

GOVERNMENT OF THE REPUBLIC OF SIERRA LEONE

MILLENNIUM DEVELOPMENT GOALS REPORT FOR SIERRA LEONE

2005

MILLENIUM DEVELOPMENT GOALS REPORT FOR THE REPUBLIC OF SIERRA LEONE, 2005

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ACRONYMS AND ABBREVIATIONS

ACT	Artemisinin-based Combination Therapy
AGOA	African Growth Opportunity Act
AIDS	Acquired Immunodeficiency Syndrome
CEDAW	Convention on the Elimination of all forms of Discrimination Against
•	Women
DACO	Development Assistance Coordinating Office
DOTS	Directly Observed Treatment Short Course
ECOWAS	Economic Community of West African States
EFA	Education For All
FAO	Food and Agricultural Organization
GER	Gross Enrolment Rates
GoSL	Government of Sierra Leone
HIV	Human Immunodeficiency Virus
IRC	International Red Cross
MDG	Millennium Development Goal
M&E	Monitoring and Evaluation
MICS	Multi-Indicator Cluster Survey
MoSWGCA	Ministry of Social Welfare, Gender and Children's Affairs
MoHS	Ministry of Health and Sanitation
NEPAD	New Partnership for Africa's Development
NER	Net Enrolment Ratio
NERICA	New Rice for Africa
NGO	Non-Governmental Organization
OFTN	Operation Feed The Nation
PASCO	Poverty Alleviation Strategy Coordinating Office
PLWHA	People Living with HIV/AIDS
PRSP	Poverty Reduction Strategy Paper
SALWACO	Sierra Leone Water Company
SLIHS	Sierra Leone Integrated Household Survey
ТВ	Tuberculosis
UNAIDS	Joint United Nations Programm on HIV/AIDS
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNIFEM	United Nations Development Fund for Women
VCCT	Voluntary Confidential Counselling and Testing
WFP	World Food Programme
WHO	World Health Organization
WTO	World Trade Organization

Foreword

It was an honour and a matter of pride to be one of the Heads of State who signed the Millennium Declaration at the United Nations Millennium Summit in September 2000 in New York. Of particular significance is the fact that the realisation of the Millennium Development Goals would forever represent a historic event that would signal opportunities for the improvement of untold socio-economic livelihoods of all Sierra Leoneans.

The turbulent years of the rebel war in Sierra Leone brought about unimaginable sufferings, socio-economic decline and retarded national development. It would take not only time to overcome the resulting adverse impact on our nation's growth but also highly dedicated national and regional planning effort in every sector of Sierra Leone's development programme. This is the challenge we must now face as a nation.

As we work towards overcoming these challenges, we are gratified by the development strides that Sierra Leone is making. We are particularly gratified by our efforts in developing strategies as outlined in the Poverty Reduction Strategy Paper (PRSP) and the Vision 2025 document. All of these are consistent with the MDGs and NEPAD.

It is our fervent hope that the solutions of problematic issues that will be brought to realisation as we pursue the achievement of the MDGs will further help to concretise the restructuring of our social and economic systems in such a manner as to accelerate our economic growth and development. We fully appreciate the fact that these efforts to improve and strengthen our social and economic systems would require significant amounts of domestically generated revenue as well as matching foreign assistance funding.

We reiterate that the human resources and financial support that the UN family in Sierra Leone has given towards the preparation of this first **Millennium Development Goals Report** have truly given concrete meaning to the cordial partnership with the Government. We look forward to this continuing partnership.

His Excellency Alhaji Dr. Ahmad Tejan Kabbah President of the Republic of Sierra Leone

Acknowledgements

We wish to thank Mr. Ibrahim M. Sesay, Deputy Minister of Development and Economic Planning who is the designated government focal point for the MDGs and Co Chair of the Steering Committee that was tasked with the responsibility of coordinating and supervising the preparation of the MDG Report for Sierra Leone. Special recognition also goes to Mrs. Nancy Asanga, UNDP Country Director, Co-Chair of the Steering Committee. We also acknowledge the contributions from Mrs. Konah Koroma, Development Secretary of the Ministry of Development and Economic Planning, Dr. Graham Chipande, Senior Economic Advisor (UNDP), Mr. Ibrahim S. Kamara, Programme Specialist (UNDP), and Ms. Harriet Matthews, Assistant to the United Nations Resident Coordinator, for their unflinching commitment to the process. Commendation also goes to all Steering Committee and Task Forces members as well as all those who participated in the sensitisation meetings. We thank Messrs. Edward Davies and Associates for facilitating the preparation of this Report, and appreciate the contributions of Mr. N. Sankaranarayanan, Development Advisor (UNDP) for coordinating the completion of the report.

Having completed the Report, our fervent hope is that the capacity of the Government will be strengthened with a steadfast determination to tackle the concerns of the MDGs.

Mr. Mohammed B. Daramy Minister of Development and Economic Planning

Mr. J. Victor Angelo UN Resident Coordinator and Deputy Special Representative of the Secretary General

Box 1: The Millennium Development Goals and Associated Targets

Goal	Target
Goal 1: Eradicate extreme poverty and hunger	Target 1: Halve, between 1990 and 2015, the proportion of people whose income is less than \$1 a day
	Target 2: Halve, between 1990 and 2015, the proportion of people who suffer from hunger
Goal 2: Achieve universal primary education	Target 3: Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling
Goal 3: Promote gender equality and empower women	Target 4: Eliminate gender disparity in primary and secondary education, preferably by 2005 and in all levels of education no later than 2015
Goal 4: Reduce child mortality	Target 5: Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate
Goal 5: Improve maternal health	Target 6: Reduce by three-quarters, between 1990 and 2015, the maternal mortality ratio
Goal 6: Combat HIV/AIDS, malaria and other diseases	Target 7: Have halted by 2015 and begun to reverse the spread of HIV/AIDS
	Target 8: Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases
Goal 7: Ensure environmental sustainability	Target 9: Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources
	Target 10: Halve by 2015 the proportion of people without sustainable access to safe drinking water
	Target 11: Have achieved by 2020 a significant improvement in the lives of at least 100 million slum dwellers
Goal 8: Develop a global partnership for development	Target 12: Develop further an open, rule-based, predictable, non-discriminatory trading and financial system (includes a commitment to good governance, development, and poverty reduction—both nationally and internationally)
	Target 13: Address the special needs of the least developed countries (includes tariff- and quota-free access for exports, enhanced program of debt relief for and cancellation of official bilateral debt, and more generous official development assistance for countries committed to poverty reduction)
	Target 14: Address the special needs of landlocked countries and small island developing states
	Target 15: Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term
	Target 16: In cooperation with developing countries, develop and implement strategies for decent and productive work for youth
	Target 17: In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries
	Target 18: In cooperation with the private sector, make available the benefits of new technologies, especially information and communications technologies

Source: UNDP

MILLENIUM DEVELOPMENT GOALS

REPORT FOR THE REPUBLIC OF SIERRA LEONE, 2005

EXECUTIVE SUMMARY

The Millennium Development Goals (MDGs) were established in September 2000 by world leaders, including His Excellency Alhaji Dr. Ahmad Tejan Kabbah, at the United Nations Millennium Summit. The Goals (Box 1) are a set of time-bound, measurable goals and targets for human development and reduction of global inequalities. In summary Sierra Leone's national Millennium Goals are:

- To halve the proportion of people suffering from extreme poverty and hunger;
- All 'primary school-going age' children must be in school;
- Girls must have the same education opportunities as boys;
- To halve the proportion of people without access to safe drinking water;
- Stop the spread of HIV/AIDS and malaria;
- A child's risk of dying before the age of five must be reduced by two-thirds;
- A mother's risk of dying while pregnant must be reduced by three-quarters;
- Protect ecosystems and biodiversity;
- Better housing, healthcare and education opportunities for slum dwellers;
- Access to essential drugs;
- Spread the benefits of new technologies; and
- Partnership with wealthy countries through debt relief, aid, and market access.

In working towards the national MDG targets, Sierra Leone needs constantly to monitor progress. This is the first MDG report for Sierra Leone. It briefly describes the MDG status: the actions that Sierra Leone is taking, the present situation and challenges in each policy area, and further action needed. It builds on the national Poverty Reduction Strategy Paper of March 2005, and other national policy documents. The Report was a collaborative undertaking by the Government of Sierra Leone, the United Nations Country Team, and Civil Society Organisations

The Report concludes that while there is demonstrated political will and favourable support from development partners, achievement of the MDGs poses enormous challenges. Nonetheless, considerable progress is evident, in particular in access to education, despite the late start in implementing the MDGs due to the civil war.

Development Context

Of Sierra Leone's 4.9 million people, 70% live below the poverty line. There is high unemployment and underdevelopment, particularly as a result of the ten-year civil war. The destruction of infrastructure and the exodus of skilled people had a devastating economic impact. Mining and agriculture stopped almost completely; farms were destroyed, the livestock population was reduced. Over 2 million people were displaced. In the 1990s, the economy experienced a fall of over 50% in GDP. Sierra Leone has been perpetually ranked at the bottom of the United Nations Development Programme (UNDP) Human Development Index.

The cessation of hostilities and restoration of security facilitated economic recovery and countryside reconstruction. Since 2000, the economy has been growing at about 6 % per

annum, with impetus from resources freed-up through HIPC debt relief. The nation is aware of the need for internal resource mobilization to achieve the MDGs. The reform programmes of recent years have brought significant progress in stabilising the economy, but without adequate attention to human conditions and the poor have not delivered the expected human development benefits.

Status and Trends Towards Goals, and Supportive Environment

The war caused increasing **poverty**, a trend that only changed recently. Some 70% of Sierra Leoneans are below the basic needs poverty line, and 26% cannot meet basic food needs. The challenge of overcoming poverty is intensified by rapid population growth, and by the youth of the population. Consistently high economic growth is needed to generate employment and meet social needs. Basic infrastructure needs to be rebuilt, good governance developed, and private sector activities encouraged.

Addressing poverty is the central focus of all Government and donor activities, encompassing hunger, education and health factors. The principle policy instrument is the Poverty Reduction Strategy Paper. Much reform has taken place, including the Local Government Act, placing resource allocation at the local level; new legislation designed to improve accountability; and the Investment Act to enable the private sector to develop. ECOWAS and NEPAD initiatives will improve the economic environment. Unfortunately, due to the weak economic structures, Government's capacity to deliver is extremely limited.

Food insecurity remains worrying, with limited access to food, poor quality food intake, and low production. Although food production has been increasing, major constraints remain. Production technology is subsistence-level; poor rural infrastructure hinders access to markets. With regard to **nutrition**, energy intake is growing slowly, but many do not get the minimum requirement. Malnutrition in young children is high: more than 40% of children under age five are too short for their age.

The President's pledge (Box 5 below) shows that achievement of food security is an overriding national priority. A food security programme (Operation Feed the Nation) and rural infrastructure programmes are under way with donor support; and the World Food Programme supports feeding activities.

Education. Literacy rates are among the lowest in the world, with adult literacy of 30%. Poor quality of education is widespread, with poorly qualified teachers and shortage of infrastructure and materials. During the civil strife, many children did not go to school. However, peace brought a dramatic increase in primary enrolment. Gross Enrolment Rates rose sharply from 65% in 2000 to 90% (63% for girls) in 2001, and reached 143% (166% for boys and 120% for girls) in 2003. Many, however, drop out of school after Grade 1.

Government is committed to achieve the Education For All 2015 targets, seeing basic education as critical for economic growth and reducing poverty. The education budget increased by 500% between 1999 and 2004. In 2003, girls in Junior Secondary Schools in the Eastern and Northern Regions were given financial support.

Gender equity in education remains a serious problem: fewer girls enrol, girls drop out earlier, and literacy is worse for women. The gender gap has improved for primary education, but is still high: girls are only 42% of primary pupils. But the gap is progressively higher in later

stages: only 19% of university students are female. Generally, women have little access to non-traditional **employment**: women are only 7.5% of those employed in the non-agricultural sector. They are under-represented in public life, although progress is being made. Women hold 15% of seats in the national parliament, and similar proportions in local assemblies. Three of the 21 cabinet ministers are women.

Government is trying to create a supportive environment for gender equity. There is a Ministry for Gender Affairs; a 2004 act requires 50% female representation in local development committees; a committee is integrating provisions of the Convention on Elimination of Discrimination Against Women into national law; and a network is addressing violence against women.

Health Issues. The end of the war has seen gradual improvement in Under-Five Mortality, to 265 per 1000 live births in 2004. Immunisation has also increased. Maternal mortality however has been persistently high since 1990, at 1,800 for 100,000 live births. Few births are attended by skilled personnel, while cultural beliefs inhibit maternal health efforts. **HIV/AIDS** infection is on the increase and may have passed 5%. **Malaria** is the leading cause of illness – about 47% prevalence in under-fives and a high mortality rate, with low use of insecticide-treated bed nets. Amongst other diseases, **tuberculosis** is serious; **river blindness** and **Lassa fever** pose a threat in some areas.

Major health challenges include the lack of medical professionals and a proliferation of untrained practitioners, lack of health care facilities, and of recurrent funding. There is weak managerial and institutional capacity. A National Reproductive Health Policy is needed, with a coordinated effort to improve maternal and child health. HIV/AIDS priorities include awareness-raising, promotion of condom use, and affordable treatment with antiretroviral drugs. Other health priorities include expanded and updated malaria prevention and treatment, and improved environmental sanitation.

