The Millennium Development Goals in Africa:
Progress and Challenges
The Millennium Development Goals in Africa: Progress and Challenges

August 2005
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## Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>AfDB</td>
<td>African Development Bank</td>
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<tr>
<td>APRM</td>
<td>African Peer Review Mechanism</td>
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<tr>
<td>AU</td>
<td>African Union</td>
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<tr>
<td>CEDAW</td>
<td>Convention on the Elimination of All Forms of Discrimination Against Women</td>
</tr>
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<td>CHGA</td>
<td>Commission on HIV/AIDS and Governance in Africa</td>
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<tr>
<td>ECA</td>
<td>Economic Commission for Africa</td>
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<tr>
<td>GNI</td>
<td>Gross National Income</td>
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<tr>
<td>GNP</td>
<td>Gross National Product</td>
</tr>
<tr>
<td>HIPC</td>
<td>Heavily Indebted Poor Countries Initiative</td>
</tr>
<tr>
<td>MDG</td>
<td>Millennium Development Goal</td>
</tr>
<tr>
<td>NEPAD</td>
<td>New Partnership for Africa's Development</td>
</tr>
<tr>
<td>ODA</td>
<td>Official Development Assistance</td>
</tr>
<tr>
<td>PRSP</td>
<td>Poverty Reduction Strategy Paper</td>
</tr>
<tr>
<td>REC</td>
<td>Regional Economic Community</td>
</tr>
<tr>
<td>UNCED</td>
<td>United Nations Conference on Environment and Development</td>
</tr>
<tr>
<td>UNDP</td>
<td>United Nations Development Programme</td>
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Preface

As leaders gather in New York for the World Summit 2005, the publication of this update on the Millennium Development Goals in Africa could not be more timely. Given the Summit’s brief to benchmark progress towards the 2015 target date, Africa’s struggle to get on track is at the heart of the MDG story.

We at ECA have looked closely at African efforts to achieve the Goals. While the overall message is that we are falling behind and need urgently to find new and effective strategies to move forward, there are important successes to report and they must be celebrated and shared as best practices for others to emulate.

This short report documents our findings and draws on other relevant research to offer practical policy advice on how Africans in government, business, civil society and other sectors can work together to accelerate progress.

Along the way we have contributed to the African Union’s Common African Position on the MDGs and we have collaborated with NEPAD whose framework incorporates the Goals; and at ECA’s annual Conference of Africa Ministers of Finance, Planning and Economic Development in Abuja this year, ministers took the opportunity, as key policy makers, to look at the reasons for slow progress and recommit themselves to meeting the Goals by 2015. Their statement appears as an annexe to this report.

In these pages, readers will find a status report on progress towards each Goal, a review of the challenges impeding progress and detailed proposals for member states and their citizens to adopt. We hope it will prove a valuable contribution in a noble cause, vital to Africa’s future.

K.Y. Amoako  
Executive Secretary  
Economic Commission for Africa
1. The MDGs: What are they and where are we?

The urgent need to address poverty around the world and the opportunity provided by the Millennium Development Goals (MDGs) have made them the rallying cry of a global partnership and the cornerstone of international and regional development policy. For the first time in history, a diverse range of players across the globe has agreed on a common platform of priorities for addressing the many faces of extreme poverty, hunger, joblessness, diseases, lack of shelter, gender inequality and environmental decline (see Table 1 and centre-spread).

The MDGs are measurable targets attached to a timeframe for making a difference in the lives of billions of people. Governments in developing and developed countries have jointly committed themselves to provide the resources and the policies to implement these Goals.

African leaders have adopted the MDGs as a tool within their wider development planning framework, in order to end the tragic conditions in which so many Africans are deprived of their basic human rights, such as health, education, shelter and security. By making the Goals work as tools for coordinating development policy, within broader development priorities, African leaders can tackle the extreme poverty that is hobbling their people, make their countries more productive and reduce the risk of conflict.

Between 1990 and 2002, the world overall made significant progress towards achieving the MDGs: average incomes went up by 21 per cent; the number of people living in extreme poverty declined by 130 million; life expectancy rose from 63 years to 65 years; and primary school enrolments and access to safe drinking water and sanitation increased. Progress varied across regions, between countries and within countries.

Despite significant progress by some of its subregions and countries, Africa fared worst among the world’s regions. It saw the slowest progress overall and suffered reverses in some crucial areas. In sub-Saharan Africa (SSA), the number of people living in extreme poverty (on US$1 a day or less) rose from 217 million in 1990 to 290 million in 2000, the majority of whom are women. Adult life expectancy is reckoned to have declined from a little over 50 years to 46 years. Based on the trends of the past 15 years, SSA will not achieve the MDGs on time.
Table I: Progress towards the MDGs in SSA – 1990 – 2015

<table>
<thead>
<tr>
<th>MDG</th>
<th>1990</th>
<th>2000</th>
<th>2015 (Target)</th>
</tr>
</thead>
<tbody>
<tr>
<td>MDG1: People living on less than $1 (PP) a day (% of population)</td>
<td>45</td>
<td>46</td>
<td>22</td>
</tr>
<tr>
<td>MDG2: Primary education completion rate (% of relevant age group)</td>
<td>57</td>
<td>55</td>
<td>100</td>
</tr>
<tr>
<td>MDG3a: Promoting gender equality: primary education (% of girls in school)</td>
<td>0.82</td>
<td>0.87</td>
<td>1</td>
</tr>
<tr>
<td>MDG3b: Promoting gender equality: secondary education</td>
<td>0.75</td>
<td>0.82</td>
<td>1</td>
</tr>
<tr>
<td>MDG4: Under-five mortality rate (per 1,000 births)</td>
<td>187</td>
<td>174</td>
<td>62</td>
</tr>
<tr>
<td>MDG5: Maternal mortality rate (per 100,000 live births)</td>
<td>920*</td>
<td>917</td>
<td>230*</td>
</tr>
<tr>
<td>MDG6: Combating HIV/AIDS, malaria and other diseases: HIV/AIDS – In 2001 youth prevalence was 13% for men and 6% for women Malaria - Only 7 out of 27 SSA countries with above 5% incidence use bed nets for prevention. Tuberculosis (TB) - had a prevalence of 350 per 100,000 in SSA in 2001</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>MDG7a: Access to improved water source (% of pop.)</td>
<td>54*</td>
<td>58</td>
<td>77</td>
</tr>
<tr>
<td>MDG7b: Access to improved sanitation services (% of population)</td>
<td>55*</td>
<td>54</td>
<td>77</td>
</tr>
<tr>
<td>MDG8a: ODA flows (% of donors’ GNI)</td>
<td>On the decrease</td>
<td>Increase to 0.3%** in 2003</td>
<td>0.7% as agreed in Monterrey</td>
</tr>
<tr>
<td>MDG8b: Debt sustainability</td>
<td>N/A</td>
<td>Currently (2004) 12 African countries have reached completion point</td>
<td>-</td>
</tr>
</tbody>
</table>

Source: ECA 2005c
The MDGs as an international commitment to human development

Endorsed by over 180 member States at the United Nations General Assembly in September 2000, the MDGs are a recognition that 60 years after the end of World War II, the world remains far from the ideals of peace and prosperity inspired by the end of that global conflict. For Africa, the launching of the goals through a network of partnerships guided by the Millennium Declaration has served as a catalyst to spur long dormant programmes that, together, will bring the continent closer to its development aims.

The MDGs embody several national and international development initiatives

Contained in the eight goals, 18 targets and 48 indicators of the MDGs are a number of previous declarations, as well as regional, national and international initiatives: the 1995 Copenhagen UN World Summit for Social Development, the 1995 Beijing Fourth UN Conference on Women, the 1994 Cairo UN International Conference on Population and Development, the 1979 Convention on All Forms of Discrimination Against Women (CEDAW), and the 1992 Rio UN Conference on Environment and Development (UNCED), among others.

The MDGs are far from being the only solution to the development challenges of any specific country. This set of Goals, ranging from getting more girls into school to better environmental management, work to kick-start a development that takes into account the links between different sectors and needs. Unlike past donor-driven development programmes, this time each country is responsible for working out the details of comprehensive development frameworks and funding strategies.

