

Executive Summary

MDG Report 2013

Assessing Progress
in Africa toward
the Millennium
Development Goals



Food Security in Africa:
Issues, challenges and lessons

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Foreword

Africa's impressive economic performance over the past decade has rekindled hopes for the continent's future as an important player in the global economic landscape. The challenge for Africa is ensuring that the gains from growth leverage progress on the Millennium Development Goals (MDGs). Indeed, most developing countries that have seen rapid growth have also enjoyed declines in poverty. With growth steady at 7 per cent, East Asia has maintained unemployment at around 4 per cent. China's rapid progress has led to substantial poverty reductions, accounting for a large share of the global decline.

With less than 1,000 days until 2015, the impulse of policymakers is to strive for the targets without considering quality, equality and sustainability. The urgency must be tempered by the imperative of sustaining progress beyond 2015. After all, the development process and its challenges and opportunities will persist long after the MDGs have passed. Africa must commit to inclusive, transformative development that reduces income poverty, creates decent jobs, enhances the quality of and access to social services, reduces inequality and promotes resilience to climate-related hazards. Achieving these objectives will invariably put Africa on a trajectory towards sustained and sustainable development. The continent must ensure that the outcomes of its interventions meet the litmus test of economic, social and environmental sustainability.

Failing to address Africa's inequalities is a recipe for social unrest. The stark income, gender and rural-urban inequalities have implications for social cohesion and thus the sustainability of the continent's MDG performance. Inequalities result in part from the enclave structure of most African economies, which concentrates economic activity in the extractive and commodity-producing sectors. With limited spillover to other sectors, such production patterns generate few jobs, concentrate wealth in resource-rich sectors, encourage inequality and sow the seeds of social unrest. This report demonstrates that without concerted efforts to reduce inequality, growth will have only limited effects on poverty. Policymakers must thus pursue inclusive growth strategies that promote broad participation of the active labour force while ensuring that the returns from growth are invested in programmes that enhance the productive capacities of broad segments of society, particularly women, young people and the vulnerable.

The livelihoods of countless African households will be imperilled without efforts to improve resilience to environmental hazards, including those attributable to climate change. Sustaining progress on the MDGs will require strengthening capacities to anticipate and respond to climate-related disasters and capitalizing on green growth opportunities. Without a doubt, Africa's (especially the Sahel and the Horn of Africa) dependence on climate-sensitive sectors makes it more vulnerable than other regions to climate hazards. Climate-related shocks manifested by extreme weather conditions have destroyed livelihoods and exacerbated Africa's food insecurity, resulting in a high incidence of underweight children, widespread hunger and poor dietary consumption patterns.

Sustaining Africa's momentum on the MDGs entails adequate, reliable financing. This report shows that, adjusted for inflation, official development assistance declined the last two years, partly because of the Eurozone's sovereign debt crisis. This trend is worrying, as official development assistance is important for helping low-income African countries fight HIV/AIDS, tuberculosis and malaria. With declining official development assistance, sustaining progress on several MDGs entails identifying alternative sources of funding, including through the mobilization of domestic resources. Externally, engaging closer with emerging countries like China, Brazil and India will be necessary, and such partnerships must support the continent's development priorities. Domestically, measures that promote accountable and transparent governance, expand the middle class and strengthen the capacity of revenue-collecting agencies will be vital.

Africa will regress on the MDGs unless efforts to improve access to social services are matched by measures to ensure that these services meet minimum quality standards. Ultimately, it is service quality that enhances people's health and expands their productive capacities. Neglecting quality will only undermine the returns on Africa's investments in its people's health and education. In this context, Africa's high dropout rates and low-quality education and healthcare should be given due attention. Increasing primary enrolment will promote development only if students complete a full course of study, achieve a minimum level of literacy and make meaningful contributions to society.

Building Africa's resilience to food system stresses requires addressing the key drivers of instability, managing the risks associated with the many threats to food security and enhancing human capabilities. This report thus urges member states to work closely with the private sector, civil society groups and development partners to tackle the recurring problem of food insecurity in Africa. It also admonishes African governments to expand the agricultural productivity frontier by encouraging policies that support the sustainable use of agricultural inputs, invest in infrastructure, develop financial markets and create and apply local knowledge. The interlocking dynamic between food security and health indicators suggest that tackling this challenge will accelerate progress on the MDGs.

The report shows that, were MDG progress measured in effort, Africa would rank among the best. Indeed, Africa has made great strides. But the continent's low development has required more effort to make meaningful progress. And while it might not reach the finish line first, its efforts should not be discounted. Perhaps most important, Africa must put structures in place to sustain its development well beyond the MDG timeline. We hope that this report inspires and energizes member states to accelerate efforts towards the MDGs. Further, we recommend that the post-2015 development agenda consider the initial conditions of nation-states and recognize countries' efforts towards the goals, as opposed to just measuring how far they fall short.

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Africa's Recent MDG Performance

Africa has made significant progress

Measured by effort, three African countries—Burkina Faso, Mozambique and Namibia—lead the way in accelerating progress for 16 of the 22 indicators accessed. Many countries in Southern, East, Central and West Africa have substantially improved their rate of progress and figure among the top 20 countries, and in most indicators progress has sped up. In North Africa, Egypt leads the way, accelerating or maintaining its rate of progress in 11 indicators, followed by Morocco with 9 and Tunisia with 8. In the rest of Africa, by contrast, 40 of 50 countries have accelerated or maintained their rate of progress in at least 11 indicators between the pre- and post-2000 periods, confirming their commitment and effort towards the Millennium Development Goals (MDGs) and the need to revisit the metric of progress in this context.

Table 1 summarizes Africa's MDG performance and identifies the best performing countries by indicator. The best performers are not necessarily those that have reached the target but those that have made the greatest improvements from their initial conditions.

Table 1. Africa's Millennium Development Goal performance at a glance, 2013

Goal	Status	Best performing countries, selected targets and indicators
Goal 1: Eradicate extreme poverty and hunger	Off-track	Target 1A: Egypt, Gabon, Guinea, Morocco, Tunisia Target 1B: Burkina Faso, Ethiopia, Togo, Zimbabwe Target 1C: Algeria, Benin, Egypt, Ghana, Guinea Bissau, Mali, South Africa, Tunisia
Goal 2: Achieve universal primary education	On-track	Indicator 2.1: Algeria, Egypt, Rwanda, São Tomé and Príncipe Indicator 2.2: Ghana, Morocco, Tanzania, Zambia
Goal 3: Promote gender equality and empower women	On-track	Indicator 3.1: The Gambia, Ghana, Mauritius, Rwanda, São Tomé and Príncipe Indicator 3.2: Botswana, Ethiopia, South Africa Indicator 3.3: Angola, Mozambique, Rwanda, Seychelles, South Africa
Goal 4: Reduce child mortality	Off-track	Indicators 4.1 and 4.2: Egypt, Liberia, Libya, Malawi, Rwanda, Seychelles, Tunisia
Goal 5: Improve maternal health	Off-track	Target 5A: Equatorial Guinea, Egypt, Eritrea, Libya, Mauritius, Rwanda, São Tomé and Príncipe, Tunisia Target 5B: Egypt, Ghana, Guinea Bissau, Rwanda, South Africa, Swaziland
Goal 6: Combat HIV/AIDS, TB, malaria and other diseases	On-track	Target 6A: Côte d'Ivoire, Namibia, South Africa, Zimbabwe Target 6B: Botswana, Comoros, Namibia, Rwanda Target 6C: Algeria, Cape Verde, Egypt, Libya Mauritius, São Tomé and Príncipe, Sudan, Tunisia
Goal 7: Ensure environmental sustainability	Off-track	Target 7A: Egypt, Gabon, Morocco, Nigeria Target 7C: Algeria, Botswana, Burkina Faso, Comoros, Egypt, Ethiopia, Libya, Mali, Mauritius, Namibia, Swaziland
Goal 8: Global partnership for development	Off-track	Target 8F: Kenya, Libya, Rwanda, Seychelles, Sudan, Uganda, Zambia

Source: Authors.

Poverty reduction lags behind growth

Africa is the world's second fastest growing region, and extreme poverty has declined faster since 2005 than over 1990–2005—but not fast enough to reach the target by 2015. The proportion of people living in extreme poverty (on less than \$ 1.25 a day) in Southern, East, Central and West Africa as a group fell from 56.5 per cent in 1990 to 48.5 per cent in 2010; about 20.25 percentage points off the 2015 target, compared with just 4.1 points for South Asia. However, more people are joining the ranks of extreme poverty than exiting—some 124 million people fell into extreme poverty over 1990–2010.