Sierra Leone is supportive of child and maternal health and welfare issues, with commitment to ongoing improvement in health care delivery, and increased, sustainable donor support. Programmes to control malaria, diarrhoea, and respiratory tract infections have been strengthened. Government plans preventive measures in health education to hold back the spread of HIV/AIDS.

Environmental Issues. Traditional farming practices, together with the demand for fuel wood, create an urgent need to protect **forest and bio-diversity resources**. 80% of the energy used is derived from firewood and charcoal, which also causes respiratory infections due to smoke inhalation. Deforestation affects climate and water supply. Access to **safe water** is improving, although it worsened during the civil war and with population growth. **Slums** expanded in Freetown and the main provincial towns following the civil war; **slum dwellers** are mostly unemployed and poor. Environmental challenges include community capacity building for environmental protection; increased community participation in water and sanitation projects; providing alternatives to firewood consumption; increased regional cooperation in conservation; economic empowerment for slum dwellers; and reform of land tenure. Sierra Leone already has a relatively good institutional framework to support environmental sustainability.

Partnerships for Development

Sierra Leone, one of the highly indebted poor countries, and highly donor-dependent, qualified for interim debt relief in 2002. A recent IMF review indicates that by mid-2006 it is expected to sustainably manage its debt situation and reach the HIPC 'completion point'. However, debt service continues to crowd out private investment and poverty reduction public expenditure.

Sierra Leone has consistently suffered from balance of trade and payments deficits. The small, open economy, with a weak production base but liberal trade and financial regimes, is vulnerable to external shocks and international trade inequalities. Major challenges include to create good governance and security to attract the needed foreign direct investment, and to build a viable private sector for sustainable growth, employment and wealth creation.

The economic imbalances limit employment opportunities, particularly for the 55 per cent of the population in the 15-35 age group. The majority of young people are either unemployed or underemployed; many are illiterate, surviving on petty trading, menial jobs, drug peddling, and crime.

The institutional environment is favourable for development. Sierra Leone benefits from unprecedented international interest and goodwill. Government has launched national initiatives in support of trade promotion, aid coordination and youth empowerment. To improve **governance**, Government has taken a series of legislative measures, including setting up an Anti-Corruption Commission to minimize corruption and ensure effective management and utilization of resources.

A Development Assistance Coordination Office (DACO) situated in the Office of the Vice President is responsible for **aid coordination**; a Development Partnership Committee comprising Government, Donors and NGOs meets regularly.

Priorities for Development Assistance

Overall development and poverty reduction. To meet the MDGs, Sierra Leone urgently needs continued and augmented external assistance. The level and flow of aid must be Predictable consistent and sufficient to bridge the gap between domestic funding and development needs. Help is needed both at macroeconomic and sector levels.

At the **central level priorities** are for debt relief or cancellation, support for Government's trade reforms and macroeconomic stabilisation efforts and for sustained private sector development. Government agencies need capacity building, including to coordinate donor activities and integrate donor and Government systems.

Sector Priorities for Development Partner Support. Basic economic infrastructure needs further investment, to facilitate private sector growth and to enhance public service delivery.

Food Security priority programmes:

- To create a supporting environment for agriculture production and marketing: developing rural infrastructure, augmenting distribution channels, and strengthening agricultural extension delivery; also mechanising and commercialising agriculture;
- To create household awareness about action to reduce malnutrition;
- Targeted support to farmers and vulnerable groups.

Meeting **education needs** will be expensive, to improve quality and to improve access. Priorities for basic education include:

- Special efforts to ensure that girls enrol and stay in school;
- Building and equipping schools and encouraging community schools;
- Early childhood education and adult literacy;
- Subsidised girls education in Junior Secondary School;
- Training and recruiting teachers;
- Providing educational materials.

Promoting gender equality includes updating the legal framework, developing policies on sex exploitation and abuse of women, taking affirmative action to increase women's participation in decision making, and promoting female education at all levels.

To reduce **child and maternal mortality**, and to improve **disease control and treatment**, priorities include:

- Policy guidelines in reproductive health, family planning, malaria, water and environmental sanitation;
- Additional assistance for disease control;
- Developing human resources for health services;
- Improving coverage of health facilities including maternity units, HIV/AIDS testing and care facilities, and blood banks;
- Affordable insecticide-treated bed nets.

Environmental priorities include work with communities to stop deforestation; building environmental awareness and capacities, programmes in water, sanitation and community housing; use of energy-efficient technologies.

Programmes to provide skills training for **youth** and to create employment opportunities are a high priority for donor support.

Monitoring and Evaluation (M&E)

The PRSP Technical Committee Secretariat monitors the Poverty Reduction Strategy implementation process, with representatives from Government and the donor community. The M&E and statistical capacities of line ministries, departments and agencies need to be strengthened, and they need additional resources. Co-ordination between M&E units needs to be stronger.

Databases are weak or non-existent; both the scope and quality of data need improvement. In the health sector, regional and district monitoring is made difficult by the lack of disaggregated statistics.

	Progres	Progress towards the MDGs in Sierra Leone	he MDGs	in Sierra	Leone			
	WILL GOAL	WILL GOALS BE REACHED?	:D?		STATE O	F SUPPOR	STATE OF SUPPORTIVE ENVIRONMENT	NT
GOALS	Probably	Potentially Unlikely	Unlikely	Lack of Data	Strong	Fair	Weak But Improving	Weak
Eradicate Extreme Poverty Halve the proportion of people below the national poverty line by 2015		7			7			
Eradicate Extreme Hunger Halve between 1990 and 2015 the proportion of people who suffer from hunger	7				7			
Achieve Universal Primary Education Achieve universal access to primary education by 2015	7				7			
Promote Gender Equality and Women Empowerment Eliminate gender disparity in primary and secondary education by 2015	7						7	
Reduce Child Mortality Reduce under-five child mortality by two-thirds by 2015		7			7			
Improve Maternal Health Reduce maternal mortality ratio by three-quarters by 2015		٢			٨			
Combat HIV/AIDS, Malaria and Other Diseases Halt and reverse the spread of HIV/AIDS by 2015		7			7			
Can targets on Malaria and other diseases be achieved?		٨			۲			

Box 2: Status at a Glance gress towards the MDGs in Sierra Leo

	WILL GOAL	OALS BE REACHED?	HED?		STATE O	F SUPPOF	STATE OF SUPPORTIVE ENVIRONMENT	ENT
GOALS	Probably	Potentia	Potentially Unlikely	Lack of Data	Strong	Fair	Weak But Improving	Weak
Ensure Environmental Sustainability								
Integrate the principles of sustainable								
development into country policies and programmes and reverse loss of		7				>		
environmental resources								
Halve the proportion of people without								
access to safe-drinking water by 2015		~				~		
Develop Global Partnership For								
Development								
Deal comprehensively with debt and	7					~		
make debt sustainable in the								
long-term								
Develop further an open, rule-based,								
predictable, non-discriminatory trading	~					~		
and financial system in cooperation								
with developed countries.								
Implement strategies for decent and								
productive work for the youths	7					~		

MILLENIUM DEVELOPMENT GOALS

REPORT FOR THE REPUBLIC OF SIERRA LEONE, 2005

SECTION I: INTRODUCTION

The Millennium Development Goals were established in September 2000 when world leaders, including His Excellency Alhaji Dr. Ahmad Tejan Kabbah, met at the United Nations Millennium Summit in New York. The result was a set of time-bound, measurable goals and targets for the promotion of human development and the reduction of global inequalities. The Goals and their associated targets are set out in detail in Box 3.

In its approach to meeting the MDG targets, Sierra Leone is focussing on the following national priorities, within the MDGs:

- The proportion of people suffering from extreme poverty and hunger must be halved;
- All 'primary school-going age' children must be in school, and girls must have the same education opportunities as boys;
- The proportion of people without access to safe drinking water must be halved;
- The spread of HIV/AIDS and malaria must be stopped;
- A child's risk of dying before the age of five must be reduced by two-thirds;
- A mother's risk of dying while pregnant must be reduced by three-quarters;
- The world's ecosystems and biodiversity should be better protected from destruction;
- At least 100 million slum dwellers should get better housing, healthcare and new opportunities for education;
- People in developing countries must have greater access to essential drugs;
- The benefits of new technologies, especially information and communication technologies, must flow to more countries and reach more people; and

 Wealthy countries must support the developing countries through debt relief, more untied financial aid and greater accessibility to the international market.

Monitoring Progress Towards the MDGs

In working towards the national targets of achieving the MDGs, Sierra Leone needs constantly to monitor how well it is doing. This MDG status report – the first MDG report for Sierra Leone – describes progress to date towards each of the goals. It shows the actions that Sierra Leone is taking, briefly describes the present situation and challenges in each policy area, and discusses the further action needed to achieve the Goals. It builds on the national Poverty Reduction Strategy Paper (PRSP) of March 2005, and other national policy documents. We hope that it will contribute to continuing discussions among all stakeholders about how to overcome poverty.

This first MDG status report was a collaborative undertaking by the Government of Sierra Leone, the United Nations Country Team, and Civil Society Organisations. The Report is an outcome of useful insights and fervour of the high-ranking officials of government ministries and institutions and other stakeholders who took part. The institutional structures established to review progress towards the MDGs and to prepare the report are shown in Annex 1, together with their terms of reference and the list of participants. Preparation followed a sensitisation workshop for senior ministry staff, agencies, institutions and civil society organisations, held in Freetown on 29 September 2004, whose objectives were to ensure a common understanding of the MDGs, of the MDG report preparation

SECTION II: DEVELOPMENT CONTEXT

process, and to begin its conceptualisation. An inclusive and consultative mechanism was established to guide its preparation and production.

The Report consists of three sections: (I) this Introduction, (II) a brief note on the Development and Macroeconomic Context of the analysis, and (III) the Status report, presented with a sub-section for each Goal.

Sierra Leone has an estimated population of 4.9 million, of whom 70% live below the poverty line; with a highly skewed income distribution. There is high unemployment and underdevelopment, particularly as a result of the impact of the ten-year civil war. The destruction of social, economic and physical infrastructure and the exodus of skilled professionals had a devastating economic impact. Mining and agricultural activities had almost completely stopped; farms were destroyed and abandoned, while the livestock population was dramatically reduced. Between 1990 and 2000, over 2 million people were displaced; there was an exodus of people both to the capital Freetown and out of the country.

As Figure 1 reveals, the aggregate economic impact of the war was declining GDP across the period. In the 1990s, the economy experienced an average annual fall in GDP of 4.5 percent. Sierra Leone has been perpetually ranked at the bottom of the United Nations Development Programme (UNDP) Human Development Index.

The cessation of hostilities and eventual restoration of countrywide security strengthened confidence, which facilitated economic recovery, and countryside reconstruction and rehabilitation during 2002–2004. Since 2000, the economy has been growing between 5.8 and 6.8 percent per annum, spurred by reconstruction work, with added impetus from the use of freed-up resources coming through HIPC debt relief.¹

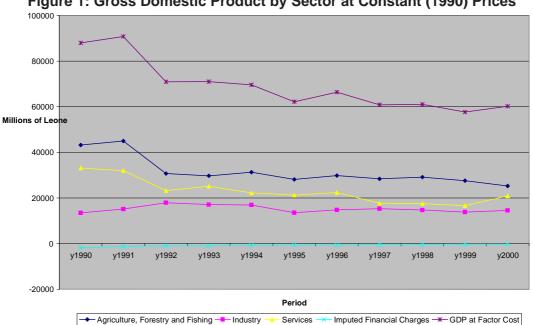


Figure 1: Gross Domestic Product by Sector at Constant (1990) Prices

¹ Macro-economic issues are discussed further below, in Section III, Sub-Section 8, Global Partnership for Development. The nation is aware of the need for internal mobilization of resources to achieve the MDGs. In spite of significant progress in efforts at stabilising the economy, the implementation of macro-economic and structural reform programmes has not fully delivered the expected benefits in terms of human development. During the past few years, emphasis has been put on stabilisation and macro economic balance without adequate attention to the human conditions, especially of the poor, as well as the social and economic dimensions of the causes and conduct of the war.

As part of Government's strategy in seeking a fresh approach to the problems of development, a policy of devolution of powers through decentralisation by the reestablishment and empowerment of local governments has been instituted. These are expected to catalyse social and economic development in a post civil war era, when Sierra Leone is faced with the daunting task of eradicating disease, poverty and hunger as targeted by the MDGs. For social sector services, especially education and health, enormous human, material, financial and other resources will be required. Unfortunately due to the weak economic structures, Government's capacity to deliver is extremely limited.

Accordingly, public policy is geared towards maintaining partnerships with civil society and the international community. The economic reforms favour private sector-led development with effective indigenous participation to create a high quality of life for all Sierra Leoneans within a democratic framework.

It is hoped that the successful implementation of the poverty reduction programme will result in the achievement of the MDGs in Sierra Leone. Hence, the final PRSP for Sierra Leone was linked to the MDGS, having the following main pillars:

Pillar One: Promoting good governance, peace and security;

Pillar Two: Promoting pro-poor sustainable growth for food security and job creation, and Pillar Three: Promoting Human Development.

The strategic location in the continent, the potential scope for trade and commerce, and the availability of sufficient natural and agricultural resources, are all positive aspects for Sierra Leone. The post civil war years have illustrated the scope for speedy development. With intensive and sincere external support, the country can achieve by 2015 the United Nations' Millennium Development Goals and targets.