For Africa, the MDGs provide a new impetus to reverse the deterioration in human development evident especially since the major economic crises of the 1980s. In SSA, the two decades preceding the turn of the millennium were characterized by increasing economic deprivation and generalized misery, with high incidences of poverty, diminishing food security, the dire effects of the HIV/AIDS epidemic, environmental destruction, increasing unemployment, and general reversals in human development indicators, especially in primary education, health and access to water.

The MDGs listed in Table 1 were described by regional partners as a “laudable initiative to accelerate human development and facilitate the gradual but effective integration of the developing world, particularly Africa, into the global economy.” This endorsement is especially valuable at a time when many countries are rebuilding their national economies after years of conflict, or are emerging as new democracies after long periods of military or civilian dictatorships.
Anchored within national development strategies in many African countries, the MDGs have also provided a vehicle for broad-based, community participation in development, including decision-making at the grassroots level. Above all, they have provided the basis for global partnership on a broader scale than hitherto achieved. This is evident within existing programmes such as the New Partnership for African Development (NEPAD), which incorporated the Goals into its framework.

Provided development partners appropriately harness existing resources, most of the MDGs are achievable. Part of the challenge is making sure that programmes are interconnected, so that when addressing primary education, for example, a comprehensive development strategy would also incorporate natural resource management and health education.

The MDGs are not a ‘one size fits all’, across-the-board solution for all countries and all development challenges

<table>
<thead>
<tr>
<th>Integrating the MDGs into national plans – some examples</th>
</tr>
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<tbody>
<tr>
<td>• In Rwanda, MDGs have become targets for an interim PRSP. In addition, Government and civil society groups, taking the MDGs as common ground, discussed issues related to post-conflict recovery;</td>
</tr>
<tr>
<td>• In Tanzania, MDGs have provided a framework for long-term planning, with a PRSP that operates on a three-year cycle;</td>
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<tr>
<td>• In Senegal, the MDG report in 2001 stimulated greater participation in the PRSP process at a local level;</td>
</tr>
<tr>
<td>• Zimbabwe had a UN-supported consultative meeting with stakeholders who included private organizations, in an effort to contextualize MDGs at the national and local level and identify the most relevant goals for the country;</td>
</tr>
<tr>
<td>• In Ethiopia, the country’s Sustainable Development Poverty Reduction Paper (SDPRP) refers to MDG-relevant sector development programs in education, health, water, and Roads. Most SDPRP targets are in line with the MDGs.</td>
</tr>
</tbody>
</table>

Source: Jahan (2003) and ECA from official sources
2. What progress has been made towards achieving the Goals?

In general, Africa is behind the rate of progress required to achieve the MDGs. However, there are striking differences across countries and subregions. In particular, most of North Africa is likely to attain nearly all of the MDGs within the timeframe. In contrast, with few exceptions, SSA lags behind (Table 1).

Goal 1 - Eradicating extreme poverty and hunger

Although North Africa as a whole and a small number of SSA economies have the potential to reach the sub-goal of reducing extreme poverty by half by 2015, the slow pace of progress in the majority of countries indicates that as a continent, Africa is unlikely to reach this goal, given the current trends.

The number of poor people in Africa has actually risen since the 1990s by over 90 million, while the average income of the poor has declined, indicating worsening income distribution within the countries. On the whole, the proportion of people living with insufficient food has declined by only 3 percentage points since the starting point of the Goals in 1990, and hunger still prevails (see Figure 1). This is especially true for rural Africa.

The spectre of hunger continues to haunt most of the African continent. This year, the trauma faced by Niger brought once again to the world's attention the need to increase the long-term planning capacity of African countries. For many countries south of the Sahara, where most still rely on subsistence agriculture for survival, food security is directly related to the weather. Faced with consecutive years of poor agricultural production and consequent humanitarian crises, governments have had to spend scarce resources in purchasing emergency rations.

Despite slow progress in eliminating hunger and in achieving other MDG targets, 14 SSA countries - among 30 globally - managed to reduce the number of people living with hunger by at least 25 per cent. These countries had more stable and growing economies, coupled with investment in interlinked socio-economic policy.
Goal 2- Achieving universal primary education

The number of children attending primary school in Africa has increased rapidly during the past decade, from 50 per cent in 1990 to 61.2 per cent in 2000. Albeit significant, progress is insufficient to attain the Goal (Table 2).

Source: World Bank 2004
Table 2: Annual growth in net enrolment rates required to achieve EFA and historical trends (percentage points)

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<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>Central</td>
<td>71.00</td>
<td>2.86</td>
<td>0.03</td>
</tr>
<tr>
<td>East</td>
<td>53.99</td>
<td>4.60</td>
<td>0.07</td>
</tr>
<tr>
<td>North</td>
<td>82.83</td>
<td>1.72</td>
<td>0.22</td>
</tr>
<tr>
<td>Southern</td>
<td>75.27</td>
<td>2.47</td>
<td>0.01</td>
</tr>
<tr>
<td>West</td>
<td>44.66</td>
<td>5.53</td>
<td>0.21</td>
</tr>
<tr>
<td>All regions</td>
<td>61.18</td>
<td>3.88</td>
<td>0.54</td>
</tr>
</tbody>
</table>


Unfortunately, increased enrolment has not translated into completion rates. Overall, a mere 55 per cent of the children on the continent are able to complete a full course of primary education, against 57 per cent a decade ago. The remainder enter into child labour, poverty and the streets – and the girl child is the first victim.

Access to primary education is considered the first step in providing citizens with the tools to develop as individuals and as productive members of society. Some 14 African countries have already reached or have the potential to reach this Goal (centre-spread).4

Uganda’s higher economic growth leads to higher enrolment

Uganda has achieved a doubling of gross primary enrolment between 1996 and 1999. This happened after the country’s president, Yoweri Museveni, abolished school fees for up to four children per family, simultaneously sending a message to citizens that smaller families may be more affordable.

Even though enrolment did rise after 1996, getting those children through the door required more than lower fees. The Ugandan government was able to meet its objectives in the area of primary education because, as a prior condition, it established macroeconomic stability and prioritised social spending.

Uganda demonstrated political will by raising enrolment so quickly. But, as its education ministry pointed out, the government’s ability to do so was closely related to the nation’s emergence from two decades of war and instability to one of the highest economic growth rates in the world.

Source: Clemens et al. 2004
Goal 3- Promoting gender equality and empowering women

Faced with the role of women in traditional African societies, one of the most intimidating challenges for many African countries has been to guarantee access to education for the girl-child, and for young and adult women. Gender parity at the primary school level has been reached or is likely to be achieved in most Southern African countries such as Botswana, Lesotho, Mauritius, Namibia, Swaziland, and Zimbabwe.

In West Africa, more effort is needed in Benin, Burkina Faso, Guinea, Mali and Niger as their current status is low. In general, the rate of progress between 1990 and 2000 indicates that the North African, West African, and Central African subregions can achieve the goal before 2015 but not in 2005. The current level in Central and West Africa is below the SSA average.

On the political front, more women are in parliaments across Africa today than ever before. However, in most countries, African women remain vastly under-represented in politics, in the legislature, at the highest levels of the corporate sector and in economic institutions. More needs to be done for women to have their say in governance, democracy and decision-making. The participation of women is fundamentally important to fighting poverty.

Goal 4- Reducing child mortality

Reducing the under-five mortality rate in SSA has been painfully slow. The under-five mortality rate was 186 per 1,000 live births in SSA in 1990, and remained practically unchanged at 174 in 2002. On the other hand, in North Africa, the under-five mortality rate was 87 per 1,000 live births in 1990 and dropped significantly to 38 in 2003.

The success in North Africa may be directly attributed to focused strategies for combating preventable diseases such as polio, smallpox, and parasites, which cause one-half of the under-five deaths. In 2003, while 93 per cent of North Africa’s children received a full course of vaccinations, the figure for SSA remained at a dire 61 per cent.

Part of the problem lies in poor planning. African governments and their development partners continue to overlook the need to link health to other programmes. Too little is invested in facilities for the delivery of public health services and basic health education for communities. Despite a recent commitment by African governments to allocate 15 per cent of their annual budgets to health, most countries in SSA have not found it possible to remove fees for basic healthcare.

