I, Stephen K Diko, hereby submit this original work as part of the requirements for the degree of Master of Community Planning in Community Planning.

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SETTING A NEW INTERNATIONAL DEVELOPMENT AGENDA FOR WEST AFRICAN COUNTRIES AFTER 2015 – MOVING BEYOND THE MILLENNIUM DEVELOPMENT GOALS

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Setting A New International Development Agenda For West African Countries After 2015 –
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ABSTRACT

By 2015, the Millennium Development Goal (MDG) Agenda will be over and the various targets and indicators will be expected to have been met. Unfortunately, progress has been mix and at times “ugly.” As efforts and debates on international development rage on, the question that everyone is asking is whether there should be a new international development agenda after 2015? Such a question underpins this research with particular emphasis on West Africa — with the exception of Saint Helena. In all, sixteen countries were considered in this research. All eight MDGs were considered. However, out of the 48 indicators, 40 were considered for this research. The data used for this research were mainly secondary relying on databases and publications on MDGs and international aid. Two main databases were used, namely the United Nations MDG indicators and the World Bank Global MDG Monitoring Report. While the former helped in tracking progress from 1990 to 2014, the latter was used to track projected progress for nine indicators for West African countries using most recent progress by the countries. Like the global trends — especially for developing countries and Sub-Saharan Africa — progress in West Africa was mixed both across countries and across indicators. Some factors are supporting and others hindering progress in these countries. It was evident that economic development, national programs on poverty and sectoral programs directed at the goals, and international aid were some factors supporting progress. On the hand, political conflicts, the global economic and financial crisis, socio-cultural and religious factors, as well as poor national capacities to implement national programs effectively, and the over reliance on international aid, limited progress. It was clear that the MDG Agenda increased momentum towards global poverty reduction and human development from the experiences of these countries. However, unlike some studies that resorted to suggesting specific goals and focus areas for a possible new global agenda, this research concludes by identifying critical points for consideration in the overall international development and aid agenda. Issues relating to country sufficiency, structural development actions, and development measurements are noted as noteworthy points of consideration for West African countries and developing countries as a whole beyond the MDG Agenda after 2015.
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DEDICATION

To my parents — Mr. and Mrs. Diko — and siblings Harold Diko and Catherine Diko
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CHAPTER ONE

INTRODUCTION

1.1 Background of Research

International aid has increasingly become paramount in development discussions as a result of the low capacities of developing countries to raise enough resources to mitigate their development challenges. The main cause of this phenomenon is attributed in many ways to the nature of the world market that seemingly favors the advanced countries to the detriment of developing countries. According to the World Bank, “countries left behind in the global economy stand to benefit much less from global markets in the short run and will continue to rely on aid” (2005: 17). As such, for these developing countries, global interventions “that help compensate for unequal endowments are truly essential” (ibid: 17). These compensatory interventions aim to achieve development aspirations in developing countries by increasing public investments in human development, infrastructure, and governance structures through resource transfers in the form of aid, debt relief, and programs.

Since 2000, the relevant issues at the international level have included high poverty levels, illiteracy, and mortality in some parts of the world, set against the prosperity, literacy, and longevity in others. Climate change, terrorism and the global economic meltdown have also been international concerns in the years leading to 2010s (Schipper and Pelling, 2006; Andreassen et al., 2010). These, unfortunately, have had dire consequences in developing countries. The policy responses have encompassed international aid in the form of bilateral and multilateral programs and projects to build national development capacities and also to ease international trade and investment flows (World Bank, 2008; Grimm et al., 2009; McGillivray et al., 2012).

Despite such program and project efforts, these development challenges continue to persist. These challenges have also shaped the flow of international aid in the last decade, leading to 2010, making flows erratic and declining at some points. Between 2000 and 2005, global international aid towards
development increased steadily, while flows declined between 2005 and 2010. International aid statistics from Official Development Assistance (ODA) declined from US$107.1 billion in 2005 to US$103.7 billion in 2007 (United Nations, 2008). The net aid disbursements in 2011 were estimated at $133.5 billion indicating increments of 28.74% in absolute aid flows (United Nations, 2012). However, the quantum of aid is still inadequate. International aid is still less than the 0.5% of the gross national income of giving countries (and the target of 0.7% set by donor countries as ODA\(^1\)) and does not even form a large fraction of the Gross Domestic Product (GDP) of countries home to the severest forms of poverty (World Bank, 2009: 5; United Nations, 2012: 59). These trends have presented opportunities, and, at the same time, challenges for the development of poorer countries. As a result, several discussions have emerged as to whether international aid is a relevant development strategy for developing countries.

Through international aid interventions, bilateral and multilateral efforts towards the empowerment of developing countries and their citizens have been undertaken since the 1940s in varied forms. Prominent among these is the Millennium Development Goals (MDGs) Agenda. In 2000, there was a global consensus and commitment from the international development community towards the direction and response by bilateral and multilateral agencies to poverty reduction and development in low income-countries. The MDGs identified in 2000 set an agenda of international consensus and commitment for promoting development for these countries (United Nations, 2000: 1). Eight goals, eighteen targets and forty-eight indicators were identified by developed and developing countries to shape the international and national development agenda to manage development challenges in poor countries (United Nations Development Program [UNDP], 2005: xviii). This agenda has received several critiques and examinations from both academia and the world of practice.

\(^{1}\) “First pledged 35 years ago in a 1970 General Assembly Resolution, the 0.7 target has been affirmed in many international agreements over the years, including the March 2002 International Conference on Financing for Development in Monterrey, Mexico”(http://www.unmillenniumproject.org/press/07.htm. Accessed September 6, 2013).
The United Nations explains that this international framework for development has “…helped to lift millions of people out of poverty, save lives and ensured that children attend school. They have also helped to reduce maternal deaths, expanded opportunities for women, increased access to clean water and freed many from debilitating diseases” (2011: 3). Indeed, some targets such as halving poverty between 1990 and 2015 are projected to be achieved by the deadline of 2015, while several others present mixed results (Vandemoortele, 2011). With less than two years to go, several questions have emerged as to whether these targets are realistic and achievable.

In response to this, several studies have been initiated by national agencies, bilateral and multilateral and research institutes to assess the challenges of the MDG Agenda to create better ways of achieving development targets in developing countries beyond 2015. Such is this research. It focuses on the dynamics and complexities associated with the progress of the MDG Agenda in sixteen countries of West Africa. The outcome is to help inform a rethinking by the international development community in their response to development challenges in poor countries.

Specifically, the research focuses on the factors that affected the progress of the MDG Agenda in West Africa. These sixteen West African countries (Benin, Burkina Faso, Ivory Coast, Cape Verde, Gambia, Ghana, Guinea, Guinea-Bissau, Liberia, Mali, Mauritania, Niger, Nigeria, Senegal, Sierra Leone and Togo) vary in terms of history, governance systems and structures for national development and economic prosperity. Similarly, the sub-region is characterized by varied geographical factors and resource potential. These presented different analytical context to understand the factors that affect the MDGs in these countries.

1.2 Problem Statement

The MDG Agenda initiated in 2000 provides a new paradigm in the international development agenda where aid flows and national capacity and ownership of international development interventions are
adduced as key to aid effectiveness. The agenda also provides a new consensus for action between developed and developing countries to reduce poverty and enhance overall human development in countries through nationally-led interventions. Thus, this illustrated a move from the mostly donor-led approaches to donor partnership approaches with aid beneficiary countries. In this new framework, the MDGs are placed within the context of national development frameworks and synergies between these agendas are advocated and initiated by developing countries (MacGarty, 2013).

Emerging from this awareness is the need for beneficiary countries to lead and take ownership of international aid initiatives (Kayizzi-Mugerwa, 2003; Waage, 2010). Over the course of the implementation of the MDG Agenda, international aid issues which hitherto consolidated around aid effectiveness articulating the lack of capacities of developing countries to effectively channel international aid to the benefit of citizens became more critical. As efforts and attention on the MDG Agenda increased, several arguments emerged including whether the whole idea of international aid is actually having an impact on reducing poverty in developing countries and whether the MDG Agenda is worthwhile. Within the general aid society, Cogneau and Naudet (2004) for instance, argued that there was a flaw in aid allocation because aid agencies fail to adequately take into consideration poverty issues and the greater structural disadvantages of developing countries. To the World Bank (2006), greater effectiveness could be achieved by emphasizing results, moving away from ex-ante conditionality, and progressively shifting design and management from donors to recipients. Examining the MDG Agenda, Nayyar (2011) draws a missing link between the MDGs and a framework for achieving the goals. Such are the controversies surrounding international development and the MDG Agenda. Innovative mechanisms to expand the development agenda from international development stakeholders, therefore, need to be explored, including global systems and private contributions. These, among others, have been the critical issues of international aid in developing countries, especially in the area of achieving development goals.
Throughout the implementation of the MDG Agenda, studies continue to allude to the fact that, despite
the potential of international aid to developing countries, there are observed challenges; these include the
erratic nature of aid flows, a low quantum of aid flows and the challenges of aid utilization by recipients
(Birdsall, 2004; Clemens et al., 2004; Sridhar, 2010). These challenges have also been observed
throughout the implementation of the MDGs since 2000 (De Renzio, 2009). While some situations can be
avoided and others improved upon, particular world trends limit global and national responses to facilitate
the implementation of the MDG Agenda in developing countries (Addison and Mavrotas, 2008).

During the recession following 2008, international aid flows to developing countries declined and only
picked up as the economies of developed countries started improving. Hence, international aid flows were
seen to be dependent on the functional and economic vitality of advanced countries. Such challenges
imply less international aid for developing countries in times of global crisis (Riddell, 2009; Addison et
al., 2011: 467). The challenges of terrorism and political instability in developing countries have tended to
also increase vulnerabilities and eroded achievements made earlier (Werker, 2012). In such
circumstances, efforts towards achieving the MDGs are redirected to mitigate security situations thereby
limiting the availability of national resources and aid for promoting other development aspirations.

There have been several other issues such as poor accountability, transparency and efficiency in aid
utilization in developing countries. As a result, aid effectiveness and national development capacities
have become paramount. These are some challenges affecting the progress in achieving the goals of the
MDG Agenda. The dire consequences of these issues have different implications for developing countries
and their development agendas. Especially for African countries, attainment of the MDG targets looks too
daunting. Though there has been progress “in key areas such as net primary enrollment, gender parity in
primary education, political empowerment of women, access to safe drinking water, and stemming the
spread of HIV/AIDS,” compared to other regions, Africa is lagging (Economic Commission for Africa
and United Nation Development Program, 2010: Forward). In all these cases, the ramifications and
responses to action have a paramount demand on contributors and recipients of international development aid to stress effective and efficient management of international aid and, most importantly, in rethinking a new international development agenda in poor countries after 2015.

Strategies to improve development and international aid effectiveness are imminent as 2015 approaches. Consequently, this research assessed the progress in achievements of the MDG agenda, examined the effects of international aid flows on MDG, identified factors affecting the progress of the MDG Agenda, and, among others, suggested factors to be considered in a new international agenda for development in developing countries using evidences from West African countries.

1.3 Research Questions

The main questions for the research include:

- What progress has been made by West African countries in achieving the MDG targets?
- What factors have supported the achievement of MDG targets in West African countries?
- What factors have hindered the achievement of MDG targets in West African countries?
- What new factors should inform a new consensus for an international development agenda for developing countries, particularly West African countries, beyond 2015?

1.4 Scope of Research

This research focused on the West African sub-region of Africa. As such, this research appreciated the progress of the MDG Agenda in the sixteen countries within the sub-region. The statistics are based on the national and multinational discussions of the MDGs most especially the MDG database for tracking progress of countries in the achievement of the MDG targets by the United Nations and World Bank. This was also be supported by national and research papers on the MDGs for the sub-region.
The time scope for this research spanned from 1990 to 2012. However factors explored in relation to progress emphasized the period between 2000 and 2014. This is because the research sought to understand the evolution of the MDG Agenda from its inception to the most recent year of MDG Agenda.

1.5 Significance of the Research

The MDG Agenda presents how international consensus and commitment for development in poor countries can be achieved and promoted. Nonetheless, the process is not without challenges. This research has provided further evidence as to what these challenges are and what new efforts can be taken beyond 2015 when this MDG Agenda comes to an end.

This research further provided awareness as to the importance of international aid and how its potential can be optimized to provide greater benefits for developing countries. Typically, international aid is well known to be one mechanism for financing development in developing countries. Although it is not the ultimate response to solving the financing challenges in developing countries, the optimization of this opportunity can ensure that benefits reach a majority of those in need. The understanding of international aid interventions in relation to MDGs and their impact on beneficiaries of developing countries should help policy makers be better informed on the ways of improving development strategies to optimize this potential.