SECTION III: STATUS OF PROGRESS TOWARDS MDGs

Section III consists of an analysis of each of the Goals, and a review of progress towards attaining that goal. Sierra Leone decided to divide Goal 1, "Eradicate extreme poverty", into two separate but related sub-goals: Goal 1a, to eradicate extreme poverty, and Goal 1b, to eradicate extreme hunger. In summary, while there is demonstrated political will, favourable support from development partners, and a positive environment to achieve most of the MDGs, the achievement of some does pose enormous challenges. The challenges are intensified by the late start in implementing the MDGs, due to the civil war. Despite the challenges and the late start, considerable progress is evident in one or two areas, in particular access to education.



The UN Resident Co-ordinator Mr. J. Victor Angelo making a point during the launch of the Millennium Project Report in Sierra Leone. Looking on with keen interest are His Excellency The President Alhaji Dr. Ahmad Tejan Kabbah and Vice-President Hon. Solomon E. Berewah.

GOAL 1 (a)

ERADICATE EXTREME POVERTY

The voices of the Poor: PRSP/MDGs Consultations





Poverty in Sierra Leone is widespread, deep and severe with over half of the popu daily nutritional needs, and living on less than US\$ 1 a day. Poverty is worse in ruthe four provinces, whilst the poorest districts are Kailahun, Bonthe and Tonkolili.	Poverty in Sierra Leone is widespread, deep and severe with over half of the population deemed to be poor, unable to meet their basic daily nutritional needs, and living on less than US\$ 1 a day. Poverty is worse in rural areas and the Eastern Province is the poorest of the four provinces, whilst the poorest districts are Kailahun, Bonthe and Tonkolili.
Income consumption inequality is great, with the poorest 20% consuming 46%. Consumption is also more unequally distribu 19% of the per-capita consumption by district is attributable to 10%.	Income consumption inequality is great, with the poorest 20% consuming only 7% of total goods and services, and the richest 20% consuming 46%. Consumption is also more unequally distributed between the more urbanised Western Area and the rural districts. 19% of the per-capita consumption by district is attributable to the Western Area while all other districts' consumption range from 5-10%.
The characteristics of the poor in Sierra are categorised into three by the PRSP:	ee by the PRSP:
 (a) The Poorest (Popolipo): Those who cannot meet immed (b) The Poorer (Po-Pas-Po): Those who can meet some of the Poor (Po): Those who can meet some of the nutritious; (d) The Better off: Those who see well-being in tenter off: Those who see well-being in tenter families. 	Those who cannot meet immediate needs (food, shelter and clothing); Those who have some ability to meet some basic needs but not always; Those who can meet some of their daily needs including a meal per day though the meal may not be nutritious; Those who see well-being in terms of their ability to provide the essentials of life for themselves and their families.
There are more women living in poverty than men. For every 100 wom households are considerably larger, and have more women and dependant: are headed by women, the majority of whom are disproportionately poor.	There are more women living in poverty than men. For every 100 women living in lowest poverty quintile, there are 93 men. Poor households are considerably larger, and have more women and dependants than non-poor households. A growing number of households are headed by women, the majority of whom are disproportionately poor.
The following summarizes the poverty situation in Sierra Leone:	
5% living below the poverty line: 50% living below the poverty line: 50-70% living below the poverty line: >70% living below the poverty line,: >75% severe food poverty: Highest Gini coefficient of inequality (0.36):	Western Area Moyamba, Pujehun Bo, Kambia Koinadugu, Port Loko, Tonkolili Bombali, Kenema, Kailahun Kono
Source: Sierra Leone PRSP Health Sector Review.	

Characteristics of the Poor and the National Poverty Profile.

GOAL 1a: Eradicate extreme poverty	y
Target 1: Halve, between 1990 and 2015, the	Indicator 1: Proportion of population below \$1 (PPP) per day. Indicator 2:
proportion of people whose income is less than one dollar a day.	Poverty gap ratio (incidence x depth of poverty). Indicator 3:
	Share of poorest quintile in national consumption. Status at a Glance
Can target be achieved? Potentially.	State of supportive environment: Strong.

Status and Trends

Owing to the destruction of economic and social infrastructure as well as the absence of food security, the civil war had the impact of increasing poverty from 1990 until recently. However, the inability of Government to function efficiently throughout the country during this time means that consistent and reliable data preceding the 2003/2004 Integrated Household Survey (SLIHS) are unavailable. Therefore the year 2003/2004 has been adopted as the base year for quantitative analysis of poverty reduction, rather than 1990, which is the international base year for assessing progress towards the MDGs.

The SLIHS of 2003/2004 defined those in poverty (food and basic needs) as individuals living on less than Le2,111 per day. Basic needs were defined as food, safe water and sanitation, shelter, good health, basic education, and the ease of access for a household (both in terms of affordability and distance), to social infrastructure: schools, health facilities, markets and public transportation. Approximately 70% of Sierra Leone's population was found to be poor according to this definition, with 26% of the total population being further unable to meet basic dietary needs, that is they were found to be "food poor". Figure 2 below reflects the national poverty count.

The poorest districts – those with the highest incidence of poverty – were Kailahun, Bombali, Kenema, Bonthe and Tonkolili. More than 8 out of 10 residents of these districts live in poverty, with poverty being worst in Bombali and Kailahun. Rural areas generally fare worse than urban areas, while Freetown was better off than the rest of the urban areas. Poverty in the capital, however, was more severe than expected. At the national level, the share of the poorest quintile in consumption was just 6.6%.

Major Challenges

Given both the scope and depth of poverty in Sierra Leone, many challenges must be met in overcoming it. This is particularly so because the population is rising fast, and is youth-based, requiring a disproportionately and consistently high rate of economic growth in order to generate sufficient employment and meet the needs of social development. The main challenges can be summarized as follows:

- To generate a rate of economic growth that is sufficient to absorb the existing high unemployment and also providing jobs for the high number of young entrants to the labour market.
- To rebuild and construct the basic infrastructure and utilities which form the foundations of growth and sustainable private sector activity.

Figure 2: Poverty Distribution of Population of Sierra Leone

Source: SLIHS, 2003/2004

- To develop and maintain a level of good governance that generates both business confidence and effective resource allocation.
- To reduce income inequality by enabling poor households to have access to a much higher percentage of resources than the current level of 6.6%.

Supportive Environment for Poverty Reduction

The PRSP is the principal policy instrument for poverty reduction over the medium-term.

Other Poloject to periodic reviews. Box 4 de44% best the main pillars of the PRSP around which its implementation is anchored, each with objectives closely tied with the MDGs.

Addressing poverty as a broad concept Three key priority areas have been identified encompassing hunger, education and health for action to reduce poverty: factors, is the central focus of all Government and donor activities in Sierra Leone. Much reform has already taken place, including the following:

The Local Government Act, enacted in 2004 is enabling resource allocation decisions to be taken at the local level, thereby improving the allocation of resources to those in need.

- The Government Budgeting and Accountability Act, the Anti-Money Laundering Act and the Public Procurement Act are designed to improve accountability in the management and allocation of public resources.
- The Investment Act of 2005 is designed to better enable the private sector to establish and develop commercial enterprises.
- Food: Boromped that development of ECOWAS **26%** NEPAD initiatives will put in place an environment that will aid and induce poverty reduction.

Poverty Reduction Priorities for Development Assistance

30% December 2010 Have

- Resource mobilization: the level and flow of aid must be both sufficient and consistent, to urgently bridge the gap between domestic funding availability and development needs, as outlined in the PRSP.
- The institutional environment for donor support: to coordinate donor activities and integrate donor systems with those of the Government.

Institutional capacity needs further strengthening.

 Basic economic infrastructure: to facilitate growth of the private sector and to enhance public service delivery, further investment in basic economic infrastructure is needed. The absence of reliable and cost-effective energy supplies, for example, and the absence of a functional road network, both impede private sector activities.

Monitoring and Evaluation of Goal 1a

The PRSP Technical Committee Secretariat monitors the Poverty Reduction Strategy

implementation process. The Secretariat has representatives from the Ministry of Development and Economic Planning, Ministry of Finance, Development Assistance Coordination Office and the donor community. It is expected that this Committee will ensure that resources are effectively channelled towards poverty reduction objectives.

The statistical capacity of line ministries, departments and agencies needs to be strengthened, so as to improve the clarity with which poverty reduction can be monitored. Ministry of Finance is developing a system for tracking poverty-related expenditures.

Box 3: The Three Pillars of the PRSP

Pillar 1: Promoting Good Governance, Security and Peace.Measures to ensure an enabling environment of good governance and secure, stable living conditions to attain poverty reduction objectives.

Pillar 2: Pro-Poor Sustainable Growth for Food Security and Job Creation.Measures relating to income and production: strategies and programmes for food security and job creation, through pro-poor sustainable growth.

Pillar 3: Human Development. After food security, measures addressing the priorities of the poor in education, heath and water, as the route out of extreme poverty.

Source: Poverty Reduction Strategy Paper, March 2005



On the journey towards food security

GOAL 1(b)

ERADICATE EXTREME HUNGER



Women: The backbone of Food Security



NERICA and other improved local seed rice varieties

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all times, have physical, social and economic access to sufficient safe and nutritious food to meet their dietary needs and food According to the definition of food security by the World Food Summit 1996, a state of food security will be achieved when: "All the people, at reliability and stability of access and availability; and effective utilisation of food consumed. An assessment of the food security in Sierra Leone preferences for an active and healthy life." Four basic conditions need to be fulfilled: accessibility to food; availability to sufficient food; eveals deficiencies with regard to all of these four aspects. Hence, the strategic areas of intervention include:

- Improving Access to Food: Targeted assistance/safety nets to small farmers/rural poor and other specific vulnerable groups; ΞĒ
- Employment and Income Generation: Special attention is given to the high number of underemployed and unemployed youths in order to mobilise their potential in a productive way;
- Increasing Food Supplies: Increasing domestic food production through the following- timely supply of appropriate inputs; rural credit supply to farmers; research and extension development and selection of improved technologies; rehabilitation of the mined-out areas; crop diversification; land tenure legislation; livestock development; fisheries development; and ensuring the necessary food imports.
- Increasing Stability and Reliability of Food Supplies: Addressing the seasonality of food supplies, particularly the shortage of food during the rainy season; Addressing marketing issues to ensure stability of food supplies in deficit areas. <u>S</u>

To address the food security challenge, the following policies are being pursued in line with the strategic areas outlined above:

(i) The PRSP:

It identifies food security as one of its fundamental pillars. It states that poverty is the main cause for food insecurity, and particularly affects people's ability to access food and has adverse implications for all other aspects of food security. Therefore, there are very close linkages between the poverty alleviation objectives pursued by the on-going PRSP process and food security objectives.

In pursuance of the overall food security objectives, both the ADS and MTASP concentrate on steps to be taken to boost food production and promote sustainable agricultural development. The strategies comprise development programmes for rice, other food crops, export The Agricultural Development Strategy (ADS) and the Medium-Term Agricultural Strategic Plan (MTASP) 2003-2007: Ξ

(iii) The National Food and Nutrition Policy (2004-2008):

crops, forestry, livestock and fisheries; and research and extension.

A multi-sectoral task force anchored in the Ministry of Health and Sanitation has been set up to define food and nutrition policy for the country. Specific recommendations are being made regarding measures to improve child nutrition and the nutritional status of the population. The proposed measures comprise activities in the following areas- nutrition education, infant feeding, nutrition rehabilitation, food and nutrition surveillance, control of specific nutritional deficiencies, and food safety.

Source: Draft Food Security Strategy for Sierra Leone 2004.

Goal 1b: Eradicate	Extreme Hunger
Target 2: Halve, between 1990 and 2015, the proportion of people who suffer from hunger	Indicator 4: Prevalence of underweight children (under-five years of age). Indicator 5: Proportion of population below minimum level of dietary energy consumption.
Status at	a Glance
Can target be achieved? Probably	State of supportive environment: Strong

Sub-Section 1b: Eradicate Extreme Hunger

Table 1: Food Production Trends from 1999 to 2003(Thousand metric tons)

Сгор	1999	2000	2001	2002	2003
Rice	248	298	311	422	445
Sweet Potato	20	28	21	25	28
Groundnut	29	15	49	98	34
Cassava	240	241	314	400	479

Source: FAO Statistics

Food insecurity is one of the major problems in Sierra Leone, as indicated by limited access to food, and the poor quality of food intake. In 2002, FAO estimate shows that out of 580,000 metric tons required, only 46% of the cereal consumption (especially of rice, the staple food) was met by local production, the rest coming from commercial imports and aid.

After 1999, there has been a visible increasing trend in food production as shown in Table 1. Major constraints to agricultural production and productivity remain, including shortage of quality seeds, pesticides, fertilizers and modern implements; post-harvest losses; and a poor marketing system.

With regard to the nutrition value of food, there is a slow growth in the energy intake. Yet, the majority of the population do not get the minimum requirement. Only 26% can afford to acquire the required 27Kcal/adult/ day. Table 2 shows a typical Sierra Leonean consumption basket. Malnutrition in young children is the highest in the region with more than 40% of children (less than five years old) being too short for their age. The prevalence of underweight children was 24% in 1990 and 27% in 2000.

Table 2: Key Components of FoodConsumption Basket in Sierra Leone

Commodity	Per Capital Consumption (Kg)	National Consumption Requirement (Mt)
Rice	104	498,472
Cassava	50	248,164
Groundnut	12	53,603
Palm oil	20	89,339
Smoked Fish	15	67,000

Source: Ministry of Agriculture, Forestry and Food Security 2004

Major Challenges to Improve Food Security

There are major challenges to overcome, if Sierra Leone has to eradicate extreme hunger. These include:

- Food insecurity remains a threat especially in rural areas of Sierra Leone, because of the low production, low income, poor rural infrastructure (road networks), transportation and access to markets.
- Production technology is still subsistencelevel and requires transition to commercial agriculture.
- The majority of the population has limited knowledge of nutrition, translating into poor dieting practices and the high incidence of under-weight and poor growth in children.
- Service delivery for production (research and modern inputs etc.) is weak.
- The lack of a comprehensive agricultural database and an early warning information system pose difficulties for forecasting climatic conditions, pest and disease threats.