Another major issue is training and retention schemes for health workers, many of whom leave Africa for better pay and working conditions on other continents. It is es-
imated that to turn the health tide in Africa, especially with regard to the HIV/AIDS pandemic, the continent will require an additional one million health workers.

Goal 5- Improving maternal health

Apart from a few countries, the average maternal mortality rate for SSA remained practically unchanged between 1990 and 2000, with a rate of reduction of 4 to 16 per cent. In 2000, 917 mothers died in Africa for every 100,000 live births, virtually the same as in 1990. In some cases progress was also reversed and, for 18 countries, the maternal mortality rate was over 1,000 per 100,000 live births.

The situation is more encouraging in North Africa, where the maternal mortality rate is less than 150 per 100,000 births during the same time period. Most births in that subregion are attended by professional health workers, which impacts positively on reduced maternal and infant mortality. In Egypt, in 2002, skilled personnel attended 61 per cent of all births, leading to a 50 per cent decline in all maternal deaths in only eight years. In stark contrast, in SSA, only about 50 per cent of all births are attended by health workers, though exceptions are found in Cape Verde, Mauritius and Botswana.

Once considered a public health issue only, the issue of maternal mortality is increasingly connected to the status of women in society. Women’s lack of access to decision-making, employment, finance and education are at the root of this dilemma. Poor nutrition in girls, early sexual activity and teenage pregnancy all have consequences for these young mothers. Educated and empowered women are more likely to marry at an older age and to seek neonatal and postnatal care, all of which are crucial in reducing child and maternal mortality.5

Many women cannot afford health care. On a continent where most still live in rural areas and have limited access to health clinics or hospitals, community partnerships can be the most immediate means to better health. For example, the important social status of traditional birthing assistants, or midwives, in the community can be harnessed. Training of these professionals by the public health authority can provide rural women in Africa with safe pregnancies and deliveries, as well as access to family planning information and services.
Gambia on track to reduce maternal mortality through synergy across goals

Gambia has accomplished a 30 per cent reduction (from 1,050 per 100,000 in 1990 to 730 in 2000) in maternal mortality. At this pace, the West African nation might reach this MDG by 2015. With some discrepancy between the investment in health undertaken in the more prosperous south and in the northern subregion, there is still a way to go. To reach the Goal, Gambia must bring its maternal deaths down by at least another 60 per cent, to 262 deaths per 100,000 live births. In addition, halving the proportion of underweight children under five years old (an indicator of hunger), is a target likely to be met by 2015, provided the current trend continues or improves. A closely linked target, increasing access to safe drinking water is already achieved. The country reduced the percentage of the population without sustainable access to safe water, from 48 per cent in 1990 to 16 per cent in 2000.

Source: Government of Gambia and UNDP, 2003

Goal 6- Combating HIV/AIDS, malaria and other diseases

Seven out of 100 adults are living with HIV/AIDS in Africa. This rate is substantially higher in Southern Africa, where sexual behaviour, high domestic violence, and illegal drug use are some reasons for higher infection risk. Limited access to treatment drugs and lack of effective educational campaigns to reduce risk of infection remain serious challenges. Unwillingness to speak out and inadequate commitment to addressing issues of power relationships between men, women and youth also hamper the response to the pandemic. Adopting more people-centred programmes that take sexual behavioural norms and cultural practices into consideration may help to break the pattern of the disease. Just as important, however, is treating those already infected with the disease.

African governance at risk

In response to the governance challenge posed by the HIV/AIDS pandemic, in February 2003 the United Nations Secretary General Kofi Annan established the Commission on HIV/AIDS and Governance (CHGA) at ECA headquarters. It aims to equip African policy makers with the tools for addressing the profound structural impact that HIV/AIDS is having on the continent’s capacity to meet its development challenges. Led by ECA’s Executive Secretary K.Y. Amoako, CHGA is composed of senior specialists from the continent and other nations facing similar challenges. Its full report is scheduled for release at the end of 2005.

Source: ECA (2004b)
Malaria still accounts for the largest proportion of deaths especially among children on the continent. Part of the counter-strategy has been the distribution of insecticide-treated mosquito nets, which has increased tenfold since 2000. Curbing the spread of malaria is a complex challenge that calls for the involvement of often-ignored urban planners and management: building ventilated homes; ensuring communities are outfitted with appropriate drainage systems to avoid mosquito-breeding sites such as puddles and still water collected in garbage; and ensuring garbage collection and disposal is performed in a timely and efficient manner, among other measures.

At least 70 per cent of the 14 million people worldwide living with HIV/AIDS and tuberculosis (TB) – these diseases often go together – are in Africa. There, the number of new TB cases per 100,000 population (excluding those that are HIV-positive) nearly doubled between 1990 and 2003, from 142 to 274. Prevention and treatment efforts are being scaled up but more can be done to integrate programmes, especially in the context of the Global Fund to Fight AIDS, Tuberculosis and Malaria.

Goal 7- Ensuring environmental sustainability

Poverty across the region has meant continued loss of forests and other precious environmental resources. In SSA, the proportion of land covered by forest is estimated to have decreased from 29.3 per cent in 1990 to 27.1 per cent in 2000.

Environmental performance has varied considerably at country level, with commendable achievement in some countries. Average deforestation for North Africa remained constant at 1 per cent over the decade. Others lost as much as 33 per cent of their forest coverage.7

With little access to alternative and affordable energy sources - 60 per cent of Africa’s energy demand is met by forests - African communities continue to rely on firewood for heating, cooking and lighting. Energy use per unit of GDP, a measure of energy efficiency, declined in Africa between 1990 and 2002, but improved in developing regions as a whole. In addition, population displacement through civil wars and/or natural causes has also taken its toll on the African environment.

Overall, deforestation, as well as poor land use and management, has had a devastating climatic effect on the continent, increasing the region’s historic tendency to both extremes of drought and flooding. Some of the problems caused by environmental and land degradation are: lower agricultural yields due to declining soil productivity, pollution, depletion of freshwater basins, loss of biodiversity, and loss of revenue from tourism.

Despite the adverse impact of depleted forest coverage and related damage to water resources, total population access to water in SSA increased from 49 to 58 per cent in ten years. In rural areas, it increased from 36 to 45 per cent. However, unless water basin management takes a much more visible and tangible role, progress on this
target may be unsustainable. Connected to water management as it is, access to basic sanitation also showed little progress, rising from 32 to 36 per cent.\textsuperscript{8}

In contrast, on a more positive note, North Africa has already met its second target in towns by halving the proportion of the urban population without sustainable access to safe drinking water, although more has to be achieved for rural populations. SSA is also on track and is also likely to meet that target in urban areas, though not in rural areas.

North Africa is also on track to achieve the target of improving the lives of slum dwellers. In this area, SSA is unlikely to meet the target as its slums have generally continued to proliferate.

Goal 8- Developing a global partnership for development

This broad goal encompasses reform of global trading and financial systems, tariff – and quota-free access for Least Developed Countries’ exports, debt cancellations, addressing special development needs, creating work, providing access to essential drugs, and sharing new information, communications, and other technologies.

Developed countries subsidies, tariffs and quotas still restrict market access for African products. And, where there has been market access, supply-side constraints have prevented African countries from taking advantage of it. This is compounded by the slow pace of regional integration and poor governance within Africa. Key to helping reduce supply-side constraints, ODA levels to Africa have started to increase since 2001. They recovered from a low of $US15.3 billion in 2000 to a new high of $US26.3 billion in 2003.\textsuperscript{9} Following the 2002 Monterey Consensus, they have fallen short of requirements and aid quality has not shown much improvement.\textsuperscript{10}

The recovery in ODA flows was largely driven by debt relief, provided through the Highly Indebted Poor Country (HIPC) initiative, and emergency assistance. However, debt relief schemes have left out middle-income countries, which also labour under heavy debt burdens. Furthermore, countries benefiting from the HIPC initiative still find themselves burdened with unsustainable debts.