Furthermore, this research has thrown more light on whether continual dependence on international aid is the most appropriate response to the management of development challenges in poor countries and potential identify more avenues for improvement. Furthermore, this research has also provided a depth of information for academia, professionals and experts in this area, and laid a good foundation for further research.
1.6 Organization of the Research Report

There are nine chapters to this report. Chapter One presents an overview of the research, its research questions, scope, and justification. Chapter Two reviews the literature for the research, which provides a detailed discussions of international aid, aid effectiveness, the MDG Agenda and emerging international development issues related to the MDGs. Chapter Three presents a comprehensive discussion of the methodology that the research adopts. This is followed by Chapter Four, which presents the geographical scope of the West Africa and Chapter Five discusses the different debates on the focus of a new international agenda should be after 2015. The analysis and findings for the research are presented in chapters six, seven and eight. The last chapter, Chapter Five, discusses the implications of the findings and suggested factors to inform a rethinking in any new development agenda by the international development community towards the development of developing countries, particularly West African Countries, after the end of the MDG Agenda in 2015.
CHAPTER TWO
INTERNATIONAL AID AND THE MDG AGENDA

2.1 Introduction

There are several contested views on the subject of international aid\(^2\) and the MDG Agenda. On the one hand, one school of thought is of the view that international aid is necessary for the development of the Global South; i.e., without it the path to mitigating impoverishment and deprivations may be impossible and hard to attain. In contrast, the second school of thought argues that international aid invariably cripples the development efforts of the Global South. This second school argues that such aid presents a dependency syndrome, which reduces initiatives towards innovations and structural transformation. In both schools, there have been strong opinionated positions.

On the MDGs, the arguments are not as disconnected or divergent as with international aid. Nonetheless, as a component of the conception of international aid, it invariably bears the brunt of the debates. One such argument rests in its design and its ability to facilitate development effectively in the Global South. This introductory section has presented a generic purview on the discussions related to international aid and the MDG Agenda. In the sections, the chapter presents detailed discussions on the issues from both sides of the argument. The initial section looks at the relationships between development and international aid by drawing from its history and typologies. This is followed by the debates from the different schools of thought on aid after which the MDG Agenda is discussed. The chapter concludes with a summary of the issues reviewed from literature.

\(^2\) Note that different terminologies are adopted by different writers and agencies. These include: foreign aid, development aid, development assistance, official development assistance. These are used interchangeably in literature and at times to refer specific types of aid. This research adopts international aid to refer to all forms of all aid directed at development and poverty reduction efforts.
2.2 International Aid and Development

International aid and development have common themes and trajectories. Though there are some divergences and differences in terms of the role international aid plays in promoting development, it continues to remain a central element of development discussions. The subsequent sections expound the definition, history and debates related to international aid.

2.2.1 Concept of Aid

2.2.1.1 Definition and Nature of Aid

International aid is an international framework designed to facilitate development in declining areas around the world. The premise of this is to establish a global balance in world economic and human development. According to Hjertholm and White, this operation channels “tens of billions of dollars to developing countries each year and [employs]… hundreds of thousands of people in a multitude of organizations” (2000: 3).

There are differences in the definition of aid, and some are simple or technical, depending on the origin of the definition. Tarp for example, explains that “it covers governmental transfers to poor countries that are destined for developmental purposes” (2006: 13). Minoiu and Reddy distinguish between two types of international aid: “development aid” and “non-development aid” (2009: 7-8). They define the former “as aid expended in a manner that is anticipated to promote development, whether achieved through economic growth or other means,” and the latter “as aid of all other kinds” including that for humanitarian purposes. Their fundamental premise is that development aid is evidently based on the expenditure of countries and agencies to the extent to which expenditures “are expected to promote development” (Ibid: 7-8).

The Development Assistance Committee (DAC) of the Organization for Economic Cooperation and Development (OECD) provides a more technical definition. According to Hjertholm and White, DAC “is
the principal body through which the OECD deals with issues related to cooperation with developing countries” (2000: 13). In other words, DAC is the basic form of framework by which the very basics of “aid from governments in developed countries to developing countries” are facilitated (Brian, 2012: 49). The definition of DAC comprises “financial flows, technical assistance, and commodities that are: (1) designed to promote economic development and welfare as their main objective (thus excluding aid for military or other non-development purposes), and (2) provided as either grants or subsidized loans” (Radelet, 2006: 4)

Specifically, the OECD identifies international aid as ODA. ODA is defined by the OECD as “foreign aid” or “development assistance” to refer to the “sum of grants and loans to aid recipients that are: (a) undertaken by the official sector of the donor country; (b) with promotion of economic development and welfare in recipient countries as the main objective, and (c) at concessional financial terms, where the grant element is equal to at least 25 per cent” (Tarp, 2006:13; Hjertholm and White, 2000: 16).

ODA remains pervasive in international aid discussions because of its dominance and magnitude in terms of financial contributions to development in developing countries (Radelet 2006). It has three main characteristics, namely: “It comes from governments, either at national or state level, or from their official agencies; it is targeted at improving the economic development and welfare of developing countries, and it is either a grant, or a loan at a rate less than market interest rates” (Brian, 2012: 49). Broadly, they are classified as loans or grants, planned or emergency, debt forgiveness, bilateral or multilateral and technical co-operation. In some instances, these forms of aid are tied to and/or come with many conditions. Developing countries may be required to purchase particular commodities or award contracts to businesses in the giving countries despite the existence of cheaper alternatives before this aid is transferred. In addition, international aid is provided only if developing countries adopt some reforms as prescribed by the donor countries. These conditions have often received criticism for facilitating the disconnection between aid and development effectiveness. As will be seen in the subsequent section,
international aid and development in developing countries run parallel to each other as a result of these conditions.

2.2.1.2 History and Trends of International Aid

International aid and development have been a focal issue of human development efforts since the end of World War II. There is a strong connection between international development thinking and international aid, mostly because international aid agencies invariably have tied international aid to what they perceive as the development thinking and approach needed for the economic and human development of developing countries. Apparently, international aid did not start with developing countries per se. It started with impoverished or struggling countries which were constrained in meeting the needs and aspiration of their people.

In the 1930s, the Great Depression of many of the now developed countries was a great development challenge and this was exacerbated by non-competitive trading practices. Thus, after World War II, their ability to trade was eroded—making their recovery severely difficult. This set in motion an international diplomatic process that laid the foundation for an international aid system. The efforts on international aid began during and after World War II when the economies of Western Europe and the Soviet Union were at the apogee of their decline. International aid became the means to help these countries tackle their declining economies and spur them back towards prosperity. The first evidence of international aid in the twentieth century was the US Marshall Plan of 1947, or the European Economic Recovery Program, which was aimed at helping Europe recover from the vagaries of World War II (International Monetary Fund [IMF], website, 2013). Following this, the IMF and the International Bank for Reconstruction and Development (World Bank) were formed. The IMF was conceived in 1944 by representatives of 45 countries. They identified the IMF as a key multilateral agency necessary for providing a “framework for international economic cooperation.” The IMF formally came into being in 1945 and began operations in 1947. Subsequently, as many African countries and other developing countries became independent in the
1950s and 1960s, they joined the IMF. This was the foundation that consolidated the whole architecture of international aid.

However, for developing countries, international aid started during colonization when colonial masters transferred capital and manufactured goods into their colonies. According to Aid Watch, “Aid money from the colonizers to their colonial governments, usually in the form of loans, was never enough for genuine economic development; instead it usually benefitted urban elites and colonial business interests.” Since then, there have been several changes. The first sign of such international aid occurred in Venezuela in 1812. This stemmed from US overseas food assistance and attempts “to serve donor commercial or political objectives (illustrated, beginning in 1896, by the conscious use of US food surpluses for market development)” (Hjertholm and White, 2000: 4). The United Kingdom also used international aid to leverage their economic and political interests in their colonies. They “allowed for loans and grants for infrastructure, the purpose of which was explicitly seen as obtaining inputs for British manufacturing” (Ibid.: 4). Table 2.1 presents a summary of international aid trends and their connection to development thinking since the 1940s.

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<table>
<thead>
<tr>
<th>Period</th>
<th>Dominant or rising institutions</th>
<th>Donor ideology</th>
<th>Donor focus</th>
<th>Types of aid</th>
</tr>
</thead>
<tbody>
<tr>
<td>1940s</td>
<td>- Marshall Plan and UN system (including World Bank)</td>
<td>- Planning.</td>
<td>- Reconstruction.</td>
<td>- Marshall Plan was largely program aid.</td>
</tr>
<tr>
<td>1950s</td>
<td>- United States, with Soviet Union gaining importance from 1956.</td>
<td>- Anti-communist, but with role for the state.</td>
<td>- Community Development Movement (CDM).</td>
<td>- Food aid and projects.</td>
</tr>
<tr>
<td>1960s</td>
<td>- Establishment of bilateral program.</td>
<td>- As for the fifties, with support for state in productive sectors.</td>
<td>- Productive sectors (e.g. support to the green revolution) and infrastructure.</td>
<td>- Bilaterals gave technical assistance (TA) and budget support; multilaterals supported projects.</td>
</tr>
<tr>
<td>1970s</td>
<td>- Expansion of multilaterals (especially World Bank, IMF and Arab-funded agencies).</td>
<td>- Continued support for state activities in productive activities and meeting basic needs.</td>
<td>- Poverty, taken as agriculture and basic needs (social sectors).</td>
<td>- Fall in food aid and start of import support.</td>
</tr>
<tr>
<td>1980s</td>
<td>- Rise of NGOs from mid-eighties</td>
<td>- Market-based adjustment (rolling back the state)</td>
<td>- Macroeconomic reform.</td>
<td>- Financial program aid and debt relief.</td>
</tr>
<tr>
<td>1990s</td>
<td>- Eastern Europe and FSU become recipients rather than donors; emergence of corresponding institutions.</td>
<td>- Move back to the state toward end of the decade.</td>
<td>- Poverty and then governance (environment and gender passed more quickly).</td>
<td>- Move toward sector support at end of the decade.</td>
</tr>
</tbody>
</table>

Source: Hjertholm and White (2000, 8-9)
Riddell notes that “development [international] aid architecture has evidenced a lot of changes from its colonial era, when the aid was delivered from ruling government to their colonies, to partnership based approaches between rich developed countries and poor developing countries over a period of time” (2007: 25). Beyond the 1990s, these dynamics changed. International aid has encompassed all the actors in Table 2.1, as well as new actors emerging from south-south cooperation. The prominent ones among these are BRIC — Brazil, Russia, India and China. The 2000s to date have focused on poverty reduction, human development, aid effectiveness and global partnerships. This is different from the 1990s where the focus was on sector support aid interventions. The concentration on multi-dimensional development will continue to be a core part of the international aid agenda. However, as international aid has evolved with the predominant issues and thinking across the globe, sustainable development and climate change will also become a core part of the new international aid processes and frameworks in the decades after the 2010s (Figure 2.1).

**Figure 2.1 Donor Focus in International Aid since the 1940s**

Source: Author’s own illustration, 2014 (using Hjertholm and White, 2000: 8-9)
Currently there are three main types of international aid to developing countries. The first, which has been discussed in some detail, is the ODA. The other two do not come from governments of developed countries. The first of the two is the “private philanthropy and the other is from government, or official, assistance from countries that are not members of the OECD […] DAC, such as countries in the Arab League and emerging economies like China, India and Brazil,” These are known as “new development partners” of developing countries (Brain 2012: 54). The new development partners represent current thinking in development partnerships and a direction of south-south cooperation contrary to north-south cooperation. BRICS (Brazil, Russia, India, China and South Africa), for instance, is such a new development in south-south cooperation.

These shifts are spurred by two main factors. Firstly, these emerging countries are growing economically and see themselves as a force in the global economic architecture. They cannot, however, be considered as “developed countries” nor can they be considered as wholly “developing countries.” Nonetheless, they now present a huge force in the global economy. Secondly, the economic growth of these countries has occasioned a rise in the demand for resources such as energy, water, timber and other natural resources. To be able to sustain their growth, they are forging new partners in developing countries to be able to have access to these resources. China, for instance, is increasingly penetrating the African market and forging ties with countries to explore natural resources in exchange for international aid. “Indeed, emerging partners do not benefit all African countries. “While oil-rich and mineral rich countries have benefited disproportionately, others — especially, those that do not have diplomatic links with China — have hardly benefited at all” (African Development Bank, OECD, UNDP, UNECA, 2011: 96). China has become a critical part of these new partnerships because it tends to offer “flexible” terms for countries, especially where the mainstream international aid sources are reluctant to come in. Thirdly, there is a realization that South-South cooperation has huge potential for enhancing the development of developing countries. In the African Economic Outlook of 2011, the African Development Bank (2011) and the IMF
(2011) both see this new partnership as an opportunity to enhance trade and help developing countries diversify their economies.

