

## EDITORIAL

# Achieving the Millennium Development Goals in Africa: How Realistic?

*Friday E. Okonofua\**

\*Editor, African Journal of Reproductive Health and Provost, College of Medical Sciences, University of Benin, Benin City, Nigeria

In 2000, the United Nations supported the pronouncement of the Millennium Development Goals (MDG)<sup>1</sup>, which was a commitment amongst countries of the world to ensure the accelerated development of all countries during the first fifteen years of the new millennium. The aim of the initiative was to narrow the gap between developed and developing countries, ensuring more equitable distribution and use of the world's resources. These eight goals of development include the following:

1. the eradication of extreme poverty and hunger;
2. achievement of universal primary education;
3. promotion of gender equality and the empowerment of women;
4. the reduction of child mortality;
5. the improvement of maternal health;
6. reduction of the incidence and prevalence of HIV/AIDS, malaria and other diseases;
7. ensuring environmental sustainability; and
8. development of a global partnership for development.

Presented alongside these goals are 18 targets and 48 monitoring indicators for measuring the performance of countries that subscribe to the tenets of the goals over the period 1990 and 2015.

Although the developmental agenda emboldened in the MDGs address all countries of the world, there can be no doubt that sub-Saharan African countries (SSA) have the greatest problems and stand to benefit most from the promotion of its principles as compared to other regions of the world. In comparison to the rest of the world, SSA countries have the highest rates of poverty and illiteracy as well as the highest rates of child mortality, maternal mortality, HIV/AIDS and malaria. By December 31, 2005, five out of the fifteen years for reaching the targets and indicators of the MDGs would have passed. A relevant question is whether SSA countries can meet the targets and monitoring indicators within the stipulated time frame and if so, whether such an achievement can be sustained? If results would be achieved in Africa, there should be positive signs during the first five years of the millennium to point to this direction. Unfortunately, for many of the goals and indicators there are no favourable signs in the horizon to suggest that any substantial progress is being made in the African continent.

The current situation in Africa is best illustrated with some of the goals and indicators. The high levels of poverty in Africa constitute one of the primary development challenges facing the continent today. Available evidence indicates that the level of poverty increased in Africa during the first years of the millennium<sup>2</sup>. Indeed, there is evidence that the level of poverty increased slightly in sub-Saharan Africa between 1990 and 2003, while it declined in other parts of the world<sup>2</sup>. In 2003, about 46 percent of the population in Africa lived on less than US\$1 per day, a proportion slightly above the ones that prevailed in 1980 and 1990. At the global level, the proportion of people living on less than US\$1 per day declined from 40 percent in 1980 to 20 percent in 2003. The US\$1 headcount index in SSA currently exceeds the next poorest region, South Asia, by about 17 percentage points<sup>3</sup>.

Estimates of the Human Development Index (HDI) for different regions indicate that SSA countries are doing worse than other parts of the world. Sub-Saharan Africa has with .465 the lowest HDI of all regions and below the world average of 0.729. Life expectancy in SSA is 46.3 years compared to 66.9 years as the world average. The education and GDP indices in SSA are also the lowest in the world. In particular, according to the UNDP<sup>4</sup>, sub-Saharan Africa accounts for 43 million of the 115 million children out of school, or just over one-third of the total. By 2015, approximately 19 million children in SSA will still be out of school if current trends continue and

Africa's share of the global out of school situation would have increased to 40 percent. Clearly, it is difficult to envisage that Africa will be able to meet the envisaged MDG target of ensuring that all boys and girls complete a full course of primary education by the year 2015.

Maternal, child health and HIV/AIDS statistics are some of the indicators that show the greatest disparity between SSA and the rest of the world. The number of maternal deaths has shown no signs of abating in SSA African countries, with current trends indicating that Africa will not meet the target of reducing maternal deaths by 75 percent by the year 2015. The data for child mortality are even more depressing.

