NIGERIAN PUBLIC AWARENESS AND KNOWLEDGE OF THE MILLENNIUM DEVELOPMENT GOALS (MDGs) AND THEIR LEVEL OF IMPLEMENTATION IN NIGERIA

Jude Nwakpoke Ogbodo, MSc, MA
School of Journalism and Media, University of Central Lancashire, UK
Nnanyelugo M. Okoro, PhD
Mass Communication Department, University of Nigeria, Nsukka

Abstract

This study was aimed at assessing the status of Nigerian public awareness and knowledge of the Millennium Development Goals (MDGs) and their level of implementation in Nigeria. Survey research design was used to this effect. Contrary to speculations from all quarters that Nigeria is on the verge of achieving the MDGs, this study revealed that the level of implementation of MDGs in Nigeria is still at its lowest ebb. Based on the findings, it is recommended that Nigerian government should as a matter of necessity and urgency, select and pursue vigorously at least four of the goals that are manageable and more critical than others instead of pursuing all at the same time and losing all at the end. It will make sense if all impediments hampering the achievement of the MDGs are removed and very quickly too.

Keywords: Nigerian public, Awareness, Knowledge, Millennium Development Goals

Introduction

Over the last 14 years, there has been an accelerated effort by World leaders to make the world a better place to live in. Thus, ''as the world was entering a new millennium, acknowledging the centrality of human development, the United Nations General Assembly, in its Millennium Summit in 2000, adopted the Millennium Development Goals (MDGs), a time bound set of goals to overcome some basic human deprivations'' (Jahan, 2003:2). These goals are the offshoots of various global summits and conferences, and they reflect the desire and commitments of development stakeholders around the world to ensure basic human development for all (Jahan, 2003).

The above view by Selin Jahan¸ is indeed a bird-eye view of what prompted the MDGs. Thus, as developmental issues continued to pose difficulties for different countries, especially the less developed countries (LDCs), the world leaders agreed to a set of time-bound and measurable goals and targets for eradicating poverty, hunger, diseases, illiteracy, discrimination against women, environmental degradation and other major critical issues on which the goals are focused. The MDGs are therefore, the summary of the resolutions reached at different conferences, forums, seminars and workshops organized by the United Nations to make the world more habitable and interesting to live in. To achieve this feat, all the problems facing mankind especially in the less developed countries were summarized into eight goals, 18 targets and 48 indicators (Higgins, 2013).

Looking through these goals, Hampo (2005:8) notes, that "it appears that the world body (UNO) has Africa at the back of their minds while drawing up these goals". Without mincing words, MDGs if achieved are capable of re-writing the *chequered history* of Africa and other countries still battling with acute water shortage, poverty, gender disparity, illiteracy, maternal and child mortality, environmental degradation and HIV/AIDS pandemic.

Like any other development objectives, the achievement of MDGs requires, among other things, conducive policy frameworks, sufficient resources and enabling institutional environments (Jahan, 2003). In the same vein, the realization of the MDGs crucially hinges on good governance, which encompasses partnership and participation. This is also a view shared by Hampo (2005) in his assertion that the success of these goals depends very much on the quality of leadership in the affected countries. The above views shared by Jahan and Hampo are, therefore suggestive of the fact that MDGs can only thrive where the government has prepared adequate grounds for them to flourish.

People like Jahan (2003) have actually argued that the acronym MDGs should not only stand for Millennium Development Goals, but also Movement for Development Goals. MDGs are not only a set of goals, but they are also a movement. Suffice it to say that before the declaration of the MDGs, Fukuda-Parr (2004) observed that strategies over earlier decades had focused on economic growth, measuring progress through the instrumentality of *per capita* income. These agenda ranged from building infrastructure, human capital and an industrial base in the 1960s and 1970s, to economic liberalization in the 1980s and 1990s and institutional reforms of the 1990s. This means that even though issues such as hunger, education and child survival had remained areas of concern for the beginning, they never topped international development agenda until the year 2000, when the

United Nations unequivocally made the declaration on the MDGs (Cutter, 2013).