Decent jobs, a work in progress

Africa's growth has not been job-rich, and most jobs are vulnerable. Over the past 10 years, Africa's labour force added 91 million people but only 37 million jobs in wage-paying sectors. Some 46 per cent of Africa's workers earn less than \$1.25 per day, working in vulnerable jobs with low wages and low productivity. Africa's high working poverty and vulnerable employment call for strengthening social protection programmes to cushion workers from economic shocks. Job growth requires a structural transformation of African economies—with bold industrial policies that promote value addition and economic diversification.

Inequality is undermining efforts to reduce poverty

High gender, income and rural–urban inequalities have tempered the nexus between growth and poverty reduction. In Africa, a 1 per cent increase in inequality increases poverty 2.16 per cent. Wage rates remain unequal by gender, with women making as little as half that men make for the same work in Mauritania, Algeria and Côte d'Ivoire. On average, births to women in the richest quintile are nearly three times as likely to be attended by a trained professional as births to women in the poorest. Ninety per cent of women in urban areas had at least one antenatal care visit during pregnancy, well above the 71 per cent for women in rural areas. Addressing gender and rural–urban inequality is thus vital for sustaining progress on the MDGs.

Attending primary school is becoming the norm, but the quality of education remains a challenge

Most countries have achieved universal primary enrolment—rates of 90 per cent or higher—so the continent as a whole is expected to achieve Goal 2. Low completion and high grade repetition remain a challenge, however, as one in three students drop out. Reasons include late entry, poverty, poor quality of education and a lack of awareness of education's importance. Some 30 per cent of students with six years of schooling cannot read a sentence, and girls are more likely to drop out than boys. Social protection regimes—particularly cash transfers and school feeding programmes—and access to preschools have been instrumental in reducing dropout.

Progress toward gender parity is encouraging

Women across Africa are becoming more empowered, with more girls attending both primary and secondary school and more women in positions of political power. Nearly half the countries in Africa have achieved gender parity in primary school, and while parity at the secondary and tertiary levels has improved, limited data makes measuring progress difficult. Thanks to affirmative action, the proportion of seats held by women in African national parliaments (nearly 20 per cent) is second only to that in Latin America and the Caribbean. Early marriage, inequitable household power dynamics and low economic opportunities for women, however, are slowing progress.

Despite good progress, Africa still has the greatest burden of child and maternal deaths

Africa has made good progress in reducing child and maternal mortality in recent years. The under-five mortality rate declined 47 per cent (1990–2011), while maternal mortality fell 42 per cent (1990–2010). But far too many children and pregnant women still die each year from preventable causes. To speed progress, Africa needs integrated maternal and child health interventions focusing on infant mortality—as well as holistic policies to strengthen health systems, reduce adolescent birth rates and increase access to skilled birth attendants, antenatal visits and contraception.

Africa has halted the spread of HIV/AIDS, tuberculosis and malaria

Africa has halted and reversed the spread of HIV/AIDS, with a drop in prevalence rates from 5.9 per cent in 2001 to 4.9 per cent in 2011, due to strong political will, focused interventions and increased access to antiretroviral therapy. While tuberculosis and malaria remain serious health threats, Africa as a whole has halted the spread of both. Tuberculosis infections and deaths have fallen sharply in recent years, as have malaria cases and deaths. Access to insecticide-treated bed nets and improved prevention and treatment have played a large role in the declines.

Ensuring environmental sustainability-mixed progress

Africa contribution to CO₂ emissions and ozone-depleting substances remains marginal, but forest cover is shrinking, and most countries are struggling to meet targets on water and sanitation, particularly in rural areas. To improve access to water and sanitation, countries must concentrate efforts in rural areas and low-income groups, as rural-urban income disparities in access are holding progress back.

Medium-term prospects for official development assistance flows are dim

As a percentage of their combined gross national incomes, official development assistance (ODA) to developing countries and least developed countries fell 4 per cent in real terms in 2012, following a 3 per cent decline the year before. In real terms, bilateral ODA to Africa also declined in 2012. Total ODA to all African landlocked developing countries increased an average of only 2 per cent in nominal terms over 2009–2010. These trends, attributable in part to the Eurozone's sovereign debt crisis, are projected to continue into 2016. Cuts in ODA were evident in the highly affected Eurozone countries, such as Spain and Portugal.

Mobile communication, an incipient revolution in Africa

Africa is the world's fastest growing mobile market. The number of mobile cellular subscribers in Africa increased an average of 17 per cent between 2010 and 2011. Internet access is also expanding rapidly, due to the increasing use of smartphones and falling costs. Further, through innovations in money transfer systems, mobile phones have revolutionized the continent's financial transactions.

Africa's share of global trade remains marginal

Efforts to increase Africa's marginal share of global trade through Aid for Trade and preferential market access initiatives have yielded mixed results. Aid for Trade commitments and disbursements to Africa have increased the past few years, but disbursements have always fallen short of commitments. Further, the proportion of developed country imports from Africa (admitted duty-free) has generally stagnated, but it increased more than 50 per cent for 14 African countries. Overall, Africa's contribution to global trade remains around 3 per cent, largely unchanged since 2000.

Food insecurity—a recurring challenge

Africa's food insecurity challenge is manifested in high prevalence of hunger and malnutrition, especially among children. In 2012, Southern, East, Central and West Africa's Global Hunger Index (20.7) was second only to Southern Asia's (22.5). Most African countries endured serious to alarming hunger over 1990–2012, scoring between 20 and 40.¹ At \$174 per capita, the value of Africa's food production is well below the global average (\$241 per capita) and the lowest worldwide. African countries must build on initiatives like the African Union's Comprehensive Africa Agricultural Development Programme and focus on the multidimensional aspects of food security to accelerate progress towards halving hunger and ensuring food security. Regional and national programmes have shown that food security is an intersectoral problem that needs an integrated approach. But the responses have been undermined by weak political ownership, the limited scope of programmes and weak private sector and civil society involvement.

Moving forward

Africa has come a long way since 2000, making substantial progress towards several MDGs. And with less than 1,000 days until 2015, the focus is shifting from achieving the MDGs to developing the successor framework—the post-2015 development agenda. Regional consultations led by the United Nations Economic Commission for Africa, African Union Commission, African Development Bank and United Nations Development Programme confirm that health, education, water and sanitation and the environment remain

¹ The Global Hunger Index is scored as follows: ≤ 4.9 is low hunger, 5.0–9.9 is moderate hunger, 10.0–19.9 is serious hunger, 20.0–29.9 is alarming hunger and ≥ 30.0 is extremely alarming hunger.

high priorities for African countries. Stakeholders want inclusive growth that creates jobs and livelihood opportunities, especially for the continent's young. They recommend that structural economic transformation, human development, financing and partnerships, and technology and innovation be Africa's priority areas for the post-2015 development agenda.

Goal 1: Eradicate extreme poverty and hunger

Despite the huge impacts of the recent food, fuel and financial crises, as well as those of the Eurozone crisis, with its associated fiscal consolidation on low-income African countries, Africa's poverty rates have continued to decline. The proportion of people living on less than \$1.25 a day in Southern, East, Central and West Africa as a group fell from 56.5 per cent in 1990 to 48.5 per cent in 2010 (table 2). The indicator is about 20.3 percentage points off the 2015 target, compared with just 4.1 points for South Asia. As an annual average, poverty declined faster over 2005–2008 than over 1990–2005. The annual average decline is lower in Southern, East, Central and West Africa than in other regions. Africa's slower poverty reduction is due to its lower economic growth elasticity of poverty than in the other the regions.

Table 2. Regional breakdown of poverty incidence (1990–2010) and projections for 2015

Region	1990	1999	2005	2008	2010	2015 (forecast)	Annual rate of decline (1990–2010)
Poverty rate (percentage of the population living on less than \$1.25 a day)							
East Asia and the Pacific	56.2	35.6	16.8	14.3	12.5	5.5	4.11
Europe and Central Asia	1.9	3.8	1.3	0.5	0.07	0.4	4.01
Latin America and the Caribbean	12.2	11.9	8.7	6.5	5.5	4.9	2.62
Middle East and North Africa	5.8	5.0	3.5	2.7	2.4	2.6	2.55
South Asia	53.8	45.1	39.4	36.0	31.0	23.2	2.65
South, East, Central and West Africa	56.5	58.0	52.3	49.2	48.5	42.3	1.29
Total	43.1	34.1	25	22.7	20.6	15.5	2.96
Number of poor (millions living below \$1.25 a day)							
East Asia and the Pacific	926.4	655.6	332.1	284.4	250.9	114.5	
Europe and Central Asia	8.9	17.8	6.3	2.2	3.1	1.9	
Latin America and the Caribbean	53.4	60.1	47.6	36.8	32.3	33.0	
Middle East and North Africa	13.0	13.6	10.5	8.6	8.0	9.3	
South Asia	617.3	619.5	598.3	570.9	506.8	406.5	
South, East, Central and West Africa	289.7	376.8	394.9	399.3	413.8	408.0	
Total	1,908.6	1,743.4	1,398.6	1,289.0	1,214.9	970.2	

Source: World Bank, 2012; Ravallion, 2013.