Current estimates indicate that 4.8 million children in SSA die before the age of 5 years annually, approximately 9 deaths every minute<sup>5</sup>. SSA is the only region in the world where the number of child deaths is rising rather than declining. Recent UNDP report suggests that if current trends continue, there will be 5.1 million deaths of children in 2015, with Africa contributing 57 percent to these deaths<sup>6</sup>. Countries such as Nigeria, the Democratic Republic of the Congo, Ethiopia and Tanzania with the highest rates of child deaths in Africa are expected to miss the MDG targets by more than 35 years. Indeed, if current trends continue, SSA will achieve the MDG for child mortality in about 2115, one clear century after the target date.

Although HIV/AIDS situation in the world is stabilising, the largest proportions of those infected and affected continue to be in Africa. However, for malaria and tuberculosis, recent DFID and World Bank reports<sup>7, 8, 9</sup> indicate that no significant progress has been made in sub-African countries in terms of reversing the spread of these infections. Several other MDG targets that show no signs of improving in Africa include environmental sustainability and promoting global partnership for development. The DFID report<sup>8</sup> indicates that no progress is being made on any of the six targets for measuring environmental sustainability in Africa. In particular, there is evidence that no progress has been made on the level of youth unemployment in Africa, a critical indicator for measuring global partnership for development<sup>10</sup>.

Clearly, an opportunity is again being missed to promote human and social development in Africa. In 1990, the WHO promoted the principle of "Health for all by the year 2000". It is now common knowledge that Africa failed to meet the expectation of the rest of the world in terms of promotion of vital elements of health during this period. A key objective of the 1990 WHO clarion call was the need to reduce maternal mortality by half by the year 2000; this year passed and maternal mortality increased in Africa rather than decrease. It will be a shame if Africa again drags the rest of the world back in terms of achievement of the laudable MDG health and social development goals.

The signs may be ominous for health and social development in Africa, but we believe that progress can still be made if African countries change from their "business as usual" approach and attitude. Foreign aid may be important, but African countries must learn to take their destiny in their own hands and be prepared to do the right things at the right time to change the situation of their countries.

There has been a call for high income countries to increase their aid to African countries to up to 0.7 percent of their GDP, to enable developing countries to meet the MDG targets. Additionally, moves are ongoing to reduce or cancel the debts of heavily indebted countries in Africa. These are noble commitments from the rest of the world; however, African countries must develop proactive policies to match these commitments and devote their own resources and time to actively pursue the achievement of the MDGs. Considerable social and health reforms are required in the next few years in African countries in efforts to reverse the current slow pace of achieving the goals in Africa.

Essential health and social services need to be scaled up more than ever before in these countries. According to Kofi Annan, UN Secretary-General, We will have time to reach the Millennium Development Goals - worldwide and in most, or even all, individual countries - but only if we break with business as usual. We cannot win overnight. Success will require sustained action across the entire decade between now and the deadline. It takes time to train teachers, nurses and engineers; to build the roads, schools and hospitals; to grow the small and large businesses able to create the jobs and incomes needed. So we must start now. And we must more than double global development assistance over the next few years. Nothing less will help to achieve the goal<sup>11</sup>.

This statement is most appropriate for African countries that had had substantial infrastructural decay before this time. However, to achieve the massive scale of work needed to transform the situation is

not just about more donor resources; African countries need to increase the tempo and vigour with which they complete assigned tasks, they need to stamp out corruption and to increase accountability in their populations.

African countries may be democratising but true democracy can only manifest if the people see benefits in social and developmental dividends, and if they participate in decision-making and in true leadership transformation. These are presently not happening in many parts of Africa making real progress in social development a real and growing mirage. As we enter the second third of the first fifteen years set aside for attaining the MDGs, African countries must scale up efforts and re-dedicate themselves to achieving these goals. The goals are true social and developmental benchmarks, which will benefit African countries more than the rest of the world, and provide impetus for continued growth of the continent.

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