The decisions taken at the G8 Summit in July 2005 regarding debt cancellation and increased assistance to Africa’s poorest economies will go a long way to ease the burden in many countries and free more funds for development activities. However, they may still fall short of development requirements, while the partnership implementation modalities and disbursement flows remain to be realized.

Despite some progress, patent laws still block access to essential drugs needed to fight malaria, HIV/AIDS, TB and other diseases. Finally, the information and communications technology divide between Africa and the rest of the world remains wide.
Goal 1: Eradicate extreme poverty and hunger

Targets
- Halve, between 1990 and 2015, the proportion of people whose income is less than a dollar a day.
- Halve, between 1990 and 2015, the proportion of people who suffer from hunger.

Goal 2: Achieve universal primary education

Targets
- Ensure that by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling.
- By 2015, achieve universal primary education.

Goal 3: Promote gender equality and empower women

Targets
- By 2005 and in all countries, achieve an equal share of female and male children enrolled in primary education.
- By 2015, achieve gender equality in primary education.

Goal 4: Reduce child mortality

Targets
- Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate.
- To have halved by 2015 and to begin to reverse the spread of HIV/AIDS.

Goal 5: Improve maternal health

Targets
- Reduce by three-quarters, between 1990 and 2015, the maternal mortality ratio.
- To have halved by 2015 and to begin to reverse the incidence of malaria and other major diseases.

Goal 6: Combat HIV/AIDS, malaria, and other diseases

Targets
- In cooperation with pharmaceutical companies, provide access to affordable, essential drugs in developing countries.
- In cooperation with the private sector, make available the benefits of new technologies, especially information and communication technologies.

Goal 7: Ensure environmental sustainability

Targets
- Deal comprehensively with the debt problems of developing countries through extended and international measures in order to make debt a thing of the past, including relevant programme of debt relief for heavily indebted poor countries and cancellation of official bilateral debt; and more generous official development assistance (ODA) for countries committed to poverty reduction.

Goal 8: Develop a global partnership for development

Targets
- In cooperation with developing countries, develop and implement strategies for decent and productive work for youth.
- In cooperation with pharmaceutical companies, provide access to affordable, essential drugs in developing countries.
- In cooperation with the private sector, make available the benefits of new technologies, especially information and communication technologies.

Economic Commission for Africa
http://www.uneca.org
Goal 1: Eradicate extreme poverty and hunger

Targets:
- Halve, between 1990 and 2015, the proportion of people whose income is below a dollar a day.
- Halve, between 1990 and 2015, the proportion of people who suffer from hunger.

Countries likely to achieve the targets:
- Algeria, Botswana, South Africa, Tunisia, and Uganda
- Afghanistan, Bangladesh, and Niger

Goal 2: Achieve universal primary education

Targets:
- By 2015, to achieve universal primary education
- By 2015, to achieve the full benefit of primary education

Countries likely to achieve the targets:
- Algeria, Botswana, Burkina Faso, Cameroon, Egypt, Ghana, Kenya, Lesotho, Madagascar, Malawi, Mozambique, Namibia, Senegal, South Africa, Tanzania, and Uganda
- Afghanistan, Bangladesh, and Niger

Goal 3: Promote gender equality and empower women

Targets:
- By 2015, to achieve gender parity in primary and secondary education

Countries likely to achieve the targets:
- Algeria, Botswana, Cape Verde, Egypt, Ghana, Kenya, Libya, Mauritius, Morocco, South Africa, Tunisia, and Yemen

Goal 4: Reduce child mortality

Targets:
- To reduce child mortality, by 2015, to three-quarters of the 1990 level

Countries likely to achieve the targets:
- Algeria, Botswana, Cape Verde, Egypt, Ghana, Kenya, Libya, Mauritius, Morocco, South Africa, and Tunisia

Goal 5: Improve maternal health

Targets:
- To reduce maternal mortality, by three-quarters, to 1990 levels

Countries likely to achieve the targets:
- Algeria, Botswana, Cape Verde, Egypt, Ghana, Kenya, Libya, Mauritius, Morocco, South Africa, and Tunisia

Goal 6: Combat HIV/AIDS, malaria, and other diseases

Targets:
- To reduce the spread of HIV/AIDS by half
- To reduce the incidence of malaria and other major diseases by half

Countries likely to achieve the targets:
- Algeria, Botswana, Cape Verde, Egypt, Ghana, Kenya, Libya, Mauritius, Morocco, South Africa, and Tunisia

Goal 7: Ensure environmental sustainability

Targets:
- To ensure the principles of sustainable development are integrated into national policies and programmes
- To integrate the principles of sustainable development into national policies and programmes

Countries likely to achieve the targets:
- Algeria, Botswana, Cape Verde, Egypt, Ghana, Kenya, Libya, Mauritius, Morocco, South Africa, and Tunisia

Goal 8: Develop a global partnership for development

Targets:
- To ensure further progress, supportive policies, and improved trade-related and financial system
- To address the special needs of the least developed countries

Countries likely to achieve the targets:
- Algeria, Botswana, Cape Verde, Egypt, Ghana, Kenya, Libya, Mauritius, Morocco, South Africa, and Tunisia

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Africa and the MDGs

Goal 1: Eradicate extreme poverty and hunger

Targets
- Halve, between 1990 and 2015, the proportion of people whose income is less than a dollar a day.
- Halve, between 1990 and 2015, the proportion of people who suffer from hunger.

Goal 2: Achieve universal primary education

Targets
- Ensure that by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling.
- Eliminate gender disparity in primary and secondary education preferably by 2005 and in all levels of education no later than 2015.

Goal 3: Promote gender equality and empower women

Targets
- Reduce by three quarters, between 1990 and 2015, the maternal mortality rate.
- Reduce by three quarters, between 1990 and 2015, the incidence of malaria and other major diseases.

Goal 4: Reduce child mortality

Targets
- Reduce by two thirds, between 1990 and 2015, the under-five mortality rate.
- Halve, between 1990 and 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation.

Goal 5: Improve maternal health

Targets
- Halve, between 1990 and 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation.
- Halve, by 2015, the maternal mortality ratio.

Goal 6: Combat HIV/AIDS, malaria, and other diseases

Targets
- To have halted by 2015 and begun to reverse the spread of HIV/AIDS.
- To have halted by 2015 and begun to reverse the incidence of malaria and other major diseases.

Goal 7: Ensure environmental sustainability

Targets
- To have halted by 2015 and begun to reverse the spread of HIV/AIDS.
- To have halted by 2015 and begun to reverse the incidence of malaria and other major diseases.

Goal 8: Develop a global partnership for development

Targets
- To have halted by 2015 and begun to reverse the spread of HIV/AIDS.
- To have halted by 2015 and begun to reverse the incidence of malaria and other major diseases.

Countries likely to achieve the targets
- Algeria, Angola, Benin, Burkina Faso, Chad, Congo, Democratic Republic of the Congo, Equatorial Guinea, Gabon, Kenya, Liberia, Sierra Leone, Togo, Tunisia and Zimbabwe.
- Algeria, Benin, Burkina Faso, Chad, Congo, Democratic Republic of the Congo, Equatorial Guinea, Gabon, Kenya, Liberia, Sierra Leone, Togo, Tunisia and Zimbabwe.
- Algeria, Botswana, Burundi, Cape Verde, Comoros, Djibouti, Eritrea, Ethiopia, Kenya, Lesotho, Malawi, Mauritius, Mozambique, Namibia, São Tomé & Principe, Seychelles, South Africa, Togo, Tanzania and Zimbabwe.
- Algeria, Botswana, Burundi, Cape Verde, Comoros, Djibouti, Eritrea, Ethiopia, Kenya, Lesotho, Malawi, Mauritius, Mozambique, Namibia, São Tomé & Principe, Seychelles, South Africa, Togo, Tanzania and Zimbabwe.
- Algeria, Botswana, Burundi, Cape Verde, Comoros, Djibouti, Eritrea, Ethiopia, Kenya, Lesotho, Malawi, Mauritius, Mozambique, Namibia, São Tomé & Principe, Seychelles, South Africa, Togo, Tanzania and Zimbabwe.