Despite the progress on the proportion of people living in extreme poverty, in absolute terms, poverty reduction performance remains a concern. Due to the slow pace of poverty reduction, the number of people in extreme poverty (less than \$1.25 per day) increased in Southern, East, Central and West Africa over 1990–2010, from 289.7 million to 413.8 million (see table 2).

Poverty in Africa remains predominantly rural—at least three times higher in rural areas than in urban in several countries. The deplorable state of rural infrastructure, limited rural livelihood opportunities, high youth employment and limited access to quality education are all key drivers of rural poverty.

Urban poverty is, however, an issue in several countries, due to rural–urban dynamics. For instance, urban growth has been associated with the urbanization of poverty in South African cities.² Addressing this phenomenon is important for rapid progress.

Women are disproportionately impacted by poverty in Africa. Women’s work both in and outside the home tends to be undervalued. Second, women’s jobs usually garner low wages and have poor working conditions. Third, there is limited access to productive assets (such as land) due to traditional restrictions on women’s property rights. Fourth, a lack of or low education reduces access to decent, high-wage jobs. Last, the prevalence of violent civil conflicts discriminates against women and weakens their ability to be fully engaged in productive activities. Policy and actions should be targeted at factors propagating the unequal distribution of economic opportunities between men and women.

Africa’s employment growth remains firm since the global economic crisis manifested fully on the labour market in 2009. North Africa’s employment rose 1.1 per cent in 2011 and 2.0 per cent in 2012, while Southern, East, Central and West Africa’s remained constant at 2.9 per cent. However, chances are that the regions that have managed to prevent a further increase in unemployment could have seen job quality worsen—vulnerable employment as a coping strategy. Although women’s involvement in the labour market improved over 2000–2012, the gender composition of employment still favours men. And though Africa has considerable potential to generate employment over the medium term, addressing youth unemployment and increasing labour productivity are daunting challenges.

Progress on malnutrition is slow, with many countries still having a large proportion of their population malnourished, especially children. African governments need to build on the current momentum of the African Union’s Comprehensive Africa Agricultural Development Programme to achieve agricultural transformation—not only to promote food security but also to reduce poverty and generate employment, especially from agricultural value chains. Formulating and implementing inclusive national employment strategies with a focus on youth employment is also important.

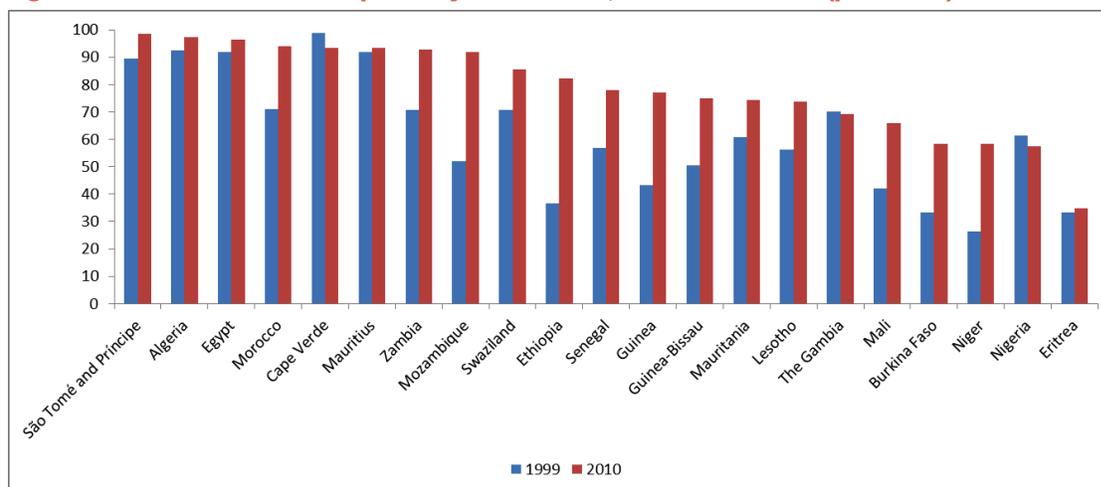
Goal 2: Achieve universal primary education

Prospects for achieving universal primary education are promising, but the quality of education is still low, contributing to low completion rates, high repetition rates and low functional literacy.

African countries continue to progress on primary school enrolment. Aggregate net primary school enrolment rose from 64 per cent in 2000 to 87 per cent in 2010 in the 29 countries with available data. Excluding North Africa, enrolment rose markedly, from 58 per cent to 76 per cent, an annual increase of 1.5 percentage points, considerable given the continent’s high population growth. North Africa’s enrolment rose from 88 per cent to 96 per cent, reflecting a narrowing difference (by 10 percentage points) between that subregion and the rest of Africa. Even so, progress varies widely across African countries (figure 1).

² For more information, see www.sacities.net/what/671-study-into.

Figure 1. Net enrolment in primary education, 1999 and 2010 (per cent)



Source: Authors' calculations based on UNSD (n.d.).

Note: Some of the data have been adjusted by the responsible specialized agencies to ensure international comparability, in compliance with their shared mandate to assess progress towards the MDGs at the regional and global levels.

Despite the intensified efforts, several African countries are still far from the target of 100 per cent net primary enrolment. In 2010, at least 13 countries were more than 20 percentage points off target. The recent outstanding performances of Niger and others, however, suggest that the challenge can be overcome.

Low completion rates are a nagging problem. The average primary completion rate rose from 54 per cent in 2000 to 71 per cent in 2010, an annual increase of 1.7 percentage points. In countries with lower initial primary completion rates, progress was greater. For example, Ethiopia, Rwanda and Mozambique improved their primary completion rates annually by 4.9, 4.7 and 4.4 percentage points, respectively, over 2000–2010. Ghana, Morocco, Tanzania and Zambia, whose primary completion rates exceeded the regional average in 2000, also featured among countries that made the most progress.

While low completion rates are due partly to poor quality education, late entry into schools; gender, location and income also play a role. Both girls and boys struggle to complete primary education, but boys are on average about 5 percentage points more likely to finish. Similarly, urban dwellers are more likely to complete school than rural dwellers, as are the wealthiest quintiles compared with the poorest. Social protection regimes and preschool have helped increase enrolment and completion rates in some African countries. Retention in the primary cycle remained almost constant over 2000–2010, increasing from 65 per cent to just 68 per cent. It is estimated that if current dropout trends continue, the primary education completion rate will rise only marginally over 2010–2015 (Ndém and Brossard, 2006).

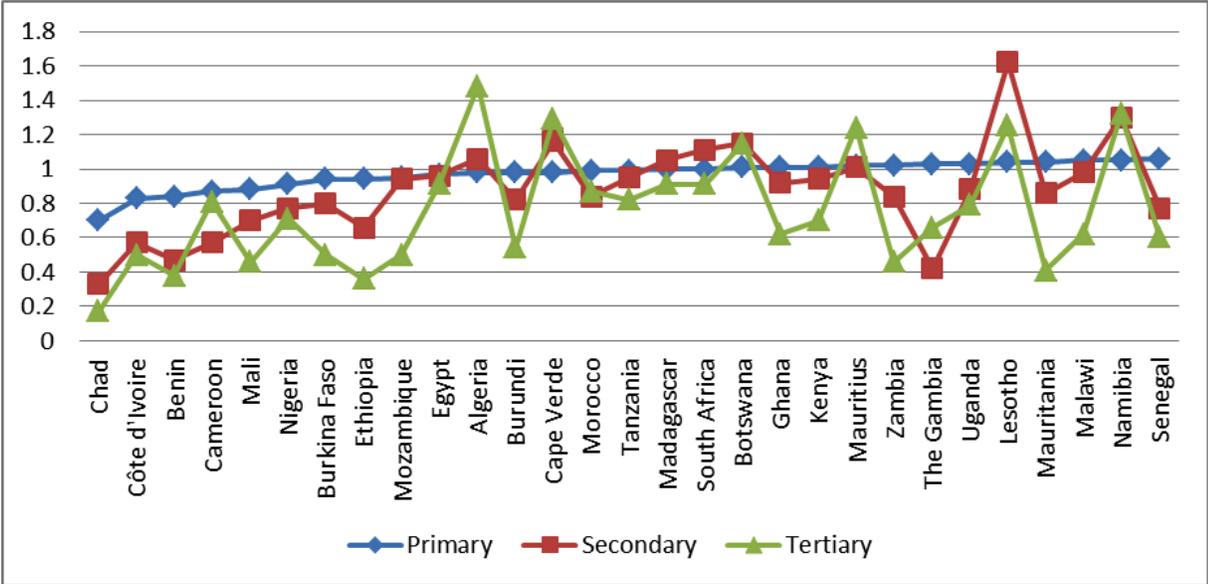
Literacy data in Africa are encouraging but mask considerable gender and cross-country disparities. In 2010, 13 African countries had a literacy rate above 90 per cent, but 10 countries were below 70 per cent. Disaggregating data by gender for the same year shows that literacy rates remain higher for men (82.5 per cent) than for women (78.0 per cent).