Supportive Environment for Food Security

On re-election to office as President of the Republic of Sierra Leone in May 2002, His Excellency Dr. Alhaji Ahmad Tejan Kabbah declared food security as the government's main objective. He pledged to work for food security: his pledge is shown in Box 5.

Box 4: The President's Pledge for Food Security, May 2002

"I pledge to work even harder and with greater resolve, to do everything in my power, to ensure that within the next five years, no Sierra Leonean should go to bed hungry." – His Excellency Dr. Alhaji Ahmad Tejan Kabbah The achievement of food security is an overriding national priority. The government and its development partners are providing a supportive environment to achieve food security targets through a number of initiatives:

- Food Security and other strategy documents have been drafted such as Strategy for National Agricultural Development, Food Security Strategy, Nutrition and Health Strategy, and the Poverty Reduction Strategy Paper (PRSP), one of whose key pillars relates to food security. On-going reviews are designing strategies for fisheries, forestry and wildlife.
- Government is mobilising national resources and donor support for programmes to enhance food security.
- The Special Programme for Food Security, renamed "Operation Feed The Nation" (OFTN) was launched in 2002. It is supported by FAO, UNDP and other donors. OFTN empowers farmers and is the main vehicle to deliver the national extension service.
- Donors support the New Rice for Africa (NERICA) programme,² to promote rice production, seed multiplication, agricultural research, and development.
- Interagency programmes are in place to improve rural infrastructure (markets, roads), to support service delivery, and to monitor the food security situation.
- WFP provides food assistance to refugees and displaced persons, and supports school feeding programmes. These programmes are intended to meet minimum dietary requirements, and to reduce the incidence of underweight in children among vulnerable groups.

² NERICA is a new high-yielding rice variety developed by Sierra Leonean Scientist Dr. Monty Jones at the West African Rice Development Association (WARDA).

Food Security Priorities for Development Assistance

In order to eradicate extreme hunger, the following priorities are to be addressed:

There is a need to create awareness amongst the households about action to reduce malnutrition, including promoting healthy breast-feeding practices, and community nutritional assessment.

- Creating a supporting environment for agriculture marketing and enhancing farm income, which calls for developing rural infrastructure, and augmenting distribution channels.
- Strengthening and intensifying agricultural extension service delivery.
- Mechanisation and commercialisation of agriculture, including through private sector participation.
- Targeted support to farmers and most vulnerable groups.

• Develop rural infrastructure: intensify water management, road rehabilitation, markets, stores etc.

Promote nutritional education.

Monitoring and Evaluation of Food Security

Responsibility for M&E for food security is divided between the Poverty Evaluation Monitoring and Statistics Division (PEMSD) in the Ministry of Agriculture, and the Nutrition Unit of the Ministry of Health and Sanitation (MoHS). The Nutrition Unit collects nutrition data using Growth Monitoring Promotion cards; its work is supported by UNICEF, WHO and the health NGOs. However there is weak co-ordination between these two units; a strong linkage is needed to optimise the processes.



Feeder Road Construction: Working towards food security



Developing improved rice varieties - Rice Researcher at work in the fields

GOAL 2

ACHIEVE UNIVERSAL PRIMARY EDUCATION



Attentive Children during Lessons



Joyous children at play

Education Sector Policy Objectives and Programmes.

The key official policy documents are the National Education Policy of 1995, the National Education Master Plan 1997-2006, and the Education For All National Action Plan 2003-2015. The current major policy thrusts are nine years of basic education for all, the full implementation of the new 6-3-3-4 education structure with its strong scientific and vocational orientation, redressing gender inequalities, and increased cost recovery at the tertiary level. The key programmes include:

BASIC EDUCATION:

- Primary and Junior Secondary Education: All children should receive nine years of basic education- six at primary school and three at Early Childhood Care and Education: Every child to have between 1-3 years of preparation nursery or kindergarten school; ΞΞ
- Adult and Non-Formal Education: Priority is given to adult and non-formal learning in order to achieve an overall adult literacy rate of Junior Secondary School;
 - Special Needs: To ensure that no group, for example the disabled, is marginalized or left out in education. The war increased the numbers of the 50% by 2015; <u>(</u>
- disabled, especially the amputees.
- Gender: Eliminating gender discrimination in education is a major policy objective. The policy recognizes that the investment in girls' education is Σ

probably the single-most cost effective way to improve standards of living.

OTHER PROGRAMMES (for Basic Education):

HIV/AIDS Prevention and Life Skills: Sensitising students particularly at the JSS level about HIV/AIDS and other sexually transmitted diseases Ξ

Top priorities are the promotion of sexual abstinence and the prevention of harmful traditional practices.

- Peace and Civic Education: From the experiences of the war, peace education ensures that there is lasting peace, while civic education is taught in schools and colleges to raise citizen awareness of rights and responsibilities; Ξ
 - School-Based Health Services: All pupils should have a medical examination every year with appropriate support follow-up.

POST-BASIC EDUCATION AND TRAINING:

The three main components include- Senior Secondary School (SSS), Post JSS Technical and Vocational Education, and Tertiary Education University, Polytechnics, and the Teacher Training Colleges)

Source: PRSP Education Sector Review 2004.

Goal 2: Achieve Universal Primary Education				
Target 3: Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling	Indicator 6: Net enrolment ratio in primary school Indicator 7: Proportion of pupils starting grade 1 who reach grade 5 Indicator 8: Literacy rate of 15 to 24 year olds			
Status at a Glance				
Can target be achieved? Potentially.	State of supportive environment: Strong.			

Status and Trends

With an adult literacy rate of about 30%, Sierra Leone is one among the lowest in the world. There are also high spatial and gender differentials in access to education, and widespread poor quality of education, due to poorly qualified teachers and acute shortage of essential infrastructure and learning materials. These problems are compounded by the fact that during the civil strife, a lot of children totally missed their opportunity to go to school.

The peace in Sierra Leone has ushered in a favourable environment for the progressive realization of the right of all primary school-age children to quality primary education. Data available from the Ministry of Education indicates that after the civil war, primary school Gross Enrolment Rates (GER) rose sharply from 65.3% in 2000 to 90.4% (79% for girls) in 2001. ³ Between 2000 and 2003 GER increased to 143% (166% for boys and 120% for girls). The high recent level of enrolment however includes many over-aged children who were encouraged to return to school after the civil war through special programmes.

Due to lack of age specific data (the results of 2004 census are not yet available) it is difficult to indicate current Net Enrolment Rates (NER)⁴,

At the end of 2000, however, NER was estimated at 42%.⁵ Anecdotal evidence from schools show nonetheless that there has been significant growth in NER. The 2004 census will give a better estimate of NER when the data are released.

The war affected girls more than boys in relation to school education, resulting in fewer girls enrolling in school. Although GER has increased for both girls and boys since 2001/ 02, the gender gap has widened, with the Eastern and Northern regions being more affected. Information on whether those who enrol are then staying in school is still uncertain. It was difficult to track retention indicators between 1991 and 2001 as a result of the war, and data for subsequent years are not yet available on a consistent basis. However, there are significant drops in the levels of enrolment after grade 1. Literacy is low for the population 15 years and above. The literacy rate was estimated to be 30% in 2000 (21% female).⁶ This suggests significantly lower access to schooling for girls than boys. The lowest overall literacy rate is 14%, in the Northern Province, compared with the highest literacy of 69% in the Western Area. Government has emphasized education as the key to improving human capital and economic development and a viable strategy for reducing poverty.

³ The GER (for a specified level) is the number of enrolled children at that level, shown as a percentage of the total population of the normal age to attend that level. Female GER is the number of girls enrolled as a proportion of the female age-group population.

⁴ The NER is the number of enrolled children of the age appropriate for that level, shown as a percentage of the total population of the normal age to attend that level. In other words it excludes over-age and underage students.

⁵MICS2, November 2000. Central Statistics Office, MODEP

⁶MICS2, November 2000. Central Statistics Office, MODEP

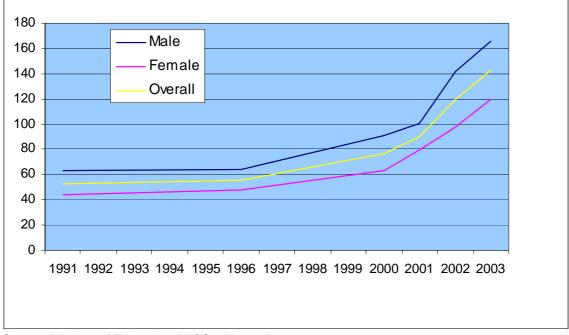


Figure 3: Gross Enrolment Rates, 1991/92 to 2002/03

Source: Ministry of Education; MICS2, November 2000, Central Statistics Office, MODEP

Major Challenges for Education

Despite government efforts, a number of key challenges remain to be addressed if universal primary education by 2015 in Sierra Leone is to be a reality:

- It is estimated that US\$ 500,000,000 will be required over 12 years for construction, equipment and materials and teacher training to meet the needs of school expansion and qualitative improvement of primary education
- Existing resources need to be utilized more effectively and effective monitoring and evaluation needs to take place.
- The rapid expansion of schools has resulted in low quality education because of the need to staff them with unqualified teachers. The quality of education needs to be improved significantly by upgrading teachers' skills in order to improve the quality of teaching and the "teachinglearning-earning" process in schools.
- Parents need to play an active role in the prioritisation of education in the midst of extreme poverty.

• Efforts need to be intensified to increase the number of girls enrolling in school and their retention, especially in the North and East. This can be done by using complementary measures, like establishing Community Schools to make primary education accessible.

Supportive Environment for Education

Government has demonstrated its commitment to achieving the Education For All (EFA) 2015 targets. It has prepared the EFA National Plan of Action, which serves as the linchpin of efforts to achieve EFA.

- The Education Act was passed in 2003, making basic education compulsory, with punitive measures for those hindering it.
- Government also waived fees for national school examinations in 2001. In 2003, full support was provided to all girls who enter Junior Secondary Schools in the Eastern and Northern Regions, with a plan to make Junior

Secondary education free for all girls in 2007.

• The government is receiving and maximizing assistance received from bilateral, multilateral and non-governmental organizations. The education budget has increased by 500% between 1999 and 2004, with the emphasis on promoting universal primary education.

Priorities for Development Assistance for Education

Government acknowledges basic education as a critical factor in achieving economic growth and reducing poverty. To achieve this MDG target, these priorities need to be addressed:

- Improving access to compulsory, free, universal, basic quality education for all children including girls.
- Construction/rehabilitation and equipping of more schools
- Supporting the establishment of more community schools,
- Promoting early childhood education and adult literacy programmes; subsidised-fee or free education for girls in Junior

Secondary School; building partnerships with communities and other stakeholders to ensure sustainability.

- The recruitment and training of more teachers to improve quality of teachinglearning in primary and secondary schools; providing adequate educational materials; resource centres and mobile library facilities; and developing sports and other recreational facilities.
- Improving and enforcing policies on basic education.

Monitoring and Evaluation of Education Programmes

Presently, the education database is weak and could not readily provide reliable statistics for planning and monitoring. The education inspectorate's operations are limited by inadequate resources. Both need to be strengthened to provide effective monitoring, supervision and reliable school-based data. Research capability needs to be improved to ensure that in the future educational planning is evidence-based.



Young girls receiving training in tailoring



Men and their women folk discussing empowerment issues with officials of the Ministry of Social Welfare, Gender and Children Affairs

GOAL 3

PROMOTE GENDER EQUALITY AND EMPOWER WOMEN



Gender Affairs Minister advocating women's empowerment



Celebrating Success: Female Students at a Graduation Ceremony

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the economic, social, cultural and political status of women in society is a major determinant of their poverty status. Women constitute an estimated 51.3 percent of the population but their low status is deep-rooted in discrimination by traditional customs and law. Various measures have been taken to address some of the challenges facing women. The key challenges are: gender-based violence; barriers to economic The Sierra Leone PRSP has recognised the critical role and empowerment of women in overall national development and acknowledges that empowerment; exploitation of poor, unskilled women and girls; sensitisation and education on gender and development issues.

and agriculture. Government has also signed major international and regional human rights instruments, including the ratification of the Convention on the Elimination of all forms of Discrimination Against Women (CEDAW) and its Optional Protocol. It is expected that more radical progress Government has created a separate Gender Ministry and programmes specifically focused on women, including credit, initiatives in education will be made to support women in Sierra Leone to enhance their effective contribution to the reduction of poverty and the attainment of critical PRSP objectives and MDGs. The overall objective is to work towards gender equality, equity, and empowerment as well as the promotion and protection of the human rights of women. In recognition of their importance in all key productive and human development sectors, gender-related issues have been mainstreamed into the various sector strategies and programmes. For example, in agriculture, it is recognised that women do the bulk of farm work, yet they remain marginalized with limited access to productive resources such as finance and training. In the current circumstances, significant improvement in agricultural output can be effectively realized if more emphasis is placed on improving the status of women in society.

Source: Final Draft Sierra Leone PRSP 2005.