Economic Commission for Africa
http://www.uneca.org
Africa and the MDGs

**Goal 1**

**Eradicate extreme poverty and hunger**

- **Targets**
  - Halve, between 1990 and 2015, the proportion of people whose income is less than a dollar a day.
  - Halve, between 1990 and 2015, the proportion of people who suffer from hunger.

**Countries likely to achieve the targets**

**Goal 2**

**Achieve universal primary education**

- **Targets**
  - Ensure that by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling.
  - Both net enrolment and completion rate:
    - Primary level education: Botswana, Lesotho, Mauritius, Namibia, Rwanda, Swaziland and Togo.
    - Secondary level: Algeria, Benin, Madagascar, Malawi, Mauritania, Nigeria, Rwanda, Senegal and Togo.

**Countries likely to achieve the targets**

**Goal 3**

**Promote gender equality and empower women**

- **Targets**
  - To have halted by 2015 and begun to reverse the spread of HIV/AIDS.
  - To have halted by 2015 and begun to reverse the incidence of malaria and other major diseases.

**Countries likely to achieve the targets**
- Algeria, Benin, Benin, Burkina Faso, Cameroon, Central Africa, Côte d’Ivoire, Egypt, Gambia, Ghana, Kenya, Lesotho, Malawi, Mauritania, Morocco, Mozambique, South Africa, Swaziland, Tanzania and Zimbabwe.

**Goal 4**

**Reduce child mortality**

- **Targets**
  - To have halted by 2015 and begun to reverse the spread of HIV/AIDS.
  - To have halted by 2015 and begun to reverse the incidence of malaria and other major diseases.

**Countries likely to achieve the targets**
- Algeria, Benin, Benin, Burkina Faso, Cameroon, Central Africa, Côte d’Ivoire, Egypt, Gambia, Ghana, Kenya, Lesotho, Malawi, Mauritania, Morocco, Mozambique, South Africa, Swaziland, Tanzania and Zimbabwe.

**Goal 5**

**Improve maternal health**

- **Targets**
  - To have halted by 2015 and begun to reverse the spread of HIV/AIDS.
  - To have halted by 2015 and begun to reverse the incidence of malaria and other major diseases.

**Countries likely to achieve the targets**
- Algeria, Benin, Benin, Burkina Faso, Cameroon, Central Africa, Côte d’Ivoire, Egypt, Gambia, Ghana, Kenya, Lesotho, Malawi, Mauritania, Morocco, Mozambique, South Africa, Swaziland, Tanzania and Zimbabwe.

**Goal 6**

**Combat HIV/AIDS, malaria, and other diseases**

- **Targets**
  - By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers.

**Countries likely to achieve the targets**
- Algeria, Benin, Benin, Burkina Faso, Cameroon, Central Africa, Côte d’Ivoire, Egypt, Gambia, Ghana, Kenya, Lesotho, Malawi, Mauritania, Morocco, Mozambique, South Africa, Swaziland, Tanzania and Zimbabwe.

**Goal 7**

**Ensure environmental sustainability**

- **Targets**
  - In cooperation with the private sector, make available the benefits of new technologies, especially information and communication technologies.
  - In cooperation with pharmaceutical companies, provide access to affordable, essential drugs in developing countries.
  - Develop and implement strategies for decent and productive work for youth.
  - Develop further an open, rule-based, predictable, non-discriminatory trading and financial system.
  - Address the special needs of the least developed countries and small island developing States.
  - Deal comprehensively with the debt problems of developing countries through real and international measures in order to make debt a non-relevant issue in the long term.
  - In cooperation with the global community, develop and implement strategies for decent and productive work for youth.
  - In cooperation with pharmaceutical companies, provide access to affordable, essential drugs in developing countries.
  - In cooperation with the private sector, make available the benefits of new technologies, especially information and communication technologies.
  - Address the special needs of the least developed countries and small island developing States.
  - Deal comprehensively with the debt problems of developing countries through real and international measures in order to make debt a non-relevant issue in the long term.

**Goal 8**

**Develop a global partnership for development**

- **Targets**
  - Halve, between 1990 and 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation.
  - By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers.

**Countries likely to achieve the targets**
- Algeria, Benin, Benin, Burkina Faso, Cameroon, Central Africa, Côte d’Ivoire, Egypt, Gambia, Ghana, Kenya, Lesotho, Malawi, Mauritania, Namibia, South Africa and Tanzania.

**Goal 9**

**Achieve sustainable development**

- **Targets**
  - Halve, between 1990 and 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation.
  - By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers.

**Countries likely to achieve the targets**
- Algeria, Benin, Benin, Burkina Faso, Cameroon, Central Africa, Côte d’Ivoire, Egypt, Gambia, Ghana, Kenya, Lesotho, Malawi, Mauritania, Namibia, South Africa and Tanzania.

**Goal 10**

**Combat HIV/AIDS, malaria, and other diseases**

- **Targets**
  - By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers.

**Countries likely to achieve the targets**
- Algeria, Benin, Benin, Burkina Faso, Cameroon, Central Africa, Côte d’Ivoire, Egypt, Gambia, Ghana, Kenya, Lesotho, Malawi, Mauritania, Namibia, South Africa and Tanzania.

**Goal 11**

**Ensure environmental sustainability**

- **Targets**
  - In cooperation with the private sector, make available the benefits of new technologies, especially information and communication technologies.
  - In cooperation with pharmaceutical companies, provide access to affordable, essential drugs in developing countries.
  - Develop and implement strategies for decent and productive work for youth.
  - Develop further an open, rule-based, predictable, non-discriminatory trading and financial system.
  - Address the special needs of the least developed countries and small island developing States.
  - Deal comprehensively with the debt problems of developing countries through real and international measures in order to make debt a non-relevant issue in the long term.
  - In cooperation with the global community, develop and implement strategies for decent and productive work for youth.
  - In cooperation with pharmaceutical companies, provide access to affordable, essential drugs in developing countries.
  - In cooperation with the private sector, make available the benefits of new technologies, especially information and communication technologies.
  - Address the special needs of the least developed countries and small island developing States.
  - Deal comprehensively with the debt problems of developing countries through real and international measures in order to make debt a non-relevant issue in the long term.

**Goal 12**

**Develop a global partnership for development**

- **Targets**
  - Halve, between 1990 and 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation.
  - By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers.

**Countries likely to achieve the targets**
- Algeria, Benin, Benin, Burkina Faso, Cameroon, Central Africa, Côte d’Ivoire, Egypt, Gambia, Ghana, Kenya, Lesotho, Malawi, Mauritania, Namibia, South Africa and Tanzania.

**Goal 13**

**Achieve sustainable development**

- **Targets**
  - Halve, between 1990 and 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation.
  - By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers.

**Countries likely to achieve the targets**
- Algeria, Benin, Benin, Burkina Faso, Cameroon, Central Africa, Côte d’Ivoire, Egypt, Gambia, Ghana, Kenya, Lesotho, Malawi, Mauritania, Namibia, South Africa and Tanzania.

**Goal 14**

**Combat HIV/AIDS, malaria, and other diseases**

- **Targets**
  - By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers.

**Countries likely to achieve the targets**
- Algeria, Benin, Benin, Burkina Faso, Cameroon, Central Africa, Côte d’Ivoire, Egypt, Gambia, Ghana, Kenya, Lesotho, Malawi, Mauritania, Namibia, South Africa and Tanzania.

**Goal 15**

**Ensure environmental sustainability**

- **Targets**
  - In cooperation with the private sector, make available the benefits of new technologies, especially information and communication technologies.
  - In cooperation with pharmaceutical companies, provide access to affordable, essential drugs in developing countries.
  - Develop and implement strategies for decent and productive work for youth.
  - Develop further an open, rule-based, predictable, non-discriminatory trading and financial system.
  - Address the special needs of the least developed countries and small island developing States.
  - Deal comprehensively with the debt problems of developing countries through real and international measures in order to make debt a non-relevant issue in the long term.
  - In cooperation with the global community, develop and implement strategies for decent and productive work for youth.
  - In cooperation with pharmaceutical companies, provide access to affordable, essential drugs in developing countries.
  - In cooperation with the private sector, make available the benefits of new technologies, especially information and communication technologies.
  - Address the special needs of the least developed countries and small island developing States.
  - Deal comprehensively with the debt problems of developing countries through real and international measures in order to make debt a non-relevant issue in the long term.
Why is Africa not on track to meet MDG targets?

