

SECTION IV:

Conclusions and Perspectives on the Post-2015 MDG Agenda

The continent continues to make steady, albeit modest progress toward attainment of the MDGs, notwithstanding the adverse effects of the global financial, food and fuel crises. Africa's performance with respect to primary enrollment, gender equality in primary school enrollment, women's representation in decision-making, child immunization, and stemming the spread of HIV/AIDS and TB has been especially strong.

Countries recovering from conflict have also made tremendous progress in reducing the under-five mortality rate, despite their challenging economic and social conditions. These developments, particularly in postconflict and fragile states, suggest that with political will, adequate resources, and strengthened governance structures, the MDGs can be achieved even under very difficult circumstances.

However, emerging trends for a number of other indicators give cause for concern. The pace of progress in halving poverty rates, creating productive employment, and reducing hunger and malnutrition has been very slow. Favorable trends in poverty reduction were reversed by global shocks and the absolute number of the working poor is on the rise. Indeed, more than one out of every two workers is poor (i.e., earns less than US\$ 1.25 per day), and this figure is expected to rise. High youth unemployment, particularly among female

youth in North Africa, is another growing area of concern, given its potential for igniting conflict and social unrest.

Efforts to reduce the incidence of hunger have yielded positive results, but here too progress has been modest. The region merely succeeded in reducing hunger by an annual average of about 0.7 percent over the past two decades. Rising energy and food prices are likely to further undermine performance on this indicator, with adverse consequences for the prevalence of underweight and undernourished children. Indeed, Africa's progress in reducing the proportion of undernourished people was stalled by the increase in food prices during 2006–2008.

Rising primary enrollment rates have not been matched by a proportionate increase in primary school completion rates, which also impacts the literacy rate. And while there has been overall progress in gender equality and women's empowerment, the continent is off-track on achieving gender parity at the secondary and tertiary levels of education. In fact, in several countries, the trend is now biased against boys, which needs to be addressed to restore parity.

Progress on health indicators such as the under-five mortality, infant mortality, and immunization has been encouraging, although not at a sufficient

pace to achieve these targets by 2015. For example, the continent reduced under-five mortality by one-third over the period 1990–2009 but this performance is not sufficient to meet the Goal by 2015. Access to reproductive health in Africa is limited but improving steadily, although only one in five married women aged 15–49 uses any method of family planning. This trend may explain why the region has the highest birth rate among adolescents (defined as the number of births per 1,000 women aged 15–19). Africa, however, recorded remarkable gains in antenatal care, with a significant increase in the proportion of women attended by a skilled health worker at least once during pregnancy in North Africa – rising from 46 percent in 1990–1999 to 80 percent in 2000–2009.

Africa faces a formidable challenge in reducing the Maternal Mortality Ratio. While all regions made progress on this indicator, the rate remains exceedingly high and tops 1,000 deaths per 100,000 in several countries. Factors influencing high maternal death rates include delays in deciding to seek care, delays in reaching care, and delays in receiving care. Other contributing factors include the high level of adolescent births and high unmet family planning needs. In this context, the availability and take-up of skilled birth assistance are vital for reducing maternal deaths. Yet, access to such services is particularly limited in Africa (excluding North Africa), where more than half the pregnant women deliver without skilled assistance.

Efforts toward stemming the tide of HIV and AIDS appear to be yielding positive results. There has been significant progress both in preventing new infections and in making antiretroviral treatment available to infected people. The largest epidemics

in the region in terms of the number of newly infected people have stabilized or are showing signs of decline. There are, however, significant cross-country variations, with some countries recording setbacks, both in prevention and treatment. Furthermore, the absolute number of adults and children living with HIV and AIDS has increased. Improvements in sexual behavior among people in many African countries (i.e., an increase in condom use and a decline in the number of adults who have multiple partners) largely explain the decline in HIV and AIDS incidence and prevalence rates. Given the interdependence between HIV/AIDS and tuberculosis, improvements in HIV and AIDS prevalence rates have been associated with corresponding declines in TB prevalence rates, since 2004. Malaria mortality rates have also declined, supported by increased access to insecticide treated bednets and Artemisinin-based Combination Therapy (ACT). Strong political leadership underpinned by external financial support has been a major driver in the fight against malaria in the continent.

Africa's performance on environment indicators has been mixed. On the one hand, consumption of ozone-depleting substances (ODSs) has declined markedly and access to improved water sources has improved. On the other hand, although Africa's contribution to greenhouse gases is marginal, emissions are on the rise and most countries are off-track to meet the biodiversity target, due to limited progress in protected area coverage.

Notwithstanding substantial improvements in access to safe drinking water, the pace of progress is insufficient for the continent to reach the target by 2015. Relative to urban areas, progress has been rapid in rural areas. Access to safe water remained

virtually unchanged in urban settings over the same period. This is partly attributable to the growth in rural–urban migration and to poor living conditions in the informal settlements which have sprung up to accommodate the influx.