The sources of international aid can therefore be deduced from the various types of aid. The first source comes from governments who transfer finance to support development programs and projects in developing countries. These include OECD\textsuperscript{4} members and the new development partners of China, India, Brazil and the Arab League. These countries work on a bilateral level through ministries and agencies dedicated to fostering their international interests. These include the Danish International Development Agency (DANIDA), Swedish International Development Cooperation Agency (SIDA), and Canadian International Development Agency (CIDA), Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH for the German Government (GTZ), United States Agency for International Development (USAID), the UK’s Department for International Development (DFID), Japan International Cooperation Agency (JICA), and many others. Although bilateral aid seems to be mostly concerned about how aid flows promoted “commercial export opportunities, propped up certain governments, promoted stability in strategically important countries, ensured support in international forums” (McGillivray, 2004: 1), they have nevertheless encouraged several human and economic projects that have had impact on water, sanitation and education in many developing countries.

The second source of international aid is from multilateral organizations. Brian (2012) identifies these agencies as encompassing development banks such as the World Bank, the African and Asian Development Banks; the International Monetary Fund; the United Nations and its agencies such as the World Health Organization (WHO), World Trade Organization (WTO), United Nations Development Program (UNDP), United Nations World Food Programme (WFP), United Nations Educational,  

\textsuperscript{4} The members of the OECD are: Australia, Austria, Belgium, Canada, Chile, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Ireland, Israel, Italy, Japan, Korea, Luxembourg, Mexico, the Netherlands, New Zealand, Norway, Poland, Portugal, Slovak Republic, Slovenia, Spain, Sweden, Switzerland, Turkey, United Kingdom, and United States (OECD, 2013).
Scientific and Cultural Organization (UNESCO), United Nations Industrial Development Organization (UNIDO), United Nations Children's Fund (UNICEF), United Nations Human Settlements Programme (UN-HABITAT), United Nations Environment Programme (UNEP), Office of the United Nations High Commissioner for Refugees (UNHCR), United Nations Conference onTrade and Development (UNCTAD), United Nations Population Fund (UNFPA), etc.; international or continental associations such as the European Union (and European Commission); and global funds that aim to promote development worldwide. These multilateral organizations are owned by member states who contribute financially to these organizations through pledges to support both development in key places and key issues around the globe. The strength with this kind of aid is that it eliminates the branding of the given countries by pooling the resources together into one basket. Subsequently, it provides an opportunity to promote global efforts and not necessarily the individual interests of the different members.

The third group encompasses non-governmental organizations (NGOs). These range from for-profits to non-profits, to religious organizations, civil rights organizations and grass-roots organizations, among others. These NGOs raise funds from governments, multilateral organizations, the private sector and philanthropic organizations and channel these resources into development projects and programs in developing countries. There are also private philanthropic organizations and foundations that promote development in developing countries. These include the Gates Foundation, the Ford Foundation, the Mo Ibrahim Foundation, and many others. All of these have contributed in some way to the development trajectory of developing countries, particularly by providing humanitarian services.

2.2 Guiding Principles and Declarations

Three main principles influenced international aid in the early years after World War II. Robinson and Tarp (2003) explain that the fundamental principles for international aid intervention were altruism; political ideology, foreign policy, and commercial interests, as well as economic development. Altruistic actions, based on humanitarian concerns, hugely influenced the role of donor agencies in developing
countries. Their motive was to help ameliorate the poverty and inequality challenges that were pervasive in newly independent countries across the globe. The second principle was influenced by the global competition between capitalism and communism, and international aid was used as a means for creating allies in the developing world. In addition, many developed countries saw this as a means of expanding their markets and creating fertile grounds for economic transactions between donor countries and resource rich countries. This underpinned much tied international aid to developing countries as it ensured that the economic interests of donor countries were perpetuated. Lastly, the third principle is that international aid was seen as providing the necessary capital to spur economic development in many developing countries. Donor countries were of the view that many developing countries did not have the necessary development financing to spur development, and, thus, international aid was a cogent avenue for raising the needed funds to fight poverty and promote prosperity.

The nature of these principles has evolved. Indeed, international aid has increasingly been criticized for its role in reducing poverty and promoting development, which is part of this evolution. While many discussions see international aid as the problem, many others have argued that it is still a cogent factor for promoting development in developing countries as it provides alternative resources to foster and finance necessary development interventions. Secondly, the decline in communism around the world, and the increase in democratic dispensations, mean that the fundamental arguments are changing. Now, the argument is neither adopting communism nor capitalism. The argument is how to promote development as many countries have already achieved democratic and capitalist dispensation, and, yet, development eludes many. Altruism continues to persist. As a matter of fact, the challenges of population growth, urbanization, climate change, natural disaster, and global terrorism and conflict have become a fundamental concern for international aid in the twenty-first century.

The development challenges that continued to persist unabated in the 1990s led to several global events. They drove efforts towards achieving global development and poverty reduction by the last decade of the
twentieth century. Thus, by 2000, a global agenda for poverty reduction was reached. This came to be known as the Millennium Declaration. The United Nations subsequently made a clarion call for increasing aid allocations to developing countries. The agency saw this as one of the critical conditions for a global transformation in development effectiveness. However, this rejuvenated the debate on aid, and critics such as William Easterly and Stephen Brown began to question again the effectiveness of international aid.

In the last decade — from 1990 to 2000 — before the Millennium Declaration, African and Asian countries were impoverished despite continuous allocations of aid. The 1997 World Development Report by the World Bank indicated that globally, the rich had stayed richer and the poor continued to be impoverished. Africa was home to the greatest number of countries which were poor, and Asia was home to the greatest number of people who were poor (World Bank, 1997). Thus, the call to increase international aid was met with severe skepticism. In response to this skepticism, there emerged a global consensus to improve aid interventions so that they would better promote development and reduce poverty in developing countries.

In 2005, the Paris Declaration on Aid Effectiveness came into being. This was part of the efforts of the Millennium Development Declaration, which was proclaimed in 2000 “to making the right to development a reality for everyone and to freeing the entire human race from want” (United Nations, 2000: 4). Following the debate that resurfaced and the concerns from donor partners and developing countries about the then current aid architecture, a global consensus was reached to reform the structure of international aid. In Paris, on March 2, 2005, ministers of developed and developing countries and representatives of bilateral and multilateral aid agencies resolved “to take far-reaching and monitorable actions to reform the ways we deliver and manage aid” (OECD, 2005: 1). The OECD intimates that “The Paris Declaration marks an unprecedented level of consensus and resolve to reform aid to make it more effective at combating global poverty” (2006: 50). Indeed, it did. Several commitments were made in
relation to “Scale up for more effective aid;” “Adapt and apply [aid] to differing country situations;” “Specify indicators, timetable and targets [on commitments];” and “Monitor and evaluate implementation [of commitments on aid effectiveness]” (OECD, 2005: 2).

Five core principles emerged from the Paris Declaration on Aid Effectiveness. These are:

1. **Ownership:** Developing countries set their own strategies for poverty reduction, improve their institutions and tackle corruption.
2. **Alignment:** Donor countries align behind these objectives and use local systems.
3. **Harmonization:** Donor countries coordinate, simplify procedures and share information to avoid duplication.
4. **Results:** Developing countries and donors shift focus to development results and results get measured.
5. **Mutual accountability:** Donors and partners are accountable for development results.

There is hope in the Paris Declaration to spur some rejuvenation and transformation in the global aid architecture and, particularly, on aid effectiveness. First, it emerged from a global consensus and places moral and diplomatic obligations on both developed and developing countries as well as bilateral and multilateral aid agencies. By providing a framework for achieving this transformation, all actors can be examined on the progress being made in achieving the five core principles. Indicators were also identified to shape the assessment of progress. This serves as a mutual accountability framework for all actors.

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In a follow-up meeting in 2008 in Accra, international aid actors met to strengthen and deepen the implementation of the Paris Declaration. At this meeting, the Accra Agenda for Action, actors took stock of the progress in achieving the targets and came to the conclusion that three core principles still needed improvement: ownership, inclusive partnership, and delivering results. However, two more principles were introduced: inclusive partnership and capacity development. The former emphasized the need for all actors in the aid industry to participate fully in the delivery of aid and to ensure that aid effectiveness is attained. The latter stressed that international aid allocation was inherently dependent on the capacity of countries and their national and local agencies to manage the aid allocations, and, most especially, their ability to control and direct their own process of development for a prosperous future. This includes making the right decisions about development programs and projects, policy decisions and the effective and efficient implementation of development policies, programs and projects.

Despite the great intentions and enthusiasm that characterized the Paris Declaration and the Accra Agenda for Action, little progress was made. This is not to say that no progress has been made. As the Co-Chairs on the “Working Party on Aid Effectiveness” carefully put the issues:

> In most respects, the answer is clear: some progress has been made, but globally, donors and developing countries have fallen short of the goals that they set themselves for 2010. Many of the reforms needed to reach these goals were understood to be ambitious, though for most, they are still within reach. The Paris Declaration and the monitoring process documented in this report have made an important contribution to development partnerships. They have placed greater emphasis on transparency, and helped set out norms for demand-driven aid. Many of the efforts made by developing countries have the potential to change not only the way aid is managed, but can have much wider-reaching impact on institutions and, in turn, development results. Donors should recognize the progress made by partner countries and sustain and deepen their support. (OECD, 2012: 3)

Specifically, “while many donors and partner country governments have made progress towards the targets that they set themselves for 2010, few of them have been met” (OECD, 2012: 17). By 2010, the
deadline for achieving the 12 targets set out in the Paris Declaration in 2005, only one target was met: strengthening capacity by coordinated support, measured as a percentage of technical co-operations implemented through coordinated programs consistent with national development strategies. While some targets were closer to being achieved, others were not. Chandy (2011) argues that this is evidence of the general apathy of global development where standards are set, commitments are made but little is achieved or fulfilled. These tend to give impetus for aid skeptics to be critical of international aid. To them these are just “ineffectual talking shops” (Chandy, 2006: 1). This is a bad reflection on global actors of international aid— especially donor agencies. This demonstrates the low commitment to restructuring the aid architecture and the global efforts towards global development where donor agencies have greater control over resources than recipient countries.

2.2.3 The Aid Debate: Is Aid a “Blessing” or a “Curse”?  
The fundamental issue that underpins the aid debate has been and continues to be the issue of “aid effectiveness.” Stern et al. define the term as an “Arrangement for the planning, management and deployment of aid that is efficient, reduces transaction costs and is targeted towards development outcomes including poverty reduction” (2008: vii). The fundamental question has remained whether aid is effective in promoting development and reducing poverty in developing countries. Two schools of thought are associated with this debate. They include Jeffery Sachs, Roger Riddell, Thomas Billion, the United Nations and, recently, Bill Gates, on the one hand, and Teresa Hayter, William Easterly, Stephen Brown, Jonathan Glennie, Yash Tandon and Dambisa Moyo, on the other. To appreciate the context within which these arguments are adduced, there is a need to first tackle the whole idea of aid effectiveness, which in recent years has seen a “growing focus […] on improving our understanding of the conditions that enable aid to work (Brian, 2012: 76).” The subsequent section focuses on this.

For starters, Doucouliagos and Paldam (2009) and Nissanke (2010) espouse that much of the international aid debate is a reflection on aid ineffectiveness and current insurgence of the notion of “aid fatigue — a
concept that refers to “a situation where aid from developed countries either fails to increase, or decreases” due to financial constraints on the part of giving countries and a lack of evidence on the impact of aid being relevant in leading to development (JICA, 2003: 224). This presents two implications for the recently increased aid debate. The first has to do with intensifying the demand for development results and accountability, and the second with the increasing budgetary constraints of many donor countries and agencies (DAC, 2001).

Developing countries and their development partners (stakeholders of global development) appreciate that aid discussions should not only emphasize the quantum, but also the quality of aid. In other words, “aid effectiveness is not only about “how much aid” but also “what it [aid] achieves” (Brain 2012: 16). The loop between aid allocation and what it achieves is well captured by Bourguignon and Sundberg (2007) conception of the “black box.” They argue that to be able to appreciate the connection between international aid and development outcomes (i.e., the resultant aid effects), one need to “open the black box” by asking such questions: “was the objective ill-defined, the service delivery inefficient, bureaucratic measures inadequate, or was money diverted?” (Ibid.: 318).

This places an obligation on development actors to appreciate the broader agenda and mechanism of international aid, global development and poverty reduction by redefining “the relationship between donor and recipient countries as a partnership” (Brian: 105). Bourguignon and Sundberg argue that “Peering inside the ‘black box’ linking aid to development outcomes helps clarify three relationships about which much is known: from donors to policy makers; policy makers to policies; and from policies to outcomes” (2007: 320). This is not an easy task.