The appreciable levels of literacy in Africa do not reveal the quality of the skills acquired. Indeed, primary school graduates often lack the requisite numeracy and literacy skills due to the low quality of education they receive. It takes four or five years of quality primary school for children to attain functional literacy and numeracy. And recent analysis of household surveys shows that far more children than expected in low- and lower middle-income countries are completing primary school without becoming literate (Ndém, 2011). While several African countries are on track to achieve the net primary enrolment target, the quality of education remains low and of major concern. In addition, stark gender, income and rural–urban inequalities in access to education prevail at all levels. Addressing these issues is critical for Africa to realize the demographic dividend that could accrue from its young.

Goal 3: Promote gender equality and empower women

Progress on Goal 3 is encouraging, with many countries achieving outstanding performance, especially on gender parity in primary school (figure 2) and on the number of seats women hold in national parliaments. Promoting better access for women to paid nonagriculture jobs remains a challenge, but Africa is seeing progress on that front as well.

Figure 2. Gender parity at the primary, secondary and tertiary levels, 2012



Source: Authors' calculations based on World Economic Forum (2012).

Africa performed better than Southeast Asia, Latin America and the Caribbean and West Asia in narrowing gender disparity in primary school over the past two decades, trailing only Southern Asia. Despite the progress, disparities exist between and within countries— for instance, the gender parity index is higher for high-income groups and areas than for low-income ones.

School life expectancy, the average number of years of instruction that a child entering the system can expect to receive from primary to secondary schools, is higher for boys than for girls in Africa. Over 1998–2009, six countries achieved parity in school life expectancy, and overall, the indicator improved from 5.7 years to 8.0 for girls and from 6.3 years to 8.5 for boys. West African countries are among the best performers for improved gender parity in secondary education.

At the tertiary level, enrolment increased for women almost twice as fast as that for men over 1991–2010, and 10 countries substantially improved their gender parity in tertiary education, ranging from 106.25 per cent to 371.43 per cent. Given the importance of tertiary education to women, especially for enhanced income and social status, more countries are now emphasizing it.

Africa has seen good progress in economic opportunities and participation, with women’s share of paid employment outside agriculture increasing from 35 per cent in 1990 to 40 per cent in 2010. Yet much work remains. Women’s nonagriculture employment is lower in Africa than in other regions; more than 60 per cent of female workers are in vulnerable employment, while barely a third of male workers are; and wage rates for men and women for similar work are still unequal in many African countries, with a female–male wage ratio of less than 0.5 in some. Most African countries have yet to benefit from a robust structural transformation from agriculture to industry and services. Nevertheless, women in Africa overall have fewer job opportunities in industry than men do; women are more likely to work in services, which seems to be less skill-demanding. Africa is making steadier progress on increasing the proportion of seats women hold in national parliament than are other regions. In 2012, only Latin America and developed regions surpassed its achievement.

The composite gender parity index, capturing gaps in economic participation and opportunity, education attainment, health and survival and political empowerment, has improved in many countries. And two African countries ranked 14 and 16 in the global parity index in 2012, ahead of Canada and the United States. Still, reproductive and sexual health remains one of the weakest areas of human rights in Africa and requires special attention.

Africa is not short on declarations and treaties that recognize human rights. The main challenge is implementing them to protect women and children’s rights. Although the pace of implementation is low, things have started to change.

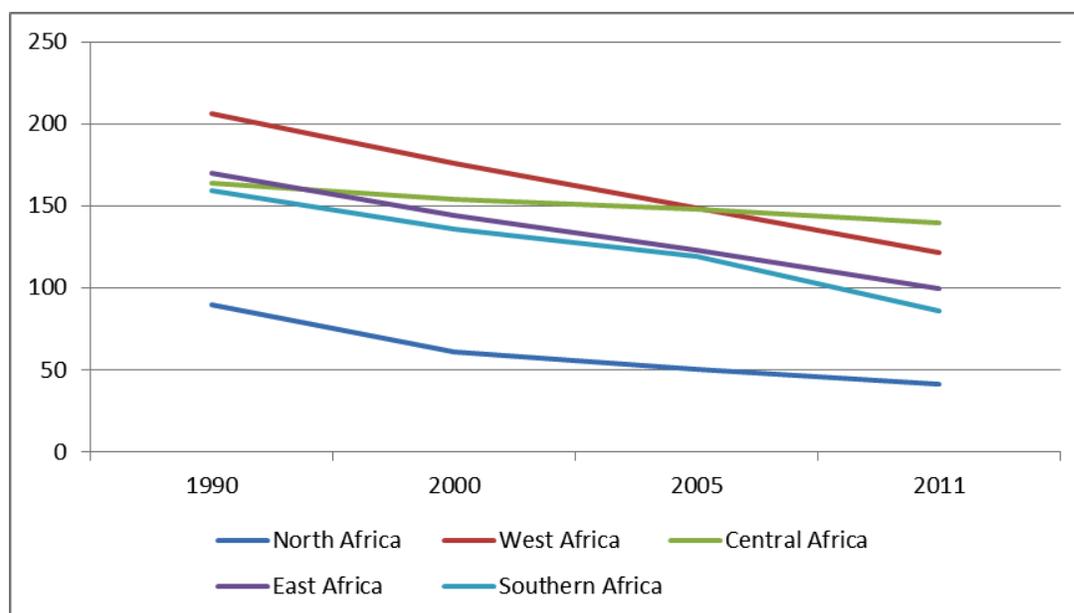
Goal 4: Reduce child mortality

Africa continues to steadily reduce its under-five mortality rate, having gone from 146 deaths per 1,000 live births in 1990 to 91 in 2011. But it is not enough to reach the target of reducing under-five deaths by two-thirds by 2015. Some factors contributing to Africa’s inadequate progress include weak health systems and poor conditions as determinants of health, such as household education, income, insufficient and inappropriate nutrition practices and poor sanitation facilities.

Despite slow progress, three countries (Egypt, Liberia and Tunisia) have already surpassed the under-five mortality rate target. Eleven countries³ have reduced their rate by at least 60 per cent, and are thus on track to reach the target. This progress is the product of multiple factors—focusing on high-impact interventions, strengthening health systems, investing more in health and its social determinates, enhancing medical technology and improving education, child protection and economic growth.

Among African regions, North Africa progressed the most in reducing its under-five mortality rate over 1990–2011, from 89 deaths per 1,000 live births to 41 in 2011, a 54 per cent decrease (figure 3). Southern Africa (46 per cent) and West Africa and East Africa (42 per cent each) are also seeing good reductions. Central Africa is progressing the slowest, and had the continent’s highest under-five mortality rate in 2011, at 139 deaths per 1,000 live births. This could be due partly to malaria, which account for more than 18.0 per cent of under-five deaths in Central Africa, against an average of just 7.5 per cent in the other regions (UNICEF, 2012). Expanding malaria prevention and treatment in Central Africa could thus reduce its child mortality rates enormously.

Figure 3. Under-five mortality rate by region, 1990–2011



Source: Authors’ calculations based on UNSD (n.d.).

³ Cape Verde, Egypt, Ethiopia, Liberia, Libya, Madagascar, Malawi, Morocco, Niger, Tunisia and Rwanda.

Note: Data are weighted by share of population ages 0–4

Note that about 65 per cent of child deaths in Africa occur before the child's first birthday. Neonatal deaths—deaths in a child's first 28 days—account for more than half that percentage. Further, infant mortality rates have declined slower than under-five mortality rates. From 1990 to 2011, infant mortality dropped from 90 deaths per 1,000 live births to 60, with 16 countries having reduced infant mortality by more than half 17 by 25–50 per cent and 14 by 10–25 per cent.

Most neonatal deaths result from preterm birth or delivery complications. Home delivery without a skilled health care provider leaves women and infants at greater risk of these complications. Improving quality and access to primary health care throughout pregnancy and birth is thus essential. High-impact interventions during delivery and the postnatal period, such as safe and clean delivery, skilled attendance at birth and exclusive breastfeeding, can drastically reduce neonatal morbidity and mortality.

African countries have progressed substantially well towards Goal 4, but current progress is not enough, and Africa overall is unlikely to reach it. By scaling up proven, cost-effective and high-impact interventions, systematically reducing bottlenecks in health systems and improving social determinants of health, Africa can speed up the progress.