The MDGs: An Overview

Poverty as we noted earlier is a serious global challenge that requires a serious global frontal attack. Jahan was aware of this in his revelation that in developing countries, ''nearly one in every five people is undernourished'' (Jahan, 2003:5). Irked by this revelation, the United Nations decided to prompt an end to extreme poverty and hunger and other challenges of mankind in the world today. This accounts for why goal one of MDGs is poverty eradication This is more so in view of the fact that poverty for instance, is no longer a southern problem today, it is increasingly becoming a northern issue because in every north there is south, and in every south there is north (UNDP, 2003).

The goal two is on achieving universal primary education. Globally, the primary school completion rate has risen from 78 to 83 percent and the pace of progress in many countries seems to have accelerated (GMR, 2007). However, there are still some countries that lack data for tracking progress (MDGs REPORT 2013). From the available records in Nigeria, the universal basic education (UBE), has achieved marked improvement in school enrolment. For instance, the executive summary of the MDGs Report (2005: ix), shows an ''improved efficiency of primary education, with higher completion rates, and increased enrolment in primary schools. However, the full realization of UBE still faces challenges related to universal access, equality, quality, funding and management''.

The goal three on promoting gender equality and empowering women has suffered a global neglect because ''even though progress for women is manifested on several fronts, the discrimination against women remains universal…women continue to be extremely discriminated on political corridors, which are still dominated by men. Worldwide, women constitute less than 10% of the legislators'' (Jahan, 2003, p. 6). This Jahanian view captured it accurately but we dare to say that Nigeria has even a gorier story. This is not to downplay the 2012 (MDGs report) in Nigeria, which upheld that women appear to have become increasingly favoured in wage employment in the non-agricultural sector. The same report equally admits that gender inequality has remained a sore point of the educational system, with low representation and full participation of girls falling from behind as they move up in the education ladder, especially in the Northern Nigeria where girl-child education still faces heavy restrictions.

The goal four is on reducing child mortality. Available statistics indicate that there exist unacceptable rates of child mortality in Nigeria

(Bretagne, 2013). This is despite the huge amount of money government claims to have pumped into this core area to bring an end to it. According to GMR (2013), child mortality lags behind other goals, even with the availability of simple, low-cost interventions meant to prevent millions of deaths yearly. The escalating cases of insurgency in most countries, especially in Nigeria must have contributed indirectly to this situation.

Improving maternal health is the goal five. This goal seems to have enjoyed stakeholders' attention, but there seems to be no tangible result to show for this. It is now, a national emergency as women who die as a result of pregnancy related cases continue to increase at an alarming proportion (Ojoh, 2012). In the rural areas of Nigeria for instance, drugs are out of reach of the poor women who often resign to fate because they could not afford too much money required to buy (even adulterated) drugs. However, it is on record that more women are now encouraged to go to hospitals for safe child delivery (Kidcare, 2014).

The goal six of the MDGs is on combating HIV/AIDS, malaria and other diseases, but the prevalence rate of HIV/AIDS in the world in general and Nigeria in particular is better seen than imagined. Since the identification of the first HIV/AIDS case in 1980s, national, regional and state prevalence has varied significantly at low, high and sometimes unsteady rates in Nigeria (Oyefara, 2013). The Global Monitoring Reports 2009 indicates that an estimated 3 million people were lost to HIV/AIDS in 2007. While the spread of this epidemic has slowed in the Sub-Saharan Africa, it is rapidly spreading in Eastern Europe and Central Asia (Bertozzi, *et al.*, 2006).

The report also revealed an estimated 300 to 500 million cases of malaria, and 1-2 million deaths, mainly among children in the Sub-Sahara Africa annually. Meanwhile, there are several homegrown and international initiatives that hold promise on checking and eradicating malaria in this part of the world. For instance, with support from the Dutch and the "Roll Back Malaria" initiative, the World Bank is persistently leading efforts at galvanizing and implementing a global subsidy for artemisinin-based combination therapy, the most promising new treatment available for this monster because resistance to traditional drugs has grown (Giovagnoli, 2008).