Firstly, context matters. Development mechanisms and relationships differ across countries and among donor partners making the understanding of these relationships very complex. In addition, priorities, interests and ideologies of developing countries and their partners are many times divergent.
Subsequently, developing such a partnership will take some time, but the first decade of the twenty-first century has seen dramatic efforts towards achieving this. The fundamental influencing factor is the awareness that “the true test of aid effectiveness is improvements in people’s lives” (OECD, 2007: 9), and the increasing literature backing the linkage between effective aid practices and development effectiveness.

This can be measured in several ways. Two frameworks come to the fore. The first, which has already been discussed, is the Paris Declaration on Aid Effectiveness. The second is a new tool from the Brookings Institution and the Center for Global Development, i.e., the Quality of Official Development Assistance assessment (QuODA). The tool examines effective aid on four dimensions: maximizing efficiency; fostering institutions; reducing burden, and transparency and learning. These two frameworks provide a cogent basis to hold both recipients and givers on aid accountable in promoting global development and reducing global poverty. Despite these processes, the debate lingers. In the subsequent sections, the claims of the two schools of thoughts are discussed.

2.2.4.1 International Aid as a “Curse Argument”

The critique of the role of aid in development has mainly focused on bilateral and multilateral aid, and, until recently, aid provided by NGOs. William Easterly, Dambiso Moyo, Yash Tandon, Teresa Hayter, and Stephen Brown feature prominently as the opponents of aid. In most of the discussion, they do not see international aid as a curse in itself, but they are concerned about the framework of their allocation and utilization, i.e., the architecture of aid or the “aid machine.” The argument is that aid allocations promote development ineffectiveness and continue to undermine the development of national capacities in developing countries to solve development problems.

Stephen Brown, in his book Aid and Influence: Do Donors Help or Hinder? (2006), argues that international aid interventions are mostly not adequately planned. In most cases, Brown intimates, they
are allocated to countries that are better placed on the development ladder than those who are more impoverished. The thesis rests on the fact that the distribution of aid to developing countries is not proportionate to the levels of aid. Apparently, 75 percent of those living in poverty are in Least Developed Countries (LDCs), but aid allocations to these countries constitute 40 percent of all aid (Brown, 2006).

For most of the first decade of the 21st century, aid allocation to LDCs increased consistently, especially between 2005 and 2011 when aid allocation from ODA increased from US$ 25.9 billion to US$ 44.6 billion (with the exception of 2009 when aid to LDCs declined by 1.1%). In 2012, however, the OECD (2013) observed “a noticeable shift in aid allocations away from the poorest countries and towards middle-income countries.” For instance, in 2012 bilateral net ODA to the LDCs fell by 12.8% to about US$ 26 billion (Ibid.). Despite the clarion call, the phenomenon still persists.

Another argument against international aid is that it is the cause of the continuous impoverishment and decline of development in developing countries. This argument is espoused by Dambisa Moyo. In her book, *Dead Aid: Why Aid is Not Working and How There is Another Way for Africa* in 2009, she argues that international aid by design is negative and has made development efforts worse in developing countries. Moyo sees international aid as the problem of development in developing countries, which limits developing countries from structurally transforming their economies. Moyo also contends that Africa is so often seen as marginalized and “condemned” and thus is incapable of spear-heading her own development. To her, Africa has come a long way. As such, the aid architecture should take cognizance of the change in times; where Africa has evolved to attain the necessary capacity to understand and prescribe for her, the necessary development interventions that are needed for promoting development and reducing poverty. For Moyo, the way forward for Africa, and for that matter other developing countries, is to rely on borrowing from the international capital markets, micro finance, and remittances and move away from “systemic foreign [international] aid” (Whitefield, 2009: 7).
William Easterly makes similar arguments. In his book, *The White Man's Burden: Why the West's Efforts to Aid the Rest Have Done So Much Ill and So Little Good*, in 2007, Easterly argues that international aid is “self-serving” and “has caused so much ill and so little good.” He observes that international aid interventions are bureaucratic, rigid and inflexible to changing development circumstances. As such, it takes too long for prescriptions to be modified when the fundamental assumptions informing these aid interventions change. This makes prescriptions irrelevant and non-responsive to the development needs of many developing countries over time — particularly when most of these interventions span several years. These two observations are confirmation of an earlier observation made by Teresa Hayter in 1971. In her book, *Aid as Imperialism*, she makes the argument that the international aid architecture creates conditions that paralyse the efforts of governments in developing countries to promote human development. To Hayter, the fundamental assumption is that informed international aid architecture and development prescriptions are flawed and do not take into consideration the inherent dynamics of developing countries. The prescription of “best practices” or the “one fit for all” approach has undermined many developing countries by constraining their efforts towards defining their unique path to economic and human development.

Lastly, Yash Tandon’s 2008 book, *Ending Aid Dependency*, argues that aid is derailing the international focus on and discussion of the key matters of human impoverishment. Tandon notes that the issue that should be at the center is development and not international aid. Though this may have already taken place with the global agenda on poverty and development in 2000, his focus reaffirms the process and reminds the world of the importance of the development debate. To Tandon, like Hayter, international aid is imperialistic and undermines national policies and efforts of development and poverty reduction. One important point he proffers is the need to understand the dynamics of international aid politics and their effects on politics in Africa. To him, aid is complex and different across the many actors. To be able to make aid a development tool and not an imperial tool, there is the need to understand the different forms
of aid, how they are transacted, and their impacts on national policies if aid is to be a blessing for developing countries.

2.2.4.2 International Aid as a “Blessing Argument”

For many advocates of international aid, the critiques are misplaced, especially the outright condemnation of international aid. To this constellation, the relevance of international aid must be placed in the right context. What are the types of aid and their purpose? What are the causes of development? How is aid utilized by national governments? What are the impacts of aid specific projects and programs? To these advocates, to judge international aid, one must do so in terms of the specific goals and objectives that international donors are supposed to achieve and within the different contexts.

The first question, for instance, notes the different roles the different types of international aid play in the global economy. International aid for humanitarian purposes provides the only avenue for people exposed to natural disasters such as flooding, earthquakes, bush fires, drought, etc. and conflicts to have access to food, shelter, water, and a path towards self-recovery and development. The United Nations (2013) indicates that the number of people who are displaced by natural disasters and conflicts continues to rise. In many cases, there is little provision to support the displaced. Humanitarian aid in many cases is the only available support available to protect these individuals from the vagaries of weather and to provide them with the basic necessities of life.

Another argument for international aid is to examine the causes of poverty. To suggest that international aid leads to poverty and reducing national efforts towards development processes is to omit several arguments. In 2010, the United Nations Development Programme Human Development Report focused on “multidimensional poverty.” In this, they examined and consolidated debates on poverty since the 1990s, where housing, education, water and sanitation, health, the environment, politic, and economics were seen as critical factors that cause poverty or promote development. Specifically, the notion of
development being equal to economic growth was discredited, although economic growth is seen as a strong avenue to facilitate human development. As such, to implicate international aid as the only cause of the economic and development backwardness of developing countries, such as in the arguments put forward by Dambiso Moyo, is misplaced.

Whitfield notes that many developing countries, including Africa, are faced with several economic development challenges as late “industrializers” (2009: 7). The challenges that occurred for the developed countries do not exist in a similar manner today. The challenges of economic development have evolved and have become more complex, globalized and technological. As such, promoting economic development, for instance, should be analyzed within national and global contexts as well as in a multi-disciplinary way. Jeffrey Sachs’ book, *The End of Poverty*, which appeared in 2005, Paul Collier’s book, *The Bottom Billion*, from 2008, and Thomas Pogge’s Book published in 2008, *World Poverty and Human Rights*, all conclude that international aid, despite its limitations, has facilitated increased understanding of the complexities and limitations of development interventions. This, they argue, has subsequently influenced creativity, critical thinking and a broader perspective on how to promote human development at the local, national and global level.

To this end, international aid is not the panacea for all the development challenges in developing countries. In many cases, it only constitutes one of the many conditions that are necessary for national governments to promote development and reduce poverty. National capacities to raise internal revenue, develop the necessary institutional framework for governance, corruption, political instability and many others are critical factors that shape the development process — and not only international aid. International aid only offers an opportunity for developing countries to support their development effort, and it can only be effective when these national systems have been adequately developed. European countries, Japan, Singapore, Malaysia, and South Korea have all depended on international aid for their development. The question, therefore, is not whether aid promotes impoverishment; it is a matter of what
are countries doing wrongly or rightly to optimize this potential. Roger Riddell presents some of the critical factors and questions in his 2008 book, Does Foreign Aid Really Work? He gives evidence on how aid has promoted human development in many developing countries in terms of access to education, health care, welfare, agriculture and many more.

It must also be realized that the process of development in many developing countries only began consistently in the early 1980s. Based on the history of developed countries, it must be said that developing countries are fast making progress though there is a need to step up efforts in the face of knowledge and increasing resource potential. To do this is to move from the over simplification of the development process. For international aid, it becomes even more critical as aid efforts are mostly tied or conditional. The role of international aid, accordingly, is better understood and appreciated within this context. Thus, the central question in the international aid debate should change. Robinson and Tarp put the question rightly, “The issue is not whether aid ‘works’, but how, and under what circumstances” (2005: 2).

2.3 The MDG Agenda

The first drastic effort in international aid in the 21st century is the Millennium Declaration and the Millennium Development Goals (MDGs) that emerged subsequently. The section of the chapter presents an overview of the MDG Agenda.

2.3.1 Background of the MDG Agenda

At the Millennium Summit in September 2000, the largest gathering of world leaders in history adopted the UN Millennium Declaration, committing their nations to a new global partnership to reduce extreme poverty and setting out a series of time-bound targets — with a deadline of 2015 — that have become known as the Millennium Development Goals. The Millennium Development Goals (MDGs) are the world's time-bound and quantified targets for addressing extreme poverty in its many dimensions-income poverty, hunger, disease, lack of adequate shelter, and exclusion-while promoting gender equality,
education, and environmental sustainability. They are also basic human rights—the rights of each person on the planet to health, education, shelter, and security.\(^7\)

The process leading to the adoption of the MDG Agenda spans over a decade of deliberations and negotiations between bilateral and multilateral aid agencies. Prominent among these agencies are the OECD and the United Nations. These two organizations come from different ideologies on how development and poverty reduction should be promoted.

Historically, efforts on the global acceptance of an international or global agenda for human development began immediately after World War II. The first effort towards a global consensus is related to the United Nations Universal Declaration of Human Rights (UDHR) of December 10, 1948. Though there have been several such declarations on human development and global advocacy towards poverty reduction, Hulme argues that “with the exception of the UDHR none of these moved much beyond the ‘aspirational’ stage” (2007: 4).

The processes leading to the actualization of the MDGs started in the 1990s (Hulme, 2007; 2009). A series of United Nations summits led to the development of sector wide global development agendas that created a good foundation for a global consensus on development and poverty goals. In 1990, the World Development Report placed emphasis on global poverty. The report began a process to track poverty in various countries around the world. Although the earlier World Development Reports had emphasized poverty and their dynamic connections to human development (World Bank, 1978; 1980), there was an over emphasis on economic and capital development. The 1990 report, however, set in motion a new direction that began to place social development at the core of poverty reduction, and the recognition that the strategy for poverty does not depend only on economic development strategies or policies. This, in a way, identified poverty not only as an economic phenomenon but also a social one. More impetus for a

new orientation of poverty and development was provided by the 1990 Human Development Report, which saw development as “enlarging people’s choices” (UNDP, 1990: 1). The report noted that “The most critical of these wide-ranging choices are to live a long and health life, to be educated and to have access resources needed for decent standard of living. The report also acknowledged choices related to political freedom, human rights and personal self-respect” (Ibid.: 1).

These two reports provided a context to which “United Nations agencies as well as the international, national and local non-governmental organizations could make reference to for their advocacy and interventions” (Hulme, 2007: 4). From this awareness, there was momentum from United Nations agencies on building an international consensus to drive efforts to promote this ideology of development and to push for global goals that would allow governments, bilateral and multilateral agencies to commit to. The World Summit for Children in New York in 1990, the Earth Summit in Rio in 1992, the World Conference on Human Rights in Vienna in 1993, the International Conference on Population and Development (ICPD) in Cairo in 1994, the World Summit on Social Development in Copenhagen and the UN Fourth World Conference on Women in Beijing, both in 1995, drove the initial global consensus process on a sector-wide dimension. In all these conferences, goals related to child development, environment, empowerment of women, population, and human rights issues were espoused and discussed. Overall consensus was still gathering the needed momentum.