Sanitation is still a struggle in most countries, especially for the rural population; only one-third of this segment has access to improved sanitation. The number of slum dwellers in Africa has also declined but only marginally; approximately two out of every three urban dwellers live in slums.

The challenge for Africa in achieving MDG 7 – and indeed other MDGs – is exacerbated by the threat of climate change and its impacts on ecosystems, water supply, and the degradation of biodiversity in Africa. Rising temperatures and changing rainfall patterns in Africa may reduce agricultural output, exacerbating food insecurity and malnutrition. This is likely have a devastating impact on the food security situation of the most vulnerable households. Both short-term and long-term assistance will be needed to step up investments to African agriculture, including research, advisory services, and market-related infrastructure.

Official Development Assistance (ODA) to Africa has increased in recent years but still remains far below the commitments made by the development partners at the G-8 Gleneagles Summit in 2005 to double aid. Bilateral ODA to Africa increased modestly in 2010 as a result of increased bilateral grants and lending, and debt forgiveness. However, overall aid remains below the Monterrey targets and Gleneagles commitments. Nevertheless, debt forgiveness has helped to relieve the high debt burden of African countries, although some HIPC post-completion point countries remain at high risk

of debt relapse. Social services, particularly reproductive health, account for a substantial share of ODA, although the relative share of the productive sector (specifically agriculture, fishing and forestry) has been growing in recent years. This reflects a gradual shift in favor of a sectoral distribution of aid. It is also important to balance the flow of ODA going to food support with resource allocation to agricultural development, to sustain gains already made in lifting people out of poverty.

Overall, the pace of Africa's progress toward the MDGs has been slow and generally insufficient to meet the target date. Performance has also been mixed and characterized by substantial variations in access to basic social services across subregions and countries, as well as within countries. Intra-country variations in performance are typified by rural–urban splits and disparities across income groups. Where spatial differences in access to basic social services coincide with ethnic boundaries, horizontal inequalities (i.e., inequalities across different ethnic groups) are exacerbated. This could heighten tensions and become a source of social unrest.

THE WAY FORWARD: CONSIDERATIONS FOR ACCELERATING PROGRESS AND FOR THE POST-2015 MDG AGENDA

Accelerating progress toward 2015

As we approach 2015, we need to redouble our efforts to accelerate progress on the MDGs in a more systematic and pragmatic way. In this endeavor, we can learn from our past experiences, identify key bottlenecks militating against progress, and collectively find and prioritize solutions. National development strategies should prioritize action plans, and frame interventions that have

proven multiplier effects across all of the MDGs. In particular, the focus should be on expanding access to energy, investing in women and girls, and developing capacity for local and economic governance.

There are fruitful experiences and lessons to be drawn from many African countries that can support acceleration. However, most of the successful interventions are at the pilot stage and need to be scaled up for greater impact. Depending on the country context, such interventions should be identified for prioritization and funding at the national level. For instance, successes in the implementation of social protection can be strengthened, resourced, and accelerated. Existing social protection programs should be legitimized, their implementation mechanisms improved, coordination enhanced, and their sustainability planned for.

It is important to address the existing fragmentation of efforts and resources of government agencies, development partners, and other stakeholders on concrete and targeted measures. Interventions designed to address challenging MDGs should have multiplier effects for the other goals. Partnership and collaboration around the challenging MDGs need to be strengthened for better results.

The post-2015 MDG agenda

As the year 2015 draws inexorably closer, the question on the minds of most development practitioners is: What next? What should be the post-2015 development agenda? Should the current MDG agenda be replaced in its entirety, continue in a modified form, or simply be extended in its present configuration? These are difficult questions with no obvious answers. What is clear, however, is that the performances of different regions, countries, and

indeed subnational entities have varied markedly. Some have made very good progress while others have stalled or fallen behind. So for countries that have achieved the targets, such MDGs may no longer be relevant in their current form. What may be relevant for MDG achievers is an agenda that prioritizes the consolidation and sustainability of progress on the Goals.

For subregions in Africa with mixed progress on the MDGs, the priorities are twofold: achieving the unmet targets, while sustaining progress on those targets that have been achieved. For such subregions and countries, the post-MDG agenda should prioritize strengthening implementation modalities and forging partnerships to ensure that all the MDGs are indeed achieved. In parallel, to sustain progress on the achieved targets and prevent slippages, measures could include improving education quality, minimizing inequalities in access to social services, and strengthening capacities for disaster risk reduction.

So, as we approach the MDG target year, the post-2015 agenda needs to recognize that achieving the Goals is not a one-off event but a dynamic process, subject to shocks and reversals resulting from exogenous and endogenous factors. And while achieving the MDGs is a critical first step, consolidating and sustaining this hard-won progress may turn out to be an even more daunting challenge.