The goal seven seeks to ensure environmental sustainability. It seeks to integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources. It also seeks to halve, by 2015, the proportion of people without access to safe drinking water and basic sanitation as well as achieving a significant improvement in the lives of at least 100 million slum dwellers by 2020 (MDGs Reports, 2013). Saying that Nigeria is endowed with abundant environmental resources is saying the obvious. However, high population

growth rate and the unending struggles to possess or harness these resources pose a big threat to environmental sustainability. The use of energy for commercial purposes has also contributed to the environmental woes of Nigeria. This is because, despite the substantial increase in energy consumption over the period, the efficiency and use gain have been insignificant. Statistics show that ''GDP per unit of energy use was $0.7 in 1980. By 1997 the figure rose to $1.1 but it has been virtually stagnant at $1.2 in 1999 and 2000 (Nigeria MDGs Report, 2005). In Nigeria, cases of gas flaring and other forms of environmental pollution have been incessant. A lot of action plans, policies and campaigns to boost environmental sustainability, are in place but they don't seem to have been fully implemented to achieve this goal.

On developing global partnership for development, which is the nexus of the goal eight, Nigeria has not fared too well. This is largely due to corruption that has engulfed every sector in the country thereby making Nigeria's image unacceptable to the international community. In response to this menace, the Federal Government has introduced a *Due Process* mechanism in all sectors to promote transparency and good governance. To launder Nigeria's image, rebranding project has also been launched, but it has died as usual. Debt management office and other relevant institutions are also being strengthened. This has produced some positive results, as investors' confidence is already witnessing a rebirth despite the spate of violence and insurgence that have beclouded the country in recent time.

Statement of the Problem

The Millennium Development Goals (MDGs) are set to be achieved by 2015. With this deadline looming, it is pertinent to assess the level of public awareness and knowledge of these lofty goals in Nigeria. Again, Nigeria has continued to grapple with so many challenges ranging from general insecurity to political instability, ethno-religious crises, ecological problems, economic stagnation, poverty, low literacy level, acute water shortage, out-break of pandemic diseases among others.

In the past, Nigeria launched so many lofty home-grown programmes meant to better the life of its citizenry. For instance, the Operation Feed the Nation (OFN), Green Revolution (GR), War against Indiscipline and Corruption (WAIC), the Heart of Africa (HoA) and the like have all come and gone with little or no success because so many people did not know about the existence of such projects and their subsequent demise. The MDGs, despite their loftiness and globalized scope cannot be different if public awareness and knowledge are not made part of it. Without the pressure which comes from public accountability demand as a result of

awareness and knowledge, these commitments are less likely to be achieved. This study was designed to investigate this problem.

Research Questions: In order to achieve the objectives of this study, the following research questions were formulated:
1.   What is the level of Nigerian public awareness and knowledge of the MDGs?
2.   What is the level of implementation of the MDGs in Nigeria?
3.   Are knowledge and awareness of the MDGs more predominant among the upper class than their lower class counterparts in Nigeria?

Review of Empirical and Theoretical Studies: Periscoping the Health MDGs
        The goals: four, five and six deal with health of children, women and indeed everybody. The goal four is on reducing child mortality; the goal five is on improving maternal health, while the goal six seeks to combat HIV/AIDS, malaria and other diseases. The above goals are also called health MDGs (UNESCO and ECA, 2010). These goals are interrelated and interdependent as trying to tackle one involves the other. For instance, to tackle poverty (goal one) a healthy population that could fight this is needed. In the same vein, to have good health, adequate food and natural resources are highly needed.
        In a study "Mortality Pattern in Children: A Hospital Based Study in Nigeria" carried out by George, Alex-Hart and Frank-Briggs (2009) the scholars used a retrospective study method to review all case files of patients aged one month to 16 years, admitted into the Paediatric wards of the UNIPORT Teaching Hospital, Port Harcourt, Nigeria over a 2-year period. The result showed that out of the 2,174 admissions during the study period, sixty one of the total number of admissions died in the children's medical wards. The commonest causes of death were HIV/AIDS and bronchopneumonia as well as malignancies. This finding is in tandem with the finding by Kayode, Thanny and Abisiga (2011) which upheld that mortality among children in Nigeria is alarming. However, the area of disagreement between the two sets of researchers is that, George *et al.* (2009) in the break-down of their findings observed more male deaths than female deaths among children, whereas Kayode *et al.* (2011) found that girls' mortality rates are higher than those of boys. This, they attributed to early marriage, premature sexuality, abortion etc. which are more rampant among the girls.
        Reducing by two-thirds between 1990 and 2015, the under-five mortality rate is the target of goal four. Towards this end, a study by Oseji and Okolo (2011) sought to determine the immunization and nutrition status