Sub-Section 3: Gender Equality

Goal 3: Promote Gender Equality and Empower Women		
Target 4: Eliminate gender disparity in primary and secondary education preferably by 2005, and to all levels of education no later than 2015	Indicator 9: Ratio of girls and boys in primary, secondary and tertiary education. Indicator 10: Ratio of literate females to males of 15-24 year- olds. Indicator 11: Share of women in wage employment in the non-agricultural sector. Indicator 12: Proportion of seats held by women in national parliament.	
Status at a Glance		
Can target be achieved? Potentially.		

Status and Trends

In 1990, there were large disparities in school enrolment at all levels in favour of boys. But the gap has reduced for primary education in the country: in 2003, 58% of those enrolled were boys, and 42% girls. More generally, in primary and secondary schools nationwide, 63% of those enrolled are males, and 37% females. Composition of students in the University of Sierra Leone in the 2003-2004 academic year was 19% females and 81% males, making the possibility of gender parity in employment in the non-agricultural sector in the near future remote.

Regionally, the disparity in primary and secondary enrolment in the west and south is not very wide, but disparities in the east and north are significant. However, though school enrolment in the east and north for girls is lower than in the western area and southern province, the quality of passes recorded in the last two years in public xaminations has been higher in those areas. At all levels in the country, disparity exists in school completion rate with girls making up the greater number of dropouts. Additionally, the literacy rate is very low among women compared to men. Generally, women have little access to non-traditional **employment**: although increasing, the proportion of women in wage employment in the non-agricultural sector was only 7.5% in 2001, up from 6.4% the previous year. To date, employees in the non-agricultural sector largely comprise men.

Presently, women are under-represented in political and public life, although some progress has been made in this direction. In 1996, the proportion of seats held by women in the national parliament stood at 8.8%, increasing to 15% following the national elections in 2002. Women currently hold 3 of the 21 cabinet portfolios and 3 of the 10 positions of deputy ministers. Table 3 shows participation of women in politics.

	Total	Females (%)	Males (%)
Voters: (General Elections 2002)	2,327,974	49.6	50.4
Voters: (Local Council	2,275,173	46.6	53.4
Elections 2004)			
Presidential Candidates (2002)	8	12.5	87.5
Cabinet Ministers	21	14.3	85.7
Deputy Ministers	10	20.0	80.0
Councillors	475	10.9	89.1
Paramount Chiefs	148	6.8	93.2
National Electoral Commission	5	20.0	80.0
(Chief & Provincial Commissioners)		

Table 3: Participation of Women in Politics/Public Life

Source: National Electoral Commission (NEC)

Major Challenges to Gender Equality

GoSL and partners have made some efforts to promote gender equality and empower women for decision-making roles at national and local levels. However, there remain some major challenges to overcome. These include:

- Modifying religious and traditional practices to eliminate gender discrimination;
- Enforcing the implementation of policies on gender mainstreaming and the advancement of women;
- Formulating affirmative policies to increase female representation in selected and elected positions at international, national and local levels;
- Reviewing gender discriminatory laws and implementing new laws addressing violence against women;
- Ensuring that girls are retained in school up to the age of 18 by implementing appropriate policies.

Supportive Environment for Gender Equality

Government has demonstrated some commitments in the promotion of gender equality and advancement of women including the following:

• The establishment of a Ministry for Gender Affairs in 1996 and a Parliamentary Sub-Committee on gender affairs;

- Specific clauses in the Local Government Act 2004, requiring at least 50% female representation in the District and Ward Development Committees;
- GoSL and partners have undertaken a series of sensitisation activities on gender and empowerment of women at national and local levels;
- Free primary education for all in government-assisted schools and support for the girl-child (free tuition, books and uniforms) in Junior Secondary Schools in the northern and eastern provinces;
- Sierra Leone has launched a UN-funded project to prepare the first Status Report on the provisions of the Convention on the Elimination of all forms of Discrimination Against Women (CEDAW). A committee comprising government and NGO partners has been set up to integrate provisions of CEDAW into the national laws of Sierra Leone;
- There is a network of active partners which include the Sierra Leone Police (Family Support Unit), UNFPA, UNIFEM and IRC to address issues of violence against women.

 Gender issues have been mainstreamed in the Poverty Reduction Strategy Paper (PRSP).

Priorities for Development Assistance for Gender Equality

To achieve the targets associated with promoting gender equality and empowerment of women, the following are priorities for development assistance:

- Updating the existing legal framework to address gender violence and inequalities;
- Development and implementation of policies on commercial sex exploitation and abuse of women and girls;
- Increase the capacity of the Ministry of

Social Welfare, Gender and Children's Affairs to play its coordinating and monitoring role of gender mainstreaming within government structures and policies;

- Taking affirmative action to increase women's participation in decision making at national and local levels;
- Promoting girls' education at all levels.

Monitoring and Evaluation

There is a weak Monitoring and Evaluation environment on gender issues. There is need to set up a database on gender related issues, and to strengthen the monitoring and evaluation mechanism within the Ministry of Social Welfare, Gender and Children's Affairs.



GOAL 4

REDUCE CHILD MORTALITY

Fighting Infant Mortality



Healthy baby care at a clinic



Vaccinating babies at a clinic

Status and Causes of Infant Mortality.

Malnutrition is a major cause of childhood mortality. In fact it is estimated that about half of all deaths in children are attributable to malnutrition. Children under five years account for 17% of the population. The interaction between nutrition and infection among children and their mothers is of great concern in Sierra Leone. A national nutrition survey established that 24% of under five year old children were moderately malnourished while 3% of them suffered from severe malnutrition. The Multi-Indicator Cluster Survey (MICS 2000) showed that the underweight prevalence in children is 27.2%, wasting (acute malnutrition) prevalence in U5 children is 9.8%, while the prevalence of stunting (chronic malnutrition) is reported as 33.9%. Acute malnutrition affects particularly children under two years of age, while its prevalence decreases after that age. Chronic malnutrition also increases considerably during the first two years of life, and gradually further increases after that age.

The proportion of LBW babies has increased significantly from 11% to about 53% during the last decade. Poor nutrition care The poor nutritional status of pregnant women is further related to the increasing number of children with a low birth weight (LBW). practices include inadequate breastfeeding, and complementary feeding. On the whole, Government is committed to improve the nutritional status of the population and has initiated the process of developing a National Plan of Action for improving nutrition through a multisectoral and multidisciplinary task force. Government has also committed itself to enhance improvements in maternal, infant and under-five care in terms of expanding the coverage of, and access to quality health services.

These efforts are complemented by the World Food programme (WFP) and health related NGOs, which support and provide opportunities for supplementary therapeutic feeding of malnourished children in Peripheral Health Units (PHUs) across the country.

Source: Sierra Leone PRSP Health Sector Review.

Sub-Section 4: Reduce Child Mortality

Goal 4: Reduce Child Mortality		
Target 5: Between 1990 and 2015, reduce the Under-Five Mortality Rate by two-thirds	Indicator 13: Under-Five Mortality Rate (Target reduction from 244 to 80/ 1000 Live BirthsIndicator 14: Infant Mortality Rate (Target reduction from 163 to 55/ 1000 Live Births)Indicator 15: Proportion of one-year-old Children immunized against Measles	
Status at a Glance		
Can target be achieved? Potentially	State of supportive environment: Strong	

Status and trends

There are indications that child morbidity and mortality in Sierra Leone are high due to the decline in socio-economic conditions. In the 1990s this trend continued and worsened. The Under-Five mortality rate and infant mortality rate were already unacceptably high, estimated at 244 per 1000 live births and 163 per 1000 live births respectively in 1990. This situation worsened further during the civil war.

The civil war led to a marked rise in the prevalence of common communicable diseases (e.g., malaria, diarrhoea and respiratory tract infections) and a high rate of malnutrition, leading to a significant deterioration of the health status of the population, especially in vulnerable groups like children under five.

The cessation of hostilities has seen a gradual improvement in socio-economic conditions. The health care delivery system is being rehabilitated with facilities becoming functional. Access to basic health services has improved considerably, as evidenced by the resultant improvement in the Under-Five Mortality Rate from 284 per 1000 live births in 1999, to an estimated 265 per 1000 in 2004. The percentage of fully immunised one-year-olds has also increased to 52% from 28% in 1997. There are reasons to assume that these improving trends will continue, given the current

strong support for child welfare issues.

Major Challenges

Major challenges in reducing the child mortality rate are as follows:

- Absence of adequate medical professionals and financial support pose very serious challenge to the health care sector;
- Need for augmenting health care infrastructure, retention of nationals and private participation;
- Need for nutritious food intake and awareness about breast feeding amongst lactating mothers.

Supportive Environment

The current situation in Sierra Leone is very supportive of child health and welfare issues. There is a very strong political commitment to improve the health care delivery system which is supported by substantial bilateral and multilateral donor assistance.

- The largest proportion of childhood illnesses and deaths are attributed to malaria, diarrhoea, and respiratory tract infections: the programs to control these have been considerably strengthened, and include strong IEC components.
- With donor support, Government has undertaken rehabilitation and construction of health care delivery infrastructure, and provision of equipment and supplies.

Priorities for Development Assistance for Reducing Child Mortality

Achievement of the MDG targets for reducing child mortality will require the following:

- Elaboration of policy guidelines in key areas like reproductive health/ family planning, malaria, water and environmental sanitation.
- To reduce child illness and deaths which are largely attributable to malaria, diarrhoea, and respiratory tract infection, will require more donor assistance to strengthen the disease control programmes, including IEC Components.
- The problems associated with human resource for health will need to be addressed through a combination of

strategies that includes in-service training, curricula revision and improvement of conditions of service.

- Extension of the road network and communications to enable easy access to medical facilities and services.
- Improve and augment the support services through training and retention of paramedical professionals (midwives and nurses).

Monitoring and Evaluation

Regional and district level monitoring and intervention is made difficult by the absence of disaggregated statistics. It is necessary to improve both the scope and quality of the data published.



Maternity ward at district headquarter hospital: improving maternal health care

GOAL 5

IMPROVE MATERNAL HEALTH



Sensitization of pregnant women on maternal practices



Vaccination time for lactating mothers

Issues and Policies of Maternal Health in Sierra Leone	A major problem that affects women in Sierra Leone is the high maternal mortality of about 1800/100000 live births, and about the highest in Sub-Saharan Africa. It is even estimated that this figure is three times higher than the rate for the sub-region. The major direct causes of poor maternal health outcomes account for 80% of all maternal deaths.	As a result of the increased understanding of the medical causes of maternal health, attention has been focussed on developing strategies to reduce the high levels of maternal mortality. Some of the short-term interventions include those that take place before, during, and after pregnancy and birth. These include improving women's access to family planning services, prevention and management of STIs, and improving the quality of maternal care. Despite these efforts, pregnancy and childbirth continue to be life threatening for many women.	The causes of maternal mortality in Sierra Leone go beyond just a medical problem. It is evidently the result of the interaction of a variety of factors-social, cultural, religious, educational, and economic. Women depend on their male partners to make decisions affecting their health, because the men have the economic power in the home. Many women do not earn incomes and cannot afford the basic necessities of life. This leaves them at the mercy of their husbands for decisions - important decisions such as family planning practices, seeking health care in cases of emergency, and the timing of marriage for the girl child. Early marriage and childbearing are a serious threat to the health of adolescents and teenagers, including the curtailment of opportunities for young women. Also, female circumcision or genital mutilation (FGM) is a deeply rooted traditional practice that has adverse health effects.	To address some of these problems, the following broad policy measures are being pursued:	 (i) Giving priority to the prevention and reduction of maternal health in national programmes; (ii) Provision of accessible, affordable and well-equipped health care facilities with well-trained and motivated staff especially in the rural areas: (iii) Sensitisation and awareness on averting harmful traditional practices; and (iv) Promoting public education and community mobilisation for the empowerment of women. 	Source: Final Draft Sierra Leone PRSP 2005.
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Goal 5: Improve Maternal Health		
Target 6: Between 1990 and 2015, reduce the Maternal Mortality Rate by three-quarters	Indicator 16: Maternal Mortality Rate (Target reduction from 1,800 to 450 / 100,000 Live Births) Indicator 17: Proportion of Births attended by skilled health personnel (Target increase from 25% to 80%)	
Status at a Glance		
Can target be achieved? Potentially.	State of supportive environment: Strong.	

Sub-Section 5: Improve Maternal Health

Status and Trends

The maternal mortality rate has been persistently high since 1990, estimated at 1,800 for 100,000 live births. This persistently high rate is due to many factors, one of which is the low percentage of births attended by skilled personnel. The general situation is a matter of concern due to lack of policies to guide the delivery of obstetric care and absence of a reproductive health policy. There are very few well-equipped maternity units and blood banks in the country, which pregnant women can get to and afford. Also harmful traditional and cultural beliefs inhibit efforts to tackle the maternal health issues.

No studies have recorded any significant reduction in maternal mortality to date, but it is expected that the target reduction from 1,800 to 450 (for 100,000 live births) is achievable by 2015, especially if the major challenges are met.

Major Challenges

Maternal health care can improve, if the following challenges are addressed:

- There is need to develop a comprehensive and cohesive national strategy to address the problems associated with the high maternal morbidity and mortality.
- The major challenges relate to the paucity of trained staff, poor conditions of service and high exodus rate of medical practitioners.

- The Medical, Nursing, and Pharmaceutical Regulatory Boards and Councils, and other professional associations, are weak, and there are few enforceable rules and regulations.
- There is a proliferation of untrained and unqualified practitioners in the health sector, which needs to be addressed.
- Supervision of all categories of medical and nursing staff in the private and public sectors is weak, restricting the disciplining of erring staff.
- Due to the absence of a National Reproductive Health Policy, a coordinated effort to address maternal health problems is lacking.
- Accessibility to basic obstetric care is still limited for the majority of pregnant women, with only an estimated one fourth of births attended by trained personnel.
- Community awareness about maternal health care needs to be increased.