Beyond 1995, two main contributions laid the foundation for the adoption of the MDG Agenda. The Development Assistance Committee (DAC) of OECD’s idea of “international development goals” presented in “Shaping the 21st Century: The Contribution of Development Co-operation” in 1996, were subsequently endorsed in G7 ministerial meetings and buy-in in 1996, 1997 and 1998 (Bradford 2002; 5). The second came from the United Nations under the auspices of the Secretary General at the time when “We the People: the Role of the United Nations in the 21st Century” was published in April 2000. These two documents had placed emphasis on different goals, and this set in motion a series of deliberations and
negotiations to harmonize these goals. The outcome was the publication of “A Better World for All (BWFA): Progress towards the international development goals,” from the four major multilateral agencies—namely the United Nations, OECD, IMF, and the World Bank (BWFA, 2000). The report focused on seven areas: poverty, education, gender equality, infant and child mortality, maternal mortality, reproductive health and environment. The goals related to these issues “from the agreements and resolutions of the world conferences organized by the United Nations in the first half of the 1990s. These conferences provided an opportunity for the international community to agree on steps needed to reduce poverty and achieve sustainable development” (BWFA, 2000: 4).

This subsequently formed the basis for the Millennium Declaration in 2000. On September 8, in New York, the United Nations Millennium Declaration was adopted as the foundation on which the MDGs would evolve. The Declaration was signed by leaders of 189 countries who assembled at the last day of the General Assembly (Saith, 2006)8. At the core of this declaration was a global commitment to reducing poverty and promoting global development. In the declaration, the countries and their development partners resolved to work in partnership to promote: peace, security and disarmament; development and poverty eradication; protecting the environment; human rights, democracy and good governance; protecting the vulnerable; meeting the special needs of Africa; and strengthening the United Nations (United Nations, 2000). It was not until 2001 that the list of goals known as the MDGs came into being. This was presented in the “Road map towards the implementation of the United Nations Millennium Declaration (United Nations, 2001).” The report focused on Section III of the resolutions that were reached on the Millennium Declaration in 2000. The United Nations indicates that the consensus between the four multilateral agencies of the world have “discussed the respective targets and selected relevant indicators with a view to developing a comprehensive set of indicators for the millennium development goals. The main reference document was Section III of the United Nations Millennium Declaration,

‘Development and poverty eradication’” (2001: 55). It was within this document that the various Millennium Development Goals and indicators were outlined. This was the United Nations General Assembly Resolution for the fifty-sixth session, which was held on September 6th, 2001. This called on developed and developing countries to partner in the effort to fight global poverty and human impoverishment.

After the adoption of the resolution, there have been several critiques of the agenda for human development. Indeed, the approach lays an ambitious foundation and focuses on a global effort towards poverty reduction and the advancement of human development (United Nations, 2005). Furthermore, the United Nations argues that:

The Millennium Development Goals are too important to fail. For the international political system, they are the fulcrum on which development policy is based. For the billion-plus people living in extreme poverty, they represent the means to a productive life. For everyone on Earth, they are a linchpin to the quest for a more secure and peaceful world. (2005: 2)

Placing poverty and human development at the core of international and national efforts allowed for the dedication of resources to mitigating poverty and promoting human development. Akin to this observation, Sachs (2005) and Fukuda-Parr (2008) conclude that the MDGs are a blueprint for the transformation of the human condition. Saith, on the other hand, intimates that “They envelop you in a cloud of soft words and good intentions and moral comfort; they are gentle, there is nothing conflictual in them; they are kind, they offer only good things to the deprived” (2006: 1167).

After the declaration in 2000 and the adoption of the goals in 2001 by the United Nations General Assembly, there have been frantic efforts to make this effort the “world’s biggest promise” to reduce
poverty and promote human development. In 2002, the International Conference on Financing for Development in Monterrey in Mexico and the World Summit on Sustainable Development in Johannesburg, South Africa affirmed the partnership and commitment between developed and developing countries in adopting the MDGs as a framework to fight against global poverty.

Despite the good intentions, the consensus and the drive to reduce global poverty, the MDG suffers challenging criticism as to the efficacy of the design of the agenda. This has raised pessimism among some international development experts. Saith, for instance, argues that the MDGs are merely words of “good intentions” and provides “moral comfort” in the efforts against global poverty (2006: 1167). Clemens et al. (2007) and Easterly (2006) argue that compared to other global development and poverty tracking frameworks, such as the Human Development Report and World Development Report, the MDGs are not comprehensive, and were rushed with inappropriate targets. To them, as a result, it distracts global efforts from “more appropriate targets […] and more effective policies and actions” (Hulme, 2009: 4).

2.3.2 Scope of the MDG Agenda

The MDGs are a multidimensional concept of development and poverty that moves beyond economic tendencies to include the absence or inadequacy of human capabilities to satisfy needs and aspirations. There are eight goals, eighteen targets and forty-eight indicators and “have been commonly accepted as a framework for measuring development progress” (United Nations, 2001: 55). The deadline for the achievement of these goals and targets is 2015, with a baseline from 1990 (United Nations, 2000).

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9 Hulme (2009: 1) asserts that The Millennium Development Goals (MDGs) are the world’s biggest promise – a global agreement to reduce poverty and human deprivation at historically unprecedented rates through collaborative action.

The United Nations General Assembly (2001:19) explains that “The millennium development goals are mutually supportive and require multi-sectoral programs that tackle each of the goals simultaneously.” Particularly, they are “a set of numerical and time-bound targets that express key elements of human development. They include halving income poverty and hunger; achieving universal primary education and gender equality; reducing under-5 mortality by two-thirds and maternal mortality by three-quarters; reversing the spread of HIV/AIDS; and halving the proportion of people without access to safe water” (Vandemoortele, 2002: 1).

Since 2001, they have invariably been the yardstick to measure progress towards the mitigation, management and elimination of human deprivation and impoverishment (Rogoff, 2003). Furthermore, “The basic thrust of the MDGs is to make economic growth more inclusive than it has been in the past and to bring all the world’s people to basic standards of health and education that modern technologies make readily feasible” (African Union, 2005: paragraph 7.01). Table 2.2 presents the list of goals, targets and indicators that make up the MDG agenda.

**Table 2.2 Millennium Development Goals (MDGs)**

<table>
<thead>
<tr>
<th>Goals and Targets</th>
<th>Indicators for Monitoring Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Goal 1: Eradicate extreme poverty and hunger</strong></td>
<td></td>
</tr>
<tr>
<td>Target 1.A: Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day</td>
<td>1.1 Proportion of population below $1 (PPP) per day[1]</td>
</tr>
<tr>
<td></td>
<td>1.2 Poverty gap ratio</td>
</tr>
<tr>
<td></td>
<td>1.3 Share of poorest quintile in national consumption</td>
</tr>
<tr>
<td>Target 1.B: Achieve full and productive employment and decent work for all, including women and young people</td>
<td>1.4 Growth rate of GDP per person employed</td>
</tr>
<tr>
<td></td>
<td>1.5 Employment-to-population ratio</td>
</tr>
<tr>
<td></td>
<td>1.6 Proportion of employed people living below $1 (PPP) per day</td>
</tr>
</tbody>
</table>

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36
1.7 Proportion of own-account and contributing family workers in total employment

Target 1.C: Halve, between 1990 and 2015, the proportion of people who suffer from hunger

1.8 Prevalence of underweight children under-five years of age

1.9 Proportion of population below minimum level of dietary energy consumption

**Goal 2: Achieve universal primary education**

Target 2.A: Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling

2.1 Net enrolment ratio in primary education

2.2 Proportion of pupils starting grade 1 who reach last grade of primary

2.3 Literacy rate of 15-24 year-olds, women and men

**Goal 3: Promote gender equality and empower women**

Target 3.A: Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015

3.1 Ratios of girls to boys in primary, secondary and tertiary education

3.2 Share of women in wage employment in the non-agricultural sector

3.3 Proportion of seats held by women in national parliament

**Goal 4: Reduce child mortality**

Target 4.A: Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate

4.1 Under-five mortality rate

4.2 Infant mortality rate

4.3 Proportion of 1 year-old children immunised against measles

Target 5.A: Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio

5.1 Maternal mortality ratio

5.2 Proportion of births attended by skilled health personnel

5.3 Contraceptive prevalence rate

5.4 Adolescent birth rate

5.5 Antenatal care coverage (at least one visit and at least four visits)

5.6 Unmet need for family planning
**Goal 6: Combat HIV/AIDS, malaria and other diseases**

**Target 6.A: Have halted by 2015 and begun to reverse the spread of HIV/AIDS**

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.1 HIV prevalence among population aged 15-24 years</td>
<td></td>
</tr>
<tr>
<td>6.2 Condom use at last high-risk sex</td>
<td></td>
</tr>
<tr>
<td>6.3 Proportion of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS</td>
<td></td>
</tr>
<tr>
<td>6.4 Ratio of school attendance of orphans to school attendance of non-orphans aged 10-14 years</td>
<td></td>
</tr>
</tbody>
</table>

**Target 6.B: Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it**

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.5 Proportion of population with advanced HIV infection with access to antiretroviral drugs</td>
<td></td>
</tr>
</tbody>
</table>

**Target 6.C: Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases**

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.6 Incidence and death rates associated with malaria</td>
<td></td>
</tr>
<tr>
<td>6.7 Proportion of children under 5 sleeping under insecticide-treated bed nets</td>
<td></td>
</tr>
<tr>
<td>6.8 Proportion of children under 5 with fever who are treated with appropriate anti-malarial drugs</td>
<td></td>
</tr>
<tr>
<td>6.9 Incidence, prevalence and death rates associated with tuberculosis</td>
<td></td>
</tr>
<tr>
<td>6.10 Proportion of tuberculosis cases detected and cured under directly observed treatment short course</td>
<td></td>
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</tbody>
</table>

**Goal 7: Ensure environmental sustainability**

**Target 7.A: Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources**

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>7.1 Proportion of land area covered by forest</td>
<td></td>
</tr>
<tr>
<td>7.2 CO2 emissions, total, per capita and per $1 GDP (PPP)</td>
<td></td>
</tr>
</tbody>
</table>

**Target 7.B: Reduce biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss**

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>7.3 Consumption of ozone-depleting substances</td>
<td></td>
</tr>
<tr>
<td>7.4 Proportion of fish stocks within safe biological limits</td>
<td></td>
</tr>
<tr>
<td>7.5 Proportion of total water resources used</td>
<td></td>
</tr>
<tr>
<td>7.6 Proportion of terrestrial and marine areas protected</td>
<td></td>
</tr>
</tbody>
</table>
### 7.7 Proportion of species threatened with extinction

**Target 7.C:** Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation

### 7.8 Proportion of population using an improved drinking water source

### 7.9 Proportion of population using an improved sanitation facility

**Target 7.D:** By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers

### 7.10 Proportion of urban population living in slums

**Goal 8: Develop a global partnership for development**

**Target 8.A:** Develop further an open, rule-based, predictable, non-discriminatory trading and financial system

Some of the indicators listed below are monitored separately for the least developed countries (LDCs), Africa, landlocked developing countries and small island developing States.

**Official development assistance (ODA)**

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.1 Net ODA, total and to the least developed countries, as percentage of OECD/DAC donors’ gross national income</td>
<td></td>
</tr>
<tr>
<td>8.2 Proportion of total bilateral, sector-allocable ODA of OECD/DAC donors to basic social services (basic education, primary health care, nutrition, safe water and sanitation)</td>
<td></td>
</tr>
<tr>
<td>8.3 Proportion of bilateral official development assistance of OECD/DAC donors that is untied</td>
<td></td>
</tr>
<tr>
<td>8.4 ODA received in landlocked developing countries as a proportion of their gross national incomes</td>
<td></td>
</tr>
<tr>
<td>8.5 ODA received in small island developing States as a proportion of their gross national incomes</td>
<td></td>
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</tbody>
</table>

**Market access**

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<table>
<thead>
<tr>
<th>Target 8.C: Address the special needs of landlocked developing countries and small island developing States (through the Programme of Action for the Sustainable Development of Small Island Developing States and the outcome of the twenty-second special session of the General Assembly)</th>
<th>8.6 Proportion of total developed country imports (by value and excluding arms) from developing countries and least developed countries, admitted free of duty</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target 8.D: Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term</td>
<td>8.7 Average tariffs imposed by developed countries on agricultural products and textiles and clothing from developing countries</td>
</tr>
<tr>
<td></td>
<td>8.8 Agricultural support estimate for OECD countries as a percentage of their gross domestic product</td>
</tr>
<tr>
<td></td>
<td>8.9 Proportion of ODA provided to help build trade capacity</td>
</tr>
<tr>
<td></td>
<td>Debt sustainability</td>
</tr>
<tr>
<td></td>
<td>8.10 Total number of countries that have reached their HIPC decision points and number that have reached their HIPC completion points (cumulative)</td>
</tr>
<tr>
<td></td>
<td>8.11 Debt relief committed under HIPC and MDRI Initiatives</td>
</tr>
<tr>
<td></td>
<td>8.12 Debt service as a percentage of exports of goods and services</td>
</tr>
<tr>
<td>Target 8.E: In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries</td>
<td>8.13 Proportion of population with access to affordable essential drugs on a sustainable basis</td>
</tr>
<tr>
<td>Target 8.F: In cooperation with the private sector, make available the benefits of new technologies, especially information and communications</td>
<td>8.14 Fixed telephone lines per 100 inhabitants</td>
</tr>
<tr>
<td></td>
<td>8.15 Mobile cellular subscriptions per 100 inhabitants</td>
</tr>
<tr>
<td></td>
<td>8.16 Internet users per 100 inhabitants</td>
</tr>
</tbody>
</table>

Source: United Nations. Official list of MDG indicators. Available online:

2.3.3 Trends in Global MDGs Achievements

Throughout the implementation of the MDGs, and particularly since 2005, the agenda has come under serious criticism. This has even become pronounced as the 2015 deadline approaches. The fundamental arguments have been directed to whether the whole approach and design of the agenda is adequate for promoting a global effort towards the mitigation and management of global deprivation and impoverishment. The primarily reason of this insurgence is associated with global progress in achieving the targets. By 2005, several assessments and annual reports indicated that slow progress and challenging trajectories in achievements are derailing many countries from possibly meeting the targets by 2015. According to Agenor, the “status of the MDGs in [low income countries] LICs reveals that progress in achieving them has been mixed and slow” (2005: 1520). Most discussions were critical of Africa and, particularly, Sub-Saharan Africa. In 2005, the United Nations (2005), the Blair Commission for Africa (2005), and the World Bank and IMF (2005) all lamented that Africa was the continent furthest behind in achieving the targets.