Goal 5: Improve Maternal Health

Despite some progress in the maternal mortality ratio over 1990–2010—a 42 per cent reduction, from 745 deaths per 100,000 live births to 429—Africa still has the world's largest burden of maternal deaths, at 56 per cent of the global burden in 2010. At 429 deaths per 100,000 live births that year, or an estimated 164,800 maternal deaths, Africa has the world's highest maternal mortality ratio. In fact, Africa accounts for the 10 countries with the highest ratios.

Further, there is great political will to speed progress towards Goal 5. Since the Campaign on Accelerated Reduction of Maternal Mortality in Africa launched in 2009, 37 African countries have adopted the initiative, and more are preparing to do so. Equatorial Guinea has achieved Goal 5, with an 81 per cent reduction in the maternal mortality ratio since 1990, and Eritrea and Egypt are both on track (table 3; WHO et al., 2012).

By contrast, Botswana, Cameroon, Chad, Congo, Lesotho, Somalia, South Africa, Swaziland and Zimbabwe all saw maternal mortality rise. HIV/AIDS is the main cause of this rise in the Southern African countries, and once antiretroviral therapy became more available, their maternal mortality ratios started to drop. Chad and Somalia are the worst performers, with more than 1,000 deaths per 100,000 live births in 2010, due in no small part to their ongoing conflicts.

Table 3. Progress of countries in reaching the goal of reducing maternal mortality

On track **Progress** **Insufficient progress** **No progress**

Egypt	Algeria	Malawi	Central African	Botswana
Eritrea	Angola	Mali	Republic	Cameroon
	Benin	Mauritania	Djibouti	Chad
	Burkina Faso	Morocco	Gabon	Congo
	Cape Verde	Mozambique	Guinea-Bissau	Lesotho
	Comoros	Niger	Kenya	Namibia
	Côte d'Ivoire	Nigeria	Sierra Leone	Somalia
	Democratic	Rwanda	Sudan	South Africa
	Republic of the	São Tomé and	Zambia	Swaziland
	Congo	Príncipe		Zimbabwe
	Ethiopia	Senegal		
	The Gambia	Togo		
	Ghana	Tunisia		
	Guinea	Uganda		
	Liberia	Tanzania		
	Madagascar			

Source: WHO et al., 2012.

A major reason for Africa's high maternal mortality is that few infants are born in the presence of skilled attendants. The lack of skilled birth attendants contributes to 2 million maternal, stillbirth and newborn deaths each year worldwide. Of the 52 African countries with data, just 7 reported that more than 90 per cent of births were attended by a skilled health professional. In 19 countries, less than half of births were attended by skilled health personnel. The World Health Organization estimates that 80 per cent of births need to be attended by an adequately equipped and skilled birth attendant to reach the Goal 5 target of reducing maternal mortality by three-quarters.

Also, good maternal health depends on access to reproductive rights and effective family planning, which can prevent unintended pregnancies, induced abortions and the associated morbidity and mortality. Contraceptive use in Africa is far lower than in other developing regions, and Africa's unmet need for family planning is highest in the world. Further, antenatal care coverage is unequal across Africa. Whereas 77 per cent of pregnant women attend at least one antenatal check-up, only 47 per cent attend the recommended four antenatal care visits, with wide disparities by geographic location and across income groups.

Africa is making strides in improving maternal health thanks to local, national, regional and international efforts, but maternal mortality is still disproportionately high. The causes of maternal mortality and morbidity are well known and mainly result from a health system's inability to manage complications, especially during childbirth or shortly after. The availability of skilled health providers is critical for ensuring high-quality antenatal, delivery, emergency obstetric and postnatal services. With greater efforts in the fight against the major causes of maternal mortality, and greater access to quality reproductive health care, African countries can accelerate progress towards Goal 5.

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

The world has achieved unprecedented gains in reducing the number of both adults and children with HIV, as well as the number of people dying from AIDS-related causes. Ten countries with generalized epidemics, including three in Africa (Botswana, Namibia and Rwanda), have attained universal access to antiretroviral therapy, spurring a new hope across the world.

Southern Africa and Central Africa remain the regions most severely affected by HIV/AIDS, with nearly 1 in 10 adults living with HIV. While the magnitude of the disease remains critical, policy interventions are having a positive impact. New data confirm Africa's drop in adult prevalence from 5.9 per cent in 2001 to 4.9 per cent in 2011, driven partly by a steep decline in new HIV infections in 23 countries.

An important aspect of reducing infections is eliminating them among children by 2015. In 2011, 330,000 children contracted HIV/AIDS, more than 90 per cent of them in Africa. In high-income countries, by contrast, practically zero children had new infections. Timely access to quality antiretroviral therapy for HIV-positive pregnant women can reduce transmission to less than 5 per cent and lower child and maternal mortality (UNAIDS, 2012a).

Behaviour change is another critical component of reduced HIV infections. In Africa, fewer young people are having early sexual intercourse, young people are having fewer sexual partners and sexually active people are using condoms more consistently and more correctly (UNAIDS, 2012b). Over 2001–2011, young women's prevalence rate in Southern, East, Central and West Africa dropped from 5.1 per cent to 3.1 per cent, a promising trend. But condom use is still low—and even decreasing—in some countries. The demand for condoms might be affected by other prevention programmes, such as male circumcision, postexposure, prophylaxes and partners receiving antiretroviral therapy.

The gains in curtailing HIV/AIDS are truly impressive, but expanding access to antiretroviral therapy, promoting correct and consistent condom use and preventing mother-to-child transmission are all critical in speeding progress. For Africa to truly reverse the spread of HIV/AIDS, efforts must be enhanced and sustained.

Africa has seen substantial progress in reducing prevalence, incidence and death associated with malaria and, to a lesser degree, tuberculosis (TB). International funding for malaria control is on the rise, enabling endemic countries to increase access to insecticide-treated bed nets, rapid diagnostic tests and artemisinin-based combination therapy. Since 1990, of the 43 African countries with ongoing malaria transmission, 8⁴ have reduced malaria incidence or admission at least 75 per cent, and 3 more (Eritrea, Madagascar and Zambia) are projected to reduce admissions 50–75 per cent by 2015. A total of 39 of 43 African countries with ongoing malaria transmission distribute free insecticide-treated bed nets to all age groups.

But Africa's malaria burden is still enormous. Indeed, the continent accounted for about 81 per cent of the estimated 216 million malaria episodes in 2010 and about 91 per cent of the 655,000 malaria deaths. Enhanced efforts are thus necessary to properly prevent, diagnose and treat malaria in order to reverse the incidence of the disease.

The target of halting and reversing TB incidence has been achieved both globally and in Africa. Over 2010–2011, Africa's TB incidence declined 3.1 per cent, compared with just 2.2 per cent globally. This 3.1 per cent reduction has not matched by TB mortality rates, which fell only at an annual average of 1.5 per cent over 1990–2010, pointing to a lack of improvement in TB patients' adhering to treatment regimens and the continent's consistent number of multi-drug resistant TB (MDR-TB) cases. Further, some 25 per cent the 8.7 million TB cases in 2011 were in Africa.

Africa does, however, have an opportunity to accelerate progress on fighting TB in the coming years. Indeed, all 54 African countries provided submissions for the 2012 round of global TB data collection. With better data collection, reporting and monitoring and evaluation, African countries can better implement Stop TB Strategies and monitor their effectiveness. An additional opportunity for Africa to fight TB comes with reducing HIV/AIDS prevalence and incidence, as the two maladies are closely linked. Some African countries have made major progress in detecting and curing cases under directly observed treatment short course (DOTS). Sudan went from detecting less than 1 per cent of cases in 1990 to 50 per cent in 2010. São Tomé and Príncipe went from 11 per cent to 76 per cent; Egypt from 11 per cent to 64 per cent; and Sierra Leone from less than 8 per cent to 32 per cent. Côte d'Ivoire, Kenya, Lesotho and Namibia each detect more than 80 per cent of cases as of 2010, and Tunisia and Morocco each detect more than 90 per cent.

Both malaria and TB are major causes of death in Africa. And while both have shown signs of abating, Africa still has the largest burden of both malaria and TB incidence, prevalence and deaths. Enhanced treatment and prevention efforts, along with more political will and targeted interventions, can speed progress, with health benefits for many of Africa's people.

⁴ Algeria, Botswana, Cape Verde, Namibia, Rwanda, São Tomé and Príncipe, South Africa and Swaziland.

Goal 7: Ensure environmental sustainability

Africa is making progress on Goal 7, but achieving environmental sustainability remains a challenge overall.

Evidence from several African countries suggests that the proportion of land area covered by forests is declining and that deforestation is occurring at an alarming rate. In recent years, encroachment has expanded. And in some countries, forest land has been given away for investment purposes; in others, like the Democratic Republic of the Congo, forests are cleared for mining. To mitigate these challenges, African countries need sustainable forestry policies, programmes and management, adequately staffed and financed institutions and diversified economies to reduce reliance and encroachment on forests.