Supportive Environment for Maternal Health

The current situation is very supportive of maternal health and welfare issues. The existing strong political commitment is supported by substantial bilateral and multilateral donor assistance. A "Reduction of Maternal Mortality Association", comprising medical professionals, and a "Maternal and Child Health Project" are in place.

Priorities for Development Assistance

To improve maternal health care, it is necessary to address the following:

- Development of a National Reproductive Health Policy, and strengthening coordination through the recently established Task Force for Mother and Child Health.
- Address the problems of human resources for health care through a combination of strategies that includes inservice training, curricula revision, improvement of conditions of service and other staff retention initiatives.
- Prioritisation and coordination of maternal health care activities in national

programmes of cooperating UN agencies, donors and health NGOs.

- Strengthen the referral system.
- Extend the network of well-equipped maternity units and blood banks with skilled attendants.

Monitoring And Evaluation for Maternal Health

The monitoring and evaluation system is weak. Reliable time series of district level data are needed. The Ministry of Health and Sanitation should strengthen its lead role in the monitoring and evaluation of maternal morbidity and mortality in collaboration with UNICEF, UNFPA, WHO, SSL and others.



Mobile Ambulance Services in Rural Areas

GOAL 6

COMBAT HIV/AIDS, MALARIA AND OTHER DISEASES



New born babies enjoying their insecticide treated bednets



Baby victim of malaria



HIV/AIDS sensitisation campaign

Response to HIV/AIDS, and Programmes for Malaria and Tuberculosis
The aftermath of war poses a serious HIV/AIDS threat on Sierra Leone. The Government has given priority to HIV/AIDS in its national agenda with ample evidence of political commitment to combat the epidemic. The following national initiatives are in place:
 (i) Establishment of a National HIV/AIDS Council (NAC) with the Head of State as Chair. The council comprises public and non-public sector representatives, as well as people living with HIV/AIDS (PLWHA); (ii) Formation of a National HIV/AIDS Secretariat (NAS) within the Office of the President. The NAS is responsible for inter-sectoral coordination and the scaling-up of responses nationwide. (iii) Adoption of a National HIV/AIDS Policy that was developed with the support of the UN Theme Group on HIV/AIDS. The policy was adopted
by Cabinet and endorsed by the President. (iv) Development of a national HIV/AIDS Strategic Framework (2005-2009) with the support of UNAIDS, key priority areas such as prevention of new infections, treatment care and support to PLWHAs, families and communities, human and legal rights of PLWHAs etc. (v) Establishment of a multi-sectoral response to the epidemic with the appointment of focal points in relevant Ministries, Departments and Agencies.
(vi) Partnerships are being developed with the private sector, NGOs and CBOs to promote HIV/AID awareness. The PRSP also lists combat- ing HIV/AIDS as one of the key areas for reducing poverty.
Financial support for HIV/AIDS has been encouraging from multilateral partners and donors. A US\$15 million loan was contracted from the World Bank under the Multi-Country AIDS Program initiative (MAP). A grant agreement was recently signed with the Global Fund to fight AIDS, World Bank under the Multi-Country would benefit from financial resources worth US\$.6 million for a 2-year period (May 2005 - May 2007) to develop a comprehensive national response to HIV/AIDS. The African Development will make available US\$ 8 million for the sub-regional HIV/ AIDS project in the Mano River countries, including Cote d'Ivoire. The UN Agencies have been providing both financial and technical support in numerous AIDS related activities through UN Theme Group on HIV/AIDS and different agencies.
MALARIA: The treatment of malaria is listed among the current national priority health problems. The key interventions include:
 Launching of the Roll Back Malaria Initiative in 2001 Development of a five-year strategic plan on malaria control Promotion and distribution of insecticide-treated nets (INTs) among pregnant women and under five Introduction of Artemisinin Combined therapy
TUBERCULOSIS Successful completion of phase 1 of the grant provided by the Global Fund to control tuberculosis through improved diagnosis of cases, treatment, and institutional support. Request for phase 2 on the way.
For HIV/AIDS, Malaria and Tuberculosis a two years grant of US\$ 8.9 million has been given to Sierra Leone to control the diseases. Source: National Aids Secretariat, UNAIDS, MoHS Health Sector Review

Sub-Section 6: Combat HIV/AIDS, Malaria and Other Diseases

GOAL 6: Combat HI\	//AIDS, Malaria, and Other Diseases
Target 7: By 2015, to have halted and begun to reverse the spread of HIV/AIDS	Indicator 18: Prevalence of HIV among 15-24 years-old pregnant women. Indicator 19: Rate of contraceptive use. Indicator 20:
Target 8: By 2015, to have halted and begun to reverse the incidence of Malaria and other major diseases	Indicator 20:Number of children orphaned by HIV/AIDS.Indicator 21:Prevalence of and death rates associated with malaria.Indicator 22:Proportion of population in malaria-risk areas taking effective Malaria-prevention measures.Indicator 23:Prevalence of and death rates associated with tuberculosis.Indicator 24:Proportion of TB cases detected and cured
Status a	under DOTS.
Can HIV/AIDS target be achieved? Potentially.	State of supportive environment: Strong.
Can targets on malaria and other major diseases be achieved? Poten- tially	State of supportive environment: Strong.

Status and Trends

HIV/AIDS is an emerging disease that needs urgent attention from all sectors in the community. The first case of HIV was identified in 1987. A survey conducted jointly by Statistics Sierra Leone and the United States Centre for Disease Control in April 2002 showed a national HIV prevalence of 4.9%. From preliminary results, HIV prevalence was higher amongst some vulnerable populations, i.e. uniformed service personnel, commercial sex workers, mobile population and migrant workers. А population-based AIDS indicator survey is ongoing and will provide updated data. Nevertheless, it is widely accepted that the rate of infection is on the increase and may have passed the critical threshold of 5%.

One of the preventive measures in combating the disease is the use of condoms. The 2002 survey also examined condom use among the sexually active age group (12-49 years) and observed the usage as 17.9% (amongst male 20.7% and female 11.4%). Further, 15.6% of the population had correct knowledge about HIV/AIDS: 21.2% of males and 11.6% of females.

Malaria is the leading cause of illness and accounts for almost 40% of outpatient attendance. Its prevalence in under-fives is about 47% and resulting in a mortality rate of about 38.5%. This high mortality rate is partly explained by the less than 7% usage of insecticide-treated bed nets amongst underfives and pregnant women. An additional

cause is the resistance of malaria strains to the available drugs.

Amongst other endemic infectious diseases, **tuberculosis** is a matter of concern. The Annual Rate of Infection is about 2.5%. The Government is making major efforts for early detection, proper treatment for infected persons, and other preventive measures.

River blindness in the north central parts and **Lassa fever** in the eastern province of the country also pose a threat.

Major Disease Challenges

The key challenges threatening the fight against HIV/AIDS, Malaria and other diseases are:

- Consistent will and commitment at all levels should be strengthened and sustained;
- Managerial and institutional capacities of coordinating and implementing bodies should be strengthened;
- Stigma and discrimination towards people living with HIV/AIDS needs to be eliminated;
- The establishment of safe blood transfusion services nation-wide is a priority to ease blood-borne infection;
- Awareness raising and condom promotion in the community and vulnerable populations need to be increased;
- Capacities of health services should be improved for accessibility to Voluntary Confidential Counselling and Testing, and prevention of mother to child transmission:
- Providing affordable treatment with antiretroviral drugs for people living with HIV/AIDS;
- The proportion of under-fives and pregnant women sleeping under insecticide-treated bed nets should be increased, requiring more outlets selling these nets;
- Intermittent preventive treatment as another strategy to control malaria,

especially amongst pregnant women and children;

- Increase access to prompt combination based treatment for malaria using Artemisinin -based Combination Therapy (ACT);
- Capacity building and institutional system strengthening needs to improve. This would help increase case detection efficiency and treatment success rates;
- Improvement of environmental sanitation to reduce the incidence of malaria and other diseases.

Supportive Environment for Disease

Control Increased and sustainable donor assistance and government support is present. Government's current aim is to stabilize the spread of HIV/AIDS through preventive measures in health education between 2004 and 2010, and to mitigate its impact.

With the support of development partners, the National Strategic Framework has been elaborated for the time frame 2005-2009 with five priority areas, including:

- Prevention of new infections;
- Treatment, care and support to people infected and/or affected families and communities;
- Human and legal rights of infected persons;
- Decentralized implementation of HIV/ AIDS programme;
- Research, monitoring and evaluation.

The following initiatives also show the supportive environment:

- High community and civil society interest for overcoming the disease and through increasing public information and awareness campaigns;
- Grant agreement signed with the Global Fund on AIDS, Malaria and Tuberculosis.
- Commitment of the World Bank to explore a grant allotment for HIV/AIDS at the closure of the on-going support.
- HIV/AIDS, malaria policy and strategic plans and treatment guidelines are available;

• Dedicated and committed United Nations Theme Group on HIV/AIDS in place and the recent appointment of the UNAIDS Country Coordinator.

Priorities for Development Assistance for Goal 6

The main priorities for development assistance are:

- Extend HIV/AIDS testing, treatment and care facilities;
- Increase public awareness to control HIV/ AIDS;
- Increase supply of insecticide-treated bed nets, and make them affordable;

- For tuberculosis, contact surveys on TB in children need to be done, and identification of TB suspects intensified;
- Overall expansion and improvement of health care infrastructure.

Monitoring and Evaluation of Disease Control

The monitoring and evaluation plan will cut across all programmes and will include the following:

- Establishing baseline date for effective monitoring of trends;
- Environmental sanitation monitoring and evaluation system is absent. This needs to be augmented.



Promoting the HIV/AIDS Campaign through quiz competitions



Commemorating the Africa Malaria Day in 2002



The Kick-Polio Campaign

GOAL 7

ENSURE ENVIRONMENTAL SUSTAINABILITY



Deforestation and land degradation at a mining site

s and Programmes.
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I Problems, Policies
Causes of Environmental
Causes of

In Sierra Leone, the most significant problems hampering the cohesive, systematic and harmonious protection of the environment embody the following:

- Neak institutional framework and lack of logistical support;
 - -and degradation and deforestation;
- Jrban degeneration due to poor housing facilities, poor coverage of water and sanitation as well as waste management for the poor; -oss of biodiversity; and EEE22
 - - Pollution.

urban migration is exacerbating the problems of overcrowding, poor living conditions and sanitation, inadequate water supply and housing. The 11-year civil conflict further affected the quality of life in both rural and urban areas, and inevitably led to serious repercussions on the The underlying causes of environmental problems are poverty and population increase. In the rural areas, development of settlements in marginal areas by the farming community has led to high levels of deforestation and soil degradation. In the urban areas, increasing ruralenvironment. Houses and properties were destroyed and a large proportion of the population was displaced and forced to live in camps thereby worsening the complexity of environmental degradation problems.

- One of the strategies of the policy is "to make as priority Environmental Impact Assessment (EIA) of proposed activities which may National Environmental Policy 1990: The aim is to achieve sustainable development through sound environmental management. To address environmental problems, two major policy instruments have been formulated and enacted: (i) National Environmental Policy 1990: The aim is to achieve sustainable development through significantly affect the environment and the use of resources", and
 - Environmental Protection Act 2000. Ξ

In addition, there is a comprehensive body of legislation encompassing environmental protection and management. However, enforcement has been very ineffective, due to institutional weaknesses such as understaffing, inadequate management skills and insufficient funding. Three of the Sierra Leone has also signed and ratified a number of international Protocols and Conventions in the environmental domain. most important are:

- Stockholm Convention on Persistent Organic Pollutants: It seeks the elimination or restriction of production and use of all intentionally produce POPs (Persistent Organic Pollutants i.e. industrial chemicals and pesticides) Ξ
- Convention on Biological Diversity (CBD): The main objectives are to preserve biological diversity and rehabilitate all disturbed areas: Ξ
- Convention on the International Trade of Endangered Species: It provides for the elimination and/or reduction in the trade of certain species, including endangered species.

Source: Poverty and the Environment: Final PRSP Sector Review Report 2004.

Sub-Section 7: Environmental Issues

GOAL 7: Ensure Environmental Sustainability		
Target 9: Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources.	Indicator 25: Proportion of land area covered by forest. Indicator 26: Ratio of land area protected to maintain biological diversity to surface. Indicator 27: Energy use (Kg oil equivalent) per \$1 GDP (PPP). Indicator 28: Carbon dioxide emissions (per capita) and consumption of ozone-depleting CFCs. Indicator 29:	
Target 10: Halve, by 2015, the proportion of people without sustainable access to safe drinking water.	Proportion of population using solid fuels. Indicator 30: Proportion of population with sustainable access to an improved water source, urban and rural: Indicator 31: Proportion of urban population with access to improved sanitation.	
Target 11: By 2020, to have achieved a significant improvement in the lives of slum dwellers. Stat	Indicator 32: Proportion of households with access to secure tenure (owned or rented).	
Can target be achieved? Potentially.	State of supportive environment: Fair	

Status and Trends:

The traditional farming practice of slash and burn, together with the demand for fuel wood and bush poles for building and other uses, create an urgent need to protect the country's **forest and bio-diversity resources**. In excess of 80% of the energy used in the country is derived from biomass, mainly firewood and charcoal. Smoke inhalation is unavoidable, causing chronic and acute respiratory infections particularly among women and children who are mainly responsible for cooking food and heating water for the family.