Although the indicators suggest these trends, this observation has given rise to several questions related to the indicators and tracking frameworks adopted for the MDGs. Easterly (2007), for instance, notes that perhaps the MDGs have not been fair to Africa. According to William Easterly, the choice of indicators in particular ways may make progress look good for some and bad for the rest. Choice of benchmark year, linear and non-linear relationships with time and per capita, absolute changes and percentage changes, change targets and level targets and positive and negative factors, are all issues that can make a country or region look bad or good. This is evident in the UNDP 2003 Human Development Report, which also suggests that certain countries are below the minimum threshold required to meet the MDGs and, therefore, will not meet the target if there were a drastic augmentation of development factors (UNDP, 2003). It will, therefore, be entirely fair to point out challenges without taking into considerations progress and contexts in comparing regions.
Indeed, since the MDGs were declared in 2000, one would think that the benchmark year would be 2000 and not 1990 (Easterly, 2007: 4). This would have allowed for the measurement of effects of the momentum that was generated by the global commitments on countries rather than assessing progress from a retrogressive perspective. The claim that Africa’s performance is worse than other regions is incorrect. This is because some countries, particularly Sub-Saharan Africa, started from a low level of human development and, thus, were catching up on progress made by other regions between 1990 and 2000 (Barimah and Diko, 2013; Easterly, 2007; Vandemoortele, 2011). The contention is not “that Africa is missing the targets.” Rather, “it is the statement that is missing the point; namely Africa will not, cannot, and need not meet the MDGs for the world to meet them” (Vandemoortele, 2011: 12). Adding to these arguments, Clemens et al. note that many of the goals and targets are unrealistic and do not take cognizance of the history that characterizes the trajectory of development in rich and poor countries. In this regard, and based on their argument, the MDGs are a demand on poor countries “to perform at the top end of historical experience” (2004: 3).

Beyond these points, there are also arguments that relate to the capacity of developing countries to promote development. Arguments and frameworks that have been associated with the MDGs have basically argued that the major breakthrough that can be achieved will come from increase international aid. Indeed, international aid allocations contribute to the development process of many countries. Nonetheless, they are by no means a panacea or the main thrust for development in developing countries. Furthermore, international aid allocation is mostly effective when there are available national capacities to utilize international aid effectively, efficiently and strategically. As such, increasing international aid allocations, as has been argued most often in the case of MDGs, understates the relevance and magnitude of the needed policies and framework to achieving the targets by 2015. Subsequently, “By putting a price tag on certain outcomes, calculations from the costing studies reported without attendant caveats create an illusion that any goal can be met, if only the right amount of resources can be mobilized” (Clemens et al 2004: 4). Although the MDGs agenda raises an important need for quantum and effective and efficient
use of international aid, it is imperative to also appreciate that developing countries should create the needed capacity to raise their own resources and to use external resource to promote their development.

From a macro point of view, it seems that the targets for GDP and growth rates receive little attention and, thus, have allowed the international aid debate to center on the policy issues in the implementation process. The multi-dimensional nature of the goals and the indirect reference to economic frameworks has placed little relevance of the role of economic growth and development. Indeed, economic growth is not the destination of development. However, it presents the greatest avenue for global poverty if linked to the other aspects of development. This is the missing link that the MDGs seem to have perpetuated by advocating for direct investments in social development without direct complementary investments in economic development in developing countries.

The World Bank (2005), Agenor (2005) and the German Development Cooperation Agency (2005) confirm this observation. For instance, Agenor (2005) argues that the MDG agenda has not mooted for a tractable quantitative macroeconomic framework that articulates how international aid can be utilized effectively to promote economic growth and development. The linkages between public investment, fiscal measures, balance-of-payments status and international aid are not adequately captured. This, therefore, presents national MDG interventions as a shopping list of projects with little macro and strategic effects on overall national development (German Development Cooperation Agency 2005; Rogoff, 2003; World Bank, 2005).

Despite all this criticism, there have been tremendous results in tackling global poverty and human development. There are successes, which vary across targets, countries and continents. Evidently, there is a mixture of success and failure. Vandemoortele (2011), for instance, describes these trends as good, bad and ugly. In the 2013 Millennium Development Goal Report, the United Nations Secretary General notes that:
Significant and substantial progress has been made in meeting many of the targets—including halving the number of people living in extreme poverty and the proportion of people without sustainable access to improved sources of drinking water. The proportion of urban slum dwellers declined significantly. Remarkable gains have been made in the fight against malaria and tuberculosis. There have been visible improvements in all health areas as well as primary education. (United Nations, 2013a: Forward)

This shows where success has been made. In terms of poverty, the global goal has already been attained. The proportion of the global population living on less than $1.25 a day has declined from 47% to 22% between 1990 and 2010, and fewer than 700 million people live in extreme poverty in 2010 compared to 2 billion in 1990.

There was positive progress in access to potable drinking water and toilet facilities, children out of school, mortality rates from malaria, and maternal mortality rates. Access to potable drinking water increased from 76% to 89% between 1990 and 2010, while 1.9 billion people had access to improved sanitation facilities. The number of children who were out of school declined from 102 million to 57 million between 2000 and 2011. Furthermore, deaths from malaria and maternal mortality fell, with a more than 25% decline in malaria related mortalities between 2000 and 2010. “Globally, the maternal mortality ratio declined by 47 percent over the last two decades, from 400 maternal deaths per 100,000 live births to 210 between 1990 and 2010” (United Nations, 2013a: 4). Despite the gains in child education and access to improve sanitation, progress has not been enough to meet the targets by 2015. The 2013 Millennium Progress Report reveals that several of the targets will not be met by developing countries.

For MDG 1, reducing extreme poverty by half, in North Africa, Eastern Asia, South-Eastern Asia, Southern Asia, Latin America and the Caribbean, and in the Caucasus and Central Asia, the target has either already been met or is expected to be met by 2015. Progress is not, however, adequate in Sub-Saharan Africa, Western Asia, and the Oceana Regions. Furthermore, progress in
halving hunger by 2015 is also a challenge. MDG 1 Target 3 reveals that Sub-Saharan Africa and Southern Asia are not making enough progress to attain the target by the deadline, while the Western Asia and Oceana Regions are not making any progress at all, and are, in some cases, retrogressing (United Nations 2013b). Women’s share of paid employment and women’s equal representation in national parliaments (MDG 3 Targets 2 and 3 respectively) remain a great challenge in all the regions with the exception of Latin America and the Caribbean — and in the Caucasus and Central Asia in the case of MDG 3 Target 2. For MDG 3 Target 1, only the Western Asia and Oceana Regions are not making enough progress to reach the deadline by 2015. Overall, Sub-Saharan Africa will not meet 14 of the 18 targets. They are, however, on track to meet the targets of achieving equal girls’ enrolment in primary school and MDG 6 Target 1, halting and beginning to reverse the spread of HIV/AIDS. Western Asia is making adequate progress in only three targets namely: reducing mortality of under-five-year-olds by two thirds; halting and reversing the spread of tuberculosis, and increasing the number of internet users. The Oceana Region, on the hand, is making adequate progress only in MDG 6 Target 1, halting and beginning to reverse the spread of HIV/AIDS.

In comparison, East Africa is on track to meet all of the targets, with the exception of MDG 3 Target 3, women’s equal representation in national parliaments, where progress is either absent or retrogressive. In addition, progress to halt and begin to reverse the spread of HIV/AIDS (MDG 6 Target 1) is inadequate to meet the 2015 deadline. Table 2.2 presents a summary of how the regions are faring with regard to achieving the targets by 2015.
### Table 2.3 Global Progress in Achieving the MDGs by Regions

<table>
<thead>
<tr>
<th>Regions</th>
<th>NO. OF TARGETS</th>
<th>Already met or expected to be met by 2015</th>
<th>Progress insufficient to reach the target if prevailing trends persist</th>
<th>No progress or deterioration</th>
<th>Missing or insufficient data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Africa</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sub-Saharan</td>
<td>2</td>
<td>14</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Eastern</td>
<td>14</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>South-Eastern</td>
<td>10</td>
<td>6</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Asia</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Southern</td>
<td>7</td>
<td>9</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Western</td>
<td>3</td>
<td>11</td>
<td>2</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Oceania</td>
<td>1</td>
<td>13</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Latin America &amp; the Caribbean</td>
<td>9</td>
<td>7</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Caucasus &amp; Central Asia</td>
<td>8</td>
<td>5</td>
<td>2</td>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>


#### 2.3.4 Factors Affecting Progress in MDG Achievement

One of the major factors associated with slow progress in achieving the MDG targets is inadequate funding and investment in development interventions in developing countries. The arguments are that developing countries are not able to raise enough funds to support socio-economic programs and projects, while commitments from bilateral and multilateral aid agencies have either been erratic or inadequate. Both the quantum and the forms of international aid to developing countries have come under criticism. Rogoff (2003), for instance, argues that there must be more focus on grants rather than international aid in the form of loans if any progress is to be made towards advancing growth and human development. While grants offer developing countries the opportunity to invest in themselves without having to pay back, loans tend to deprive these countries from investing in socio-economic interventions by burdening them with massive debts and debt servicing.

Zedillo (2001) estimates that to reach the MDGs, there is a need for an additional US$68 billion dollars comprising US$50 billion per year in Official Development Assistant, US$3 billion more in
humanitarian aid, and about $15 billion more for “global public goods.” Several other studies also suggest some estimation of the needed investments to meet the MDGs. Devarajan, et al. (2002) estimate that an additional $54-62 billion per year will be needed for the global fight against poverty and an additional $35-75 billion per year to achieve the social and environmental goals. Vandemoortele (2002) estimates an additional $50-80 billion per year are necessary to meet all the goals, and Greenhill (2002) estimates an additional $15-46 billion together with 100% debt cancellation if the global goal on poverty is to be achieved. Devarajan et al. (2002), Naschold (2002) and Filmer (2002) estimate an additional US$10-15 billion, US$9 billion, and US$30 billion for achieving the global primary goal, while for the whole of Africa, the African Development Bank (2002) estimates an additional US $20-25 billion a year is necessary to meet the targets of the MDGs by 2015.

Although these estimates may seem arbitrary because of their crude nature and simplistic approximation of the cost of meeting the MDG targets (Clemens et al, 2007), these studies suggest the relevance of adequate funding from bilateral and multilateral agencies to support development programs if the MDGs are to be a success. Unfortunately, all of these rest outside the control of developing countries, thereby limiting their ability to shape the process leading to achieving the MDG targets by 2015.

All of the momentum for increasing global international aid and trading between developed and developing countries, which enhance the financial capabilities of developing countries, were captured under MDG 8, Develop a Global Partnership for Development. Unfortunately, unlike the other goals, which have some specificity and measurability, MDG 8 lacks such an orientation. Hulmes (2007: 19), for instance, argues that “The idea of [Results-based management] RBM was rigorously pursued for goals 1 to 6 and partially applied to Goal 7. However, it was systematically avoided for Goal 8. While the like-minded group might be willing to agree to 0.7% of GDP to be provided in aid by 2015…the US and Japan were certainly not going to agree to that. Interests took precedence over ideas.”
In 2006, only Denmark, Luxembourg, the Netherlands, Norway and Sweden had met the United Nations aid target of 0.7 percent of gross national income (United Nations 2006). These countries have consistently met this target between 2000 and 2012 (United Nations MDG data set, 2013). The average, however, for all ODA countries has been low. In 2006, it was equivalent to 0.3%, 0.28% in 2007, 0.3% in 2008, 0.31% in 2009, 0.32% in 2010, 0.31% in 2011 and 0.29% in 2012 (United Nation, 2007; 2008; 2009; 2010; 2011; 2012; 2013a).