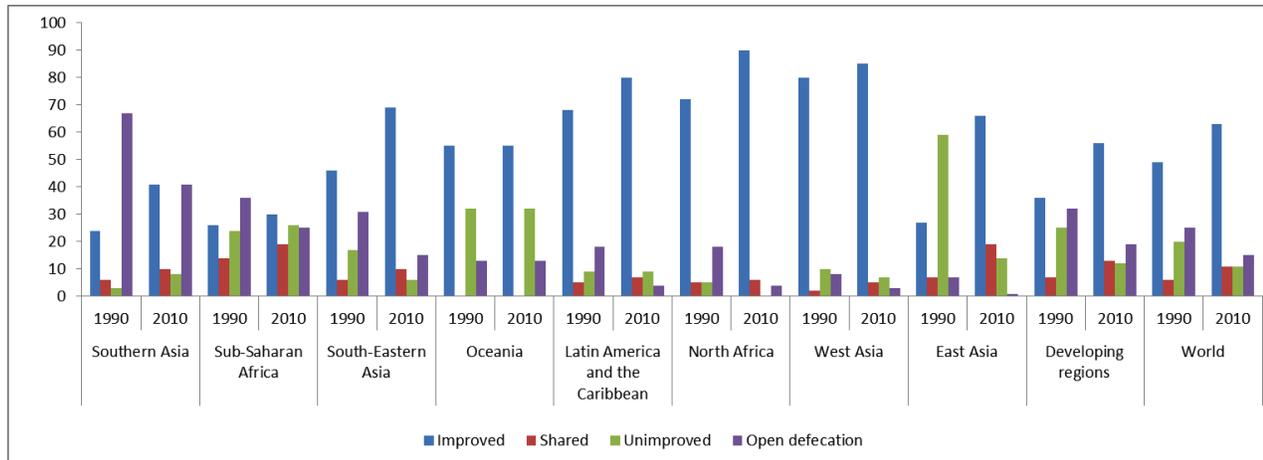
Historically, Africa's CO₂ emissions have been low—less than 4 per cent of world emissions. Many countries' CO₂ emissions increased in 2009, but most of the increases were less than 1 per cent, and Africa in general continues to have low emissions. Still, the continent remains at a high risk of the effects of climate change, as seen in its recent severe droughts and floods. Over 1990–2009, only 20 African countries reduced their CO₂ emissions, while 34 increased them. And as more African countries industrialize, CO₂ emissions will likely increase. So Africa might need to harmonize industrial development with environmental sustainability, as opposed to taking the “pollute first, clean up later” approach that most industrialized countries took.

African countries are increasing efforts to reduce their consumption of ozone-depleting substances (ODS) and are thus steadily reducing their ODS consumption. As a result, many are on track to meet this target. Over 2000–2010, more than half the countries that reduced their ODS consumption did so by more than 50 per cent. Conversely, more than half the countries that increased ODS consumption also did so by more than 50 per cent. This increase can be attributed largely to massive increases in hydro chlorofluorocarbon consumption.

Globally, the indicator on sustainable access to water has been met, with the 88 per cent target surpassed by a percentage point. But while the world as a whole is on track, Africa is not. Indeed, the continent accounts for more than 40 per cent of people without access to safe drinking water. And this population is concentrated in Southern, East, Central and West Africa. Within countries, urban dwellers generally have more access to water sources than their rural counterparts. In many cases, this has slowed progress on sanitation and contributed to outbreaks of cholera and diarrhoea. Investing in water infrastructure is necessary to improve access. Factors hindering progress in access to safe drinking water include political instability, an increasing number of refugees and growing populations putting pressure on the available resources. Additionally, African countries generally lack the technologies needed to improve water and sanitation.

Much of Southern, East, Central and West Africa is off track to meet the improved sanitation facility target. Sanitation coverage increased just 4 percentage points over 1990–2010—to reach 30 per cent of the population (figure 4). In 2010, 45 per cent of the population used either a shared or an unimproved facility, and 25 per cent practiced open defecation. Africa's population without an improved sanitation facility increased almost 200 million people—to 612 million—over 1990–2010.

Figure 4. Access to sanitation facility by region and type, 1990 and 2010



Source: WHO and UNICEF 2012

Stark disparities exist between rural and urban areas in the availability of adequate sanitation. Sanitation coverage in rural areas was below 50 per cent in 2010 in most African countries. High population growth is a major constraint in the provision of adequate sanitation. Even in urban areas, where coverage is better, the expansion of slum areas poses a challenge.

Africa's progress on Goal 7 is mixed. The continent is doing well on indicators for CO2 emissions and ODS. But forest cover is contracting, and unless water and sanitation interventions are intensified in the coming years, the continent might not meet these targets. African countries need to develop, improve and implement sustainable forestry policies with accompanying effective monitoring systems. Safe drinking water interventions need to focus on rural populations, which are holding back progress. The same applies for sanitation interventions, which require the efforts of all concerned to ensure adequate coverage.

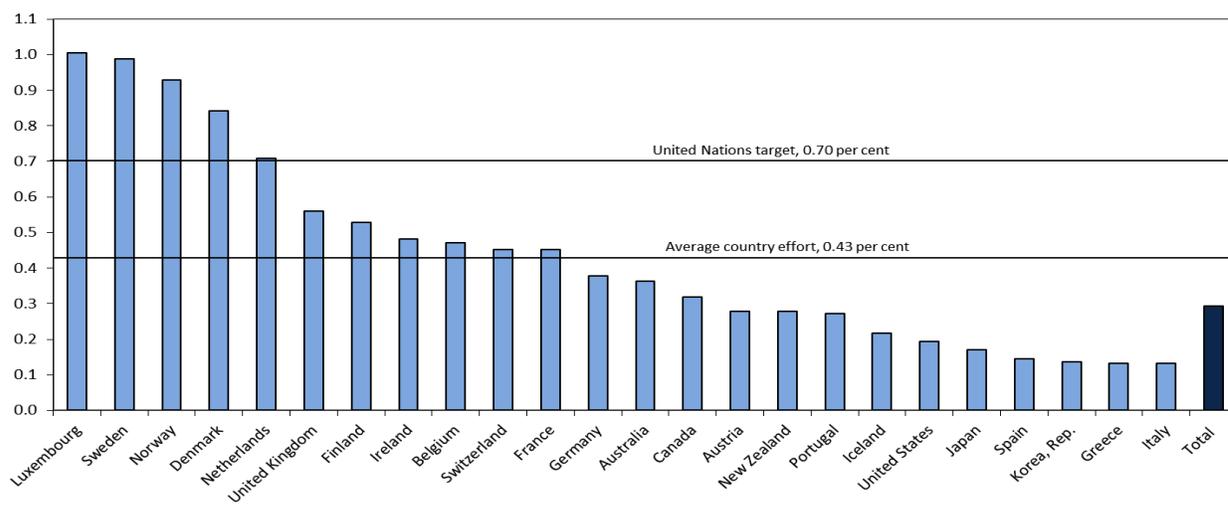
Goal 8: Develop a global partnership for development

Establishing a global partnership for development is critical for realizing the MDGs. Specifically, providing official development assistance (ODA) to developing countries is an important source of finance for the MDG interventions, and thus their progress. However, as Europe continues to struggle with its sovereign debt crisis and inflation rates increase, ODA to developing countries has fallen. Greece, Ireland, Portugal and Spain accounted for the sharpest reductions in real terms.

Aid from Development Assistance Committee (DAC) members of the Organisation for Economic Co-operation and Development (OECD) was estimated at \$125 billion in 2012, 4 per cent (in real terms) less than in 2011. The decline in 2012 followed a similar trend in 2011, when development aid from major donors fell in real terms for the first time in nearly 15 years, dropping 3 per cent. ODA has not fallen in two successive years since 1996–1997. Africa and least developed countries have not been spared the declines in ODA flows, particularly from bilateral sources. Over 2011–2012, bilateral ODA to Africa fell 9.9 per cent in real terms, following exceptional support for the Arab Spring in 2011. Bilateral support to least developed countries fell 12.8 per cent in real terms during the same period. Further, the medium-term ODA outlook for Africa is not promising, and thus even deeper cuts in concessionary funding can be expected.

DAC countries are also sliding further back on their United Nations commitment to provide 0.7 per cent of their countries' gross national income (GNI) to developing countries. In 2011, net total ODA was \$134 billion, or 0.31 per cent of donors' combined GNI (figure 5). By 2012, it had shrunk to \$125 billion, or 0.29 per cent of combined GNI. Indeed, most DAC countries did not meet the commitment in 2012.