Despite improved GDP growth in Africa, especially in SSA, over the past decade, this growth has mostly not been the rapid, sustained and inclusive growth that is key to lifting people out of poverty. Economic growth has been robust largely in countries with enclave resources such as oil and minerals. With few exceptions, the fruits of such growth have not been widely shared with the poor.

To achieve growth and also poverty reduction, governance - the capacity and quality of government - is key to effective and sustainable pro-poor targeting. Although governance is improving in Africa in many countries, much more remains to be done to ensure accountability and rule of law, fight corruption and create a business environment friendly to domestic and foreign investors. Unfortunately, many States have only weak capacity to carry out their basic functions and are not investing sufficiently in key social sectors such as education, health, water and sanitation.

The challenge of HIV/AIDS looms large over Africa’s efforts to attain the MDGs. The pandemic has aggravated weak economic growth in many countries and is depleting human capital, the very foundation of social development.

Gender inequality remains a big challenge despite the fact that educating and empowering women and girls are important to achieving all the MDGs. Notably, a large number of countries have not adopted a human rights approach to development that pays special attention to equality and non-discrimination. As a result, wars and violent conflict in many countries continue to disrupt livelihoods, destroy infrastructure, reverse gains and damage the investment climate.

Some 20 African countries, or 40 per cent of SSA, have experienced at least one period of civil war in the last 40 years. In 2000, around 20 per cent of SSA’s population lived in a country that was formally at war. In many other countries, low-intensity conflict was prevalent. Civil conflict has affected development both directly and indirectly and has contributed to the overall human suffering and environmental degradation.
Table 4: Subregional growth rates in Africa

<table>
<thead>
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<tbody>
<tr>
<td>North</td>
<td>122</td>
<td>1.9</td>
<td>37</td>
<td>5.6</td>
<td>4.2</td>
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<tr>
<td>West</td>
<td>53</td>
<td>59.5</td>
<td>43</td>
<td>7.6</td>
<td>3.2</td>
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<tr>
<td>Central</td>
<td>77</td>
<td>38.8</td>
<td>42.3</td>
<td>6.7</td>
<td>4.4</td>
</tr>
<tr>
<td>East</td>
<td>38</td>
<td>37.0</td>
<td>43.4</td>
<td>8.1</td>
<td>3.5</td>
</tr>
<tr>
<td>Southern</td>
<td>90</td>
<td>28.1</td>
<td>47.4</td>
<td>6.2</td>
<td>2.7</td>
</tr>
<tr>
<td>Total</td>
<td>76</td>
<td>37</td>
<td>44</td>
<td>6.7</td>
<td>3.6</td>
</tr>
<tr>
<td>(SSA)</td>
<td>65</td>
<td>42.4</td>
<td>43</td>
<td>7.1</td>
<td>3.1</td>
</tr>
</tbody>
</table>

Source: *ECA 1999 and **Povocalnet and ECA computations
3. Getting Africa on track

A paradigm shift is needed to achieve a true reversal of present trends in economic and human development on the continent. The world community has at its disposal the proven technologies, the policy consensus and the financial resources to achieve the Goals and change billions of lives for the better. Despite the large shortfalls in growth rates required to meet MDG1 (see Table 4), for example, there is still a chance for African countries to attain most MDG targets.

Countries can meet the Goals only through a massive scaling up of public investment, capacity building, domestic resource mobilization and ODA, beginning this year. This must be accompanied by embedding the MDGs in comprehensive development strategies with strong growth and employment-creation components, supported by improved governance structures and practices.

Africa faces a financing gap of 10 to 20 per cent of GDP to reach the Goals. Domestic resources allocated to reaching the MDGs should increase by 4 per cent of GDP. Moreover, most African countries suffer from a “tax gap” - the difference between the tax payable and that collected - of more than 40 per cent. Thus, improving tax administration - streamlining rules, improving compliance, frequent auditing - could considerably reduce the gap and enhance fiscal revenue. ODA flows have been significant in supporting primary education and health in several African countries.

“Quick wins” and “medium-term” strategies to achieve the MDGs

In the framework of effective planning and implementation, the Millennium Project highlights a group of “quick win” actions that developing and developed countries should jointly launch this year to improve millions of lives and boost economic growth. Many are within the reach of individual African governments which can seize this opportunity for effective partnership with the international community. These include:

Quick Wins

- Free mass distribution of bed nets and anti-malaria medicine for all children in areas with malaria by end of 2007;
- Ending user fees for primary schools and essential health services, compensated by increased donor funding as necessary by end of 2006;
• Successful completion of the "3 by 5" campaign to bring three million AIDS patients in developing countries onto antiretroviral treatment by end of 2005;

• Expansion of school meals programmes to cover all children in hunger spots by using locally produced foods, not later than end of 2006; and

• Massive replenishment of soil nutrients for smallholder farmers on lands with nutrient deficient soils, through distribution of free fertilizers by end of 2006.

This list of quick wins is just a start. In the medium term, African governments should consider adopting the following additional measures:

**Medium-term strategies**

1. **Embed the MDGs in overall development frameworks, as well as in poverty reduction and macroeconomic management programmes**

   This is necessary for attaining national ownership and commitment, and for prioritizing domestic spending. Three main approaches should be used:

   • Adopting MDG targets and indicators for national development frameworks, using indicators for monitoring human development and including social impact assessment of macroeconomic policies and measures based on MDG indicators;

   • Determining what is required of the various sectors in order to achieve the Goals. The implications for individual and community well-being should be assessed and communicated to all stakeholders. For example, to achieve MDG1, asking what type of infrastructure such as food transport and storage systems needs to be installed; and

   • Facilitating peer learning among African policymakers based on best practices in policy design and implementation, with the help of regional institutions such as ECA, ADB, AU and the Regional Economic Communities (RECs).

2. **Develop broad-based, people-oriented and simple, low-cost but effective strategies for MDG-related programming.**

   The main strategies include:

   a) Mobilizing the population for joint action
• Apply participation processes to ensure the broad-based ownership of policies and programmes by citizens and communities, as both implementers and beneficiaries;

• Encourage dialogue among development stakeholders - government, business, civil society and the communities – using state-of-the-art communication for development techniques including community radio, video, and extending, sustained use of Information and Communication Technologies (ICTs) in urban and rural settings.

b) Investing in people

• Scale up investment in education that is skills-intensive, and effectively deploy human resources in the provision of social services;

• Ensure that primary school enrolment increases, accompanied by rising completion rates, by implementing global school feeding programmes, removing fee systems and educating parents on the benefits of education;

• Promote gender parity in education systems not only at the primary level but also at secondary and tertiary levels, especially investing in boarding and transportation facilities for girls;

• Ensure that curricula include reproductive health education, information on rights and accessing assets, and need for political and economic participation;

• Match vocational training and education to public and private sector employment needs;

• Invest in food production by applying tried and tested technologies in agriculture and rural development;

• Promote sustainable child and maternal health by improving nutrition, promoting breastfeeding, using treated mosquito nets and improving community sanitation; and

• Promote the “ABC” of HIV/AIDS programming: Abstinence, Being Faithful to One’s Partner, Correct and Consistent Condom use, as well as partnerships with pharmaceutical companies to produce generic drugs.

c) Investing in infrastructure

• Scale up investment in infrastructure, including efficient feeder road systems and market facilities in rural areas, ensuring trade links among sectors and communities;
• Enhance cross-border trading by improving transportation and communications infrastructure and streamlining customs procedures; and
• Promote public/private partnerships in the provision of efficient services for delivery of electricity, water, and sanitation services.