as well as general well-being of primary school children through pre-enrolment medical examination in Delta State, Nigeria. They found that out of 95 children who were examined, 46 (54.3%) had evidence of completing routine immunization including measles. The calculation of height-for-age also revealed a stunting and severe stunting in 16.3% and 18.6% of the children respectively that were sampled. Though these findings fit into the problems of the researchers, 95 children are too meagre to be representatives of the children in Delta State.

Elsewhere, Sow, Ndiaye, Diarra, and Dia (2012) in their *Study of the Availability and Affordability of Medicine for Childhood in Senegal* sought to determine the rate of availability of medicine for childhood according to the pathologies. The researchers found that majority of medicines for childhood were not available in the national pharmacy of supply for medicine. It also shows that available medicines were priced out of the reach of the poor with an average availability of generic childhood medicines in public sector at <50% of all medicines except anti-retroviral drugs. This shows that inequitable access to childhood medicine affects the poor so negatively. The result of the study also finds orchestration in a study by WHO (2004) on *"Medicine Prices in Ghana"* which revealed that medicines were unaffordable in Ghana.

The goal four is on reducing maternal mortality. Again this is one area that has continued to raise critical questions among discussants and analysts. The target of this goal is to reduce by two thirds between 1990 and 2015, the maternal mortality ratio (MMR). Allaying fear on this ugly trend, Fraser (2005:36) remarks that ''the high level of maternal death in the developing world is a tragedy in itself. It reflects a gross violation of human rights by the world's governments. At a conservative estimate, at least 530,000 women die each year from causes related to pregnancy and child birth''. In all, ''African countries still show wide disparities in maternal and reproductive health'' (MDGs Report, 2013). The above findings therefore, bring an insight into the prevailing situations of severe pregnancy-related complications which induce high levels of morbidity as well as affect around millions of women each year and in many cases leading to long-term disability or permanent incapacitation.

In their study, Mohammed and Dong (2012) sought to know how MDGs 4 and 5 could be achieved using NHIS approach. Like many other lofty initiatives with limited impact on the people, the researchers discovered that due to some obvious endogenous and exogenous challenges which NHIS-MCH (National Health Insurance Scheme-Maternal and Child Health) has faced over the years, achieving this goal remains a doubt. This is because only ''a total of 615,101 people (women and children) have been covered in the phase one in June, 2010'' (NHIS-MDGs/MCH, 2011). This finding is

however a far cry considering that women and children constitute not less than 50% of the population of Nigeria estimated at 140 million as shown in the 2006 National Population Census figure. Kayode *et al.* (2011:155) painted a gorier picture of this situation in their findings that ''every year more than half a million women die from complications in pregnancy and childbirth. Over 300 million suffer from avoidable illness and disability... In the poorest parts of the world (Nigeria inclusive) (emphasis mine) the risk of a women dying as a result of pregnancy or childbirth is about 1 in 6''. Also, a study by Abrejo, Shaikh, and Saleem (2008) shows that Pakistan has one of the highest maternal mortality ratios in the world. This, they attributed to incessant cases of unmet family planning, unsafe abortions, low literacy rate, among others.