Figure 5. Official development assistance as a share of gross national income in Development Assistance Committee countries (per cent)

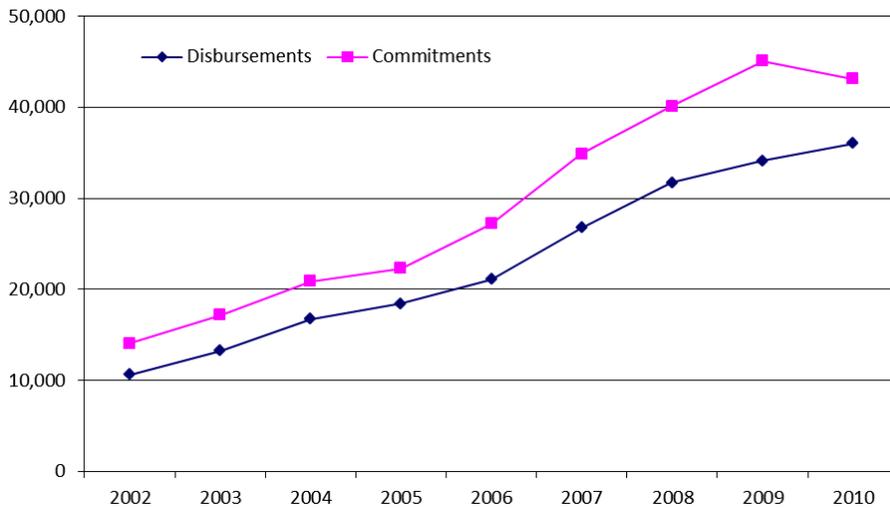


Source: OECD, 2013.

Donors are also regressing on their ODA commitments to least developed countries. DAC donors' net ODA to least developed countries fell from 0.11 per cent of GNI in 2010 to 0.10 per cent in 2011. DAC member countries contributed 0.10 per cent of GNI in net ODA to least developed countries in 2011, short 0.05 percentage points of the minimum. For African landlocked developing countries, total ODA rose only 2 per cent between 2009 and 2010. More than half the 15 African landlocked developing countries saw a decrease in ODA. As prospects for external funding become more uncertain, developing countries will need robust strategies to address their financing needs.

Aid for Trade commitments and disbursements to Africa have risen the past few years, but disbursements have fallen short of commitments (figure 6). The gap began to widen in 2006 and peaked in 2009 at the start of the global financial crisis, which forced developed countries to tighten their budgets and cut spending. Moreover, the demand for Aid for Trade has grown the past few years, but donors have not been able to respond sufficiently.

Figure 6. Aid for Trade commitments and disbursements to Africa, 2002–2010 (millions of dollars, in current prices)



Source: OECD, 2012.

Europe’s sovereign debt crisis has greatly reduced ODA flows to developing countries. If the crisis persists, ODA flows will likely continue to fall, as European ODA donors (the majority of ODA donors) seek solutions and prioritize their own recoveries. So whether the target for ODA will be met remains to be seen. African countries should thus aim to minimize ODA dependency through robust domestic revenue mobilization measures. The discovery of minerals and oil in some African countries and least developed countries presents a good opportunity for them to fund their own development.

Developed country imports from developing countries remained largely unchanged in 2010. The past decade’s stagnation of the Doha Round has greatly affected trade. Meanwhile, the world suffered multiple crises (financial, food and fuel)—all forcing some developed countries to take protectionist measures. The past decade has seen a proliferation of regional trade agreements, as countries resort more to regionalization given the growing impatience with and limited gains from the multilateral trading system. In addition, trade between Africa and other emerging economies has grown, propelling the values of Africa’s exports 28.3 per cent and imports 18.6 per cent over 2009–2010—and exports 14.5 per cent and imports 19.5 per cent in 2011. But these figures could fall by more than half in 2012, because of the global economic slowdown. In addition, Africa’s exports continue to be driven by emerging markets’ burgeoning demand for commodities, which could lock the continent into a primary commodity export trajectory and undermine prospects for developing a manufacturing base. Emerging economies like China and India are fast becoming Africa’s strategic partners; however, the European Union and United States remain Africa’s major trading partners, despite their share of trade with Africa declining steadily the past 10 years

Africa’s progress on information and communications technology is encouraging. The growing importance of the Internet, expanding use of mobile phones and swelling telecommunications investments have improved Africa’s information and communications technology landscape. However, the number of fixed telephone lines in Africa remains low, changing very little over 1990–2011. The growing popularity and diversity of mobile phone has reduced the use of and need for fixed telephone lines. As a result, fixed telephone lines are being disconnected and abandoned in favour of mobile phones. The decline in fixed telephone lines is also due to vandalism of copper cables that connect the fixed telephone lines and the high costs of maintaining terrestrial facilities (for fixed-line networks).

By contrast, Africa’s number of mobile cellular subscribers increased an average of 17 per cent over 2010–2011. The world’s fastest growing mobile market, Africa reached almost 6 billion mobile subscriptions in 2011, corresponding to 86 per cent global penetration. As telecommunications service providers have expanded beyond phone calls and SMS services, more people have been drawn to subscribe.

Over 2010–2011, Africa’s number of Internet users per 100 people increased an average of 23 per cent.

Sudan and Kenya recorded an increase of 100 per cent or more. Africa as a whole, however, has less than 5 mobile broadband subscriptions per 100 people. The continent’s increasing use of smartphones has been a primary contributor. Countries are making efforts to improve their information and communications technology, a big part of which is improving Internet access. Kenya is building and improving infrastructure to reach full Internet penetration by 2017, while Rwanda, with the fastest Internet in Africa, is working to make broadband more affordable. With more telecommunications interest in the African market, progress on information and communications technology could increase and enable Africa to achieve the mobile subscription and Internet use targets. The use of fixed telephone lines will not likely progress much more or increase any faster than the current rate.

Food Security in Africa: Issues, Challenges, Lessons

For more than 20 years, Africa has struggled with hunger and food insecurity. Food security is “when all people, at all times, have physical, social and economic access to sufficient, safe and nutritious food that meets their dietary needs and food preferences for an active and healthy life.” Food security has four dimensions: stability, availability, accessibility and consumption and use of food.

Africa first received food aid in the late 1950s, and since the mid-1980s the number of African food emergencies has tripled. Moreover, food insecurity and related crises happen despite an abundance of resources, including water and land. For every crisis, there have been responses, but the crises recur. Several challenges have kept Africa from moving wholly past food insecurity, including ineffective regional and global responses, underdeveloped agriculture, a lack of modernization, poor land structure, chronic poverty and a lack of political focus.

The situation does not look much better today. In Eastern Africa⁵ alone, an estimated 16 million people endure “stressed to emergency” levels of food insecurity, caused mostly by a lack of rain, conflict, high food prices and an inability to access humanitarian assistance. Africa accounts for 28 of the 35 countries that need external food assistance. In 2011, the Horn of Africa faced the most severe drought in 60 years, affecting more than 13 million people. And North Africa’s Sahel region was hit by a food and humanitarian crisis that led to severe food insecurity in early 2012.

According to the Global Hunger Index,⁶ Africa has long been a “hungry continent,” based on its countries’ scoring of moderate to extremely alarming hunger since 1990 (table 4). On a positive note, Africa’s overall hunger in 2012 was lower than in 1990. Over 1990–2010, Africa had the lowest average value of food production. Consequently, Africa has remained a net food importer, and countries depending on imports of major food staples have been vulnerable to global food price volatility. Price volatility, especially for staple foods, has resulted in serious food insecurity for African farmers and consumers alike, because such foods are the most widely planted by smallholder farmers and account for a large share of spending among poor consumers.

Table 4. Global Hunger Index scores by rank 1990, 2001, 2012

	Country	1990	1996	2001	2012
1	Libya	< 5	< 5	< 5	< 5
2	Tunisia	< 5	< 5	< 5	< 5
3	Algeria	6.7	7.3	6	< 5

⁵ Kenya, Uganda, Ethiopia, Eritrea, South Sudan, Sudan and Djibouti.

