with one another - though this is much less of an issue in practice.

Take the example of under-five mortality within SSA (Figure A1, overleaf). The figure shows the most recent data available for 2015, the child mortality ratio on average in the region, for the urban and rural populations, and for the top and bottom quintile. Data are available for this indicator covering 100% of the population of the region. Data disaggregated by both wealth quintile and rural/urban populations are available for 89% of the population. This means that we can present data for SSA for the region, for the bottom and top wealth quintiles within the region and for rural and urban areas within the region – subject to the caveat on comparability described above.

The trajectories illustrate the pathway of progress that would be needed to reach a threshold of 25 deaths per 1,000 live births by 2015, assuming constant change and a compound rate of reduction. It is evident that progress will need to be highest for the bottom wealth quintile and lowest for the top quintile, with the rural and urban areas falling in between. We also use these data to compute the amount of annual progress that would be needed if progress were to be condensed into a shorter period of time – i.e., nine, six and three years, rather than 15 years – to emphasise the need for immediate action.

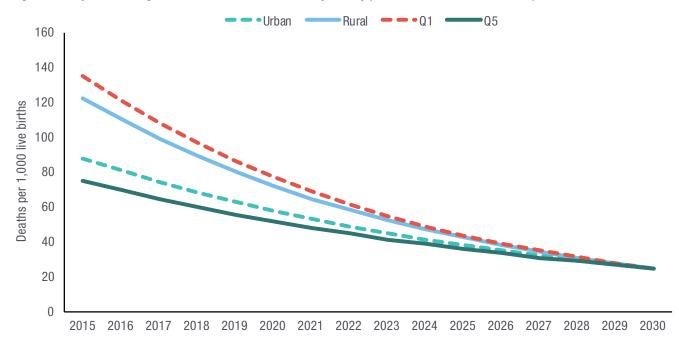


Figure A1: Trajectories to 'get to zero' on under-five mortality rate by place of residence and wealth quintile, sub-Saharan Africa

Annex 2: List of countries used in the National Development Plans analysis in Box 5

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Uzbekistan 2013-2015	Turkey	2014-2018
	Uganda	2015-2020
Viet Nam 2011-2020	Uzbekistan	2013-2015
	Viet Nam	2011-2020

Annex 3: Methodology for costings

Greenhill et al. (2015) calculate the cost of meeting the SDGs on poverty, education and health. However, these costings reflect only partially the additional costs of targeting the poorest and most marginalised people. Here we update these figures to identify the specific costs involved in targeting these groups in particular.

It is important to note that these costings focus only on 75 LICs and MICs for which financing data as well as poverty incidence data exist.

The sample does not include countries with populations of less than a million or countries with very low levels of extreme poverty (less than 1%).⁴⁹ The countries in the sample account for a total population of 5 billion (out of the global estimate of 7.3 billion) (DESA, 2015), meaning the vast majority of the developing world's population is included.

Universal health coverage

The methodology of this costing exercise is similar to that used in Greenhill et al., although differences emerge because of the focus on reaching those currently left behind. We focus our costings on those not currently receiving health coverage and also add a premium to reflect that these groups are likely to require higher per capita spending. Based on analysis published in *The Lancet* (Carrera et al., 2012), an extra 27% was applied to the average cost of providing health care because there are higher costs involved in reaching those who are currently being left behind.

Data on access to health care as a share of the total population is drawn from the ILO social protection database.⁵⁰ Access to health care is defined as having access to health insurance or free access to health care services provided by the state (ILO, 2008).

The cost of providing universal health care on a per person basis is taken from a Chatham House (2014) report that updates a WHO estimate from 2001. The estimate is \$86 per person in 2012 dollars, which is \$88 per person in current dollars.⁵¹ A 27% premium was added to this figure to reflect the additional costs facing marginalised groups. Data were not available for health care coverage for a small number of countries.⁵² To address this challenge, we used the average for countries with similar levels of incomes.

Table A1: Costs of providing universal health care (\$ million)

Group	Total cost
Low-income countries (LICs)	62,754
Middle-income countries (MICs)	239,070

Pre-primary, primary and secondary education

We focus on children who do not currently have access to education, and also apply an additional cost to reflect the higher cost per student of providing education to marginalised groups (see above).⁵³ Costs are calculated for each stage of education (i.e. pre-primary, primary and secondary).