On goal six – combating HIV/AIDS, malaria and other diseases, findings show that ''HIV/AIDS is a critical "poverty" issue which unfortunately affects women and children many of whom are orphaned. Due to this scourge, the term "female-headed household" is rapidly giving way to "child-headed household" as the number of victims of HIV/AIDS is on the increase'' (Kayode *et al.* 2011:156). This study carried out in Nigeria, also revealed that apart from HIV/AIDS, diseases such as diarrhea, pneumonia and malaria account for 52% of under-five deaths worldwide. While this is a glaring reality in Nigeria, the situation is slightly different in Albania. For instance, a survey by (HDPC, 2002) shows that Albania is ranked among countries with a low prevalence rate of HIV/AIDS with the percentage of infected persons less than 0.1% of the entire population as at 2002. The above findings indicate that only countries with workable multi-sectorial approaches can achieve this goal.

Awareness and Knowledge of MDGs

One of the key objectives of this study is to ascertain the level of awareness and knowledge of the MDGs. At several times so many developmental initiatives were lost to lack of awareness and knowledge among other factors. In a study by Connelly, Doyle and Dwyer (2008) on "*Public Opinion and Development Issues: A Survey of Irish University Students' Opinions",* the researchers found, though not surprisingly that there exists a high level support for development initiative like MDGs, but with a relatively low level of knowledge. In other words, public awareness of the goals is minimal but the very few who are aware of the goals lend support to the possible achievement. In view of this, Nashash (2013:45) argues that for MDGs to be achieved ''grassroots is required before demand, where people must first be aware of the MDGs and work with them to demand their fulfillment from their governments''. The implication of this is that awareness can be linked to possible achievement of MDGs.

The above finding finds reinforcement in "Measuring Knowledge, Attitudes and Behaviours concerning sustainable Development and Tenth Grade students in Manitoba", by Michalos (2012) which upholds that knowledge and favourable attitudes towards sustainable development such as the MDGs can lead to favourable behaviour. Ironically, McDonnell (2004) observed that early results from polls in Canada, Sweden, the United Kingdom and the United States indicate little awareness about the existence of the goals. They also observed that people are skeptical about the possibility of achieving goals on environment and halving extreme poverty. The above insight gives a clue of what the situation could be in Nigeria. If residents of countries such as Canada, UK, Sweden and the United States have had little knowledge of the MDGs, it is assumed that Nigerians also have even the least knowledge of the goals given the level of digital (information) divide. But as McDonnell (2004) affirms, there are wide country differences.

A similar result on "Public Opinion Polling and the MDGs" by Fransman *et al*. (2004) ironically showed that even in Britain, there is very little awareness about the existence of the MDGs. This is unlike the finding by Kenneth (2012). The study which was carried out in Ogun State, Nigeria showed that 85.2% of the 54 respondents held that they were aware of the MDGs, but just three of the respondents could outline the goals while others just mentioned some of the goals and their targets. The study further drew a line between awareness and knowledge. The study was however, deficient in view of the fact that 54 respondents were not representative enough in a state with over 3 million residents according to the 2006 National Population figure.

Theoretical Framework

This study adopted the ***knowledge gap theory***, which is an offshoot of several studies on political campaigns. The proponents of this theory (Blumler and McQuail, 1968) found tall-standing evidence that runs counter to the hypotheses which measured gap closing between social groups that occur in short term. To their chagrin, they came to realize on the contrary that the ruling or upper class citizens who ironically are in the minority group and live mainly in the urban areas enjoy more access to information than their lower class counterparts. This was enough to establish the fact that there exists a yawning gap between the various social classes in one society.

This is a view shared by McQuail (1993:276) that ''There is certainly a class bias in attention to "information-rich" sources and strong correlations are persistently found between social class attention to these sources and being able to answer information questions on political, social or economic matter''. There are two contending tenets of the knowledge gap hypotheses.

The first postulation maintains that due to the rising and biting cases of social inequalities made more complex by differences in social classes and *I-don't-care* attitude of those at the apex, distribution of information in a prevailing social system setting tends to favour the upper class at the expense of the lower class who may receive the information when it must have gone stale. The second tenet of the theory shows that apart from the one-sided or lopsided information flow in the social system, some groups are better informed about certain issues or agendas than others within the same social system.