Total aid flows to developing countries have improved dramatically since 2000. Nonetheless, they have been fluctuating. In 1990, the estimated net ODA was estimated at US$ 52791.01 million. By 2000, the estimated amount was US$ 53970.17 million, an increase of 2.23%. At the early stages of the MDGs, between 2002 and 2005, the momentum was high, and this had a telling effect on international aid flows; net ODA flows increased consistently by 11.18% in 2002, 18.54% in 2003, 15.01% in 2004 and 35.04% in 2006. However, between 2006 and 2012, net ODA flows were erratic, and two reasons immediately come to the fore. Firstly, it was around this time that the international aid debate reemerged with increased skepticism about the impact of international aid. The advent of the Paris Declaration seems to have confirmed the international skepticism that aid is ineffective to development in developing countries. A sense of doubt and skepticism about the transformative effects and development effectiveness emerged after a broad commitment to aid effectiveness, especially when progress targets from the Paris Declaration were far beyond reach.

In 2005, ODA flows increased by 35.04%. Subsequent to this, debates which tended to portray international aid as a “curse” to development in developing countries had a negative effect on the quantum of aid allocation. William Easterly’s book, *The White Man’s Burden*, presented the dire effects of aid on development in developing countries, while Dambisa Moyo’s book in 2009, *Dead Aid*, consolidated such claims. In the years the books were published, international aid amounts declined by 0.57% in 2007 and 1.79% in 2009. The skepticism was compounded by the progress towards MDG
targets. Progress was slow, and development partners seemed cautious of investing more in terms of international aid.

In addition, the global crisis had a negative effect on the process, and in the years where they were severest, aid declined: 2007 (0.57%), 2009 (1.79%) and 2012 (-6%). According to OECD (2013), “The continuing financial crisis and euro zone turmoil has led several governments to tighten their budgets, which has had a direct impact on development aid. There is also a noticeable shift in aid allocations away from the poorest countries and towards middle-income countries.” Figure 2.1 presents the net ODA transfers from 1990 to 2012.

**Figure 2.2 ODA Transfers between 1990 and 2012**


Another factor that remains critical is economic growth. At the early stages of the design process, developed countries and the OECD emphasized that, despite the need for promoting social and environmental development, economic growth was critically essential; hence the MDG 1 (Hulmes, 2009).
Dollar and Kraay (2001), for instance, argued that economic growth was critical and fundamental if global poverty was to be mitigated. To them, it was one sure avenue to strategically ensure that economic growth is pursued, especially for poor countries. To be able to achieve this, developing countries were expected to grow on average by at least 7% consistently for about 15 years or more (World Bank, 2004).

Unfortunately, only few developing countries were able to attain this trend of economic growth. Between 2003 and 2012, there were only a few occasions where economic growth of a minimum of 7 percent was reached in developing countries. South Asia reached a minimum of 7 percent between 2003 and 2007, but could not sustain the growth over 15 years. It thus seems glamorous the push for global poverty mitigation by 2015. Since 1990, poverty levels have declined in all regions globally, but this decline, which led to the world meeting MDG 1, was influenced greatly by China and India.

For instance, “in China, extreme poverty dropped from 60 per cent in 1990 to 16 per cent in 2005 and 12 per cent in 2010” (United Nations, 2013: 7). China and India experienced high growth rates between 2003 and 2012. China has continuously maintained an economic growth rate of more than 7 percent since 2003, 10 percent in 2003, peaking at 14.2 percent in 2007, and 7.8 percent in 2012. Economic growth of India in 2003 was 7.9 percent, 9.8 percent in 2007, a sharp decline to 3.9 percent in 2008, 10.4 percent in 2010 and now 3.2 percent. Since 2003, the economic growth rates of these countries have been higher than the world average even at moments of decline. In essence, the role of economic growth in reducing global poverty is crucial.

Even with the realization that economic growth is important, another question comes to the fore. This relates to growth distribution. The United Nations notes that despite progress in economic growth in many developing countries, the growth has been “unequally shared, within and among countries;” “Between 1990 and 2004, the share of national consumption by the poorest fifth of the population in developing regions decreased from 4.6 to 3.9 percent” (2007: 8). Similarly, the GINI Coefficient of many
developing countries continues to be over 40 percent, which is an indication that growth is not being accompanied by the wide distribution of its benefits in many developing countries.\textsuperscript{11}

Beyond economic growth, there are several other factors that affect progress. In 2006, the United Nations (2006) recognized that poverty was not only a challenge, but that it also limits the attainment of other MDGs. According to the agency, “High rates of poverty in rural areas limit educational opportunities because of demands for children’s labor, low levels of parental education and lack of access to good quality schooling” (United Nations, 2006: 7). The United Nations also noted that, “Sociocultural attitudes, employment policies and a lack of options for balancing work and family responsibilities or for controlling the timing and spacing of births contribute further to inequality in the labor market” (ibid: 8).

The negative effect of the global financial crisis on the progress in the MDGs was compounded by the world food spikes in 2008. The United Nations (2010), citing the Food and Agriculture Organization (FAO), explained the impact on of these two factors on malnourishment in 2008. To the FAO, the number of undernourished individuals in the world was about 915 million in 2008 and more than 1 billion in 2009.

A major challenge, which runs through all the annual reports on the Millennium Development Goals, is conflict. The 2007 MDG Report, for instance, notes that conflicts continue to displace people and increase world poverty. Conflict increases the number of refugees in the world, degrades development achievements and reduces or erodes the ability of individuals in developing countries to support their livelihoods. Southern and Western Asia and Sub-Saharan Africa are home to the largest populations of refugees, many of whom are caused by conflicts (United Nations, 2007; 2008; 2009; 2010; 2011, 2012;

\textsuperscript{11} The “Gini index measures the extent to which the distribution of income or consumption expenditure among individuals or households within an economy deviates from a perfectly equal distribution. A Lorenz curve plots the cumulative percentages of total income received against the cumulative number of recipients, starting with the poorest individual or household. The Gini index measures the area between the Lorenz curve and a hypothetical line of absolute equality, expressed as a percentage of the maximum area under the line. Thus a Gini index of 0 represents perfect equality, while an index of 100 implies perfect inequality.” (World Bank, 2014)
The 2011 MDG Report notes that, “Close to 43 million people worldwide were displaced due to conflict and persecution, the highest number since the mid-1990s and about half a million more than the previous year” (United Nations, 2011: 15). Conflicts present huge challenges because typically people who are affected “lack employment and a permanent residence and, without a social safety net, quickly fall into poverty” (United Nations, 2009: 8).

Unfortunately, in many cases, there are inadequate official data to measure country progress. Though this is pronounced in conflict affected areas, this challenge is pervasive in many developing countries. It thus makes it difficult to have a near precise measure as to what progress is being made towards the MDGs. Indeed, there are estimates at the regional level. But most importantly, because the interventions are undertaken at the country level, data are required to be able to appreciate country level progress for all targets and indicators. The 2010 MDG Report notes that:

The lack of good quality surveys carried out at regular intervals and delays in reporting survey results continue to hamper the monitoring of poverty. Gaps are particularly acute in sub-Saharan Africa, where more than half of countries lack sufficient data to make comparisons over the full range of the MDGs, and among small island states. (United Nations, 2010: 7)

Overall, the factors that are shaping progress in achieving the MDG targets and indicators are multidimensional. In some cases, they are country specific, and, in other cases, they are global in nature. It thus shows how complex current development challenges are. This, therefore, demands a creative and comprehensive response to development challenges in developing countries.

2.4 Summary

In this review, it has become apparent that international aid as a system for promoting development is not without challenges. Indeed, like many development frameworks, it can become a “curse” or a “blessing” depending on how it is used and adopted for development. The continual dissection of the dynamics and complexities, as well as the disputes that characterize this development framework, is a good one. It
builds a knowledge base for understanding the processes that need to be augmented, while, at the same time, presents what needs to be truncated or modified. In the phase of scarcity of development finance opportunities and the limited opportunities for enhancing the capacities of developing countries to promote their own socio-economic development, it is imperative for international aid actors to appreciate the role they play in optimizing the international aid tool for development. Subsequently, the question, as has been noted by many, is not whether aid is good or bad. The question relates rather to the ways to better understand the international aid architecture as well as the necessary framework for enhancing its role in development effectiveness.

It is, therefore, welcome that there is a consensus that aid actors, especially donor agencies, need to allow some level of flexibility in the way international aid is allocated and utilized for development in developing countries. Furthermore, the efforts that began in 2005, with the Paris Declaration on Aid Effectiveness, and the Accra Agenda for Action in 2008, provide optimism that donor agencies are interested in ensuring a transformation in the way international aid is used for development. Nevertheless, as much as this general consensus shows optimism, there is a mark difference between optimism and effectuation. The report on the implementation of the agreed targets to ensure aid effectiveness shows that there are still challenges. Although some progress has been made, there seems to be a generally low level of achievement, which is a marked contradiction to the demand for developing countries to achieve development targets. Both donor agencies and recipient countries should be able to discuss critically and promote mutual accountability if the demands from both ends are to be achieved.

This is particularly so as the end point of the MDGs beckons. In 2015, the deadline should be reached. By this time, dramatic efforts should have been made and some success achieved. Nevertheless, there will still be more to do. Many of the targets would not have been achieved, and the general challenges of global development and poverty would have become more complex. Conflicts, urbanization,
globalization, climate change and natural disasters would have reoriented the nature and premises of the causation of poverty in many developing countries.

New challenges are emerging, and, at the same time, new opportunities are appearing. Technology, resource discoveries, emerging markets, new economic partnerships and new development finance mechanisms present new ways to look at global development and poverty. The efforts beyond 2015 should take into cognizance the dynamic and complex processes, factors, and contexts that have characterized the implementation of the MDGs throughout its history. This has strong relationships with international aid as well as the global world economy and politics. The efforts towards thinking beyond 2015 should also take into consideration the dynamic interrelationships between developed and developing countries — particularly when the evidence from the global crisis has shown that promoting global development and poverty reduction is not a matter of concentrated effort in developing countries. The ramifications of what happens in developed countries may have either positive or negative effects depending on the phenomenon. The period between 2007 and 2010 demonstrated the challenges in aid allocations, which were influenced by the global economic crisis. Similarly, conflicts, rises in oil prices, and rises in global food prices are not merely a developing country phenomenon. These are events shaped by both developed and developing countries, and to assume that poverty can be reduced or developed by simply focusing on developing countries may be ethereal.

Overall, promoting development is not a simple process, but one that is complex and challenging. The period between 2000 and 2013 to 2015 offers a spectrum of experiences from which the international community and national and local development actors can learn and mainstream beyond 2015. As the world becomes even more complex, development processes become more challenging, the lessons from the implementation of the MDGs will offer a cogent starting point to put forward a more creative and stronger consensus, and a new challenge to promote mutual accountability to tackle global poverty and global development.
CHAPTER THREE
RESEARCH METHODOLOGY

3.1 Introduction

This chapter explains the methodology for the research. It subsequently discusses the systematic approach for building the knowledge based needed for understanding the research themes of international aid, international development and the MDGs which underpin this research. The chapter begins with a conceptual framework that underlines this research — procedural and substantive research issues. This is followed by the research design, a proposed hypothesis, types of data and their sources for the research, and also data analytical and presentation techniques for this research. Data validity and reliability, as well as research limitations, are also discussed in this chapter.

3.2 Conceptual Framework

As identified in Chapter One, the main research questions are:

- What progress has been made by West African countries in achieving the MDG targets?
- What factors have supported the achievement of MDG targets in West Africa countries?
- What factors have hindered the achievement of MDG targets in West Africa countries?
- What additional factors should inform a new consensus for an international development agenda for low-income countries beyond 2015?

From the literature review, it is apparent that to appreciate the progress of countries — for that matter, West African countries — in achieving the MDGs, there is a need to appreciate the achievement of the MDGs targets by these countries. It is also evident that the challenges that affected progress in achieving the MDG targets are multifaceted. As such, any analysis of progress must take cognizance of these dynamics.
The MDGs have sought to provide a framework for global poverty reduction and have become an agenda for international development. These have thus shaped local, national and regional interventions aimed at mitigating the challenges of poverty and promoting human development. It is thus important to appreciate the factors enabling West African countries to achieve these goals or otherwise. The diagnosis of the various factors supporting and hindering progress in the achievement of MDG targets forms the basis for a new focus and for action in fighting global poverty within the context of West African Countries beyond 2015.