⁶ The Global Hunger Index tracks and measures hunger at the country, region and world levels. It is based on a combination of three indicators—undernourishment, child mortality and child underweight. The higher the index, the more severe the hunger

4	Morocco	7.8	6.8	6.2	< 5
5	Egypt	8	6.7	5.3	< 5
6	Gabon	8.4	6.9	7.2	5.4
7	Mauritius	8.0	7.4	6.0	5.4
8	South Africa	6.9	6.5	7.4	5.8
9	Ghana	21.4	16.3	12.8	8.9
10	Swaziland	9.3	12.6	12.9	10.9
11	Mauritania	22.6	16.7	16.6	11.1
12	Congo	23.6	24.1	15.7	11.4
13	Lesotho	12.6	13.6	13.9	11.9
14	Namibia	20.3	19.1	16.3	13.2
15	Botswana	13.4	15.4	15.7	13.7
16	Senegal	18.3	19.6	19.2	13.7
17	Benin	21.3	20.1	16.8	14.6
18	The Gambia	16.2	20.1	16.3	15.6
19	Nigeria	24.1	20.9	18.2	15.7
20	Uganda	18.7	20.3	17.3	16.1
21	Mali	27.8	26.3	23	16.2
22	Guinea	22.4	20	21.6	16.6
23	Malawi	29.9	27.5	22.5	16.7
24	Burkina Faso	23.5	22.4	21.8	17.2
25	Zimbabwe	18.6	22.3	21.3	17.3
26	Cameroon	21.6	22.2	19	17.4
27	Côte d'Ivoire	16.5	17.8	16.6	18.2
28	Guinea-Bissau	20.7	20.8	21.4	18.4
29	Liberia	22.7	25.2	25	18.9
30	Togo	26.4	22	23.3	19
31	Kenya	20.7	20.8	20.4	19.3
32	Tanzania	23.2	28	25.9	19.3
33	Rwanda	28.2	32.7	25.6	19.7
34	Sudan	28.7	24.5	25.9	21.5
35	Djibouti	30.8	25.7	25.3	21.7
36	Niger	36.4	35.9	30.5	22.3
	Country	1990	1996	2001	2012
37	Madagascar	24.1	23.8	24.9	22.5
38	Mozambique	35.5	30.7	28.8	23.3
39	Zambia	24.8	25	27.2	23.3
40	Angola	41.9	39.9	33	24.1
41	Sierra Leone	32.7	30.1	30.1	24.7

42	Comoros	22.2	26.9	29.7	25.8
43	Central African Republic	27.4	28.4	27.4	27.3
44	Chad	39.3	35.6	30.4	28.3
45	Ethiopia	42.2	38.6	34.5	28.7
46	Eritrea	-	37.8	37.8	34.4
47	Burundi	31.6	35.9	38	37.1

Source: IFPRI, Concern Worldwide, and Welthungerhilfe, 2012. 1990 Figures for Eritrea missing due to lack of data. Cape Verde, D.R Congo, Equatorial Guinea, Somalia and Sao Tome and Principe are excluded from the table due to lack of data

Note: Cape Verde, Democratic Republic of the Congo, Equatorial Guinea, Somalia and São Tomé and Príncipe are excluded from the table due to lack of data, as are 1990 figures for Eritrea.

≤ 4.9 is low hunger, 5.0–9.9 is moderate hunger, 10.0–19.9 is serious hunger, 20.0–29.9 is alarming hunger and ≥ 30.0 is extremely alarming hunger.

Africa has received numerous responses to its food security situation—from both in and outside the continent. Governments, regional organizations and international development organizations are doing a lot of work on food security. But the continent has been in and out of food crises, indicating that further commitment is needed. At the regional level, the Comprehensive Africa Agricultural Development Programme aims to eliminate hunger and reduce poverty through sustained agricultural growth. The programme has received a lot of support from African governments, but implementation must be improved at country level. Other regional programmes include the Food and Agriculture Organization’s National and Regional Programmes for Food Security, which support national efforts to eradicate hunger among the local population and to promote regional integration and agricultural economic development among neighboring countries. Regional economic communities are also making efforts to improve food security. Most are now finalizing their regional agricultural strategies, within which investment priorities can be addressed in a more concerted, coherent manner.

At the international level, initiatives like New Alliance for Food Security and Nutrition and the Global Alliance for Improved Nutrition have demonstrated the commitment of world leaders, civil society and the private sector to ending Africa’s food insecurity. At its 2012 summit in the United States, the G8 pledged \$3 billion to alleviating hunger and boosting food security in Africa.

A few African countries have achieved some success in fighting food insecurity. Algeria, for example,

used policy interventions like the National Food Security Strategy and the National Agriculture and Rural Development Strategy to improve the conditions of people living in rural areas, especially farmers, and to promote infrastructure development (irrigation schemes, rural electrification, increasing rural access to potable water and the like). Ethiopia, through a project funded by the Food and Agriculture Association, adopted a holistic approach to food insecurity. The project used interventions in all the broad areas affecting food security—agriculture, health, education and water and sanitation, with a focus on women-headed households, which tend to be more prone to malnutrition. The Malawi government introduced the Agricultural Input Subsidy Programme to improve the productivity of small-scale farmers, increase their self-sufficiency and reduce their vulnerability to hunger. Sierra Leone’s Community-Based Extension and Capacity-Building Programme demonstrated the success of a bottom-up approach and the importance of implementing complementary programmes that build on and reinforce existing food security interventions to ensure coherence and the effective use of resources.

But challenges remain. In fact, those of the past have become more severe and complex. Africa’s agriculture is still underdeveloped, and people have begun abandoning it for better livelihoods. Moreover, some African countries have policies that are hurting agriculture, while others are shifting their focus away from agriculture and towards other sectors as the panacea for development. Similarly, vulnerable groups like women, children and rural dwellers are still affected by the traditional practices of denying women access to land, while others have been victims of the land grabs rampant in Africa today. The effects of climate change are more pronounced today, evident in erratic climate conditions and numerous natural disasters. And the continent’s population is increasing so fast that countries might not be able to produce all the food they need. Moreover, other challenges like widespread political instabilities, an increasing number of refugees, fluctuating food prices, low incomes, persistent poverty and poor health have undermined recovery efforts.

As these challenges remain unsolved and food insecurity worsens, Africa’s achievement of some MDGs hangs in the balance. The dynamic relationship between food insecurity and poor education, bad health and poverty can last generations. For instance, hungry children have weak immune systems and die prematurely from preventable and treatable diseases, including dysentery, malaria and respiratory infections like pneumonia. Even when they survive, they start school late, learn less and drop out early. Malnourished mothers are at a greater risk of dying in childbirth and of delivering low-birthweight babies, who often fail to survive infancy. And undernourished babies who make it through infancy are often stunted, crippling and shortening their lives. As adults, they are likely to give birth to another generation of low-birthweight babies, perpetuating the vicious cycle of low human development and destitution.

Food insecurity has played a large role in slowing progress on the health MDGs, especially for children and mothers. About half of pregnant women in developing countries suffer from anaemia. Malnourished pregnant women are more likely to give birth to underweight babies, who are more likely to die before their fifth birthday. Undernutrition and undernourishment among children younger than 5 years affects their development, resulting in cognitive problems, stunting and weak immune systems. The 2009 MDG report found that progress on the goals was beginning to slow—and in some cases reverse—as a result of food crises and the global economic crisis.

Now, as the world moves towards the 2015 deadline and decides on a post-2015 development agenda, Africa’s food security remains a daunting challenge that could slow its economic transformation, a major aspect of the agenda.

Conclusions and Policy Perspectives

Promoting industrialization and structural transformation

- Embark on a commodity-based industrialization programme.
- Promote intraregional trade and value chains linking raw material producers to end-users
- Design and enforce local content laws that obligate firms to procure inputs locally, train a cadre of local professionals and reserve artisanal mining activities for local entrepreneurs.

Improving the quality of education

- Invest in education infrastructure, including quality teachers and classrooms.
- Design and rigorously enforce quality assurance mechanisms in education.
- Address gender-biased cultural practices, by designing conditional transfers that reward parents for enrolling girls.

Addressing inequality

- Invest in rural infrastructure to promote agricultural transformation, boost rural incomes and address rural–urban income disparities.
- Tackle gender inequality in education, government and work.
- Design (where absent) and enforce equal pay laws and affirmative action programmes to ensure that qualified women are treated fairly in recruitment.
- Develop social protection mechanisms, including health insurance to improve access to high-impact interventions for children. Target the poorest and most marginalized children and families.

Improving health outcomes and the quality of health care

- Target and invest in stemming the incidence of infectious diseases.
- Strengthen weak health systems.
- Create greater awareness of food nutrition and enhance access to food supplements that improve nutrition.
- Develop and expand programmes aimed at increasing the supply of skilled birth attendants, particularly in rural areas.
- Enhance access to contraception and strengthen advocacy to reduce the incidence of adolescent births and address the high unmet need for contraception.
- Increase access to improved water sources and reduce poor sanitation.
- Encourage state-supported water and sanitation projects, including sanitation projects that recycle or transform waste products into fertilizer.
- Improve access to insecticide-treated bed nets to reduce malaria-related infections.
- Encourage public–private partnerships that focus on producing insecticide-treated bed nets and contraceptives locally—to reduce adolescent birth rates and maternal and child deaths while creating jobs for local communities.

Financing MDG-related interventions

- Strengthen strategic partnerships with emerging countries.
- Encourage foreign–domestic business partnerships that promote capital inflows and strengthen Africa’s participation in the global value chain.
- Ensure that external partnerships align with Africa’s transformation priorities.



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