In Nigeria, incentives such as improved seedlings, fertilizer, scholarship opportunity, free maternal and child treatment etc. are always hijacked and diverted by the few information-rich privileged in the society. If this remains the situation how can the poor Nigerians be aware of or key into the lofty MDGs? In a country where illiteracy and poverty have continued to gain upper hand, it becomes increasingly obvious that the poor segments of the society will hardly tap from the fountain of the MDGs unless the information (digital) divide is bridged and urgently too.

Methodology

Survey research method was adopted for this study. The instrument for data collection was questionnaire. The samples for this study were drawn from two states each from the six geopolitical zones of Nigeria and the Federal Capital Territory using multi-stage sampling techniques. Using the Top man's statistical formula with an assumed probability of 50% each for success and failure and an error margin of 5% the researchers arrived at 384 as sample size. But only 301 copies of questionnaire were retrieved and found useable.

Data Presentation/Analysis

This study adopted simple percentages or frequency tables to ensure its better understanding by the members of the public. This method of data analysis is reputed for its simplicity. The analyzed data are hereunder presented:

Table 1: Respondents' awareness of the MDGs

Response	No of respondents	%
Yes	229	76.1
No	72	23.9
Total	**301**	**100**

The above table clearly shows that out of 301 respondents, a total of 229 representing 76.1% affirmed that they were aware of the MDGs, while 72 of them representing 23.9% said they were not aware of the MDGs.

Table 2: Respondents' knowledge of the goals

Response	No of respondents	%
Yes	184	61.1
No	117	38.9
Total	**301**	**100**

Table 2 shows the respondents' knowledge of the MDGs. Out of 301 respondents, a total of 184 or 61.1% said they have knowledge of the MDGs, while 117 of them representing 38.9% said they don't have knowledge of the MDGs.

Table 3: Level of implementation of MDGs in Nigeria

Response	No of respondents	%
Very high	54	17.9
Very low	137	45.5
I don't know	110	36.5
Total	**301**	**100**

Table 3 above shows respondents' view on the level of implementation of MDGs in their respective places within Nigeria. Thus, out of 301 respondents, only 54 or 17.9% rated it as very high; a whopping 137 or 45.5% rated it as very low, while 110 or 36.5% were unable to take a stand.

Table 4: Whether knowledge and awareness of the MDGs are more prevalent among the urbanites than their rural counterparts.

Response	No of respondents	%
SA	188	62.5
A	65	21.6
D	19	6.3
SD	29	9.6
Total	**301**	**100**

The above table 4 shows responses on whether knowledge and awareness of the MDGs was more prevalent among urbanites than their rural counterparts. Thus, out of 301 respondents, 188 or 62.5% strongly agreed; 65 or 21.6% of them agreed; 19 or 6.3% disagreed, while 29 or 9.6% strongly disagreed.

Discussion of Findings:
RQ1: What is the level of Nigerian public awareness and knowledge of the Millennium Development Goals?

The above question was answered in tables 1 and 2. Findings show that 229 or 76.1% out of 301 respondents were aware of the MDGs, while only 72 or 23.9% of them were unaware of the MDGs. By this wide margin of awareness, one can confidently conclude that majority of Nigerians are aware of the existence of the MDGs. On the knowledge level, the findings

show that 184 or 61.1% said they had knowledge of the goals, while 117 or 38.9% said they had no knowledge of the goals. The above finding is in dissonance with the earlier finding by McDonnell (2004) which holds that early results from polls in Canada, Sweden, the UK and the US reveal that there is very little awareness about the existence of the goals. By implication, Nigeria can no longer be written off in terms of awareness and knowledge of global commitments or issues.

Similarly, the above finding disagrees with one of the findings of Fransman *et al* (2004) on public opinion polling and the MDGs in the UK. They had found with dismay that there is a little awareness about the existence of the MDGs in the UK. In view of the fact that the above researchers used a multi-country approach to come up with the above findings, it becomes even more substantiated that Nigerian publics, though not all have come to be aware of certain global commitments more than their European counterparts who boasts of more advanced digital communication technologies at their disposal. The study also finds orchestration in the one by Kenneth (2012), who had found that majority of Nigerians were aware of the MDGs, even though his study was rather done with minimal sample size. By implication, it is safe to agree with Nashash (2013:51) that ''awareness is a backbone for achievement''.