Where the environment is concerned, increased use of biomass continues to lead to deforestation across the country, estimated at 3,000 hectares annually. **Deforestation** is having consequences on climate, water supply and the emission of poisonous gases (carbon dioxide, carbon monoxide), contributing to the greenhouse effect which results in global warming. Access to **safe water supply** decreased rapidly during the civil war though the situation is improving gradually. Population growth has resulted in increasing demand for access to safe water. Government is currently addressing this issue nationwide.

The majority of **slum dwellers** are in Freetown and the provincial headquarters, to which 80% of the people affected by the civil war migrated and settled. Most of these slum dwellers are unemployed and poor.

Sierra Leone is a signatory to several international protocols supportive of

environmental sustainability (UN Conventions on Bio-diversity Conservations, UNFCC, UNCCD, Vienna Convention, Montreal Protocols).

Major Challenges

In ensuring environmental sustainability, the major challenges include the following:

- Capacity building for effective coordination and community participation in environmental management; including correct balance between exploitation and conservation of bio-resources.
- Enforce environmental conservation laws and provide alternatives to firewood consumption.
- Increase regional cooperation in biodiversity conservation and improve coordination amongst players with respect to environmental management.
- Provide economic empowerment and job creation for slum dwellers.
- Gender sensitive reformation of the land tenure system and increased community participation in water and sanitation projects.
- Harmonisation and implementation of international protocols and domestic legislations supportive of environmental sustainability.

Supportive Environment

Sierra Leone has a relatively good, legal and institutional framework supporting environmental sustainability anchored on the Environmental Act 2000.

- Current decentralization promises to create better service delivery, implementation and enforcement of signed international protocols and enacted laws.
- The need for safe drinking water has attracted both national and international NGOs to support government initiatives.
- Budgetary allocation to the sector is high and a water and sanitation policy has been developed.

 Government is releasing land for low-cost housing in an effort to reduce the growth of slums.

Priorities for Development Assistance in Environmental Areas

Achievement of the MDG targets requires addressing the following:

- Direct intervention to stop destruction of forest, through working with communities and the enforcement of laws;
- Building capacities and awareness at local and national levels, including local government councils and other participatory stakeholders, to implement environmentally sustainable practices; developing eco-tourism;
- Encourage the use of energy-efficient technologies (for example, solar panels, biogas, biomass conversions);
- Financial support to improve data collection and statistical analysis;
- Staff training in institutions dealing with water and sanitation, the environment, and housing at the community level;
- Institutional reforms of SALWACO and the Water Supply Division of Guma Valley Water Company for a better delineation of their functions;
- Investment in low-cost housing schemes and technologies;
- Construction and rehabilitation of water and sanitation facilities, particularly in rural and semi-urban areas.

Monitoring and Evaluation

The Ministry of Lands, Country Planning and the Environment and the Ministry of Works, Housing and Technical Maintenance are responsible for monitoring and evaluation. There is coordination amongst the relevant ministries and agencies responsible for ensuing environmental sustainability. However, there is a need for additional resource support to these instituions.

GOAL 8

DEVELOP A GLOBAL PARTNERSHIP FOR DEVELOPMENT



Attentive youths in a training workshop



Rural youths farmers facing the food security challenge

Mational Varith Dollar
The National Youth Policy is anchored on the twin notion of empowerment and the creation of a responsible citizenry. Empowerment in a post-conflict context involves privileging and mainstreaming youth related activities in the overall process of national reconstruction. The ultimate goal is to reinvent the time-honoured notion of dignity in labour, instil national consciousness and patriotism in our young citizens, so as to lay the foundation for the emergence of a responsible citizenry.
The policy is aimed at creating a level playing field for youths to actualise their fullest potentials, be competitive nationally and globally, and to contribute as good, responsible citizens to the development of their country. The objectives of the policy are as follows:
 (i) Strengthening the Ministry of Youth and Sports for policy design and implementation of projects; (ii) Fast tracking processes for the self-actualisation of youths and their overall development; (iii) Creating reliable and efficient networks nationwide through which youths can access and share valuable information for their common
 (iv) Collaborating with other ministries and youth serving agencies in facilitating and encouraging the employment of youths; (v) Collaborating healthy and productive lives for youths; (vi) Sensitising youths and their communities to fight against HIV/AIDS, and the implications of the disease; (vii) Enhancing the empowerment of young women; (vii) Mobilizing youths of all ages to replace the culture of violence with a culture of peace, dialogue, and responsible citizenry; (ix) Re-inventing the dignity of labour as an integral aspect of youth culture and consciousness.
Source: Sierra Leone National Youth Policy.
Private Sector Development, Trade and Investment Policies The private sector plays a major role in Sierra Leone's economy and key to the attainment of the MDGs. Presently, it is weak and dominated by a small group of non-citizens that concentrate on trading rather than manufacturing. There is very little manufacturing and few exports, thus making the country heavily dependent on imports for survival. Manufacturing consists mainly of the processing of raw materials and of light manufacturing for the domestic market. While the Government has commendably stabilized the economic and political situation, translating this stability into economic growth and poverty reduction through the private sector remains a major challenge.
Although Sierra Leone does not yet have a comprehensive private sector development policy framework that addresses trade and investment issues, there is great commitment to the following: Liberalized trade regime through development of a comprehensive trade and industrial policy and strategy; Create investor-friendly environment through enactment of a new Investment Promotion Act; Strengthen export promotion through the restructuring of Sierra Leone Export Development and Investment Corporation; Divestiture and reform of public enterprises; and
The Government hopes that through the new Investment Promotion Act, infusion of new investment from both indigenous business people and non-indigenes will be encouraged, particularly, in agro-processing and other value-added manufacturing that will create jobs and expand exports.
In the area of trade promotion, Sierra Leone is a contracting to the GATT and a member WTO. Sierra Leone's trade policy is part of its more general strategy for poverty reduction and in line with its ECOWAS commitments. In addition, it is eligible for trade preferences under AGOA and other preferential arrangements.
Source: Ministry of Trade and Industry; Trade Policy Review Sierra Leone 2005.

Sub-Section 8: Global Partnership for Development

GOAL 8: Develop a Global Partnership for Development		
Target 12: Further an open, rule-based, predictable, non-discriminatory trading and financial system.		
Target 13: Address the Special Needs of the Least Developed Countries [Includes: tariff and quota free access for LDC exports; enhanced programme of debt relief for HIPC and cancellation of official bilateral debt; and more generous ODA for countries committed to poverty reduction]	Indicator 33: Net ODA, total and to LDCs, as percentage of OECD/DAC donors' (GNI).	
	Indicator 34: Proportion of total bilateral, sector-allocable ODA of OED/DAC donors to basic social services (basic education, primary health care, nutrition, safe water and sanitation).	
	Indicator 35: Proportion of bilateral ODA of OECD/DAC donors that are untied.	
Target 15: Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt	Indicator 42: Total number of countries that have reached their HIPC decision points and number that have reached their HIPC completion points (Cumulative).	
sustainable in the long term.	Indicator 43: Debt relief committed under HIPC initiative, US\$	
Target 16:In co-operation with developingcountries implement strategies fordecent and productive work for youth.	Indicator 45: Unemployment rate of 15 – 24 year olds, each sex and totals	
Status at a Glance		
Can target be achieved? Potentially.	State of supportive environment: Fair	

Status and Trends

Sierra Leone is presently classified as one of the highly indebted poor countries and highly donor-dependent. Total external debt increased from US\$1.2 billion in 1996 to about US\$1.7 billion at end 2004, primarily due to disbursement of loan resources by multilateral creditors (mainly the World Bank). During the period 1996 – 2004, debt service payments amounted to US\$ 270 million, mainly to multilateral creditors, with loan disbursements amounting to about US\$ 700 million. In 2004, aid disbursements and balance of payments support constituted 80% of total foreign exchange inflows of about US\$177 million in 2004. Total external debt service payments (amortization plus interest payments) in 2004 were US\$23 million.

The country reached the HIPC 'decision point' in 2002, and qualified for interim debt relief. A recent IMF review indicates that Sierra Leone will sustainably manage its debt situation by mid-2006 when it is expected to reach the HIPC 'completion point'. However, the debt service burden continues to crowd out private investment, as well as public expenditure in critical poverty reduction activities.

In the external trade sector, transactions with other trading partners have been hampered by structural barriers. Since 1990 the country has consistently suffered from chronic balance of trade and payments deficits, mainly due to exchange rate depreciation and increasing import costs, particularly of petroleum products.

Consistent with this trend is the weak and uncompetitive domestic production base, which makes the economy highly vulnerable to external shocks. Yet, the small, open economy operates liberalized trade and financial regimes, further exposing it to unfairness and inequalities in international trading systems particularly in agriculture. The situation is further compounded by the absence of a strong industrial base: there is little or no value-added in production, and minimal manufacturing, consisting mainly of processing raw materials and light consumer goods for the domestic market. Generally, there is very little new investment in industry for export promotion. Hence, the need for the infusion of substantial foreign direct investment capital for private sector development and growth of the economy.

The imbalances in the economy have placed undue hardship on the population, with limited opportunities for youth. At least 55 per cent of the population are in the 15-35 age group. Although there is a dearth of reliable statistics on the exact numbers of unemployed and underemployed youth, the general consensus is that the majority of them are either unemployed (an estimated 25%) or underemployed and earning very little, with limited development support packages for their empowerment. The majority of youths are illiterate, comprising of school dropouts residing mainly in the city and large urban towns. Their means of survival include petty trading, menial jobs, narcotic drug peddling, and common crimes, including theft. Many idle youths are also engaged in narcotic drug abuse and prostitution. Available evidence indicates the prevalence of sexually transmitted diseases, including HIV/AIDS.

Major Challenges

To strengthen the economy and address the Goal 8 issues, major challenges include:

- Create an enabling environment for good governance and security to attract foreign direct investment.
- Build a viable private sector for sustainable growth, employment and wealth creation.
- Promote youth self-esteem and provide adequate opportunities for job creation and income-generation, including facilities for tapping their diverse talents.
- Control drug abuse, addiction and prostitution among youth.
- Improve statistics for the analysis of youth problems and addressing them.
- Reduce donor dependence and effective management of domestic resources.

Supportive Environment

Overall, the current international interest and goodwill in the growth and transformation of the country is unprecedented. The following are national initiatives in support of trade promotion, aid coordination and youth empowerment:

- Strong commitment by Government to promote trade, articulated in the Trade and Investment Promotion Act 2004.
- Strengthening the capacity of the Ministry of Trade and Industry through the establishment of a Planning and Research Unit to improve the policy and regulatory frameworks for trade and investment promotion. The Standards Bureau has been restructured to improve the quality and competitiveness of locally produced goods.
- Reform and deepening of the financial sector through review of the Banking Act and foreign exchange regulations, including efforts to establish a Stock Exchange to provide capital market opportunities.

- A privatisation and divestiture programme to facilitate the transfer of ownership of public enterprises to the private sector and promote the inflow of foreign direct investment.
- Export promotion through the restructuring and strengthening of the Sierra Leone Export Development and Investment Corporation (SLEDIC). The agency is to serve as a "one-stop-shop" for simplification of business registration and minimizing transaction costs. SLEDIC also explores export opportunities in external markets that give Sierra Leone preferential treatment such as those given by ECOWAS, EU-ACP, WTO and the African Growth Opportunity Act (AGOA).

In the area of **youth**, there is strong national concern and commitment for the empowerment of youths. A separate Ministry of Youth and Sports is in place, including a comprehensive National Youth Policy to provide a framework for addressing youth issues. Priorities include:

- The ongoing construction of recreational facilities for youths in various regions of the country for tapping their potentials.
- To maximize youth productivity and ensure the development of responsible youths, Government is purposefully tackling the drug abuse and addiction menace by establishing a Drug Control Agency, while also putting in place modalities to curb commercial sex.

To improve **governance**, Government has taken measures such as the establishment of an Anti-Corruption Commission to minimize corruption and ensure effective management and utilization of resources. A Development Assistance Coordination Office (DACO) situated in the Office of the Vice President has been established to improve **aid coordination** and management. Furthermore, a Development Partnership Committee comprising Government, Donors and NGOs meets regularly to address development priorities and needs of the country.

Priorities for Development Assistance

Achievement of MDG targets requires addressing the following:

- Eliminate the debt overhang through further debt relief or complete debt cancellation.
- Support Government's effort in implementing reforms in trade and overall macroeconomic stabilisation efforts.
- Sustained private sector development with effective indigenous participation.
- Skills training for youths and create opportunities for employment.
- Develop National Service Schemes, including Growth Centres as a basis for youth development and empowerment.
- Capacity building in aid co-ordinating ministries and agencies such as the Ministry of Finance, Ministry of Development and Economic Planning and Development Assistance Coordinating Office.

Monitoring and Evaluation

The Development Partnership Committee (DEPAC) ensures that there are regular meetings between the government and donor community, which enhances collaboration and coordination. Critical development benchmarks are established and monitored periodically. DACO maintains the database for aid monitoring in collaboration with Statistics Sierra Leone (SSL).

ANNEX 1

Organizational Structure, Membership and Terms of Reference for the Sierra Leone MDG Report Preparation Teams

A: The MDG Report Steering Committee (SC):

Responsible for overseeing and providing political guidance to the process.