3. **Formulate and pursue well-focused, socially inclusive economic growth that is pro-poor.**

Pro-poor policies are those that generate increases in incomes of the poor at a rate at least equal to the overall growth of the economy, thereby resulting in the reduction of income inequality and the incidence and depth of poverty. 18 Given the structure of African economies and populations, such policies could include:

- Diversifying economic activity in rural areas, in order to reduce volatility in rural incomes, through the establishment of agro-based secondary economic activities, eco-tourism and links to urban markets; and
- Identifying and promoting sectors with high labour absorption and growth potential

4. **Improve and streamline the administration of governance systems and institutions**

Peace and security, stable growth and sustained development can only be achieved if good governance - at the community, national and corporate levels - is ensured. Efforts should be intensified in the following areas:

- Decentralization of public administration, for increased accountability and also for mobilizing the communities for effective use and monitoring of public programmes;
- Prioritization of public spending through efficient tax collection, partnerships and the involvement of end-users in transparent and accountable systems;
- Increased investment in governance institutions of public administration, law and order, and collective security.

5. **Mobilize and improve the quality of domestic financial resources**

Domestic resources should also be effectively tapped and expanded by:

- Targeting resource mobilization efforts in order to close the MDG financing gap;
• Mobilizing domestic savings by improving banking and financial infrastructure, increasing investor transparency and maintaining macroeconomic, social and political stability;

• Improving the tax administration so as to boost public revenues, reward those who fulfil commitments and discourage fiscal tax avoidance and evasion;

• Improving efficiency in the allocation of public expenditure through the adoption of public expenditure tracking systems in order to ensure that allocations reach their intended targets; and

• Ensuring that national budgets are gender sensitive and responsive to the crosscutting issues in the MDGs;

• Encouraging public-private partnerships in the provision of social services.

6. Strengthen regional and international partnerships and systems that present opportunities for trade, to the benefit of African economies

Measures to be taken include:

• Alignment of regional and international MDG initiatives with the Monterrey Consensus;

• Support to NEPAD programmes, especially those aimed at facilitating the provision of “regional public goods” such as inter-country transport networks;

• Use the African Peer Review Mechanism (APRM) to improve governance and popular ownership of the development process;

• Encourage donors to act on pledges made on the quantity of aid flows (0.7 per cent of Gross National Income (GNI));

• Implement measures to promote aid quality—reducing tied aid, increasing the grant element, enhancing direct budget support, and ensuring better targeting, coordination, predictability, harmonization and alignment of resources;

• Pursue relief from unsustainable debt, especially for post-conflict, and least developed countries, and other fragile economies; and

• Provide appropriate incentives for mobilizing human and financial resources from the African diaspora on other continents.
4. Conclusion

African countries have made real effort to integrate the MDGs into their national development plans and budgets, and have also matched them with NEPAD goals. However, given current trends and contexts, with few exceptions, Africa as a continent will not meet most of the MDG targets within the set timeframes.

Provided existing and potential resources are appropriately harnessed by governments, private sector, civil society and development partners, Africa could achieve most of the MDG targets. Political and social commitment, macroeconomic stability, peace and safety, fuelled by information and advocacy and the participation and empowerment of women and youth, are key to improved performance.

The real challenge will be to ensure programmes that are fully owned by African stakeholders are also interconnected, and respond to Africa’s development needs, in a comprehensive, timely, sustainable and realistic manner.
References


**Endnotes**

1 In February 2005, at a session of the Committee for Social Development, the Secretary General reiterated the need to view the MDGs not as a solution to development, but as a ‘concerted effort’ to fill in the ‘implementation gap’ that followed several world summits and conferences, particularly following the 1995 World Summit on Social Development in Copenhagen. More details of this position can be found in the report: Review of the further implementation of the World Summit for Social Development and the outcome of the twenty-fourth special session of the General Assembly (document E/CN.5/2005/6).


3 UN (2005)

4 Regional averages are calculated as population-weighted means of country data for countries with insufficient data. Due to data availability, only 41 countries are considered.

5 WHO (2005), UN (2005)

6 Ibid; CFA 2005

7 World Bank (2003)

In a UN-sponsored economic summit held in Monterrey, Mexico, in 2002, Member States reiterated through the Monterrey Consensus the need to increase ODA flows to the world’s developing nations by $US50 billion, or 0.7 per cent of GNI of the world’s richest nations.

Elbadawi and Sambanis, 2000. During periods of civil war, GDP per capita growth is estimated to reduce by 2.2 percentage points. Moreover, during the 5 years following a war, GDP per capita is reduced by an additional 2.1 percentage points.

Fosu and Collier, 2005
We, the African Ministers of Finance, Planning and Economic Development, gathered in Abuja, 14-15 May 2005, under the auspices of the United Nations Economic Commission for Africa (ECA), recognise that strong political will, as well as bold and decisive action, is needed to establish the conditions for achieving sustained economic growth and eradicating poverty, as well as promoting sustainable development in Africa. This is especially urgent, considering that five years have passed since the Millennium Development Goals (MDGs) were launched and the target date is only ten years away.

After discussion of the theme of our Conference, “Achieving the Millennium Development Goals in Africa”, we reaffirm the vital importance of these goals as a framework for reducing poverty and advancing development in Africa.

The global consensus in support of meeting the MDGs is highly valuable and opens new opportunities for broad collaboration to reducing poverty. We are convinced that achieving the MDGs will be a critical step on the road towards the far-reaching and sustainable development to which we aspire.

We are encouraged by progress in some parts of our continent, and in several of our countries on individual MDGs, including progress by countries with severe resource constraints. Yet the broad picture is not satisfactory. Much faster and broader progress is needed. It is now critically important that we review both the progress we have made and the obstacles we have encountered in order to learn the lessons and become more operational. In this respect, we support the preparation of an African Common Position in the review of the MDGs.

Considering a number of forthcoming high-level discussions, notably the African Union Summit in July, the UN High-Level Dialogue on Financing for Development in June, the G8 Summit in Gleneagles, Scotland, in July, as well as the General Assembly MDG review summit in September, we wish to set out some key actions we as policy makers must take to achieve the MDGs in Africa, as well as highlight critical actions that international community must take to enable us to meet our objectives.

The fruits of growth must be increased and shared

It is clear that progress towards significantly reducing poverty and achieving the MDGs has been hampered by insufficient economic growth, and because the ben-
efits of the growth achieved have not, for the most part, been shared broadly across society. Going forward, it will be important to expand growth in sectors that can generate greater employment, and to invest more intensively in sectors such as health and education that build human capacity to engage in productive economic activity.

Other factors limiting growth and the spread of its fruits include weak governance, the impact of HIV/AIDS, tuberculosis, malaria and other diseases, gender inequality, violent conflicts and inadequate capacity, as well as insufficient public investment and internal and external resource mobilization. We must therefore develop holistic and comprehensive strategies to address many challenges simultaneously.

It is our firm belief that the way forward lies in accelerating broadly-shared and sustained employment-generating economic growth in the context of improved governance, including increased transparency and reduced corruption, as well as strong investment in people, particularly Africa’s women who have long been excluded from full economic participation in our societies. High levels of sustained growth will provide the resources and capacity for the social spending required to attack poverty directly while generating jobs required to help people improve their own situation.

Consistent with the 2004 AU Summit Declaration on Employment and Poverty Alleviation in Burkina Faso, we commit to developing strategies for generating decent and productive work for men and women as well as youth in Africa, and to explicitly address employment generation issues in national poverty reduction strategies.

Towards local ownership and more effective national poverty reduction and growth strategies

While significant progress has been registered in the past five years in the Poverty Reduction Strategy (PRS) process - notably higher investment in education and health, as well as better public financial and expenditure management – more work is needed to deepen national ownership and leadership. African governments must frame and operationalize poverty reduction and growth policies that integrate the MDGs as key objectives. In this context, they must mainstream growth and employment, as well as strengthen capacity at all levels concerned with implementing those policies.