Data on access to education as a share of the school-age population are drawn from World Bank (2015d). The cost of providing universal access to education on a per student basis comes from UNESCO (2015). These reports provide cost estimates for each stage of education and the additional cost of reaching marginal groups on a countryby-country basis. Data on access were not available for a number of countries.⁵⁴ To address this challenge, we used the average for countries with similar income levels.

Table A2: Costs of providing education to those currently without (\$ million)

Group	Total cost
Low-income countries (LICs)	23,996
Middle-income countries (MICs)	126,199

49 Countries below these cut-offs are unlikely to need significant amounts of international public finance and assumption checked in Greenhill et al. (2015).

- 50 The indicator used is social health care coverage as a proportion of the total population. See http://www.social-protection.org/gimi/gess/ RessourceDownload.action?ressourceId=37218
- 51 It is actually in 2014 dollars as this is the most recent year for most data on the World Bank World Development Indicators.
- 52 For example, access to health care data was not available for Afghanistan and North Korea.
- 53 We assumed here that all children who do not have access to education currently are 'marginalised' and thus will require additional financing to access education. This may not be strictly true, but we do not have adequate data to assess the proportion of the out-of-school population that is marginalised.
- 54 For example for North Korea and Zimbabwe.

Social protection

Table A3: Costs of filling national poverty gaps through cash transfers (\$ million)

Group	Total cost
Low-income countries (LICs)	34,478
Middle-income countries (MICs)	252,716

We have updated the social assistance costings presented in Greenhill et al. to reflect national rather than international poverty lines because this is more specific for national contexts. Hoy (2016) calculates national poverty lines based on World Bank data, using a similar approach to that used in Jolliffe and Prydz (2015). Note that this calculation leaves a considerably higher funding gap in MICs than that estimated in Greenhill et al. (2015), given the much higher poverty lines in those countries. Conversely, LICs have a smaller funding gap, given their lower national poverty lines.

Where national poverty lines are not available, they have been imputed based on income levels, as there is a strong relationship between national income and national poverty lines. Where national poverty headcount ratios and/or poverty gaps are not available, which was the case for a small number of countries, we used the average for countries with similar levels of income.

A final calculation factored in the cost of providing a transfer to cover the national poverty gap. This includes exclusion and inclusion errors as well as administration costs. The same approach was adopted as in Greenhill et al., whereby the transfer cost is assumed to be roughly twice the size of the national poverty gap, except in countries with very high levels of poverty, which would be expected to have lower inclusion errors. The details behind this estimate are in a background paper for Greenhill et al. (2015).

Methodology for calculating available revenue/spending

These calculations follow the methodology applied in Greenhill et al. (2015) and presented in detail in Manuel and Hoy (2015). A number of steps are taken to calculate the potential level of revenues and total spending available to invest in the effort to leave no one behind in relation to education, health and social protection:

A. For public revenues:

• Use assessments of the tax capacity of countries – based on the midpoint of estimates undertaken by the World Bank (Le et al., 2012) and IMF (Fenochietto and Pessino, 2013) – to calculate their potential level of public revenues; such an approach helps to address concerns that countries should take primary responsibility for mobilising resources to leave no one behind and that countries failing to adequately mobilise their own resources should not be rewarded with higher levels of aid.

• Assume that 50% of these revenues should be allocated towards education, health and social protection; this is based on recognising that this represents the typical allocation towards these sectors for OECD countries.

B. For aid:

• Assume that 50% of future aid levels are allocated towards education, health and social protection, in order to support efforts to leave no one behind.

Summing A and B for each country produces a figure for the levels of resources (from domestic public finance and aid) available to invest in the effort to leave no one behind in relation to health, education and social protection. On this basis the revenues and spending available for our country groups are presented below:

Table A4: Revenues and aid potentially available (\$ million)

Group	Total cost
Low-income countries (LICs)	51,360
Middle-income countries (MICs)	2,472,748

The spending gap for each country can then be calculated on the basis of comparing the costings for each country with the potential level of resources available for spending on education, health and social protection. On this basis, the spending gap calculated for each country group is presented in Table A5.

Table A5: Spending gap (\$ million)

Group	Total cost
Low-income countries (LICs)	69,868
Middle-income countries (MICs)	-1,854,763

NB. Although costings data were available for 77 countries, in two of these countries the full revenue/ spending availability data were not available. The spending gap figure is, therefore, calculated on the basis of a sample of 75 countries.

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