Composition of the Steering Committee

No.	Name	Position	Organization
1	Mr. Ibrahim M. Sesay	Deputy Minister and	Ministry of Development and
		Chair	Economic Planning
2	Ms. Nancy Asanga	Country Director and	United Nations Development
		Co-Chair	Programme
3	Dr. Alpha T. Wurie	Minister	Ministry of Education, Science and Technology
4	Mr. Momodu M. Koroma	Minister	Ministry of Foreign Affairs and
5	Mr. Dr. Bobson Sesay	Minister	International Cooperation Ministry of Lands, Country
5	WII. DI. DUDSUII Sesay	WIIIIISter	Planning and Environment
6	Mr. Joseph B. Dauda	Minister	Ministry of Finance
7	Dr. James C. Boima	Minister	Ministry of Works, Housing
			and Technical Maintenance
8	Mr. Ibrahim Sesay	Deputy Minister	Ministry of Health and
			Sanitation
9	Mr. Pascal O. Egbenda	Deputy Minister	Ministry of Transport and
			Communications
10	Mr. Francis K. Ngebeh	Deputy Minister	Ministry of Agriculture,
			Forestry and Food Security
11	Ms. Memunatu Koroma	Deputy Minister	Ministry of Social Welfare,
			Gender and Children's Affairs
12	Mr. Joe Blell	Deputy Minister	Ministry of Defence
13	Dr. Braima Josiah	National Coordinator	Poverty Alleviation Strategy
			Coordinating Office
14	Prof. Herbert B. Kandeh	Statistician General	Statistics Sierra Leone
15	Dr. Francis M. Kai-Kai	Executive Director	Development Assistance
			Coordinating Office
16	Dr. Mamadou Diallo	UNFPA Representative	United Nations Population Fund (UNFPA)
17	Dr. Mohamed B. Farah	FAO Representative	United Nations Food and
		•	Agricultural Organization
			(FAO)

Steering Committee Terms of Reference

- "The MDG Steering Committee shall be responsible for the following:
 - Ensuring a common understanding of the MDGs and the MDGR among all members of the SC

- Take the lead to identify the composition of the MDG Task Forces and agree on a proposed timeline for the completion of the preparation of the Report
- Agree on the format of the report which will be implemented by all of the TFs
- Ensure that the Task forces complete the preparation of the sections of the report in a timely and sufficient manner
- Review the Report sections and provide substantive comments on the way forward
- Ensure the timely preparation of the first draft of the Report
- Ensure a highly consultative and collaborative nature of the stakeholder workshops which will be convened to review the first draft of the Report
- Ensure a successful launching of the MDG Report for Sierra Leone
- Ensure that the report is ready for the CG meeting and formulate possible ways to showcase at this meeting.

B: MDG Report Task Forces:

Responsible for detailed analysis and preparing the different sections of the MDG Report relating to the nine Goals. Key contributors preparing sections of reports, and task force participants, are listed below.

Task Force Terms of Reference

"Each MDG Task Force shall, under the leadership of the appointed chair:

- Ensure a common understanding of the Millennium Development Goals and the MDG Report at the initial familiarization meeting;
- Come to the working sessions with key documentation and information for discussions, group work;
- Prepare the necessary section of the MDG Report at the working sessions as per the agreed format and work on revising this in light of Steering Committee's comments;
- Revise and incorporate any changes specified by the Steering Committee from the stakeholders' workshops;
- Work closely with the Steering Committee and the Facilitatory Institution."

Goal	MDG Task Force Group	Task Force Chair	Lead Writer
1 (a)	Poverty	Ms. Lauryn Johnston MoDEP	Ms. Lauryn Johnston MoDEP
1 (b)	Hunger	Mr. S K Tarawalie MAFFS	Dr. A C Lahai FAO
2.	Education	Mr. H M Nelson Williams MoEST	Mr. Ikem Chiejne UNICEF
3.	Gender	Ms. Memunatu M. Koroma MSWGCA	Mr. Dehunge Sharka MSWGCA
4 & 5	Mortalities	Mr. Kedrick Kiawon UNICEF	Dr. Clifford Kamara MoHS
6.	HIV, Malaria & TB	Dr. Mustapha Adeoye UNFPA	Dr. P A T Roberts MoHS
7.	Environment	Mr. Edward P. Bendu MOLCPE	Mr. Patrick S. Sundufu NUC
8.	Global Partnership	Mr. Abdulai Mansaray MTI	Mr. J. Vas-Lamin MoFA

The Task Forces designated their **Chairs and Lead Writers** as follows:

No.	Name	Position	Organization
1	Dr. Graham Chipande	Senior Economic Advisor	UNDP
2	Ms. H. Matthews	Assistant to Resident Coordinator	UNDP
3	Mr. Ibrahim S. Kamara	Programme Specialist	UNDP
4	Mr. Trond Husby	Reintegration Adviser	UNDP
5	Dr. Leopold Zekeng	Country Co-ordinator	UNAIDS
6	Mrs. Jebbeh Forster	Country Representative	UNIFEM
7	Ms. Viccinda Gordon	Administrative Assistant	UNDP
8	Ms. A. Nelson-Williams	Assistant to S.D.R.R	UNDP
9	Ms. Alberta Bindi	Programme Assistant	UNDP
10	Dr. M.B. Adeoye	HIV/Aids Programme Coordinator	UNFPA
11	Dr. Peter Sikana	R.H. Technical Adviser	UNFPA
12	Mr. George Saquee	P.O. WATSAN	UNICEF
13	Mr. Paul A. Sengeh	Monitoring & Evaluation Officer	UNICEF
14	Mr. Kedrick Kiawoin	Health Officer	UNICEF
15	Mr. Ikem Chiegne	Education Officer	UNICEF
16	Ms. Jyoti Rajkundlia	Programme Officer	WFP
17	Dr. J. Saweka	WHO Representative	WHO
18	Dr. Bona Hora	Medical Officer	WHO
19	Dr. A R Wurie	Disease Prevention & Cont. Adviser	WHO
20	Mr. A.T. Renner	Senior Economist	WHO
21	Dr. A.C. Lahai	Assistant FAO Representative	FAO
22	Ms. Sophie Conteh	Programme Assistant	FAO

Task Force Participants from United Nations Country Team

Task Force Participants From Government Ministries, Agencies, and Other Institutions

No.	Name	Designation	Organization
1	Mr. F K Tarawalie	Deputy Secretary	Ministry of Agriculture, Forestry and Food Security
2	Mr. James Freeman	Assistant Secretary & Economic Planning	Ministry of Development
3	Ms. Konah C. Koroma	Development Secretary	Ministry of Development & Economic Planning
4	Mr. Desmond S. Koroma	Senior Planning Officer	Ministry of Development & Economic Planning
5	Ms. Abie E. Kamara	Senior Planning Officer	Ministry of Development & Economic Planning
6	Mr. Mohamed K. Lebbie	Senior Planning Officer	Ministry of Development & Economic Planning
7	Ms. Lauryn Johnston	Economist	Ministry of Development & Economic Planning
8	Dr. Fatmata Lovetta Sesay	Senior Economist	Ministry of Finance
9	Mr. Willie Caulker	Dispenser	Ministry of Defence
10	Mr. H M Nelson Williams	National E & A Coordinator	Ministry of Education, Science and Technology
11	Mr. Reginald C. King	Research Officer	Ministry of Education, Science and Technology
12	Mr. J. Vas-Lamin	Assistant Secretary	Ministry of Foreign Affairs and International Cooperation
13	Mr. D S Lungay	Senior Assistant Secretary	Ministry of Foreign Affairs and International Cooperation

No.	Name	Position	Organization
14	Mr. Andrew F. Bangali	Permanent Secretary	Ministry of Foreign Affairs
			and International Cooperation
15	Mr. Simeon Fatoma	Rural Development Officer	Ministry of Local Government
			and Community Development
16	Mr. Morie Momoh	Administrative Officer	Ministry of Local Government
			and Community Development
17	Dr. K S Daoh	Manager RH / FL	Ministry of Health & Sanitation
18	Dr. P.A.T Roberts	Director of Primary Health Care	Ministry of Health & Sanitation
19	Dr. Clifford W. Kamara	Director of Planning & Information	Ministry of Health & Sanitation
20	Mr. E P Bendu	Environment Officer	Ministry of Lands, Country Planning & Environment
21	Mr. P S Bockarie	Director of Rural	Ministry of Local Government &
21		Development	Community Development
22	Dr. Brima Kargbo	Team Leader	National AIDS Secretariat
23	Dr. Sarian Kamara	Programme Manager	National Malaria Control
			Programme (MOHS)
24	Mr. Mohamed Jusu	Clerk of Committee of Parliament	House of Parliament
25	Ms. Fatou Y. Kargbo	Acting Director G.C.A	Ministry of Social Welfare,
20	Nis. Fatou F. Raigbo	Acting Director G.O.A	Gender and Children's Affairs
26	Ms. A J Koroma	Regional Desk Officer –	Ministry of Social Welfare,
20		South	Gender and Children's Affairs
27	Mr. Dehunge Sharka	Programme Officer	Ministry of Social Welfare,
			Gender and Children's Affairs
28	Mr. Eugene Sawyer	Statistician	Statistics Sierra Leone
29	Mr. Abdulai Mansaray	Acting Senior Assistant	Ministry of Trade Industry and
		Secretary	State Enterprise
30	Mr. J B Kamara	Personnel Manager	Ministry of Works, Housing and Technical Maintenance
31	Mr. J M B Aruna	Professional head	Ministry of Works, Housing and
•			Technical Maintenance
32	Mr. Patrick S. Sundufu	Final Year Student	Njala University College
33	Mr. A R Wurie	Permanent Secretary	Ministry of Works, Housing and Technical Maintenance
34	Mr. T R Gbetuwa	Senior Assistant Secretary	Ministry of Works, Housing and Technical Maintenance
35	Mr. Abdulai Koroma	Senior Assistant Secretary	Ministry of Works, Housing and
36	Mr. Eluemuno Blyden	Director	Technical Maintenance Biotechnology Association of
07	Mar Devidel A1-1	Continue Transitions Official	Sierra Leone
37	Mr. David Abibu	Senior Tourism Officer	Ministry of Tourism and Culture
38	Mr. Moses M. Lansana	Labour Officer	Ministry of Labour, Social Security and Industrial Relations
39	Mr. Foday M. Sesay	Journalist	Youth Forum
40	Mr. B W Bockarie	News Editor	Youth Forum
41	Mr. Philip Y. Maheyin	Assistant Director	Ministry of Youth and Sports
42	Mr. Sullay M. Kallay	Deputy Secretary	Ministry of Youth and Sports
43 44	Mr. Mohamed A Kabba Mr. Lamin Souma	P.R.S.P Focal Point Deputy Director General	Ministry of Youth and Sports Sierra Leone Water Company
45	Mr. Edwin Baimba	Environment Officer	Ministry of Lands, Country Planning
10			and Environment
46	Mr. Dennis K. Vandi	Deputy Secretary	Ministry of Defence

Annex 2 Links between Sierra Leone Poverty Reduction Strategy Pillars and Millennium Development Goals

SL-PRSP Pillars	MDGs	Targets
Pillar 1:	Goal 8:	Target 12:
Good governance, security and	Develop a global partnership	Develop further an open, rule-based
peace building	for development.	predictable, non-discriminatory trading
pouco building		and financial system; includes a
		commitment to good governance,
		development, and poverty reduction, both
		nationally and internationally. Target 1:
Pillar 2:	Goal 1:	Halve, between 1990 and 2015, the
Promoting pro-poor growth for food	Eradicate extreme poverty	proportion of people whose income is less
security and job creation (in a	and hunger. Goal 8:	than one dollar a day.
healthy macroeconomic	Develop a global partnership	Target 2:
environment).Promoting Food Security (investment in productive	for development.	Halve, between 1990 and 2015, the
sectors – Agriculture and Fisheries,		proportion of people who suffer from
and rural infrastructure, etc.).Job		hunger
Creation (Investment in		Target 16:
Infrastructure – energy, roads,		In co-operation with developing countries, develop and implement strategies for
transport, communication, ICT,		decent and productive
tertiary sector, private Sector		work for youth.
development and mining.		Target 18:
Sound macro-economic		In co-operation with the private sector,
management.		make available the benefits of new
		technologies, especially information and
		communications.
Pillar 3:	Goal 2:	Target 3;
Bromoting Human Development	Achieve universal primary	Ensure that, by 2015, children everywhere, boys and girls alike, will be
Promoting Human Development	education	able to complete a full course of primary
•Education		schooling
Health and Nutrition	Goal 3:	Target 4; Eliminate gender disparity in primary and
•Housing	Promote gender equality and empower women.	secondary education preferably by 2015
•Water and Sanitation		and to all levels of education no later than 2015
Vulnerable Groups	Goal 4;	Target 5;
Youth Development	Reduce child mortality	Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate
•Cross-Cutting Issues:	Goal 5;	Target 6: Reduce by three guerters, between 1000
oChild First	Improve maternal health	Reduce by three-quarters, between 1990 and 2015, the maternal mortality rate.
oHIV/AIDS	Goal 6:	Target 7;
- Conder Equality and	Combat HIV/AIDS, malaria	Have halted by 2015 and begun to reverse the spread of HIV/AIDS
oGender Equality and	and other diseases	Target 8;
Empowerment		Have halted by 2015 and begun to reverse
oEnvironment.		the incidence of malaria and other major
		disease
	Goal 7;	Target 9;
	Ensure environmental	Integrate the principles of sustainable
	sustainability	development into country policies and programmes and reverse the loss of
		environmental resources
		Target 10;
		Halve, by 2015, the proportion of people
		without sustainable access to safe drinking
		water
		Target 11;
		By 2020, to have achieved a significant improvement in the lives of at least 100
		million slum dwellers
	1	

Source: Poverty Reduction Strategy Paper SL PRSP February 2005