Poverty reduction strategies must have broader and longer-term perspectives and a deepening of ownership through meaningful stakeholder consultation, addressing gender equality, population growth, capacity and regional issues, including migration and other regional public goods policies. Furthermore, there is need to address country-specific realities, with particular attention to the special needs of Least Developed Countries, and post-conflict and other fragile economies. Much has been learned through the African Learning Group on PRSs organised by ECA. From those consultations, it is now clear that we need to move from preoccupation with the formal PRS towards a focus on the content of growth and development strategies.
Greater focus needed on trade, infrastructure and agriculture

Poverty reduction requires growth and growth requires expanded markets and much better access to the international as well as continental markets. Trade is a vital engine of growth. We wish therefore to underscore the importance for the continent, of a fair, non-discriminatory, predictable, multilateral rules-based trading system. There is also a need for significant improvement in market access, particularly in agriculture and in other export areas of interest to African countries. Within Africa, we must use the regional initiatives to open up and encourage trade in goods and services amongst member states. We call for the elimination of trade distorting domestic support and export subsidies that have harmful implications for African commodity exports. It is, therefore, necessary for all WTO Members to work to ensure a successful 6th WTO Ministerial Conference in Hong Kong in December, which will set the stage for the early conclusion of the Doha Trade Round in 2006.

On our side, and to ensure the expanded market size to make the required dent on poverty, we need to think and act collectively. Whether in sectors such as transport, or in relation to general regional public goods such as research and extension for agriculture or addressing maternal and child health, HIV/AIDS, tuberculosis, malaria, and other diseases, we need regional approaches. The regional economic communities are critical to collective action. As such, rationalizing them, harmonizing their work and enabling them to better implement programmes at sub-regional will greatly enhance efforts towards meeting the MDGs.

Given the critical importance of agriculture to development, poverty reduction, and food security in Africa, the sector deserves special attention. Some 60% of the total labour force in Africa works in agriculture, providing livelihoods for 90% of people in rural areas, yet challenges such as fragmented and underdeveloped markets, lack of access to information, finance and land, poor infrastructure, and vulnerability to external shocks and market barriers undermine the sector. Investment in integrated water and agriculture development must urgently be scaled up and the NEPAD Comprehensive African Agricultural Development Programme (CAADP) supported and applied. We urge measures to promote public-private partnerships to bring resources and infrastructural development to the sector.

In this regard, and in recognition that the private sector is the primary engine of growth, we resolve to work harder to create the necessary enabling environment, including the provision of peace and security, quality public institutions that promote efficiency, improvements in physical infrastructure, protection of the environment and natural resources, consistent with NEPAD objectives, as well as other support in terms of facilitating the use of quality human capital and technology.

Cutting across all sectors of the economy and governance, inadequate capacity has been a major constraint on progress. In this context we acknowledge the need for intensive and extensive capacity development and retention to strengthen governance
and other development efforts. Efforts to draw on and benefit from the expertise of Africans in the Diaspora must be stepped up alongside work to improve skills, knowledge and experience at home. In that context, we commend the work being accomplished by the Collaborative African Budget Reform Initiative (CABRI) to build capacity in public financial management. Recognizing the crucial importance of reliable statistics for gauging and monitoring progress toward the MDGs, we will give greater attention to the development of strong statistical capacity at both the national and regional levels and urge donors to do likewise.

Financing a “big push” for Africa

Africa’s economic development is in the hands of Africans and we are committed to achieving the MDGs by 2015. We therefore endorse the call made by the United Nations Secretary General’s report “In Larger Freedom” that developing countries must draw up, by 2006, practical national strategies to meet the MDGs, assess the financial requirements and commit themselves to making the necessary public investments. Above all, we in Africa must work harder to mobilize our domestic resources to meet the Goals.

We recognize, however, that in the immediate term our progress towards the MDGs must be accelerated through a significant increase in resources from outside. Our capacity to absorb aid has increased, making it possible for us to make good use of additional resources. We therefore acknowledge the call from the Commission for Africa’s report for “a big push” in financial support for Africa from the international community in line with the global commitment to meeting the MDGs, and in particular, the Commission’s proposal for a major fund to develop African infrastructure.

The Commission has called for the doubling of Official Development Assistance (ODA) to Africa and also proposes the creation of an International Financing Facility to provide front-loading of aid flows for enhancing predictability and planning. The United Nations Secretary General’s report also proposes a substantial upscheduling of aid towards the Monterrey target of 0.7 percent of developed countries’ gross national income. In warmly welcoming these proposals, we call on G8 leaders to commit during the Gleneagles summit in July, to meeting their existing ODA promises, as well as to helping to accelerate progress by concretely contributing to Africa’s MDG financing needs in line with these reports’ recommendations. We believe that the funds should be used to fund a holistic package of support for Africa because it is clear that without simultaneous and effective action on several priority fronts, success is unlikely to be achieved.

We recall our repeated emphasis in previous meetings for international action to ensure a sustainable exit from Africa’s onerous debt burden. Most recently at a Conference of African Ministers of Economy and Finance organised by the African Union Commission in collaboration with the Government of Senegal in Dakar, we called for the debt impasse to be broken within the coming year, and agreed on the need
for more radical action from the international community in this regard. Such action should be in line with the Commission for Africa’s recommendation that debt relief should cover multilateral and bilateral debt, as well as cover non-HIPC low-income countries and reduce debt stock and debt service by up to 100 per cent. In this context we urge African countries to act in solidarity. Above all, the key criteria for debt relief should be the financing needs of the MDGs and overall goal of poverty reduction. We cannot over-emphasise the critical importance of such a measure to Africa’s ability to be able to meet the MDGs.

Improving aid management and mutual accountability

Two years ago in Addis Ababa we looked forward to discussing at this meeting the findings of a NEPAD-commissioned report, prepared by ECA together with the OECD-DAC, on how to practically apply and monitor mutual accountability in Africa’s relations with its international partners. We have reviewed the report—the Mutual Review of Development Effectiveness in the Context of NEPAD—tabled here in Abuja and believe that it provides a valuable blueprint for action that we can adopt at national level. We reaffirm our previous view that future editions of the report should appear every two years but note that there may be need for more frequent updates on progress or reviews on specific issues in response to specific requirements. We propose that, in future, the findings of APRM country studies should provide a foundation for the monitoring of performance on the African side. We call upon the OECD/DAC to collect information on future aid commitments from budgetary and other information to help enhance the predictability of aid flows to our countries.

There is also a need for closer attention on the African side about ways to improve aid management. While specific conditions and challenges vary from country to country, our countries share many of the problems that arise from unpredictable and short-term ODA flows, changeable partner policies and practices, and lack of flexibility in the types of aid instruments in use. With the possibility of increased flows in prospect, there is a pressing need for an African architecture or framework for aid management through which we may track, at regional level, the flow, quality and effectiveness of aid.

Both Africa and her partners must meet their obligations to make mutual accountability an effective tool. Under NEPAD, African leaders have committed to implementing sound economic policies, putting in place measures of good political and economic governance, and investing in people to achieve the MDGs. We acknowledge the progress made by many African countries on accountability, adherence to constitutionalism, multi-party political systems, public financial management, and macroeconomic stability. We note particularly the strong interest as evidenced by African governments in acceding to the African Peer Review Mechanism (APRM). On the partner side, through the Monterrey Consensus, the Paris Declaration on Aid Effectiveness and other initiatives, development partners have committed to intensifying efforts for enhanced ODA in terms of quality and quantity, harmonization with
national development strategies, composition, allocation and predictability. We urge them to meet those commitments.

Fostering greater institutional coherence and effectiveness

We recognize that ECA continues to play a key role in promoting the economic and social development of the continent. Now that the AU has clearly articulated a strategic programme and given its pivotal role in providing political leadership at the regional level, we look forward to enhanced collaboration between ECA and the AU.

We also note that the Commission is constrained by resources given the tremendous rise in the demand for policy and economic analysis driven by the development agenda in Africa. We therefore urge member states to support ECA’s efforts by generously contributing to the United Nations Trust Fund for Africa in order to help ECA to continue acting as a leading voice on Africa’s development.

We are grateful to the ECA for successfully convening this 38th Conference of African Ministers of Finance, Planning, and Economic Development. We also thank the Honourable Minister of Finance of the Republic of Nigeria, Dr. Ngozi Okonjo-Iweala, for her excellent leadership during our deliberations. Finally, we wish to express our sincere gratitude to His Excellency, President Olusegun Obasanjo, and the Nigerian people for the warm hospitality accorded to us during our stay in Abuja.
Economic Commission for Africa

The Millennium Development Goals in Africa: Progress and Challenges