RQ2: What is the level of implementation of MDGs in Nigeria?

The answer to the above research question is conspicuously available in table 3. It shows that 137 or 45.5% of the respondents rated the level of implementation of MDGs in Nigeria as very low as against 54 or 17.9% which rated the implementation as very high. On the other hand 101 or 36.5% could not take a stand on the implementation of MDGs in Nigeria. This finding disagrees with the 2002 HPDC survey in Albania which upholds that as at 2002, Albania has recorded a remarkable effort that keeps it on track to achieving the MDGs by 2015.

This finding came rather as shocking in view of the fact that 68.1% of the respondents had earlier strongly agreed that Nigeria has the potential and the wherewithal to achieve the goals by 2015. Thus if the above finding is anything to go by, it means that Nigeria may no doubt parade and boast of all human and material resources but lacks the will to achieving the goals. This finding further reinforces one of the findings in Govindaraj and Sarna (2003) which found that many countries may not achieve the MDGs not because they lack the potential to do so, but due to the mismanagement of the potential. Without mincing words therefore, Nigeria can be said to be on the brinks of not achieving the goals by 2015 as made more glaring from the findings above.

RQ3: Are knowledge and awareness of the MDGs more prevalent among the upper class than their lower class counterparts in Nigeria?

Again research question 3 is not without answer. As shown in table 4 of this work, a whopping 188 respondents representing 62.5% strongly agreed that knowledge and awareness of the MDGs are more prevalent among the upper class citizens who reside mainly in the heart of the town than their lower class counterparts who reside in the rural areas; 65 of them representing 21.6% agreed; 19 or 6.3% disagreed to this effect, while 29 or 9.6% strongly disagreed.

The above finding is rather a reinforcement of the major theoretical framework of this study which is anchored on knowledge gap. It strengthens the *upper-centric* or what this study describes as *centre-centric* flow of information which is the basic postulate of the knowledge gap theory. The implication of this study is that if knowledge of these pro-poor goals resides only with the privileged few, then the aim is defeated as there may not be any accountability demand from the target population. Put more succinctly and in tandem with the submission of Jahan, (2003) the poorest people in whose name objective of poverty eradication is pursued may not have heard of the MDGs. Until they do, they cannot hold anyone accountable for achieving them. While they remain ignorant of them, they are not empowered by them. In other words, if knowledge and awareness of such lofty initiatives such as the MDGs are made the exclusive reserve of the *haves* at the expense of the *have-nots* it stands to imply that the aim is defeated and Nigeria may not achieve the goals.

Conclusion

Nigeria is no doubt blessed with enormous human and material resources capable of placing it on the acme to the envy of other nations. Whereas Nigeria boasts of these resources, indications are rife that the achievement of the MDGs is out of grip. While it is evident that some of the goals may be achieved at a significant level, it is also crystal clear that available indications show that majority of the goals may not be achieved. As far as Nigeria is concerned, the MDGs projects and programmes have been implemented at a very slow pace. The low level of implementation of these goals means that potentiality or availability does not mean achievability.

Recommendations

Based on these findings this study recommends that:

1.   Government should hasten efforts in funding and implementing MDGs projects, programmes and policies. This will boost the achievability of the goals.

2.   Nigerian mass media as the watchdogs of the society should rise up to their social responsibility by eschewing all forms of sycophancy, but tell government and the public the true situation of things objectively.

3.   The Millennium Development Goals are too vague. All of them are critical and very important if achieved, but some of them are more critical than the others. A country like Nigeria should pursue vigorously at least four of the goals, especially the ones that are so critical to our national interest and development (for instance, goals 1, 3, 4 and 5: Eradicate extreme poverty and hunger, promote gender quality and empower women, reduce child mortality, and improve maternal health), instead of trying to achieve all of them when it is becoming increasingly obvious that all of them may not be achieved within the remaining timeframe.

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