It should be appreciated herein that this research does not focus on the detailed examination of the program implementation and challenges of West African countries in their pursuit of the MDG indicators. On the contrary, the focus of this research is to identify the factors—including policies, programs and issues — that can form the focus of attention in international deliberations for a new international development agenda for West African countries and also offer an opportunity to shape further and more detailed studies on the subject. Some of these factors are identified in the literature review that pertained to global trends and not necessarily to West African countries — although they may apply in varied dimensions and degrees. Based on the literature review and research questions, the conceptual framework here appreciates some specific theoretical postulations:

- That the factors that affect progress of the MDGs of West African countries are multifaceted encompassing social, economic, environmental, political and cultural elements, among others;
- That there are two forces shaping development processes in West African countries. The first are context specific influences that emerge from country experiences and characteristics. The second relates to global forces including globalization, international aid, and international trade. Despite the recognition of these three factors, international aid is emphasized for this research;
- That, together, these factors shape the development problems of developing countries;
• That these context specific and global influences shape the factors that affect the MDG progress positively or negatively, and

• That these three perspectives should inform a new agenda for international development for West African countries taking into cognizance the regional, national and local development frameworks of these countries.

The proposed framework is not definite — nor set in stone. It illustrates an understanding of the dynamics of development in developing countries. It is strong for its recognition of local, national, regional and global forces that influence the development processes in developing countries. It also appreciates the multidimensional nature of development problems. Its weakness is a lack of specificity of the key indicators or issues affecting development in developing countries. Again, it does not reflect diagrammatically the interconnectedness among the development dimensions identified. Nonetheless, this framework is adopted—especially using circles to depict influences—to illustrate and place emphasize on the various sources of development problems. The interconnectedness of these development forces and the specific issues are implicitly assumed within the framework. Figure 3.1 presents the conceptual framework for this research.
Figure 3.1 Conceptual Framework for this Research

Source: Author’s own illustration, 2014
3.3 Research Design

The research adopts a longitudinal research design as it makes use of qualitative and quantitative research strategies. The approach also allows for examining trends of specific phenomena over a period of time. Furthermore, it helps to appreciate the factors influencing the evolution and dynamics of the phenomenon being studied. It further allows for the measurement of changes over time (Goldstein, 1968). In addition, an exploratory approach is adopted to appreciate the factors affecting the changes in progress of the MDG agenda in West African countries. These two approaches allow for the understanding of, firstly, the trends in each country and, secondly, country-specific factors that have caused the change in the achievement of MDG goals in West Africa.

3.4.1 Types and Sources of Data for Research

3.4.1 Types of Data

The research utilizes both qualitative and quantitative data to make the necessary arguments to answer the various research questions. These data will relate to the MDGs and targets. There are eight goals, eighteen targets and forty-eight indicators. The deadline for the achievement of these goals and targets is 2015. Table 1.1 presents the goals and targets. They will be the basis on which data are collected for the sixteen West African countries. However, due to data availability, forty-four out of forty-eight indicators were used in the analysis. The indicators of the MDG targets are the paramount measures for tracking progress of West African countries in attaining the goals. The eighteen MDG targets are presented in Table 3.1 (See Table 2.1 for the complete list of goals, targets, and indicators)

<table>
<thead>
<tr>
<th>GOAL</th>
<th>TARGETS</th>
</tr>
</thead>
</table>
| Goal 1: Eradicate Extreme Hunger and Poverty | • 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 | • Target 3. Ensure that, by 2015, children everywhere, boys and girls alike, will }
<table>
<thead>
<tr>
<th>Universal Primary Education</th>
<th>be able to complete a full course of primary schooling</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goal 3: Promote Gender Equality and Empower Women</td>
<td>Target 4. Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015</td>
</tr>
<tr>
<td>Goal 4: Reduce Child Mortality</td>
<td>Target 5. Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate</td>
</tr>
<tr>
<td>Goal 5: Improve Maternal Health</td>
<td>Target 6. Reduce by three-quarters, between 1990 and 2015, the maternal mortality ratio</td>
</tr>
<tr>
<td>Goal 6: Combat HIV/AIDS, Malaria and other diseases</td>
<td>Target 7. Have halted by 2015 and begun to reverse the spread of HIV/AIDS</td>
</tr>
<tr>
<td>Goal 7: Ensure Environmental Sustainability</td>
<td>Target 8. Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases</td>
</tr>
<tr>
<td>Goal 8: Develop a Global Partnership for Development</td>
<td>Target 9. Integrate the principles of sustainable development into country policies and programs and reverse the loss of environmental resources</td>
</tr>
<tr>
<td></td>
<td>Target 10. Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation</td>
</tr>
<tr>
<td></td>
<td>Target 11. Have achieved by 2020 a significant improvement in the lives of at least 100 million slum dwellers</td>
</tr>
<tr>
<td></td>
<td>Target 12. Develop further an open, rule-based, predictable, nondiscriminatory trading and financial system (includes a commitment to good governance, development, and poverty reduction?both nationally and internationally)</td>
</tr>
<tr>
<td></td>
<td>Target 13. Address the special needs of the Least Developed Countries (includes tariff- and quota-free access for Least Developed Countries?exports, enhanced program of debt relief for heavily indebted poor countries [HIPC]s and cancellation of official bilateral debt, and more generous official development assistance for countries committed to poverty reduction)</td>
</tr>
<tr>
<td></td>
<td>Target 14. Address the special needs of landlocked developing countries and small island developing states (through the Program of Action for the Sustainable Development of Small Island Developing States and 22nd General Assembly provisions)</td>
</tr>
<tr>
<td></td>
<td>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</td>
</tr>
<tr>
<td></td>
<td>Target 16. In cooperation with developing countries, develop and implement strategies for decent and productive work for youth</td>
</tr>
<tr>
<td></td>
<td>Target 17. In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries</td>
</tr>
<tr>
<td></td>
<td>Target 18. In cooperation with the private sector, make available the benefits of new technologies, especially information and communications technologies</td>
</tr>
</tbody>
</table>

Source: Millennium Project (2006). Goals, Targets and Indicators. Available online:

3.4.2 Sources of Data

The research utilizes secondary data sources to make all the necessary arguments to respond to the five research questions. These materials are sourced from the United Nation MDG website and database. The database consists of disaggregated data on the progress of countries in the achievement of MDG targets. The research also utilizes bilateral and multi-lateral documents and databases to shape the discussion. Paramount among these sources are the United Nations and their affiliate organizations, the World Bank, the Organization for Economic Cooperation and Development (OECD) and their allied agencies such as the Development Assistance Committee, research institutions (such as the International Poverty Centre and the Institute for Health Metrics and Evaluation), research journals, development newsletters, news reports and documentaries, among others.

3.5 Data Analysis and Presentation

The research uses both qualitative and quantitative approaches to discuss the data collected from these agencies. This allows for better appreciation of trends in the attainment of goals and targets by the sixteen countries within the West African sub-region.

An objective based approach is adopted by this research. To answer the research questions, the following objectives inform the analysis for the various sections of the thesis.

i. To assess progress made by West African Countries in achieving the MDG targets;

ii. To examine the factors that facilitated the achievement of MDG targets in West Africa countries;

iii. To examine factors hindering the achievement of MDG targets in West Africa countries, and

iv. To identify factors to inform a new consensus for international development agenda for poor countries beyond 2015.
The research utilizes descriptive statistical approaches such as tables, graphs and maps to present the results of analysis. Maps are designed using Arc GIS to link the targets to the various countries in the form of info-graphics.

3.5.1 Descriptive Statistical Techniques
A descriptive statistical analysis offers a means to summarize the various data and is useful in comparing and tracking indicators at different points in time. Since this research aims to track progress in the achievement of the MDGs, this analytical technique, which makes use of bar graphs, line graphs, pie charts, percentages and frequency distribution tables, offers a basis for presenting the data for the various years for each country, as well as for comparing countries.

3.5.2 Statistical Analytical Techniques
Linear projections are used to extrapolate the future trends of selected MDG targets. This was feasible using the World Bank global monitoring report on the MDGs which reports estimated projections for each country. The projections using recent progress were adopted for this research. Nine out forty-four indicators adopted for this research had these projections, namely: extreme poverty, malnutrition, primary school completion rate, gender parity index, under-five mortality, infant mortality, maternal health, access to safe drinking water sources and access to improved sanitation facilities.

3.6 Data Reliability and Validity
3.6.1 Research Reliability
One challenge of research is to examine its reliability and validity (Finn et al., 2000). Research reliability tends to measure the consistency in research outcomes by different researchers using the same research approach (Conrad and Serlin, 2006; Finn et al., 2000). This challenge is mainly due to the use of research instruments and their interpretation of questions. For this research, research reliability challenges are not encountered as the data are dependent on an existing database used for tracking the progress of countries.
in achieving the MDGs. Similarly, the pedigree of the data sources ensures that the data generated for the analysis are representative of the country specific indicators and are thus reliable. To ensure that the data that are generated from the database are reliable and devoid of generated errors, country specific data are generated several times to ensure their consistency.

3.6.2 Research Validity
Research validity also ensures that research conclusions are reflective of the analytical outcomes of the work (Bryman and Bell, 2007). Firstly, the data to be used are based on international data quality standards and offer a good basis for tracking national and regional progress in achieving the MDGs globally. These data juxtaposed with country specific reports — which represent country positions on factors affecting progress — provide the needed information for generalization for this research. Similarly, these are triangulated with country specific studies in scholarly journals, as well as national documents, so as to ensure that conclusions and generalizations are within the limits of tested and verified assumptions and implications. This, therefore, allows for valid generalization in this research. This is achieved using both descriptive and statistical analysis.

3.7 Limitations
The main limitation of this research is the gaps in the data on the various MDG indicators across the various countries. This was overcome by relying on recent data for the various indicators. Despite this, the challenge brought out one finding that related to the measurement of development indicators in developing countries. The gaps could not be filled using other databases as they presented different data for specific data points and used different methodologies.

Another limitation of this research is the fact that it does not delve deeply into the implementation challenges and details of how the MDG Agenda is being adopted and implemented in each of the 16 West African countries. This is because the focus of this research is only to present an overview of the factors
delimiting progress towards indicator achievement. This research also recognizes the importance of a detailed analysis of progress factors that may emerge and foresees that as an area for further research.

3.8 Summary

The framework identified for this research enables the identification of information that reveals the factors that affect the MDG process in West Africa countries. Overall, the validity and reliability of the research can be assured. Unfortunately, the detail scoping of factors cannot be explored as the emphasis of these research is exploratory—that is, it is aimed at identified factors and not how the factors influence the development process. This research is thus a good foundation for further research in understanding the why’s and how’s of development factors that influence the MDG process in West African countries. As the focus of this research is on West Africa, the subsequent chapter presents the geographic characteristics of this sub-region.
CHAPTER FOUR

GEOGRAPHICAL CONTEXT OF RESEARCH

4.1 Introduction

Africa is among the global regions trailing in the progress towards the MDGs. Specifically, Sub-Saharan African countries are projected not to attain most of the MDGs by 2015. Conflicts, corruption and inadequate development management capacity are among many factors that continually come to the table as the causes of these challenges despite the enormous potential of resources and international aid flows to the continent.

There are five regions that make up the African continent. The first, *North Africa*, lies north of the Sahara Desert and along the Mediterranean Sea. The countries making up North Africa are Egypt, Libya, Morocco, Sudan, Tunisia and Western Sahara. Botswana, Lesotho, Namibia, South Africa and Swaziland are the countries that make up *Southern Africa*. Angola, Cameroon, Central African Republic, Chad, Congo, Democratic Republic of the Congo, Equatorial Guinea, Gabon, and Sao Tome and Principe together make up *Middle Africa*. *East Africa* comprises Burundi, the Comoros, Djibouti, Eritrea, Ethiopia, Kenya, Madagascar, Malawi, Mauritius, Mayotte, Mozambique, Réunion, Rwanda, the Seychelles, Somalia, South Sudan, Uganda, United Republic of Tanzania, Zambia and Zimbabwe. These countries lie between the Red Sea and the Horn of Africa. *West Africa* — which has already been identified in other chapters — comprises sixteen countries (United Nations Statistics Division, 2012).

To look at all these countries is challenging, and, moreover, the regional agencies of the United Nations produce regional reports that look at Africa’s progress towards the MDGs. To avoid replication of research efforts, this thesis — as indicated in the topic — places emphasis on the West African countries and their progress toward the MDGs.\(^\text{12}\) Thus, in this chapter, the context is put forward by presenting

\(^{12}\) The selection of West Africa is primarily based on the regional familiarity of the researcher as he comes from Ghana. In addition, the researcher in “The Impact of United Nations Millennium Development Goals on Sub-

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some general characteristics of the region together with the sixteen countries that are under consideration here.

4.2 Profile of the West Africa Sub-Region

4.2.1 Location and Land Size

West Africa is located on the west coast of the African continent (Figure 4.1). It constitutes about 17 percent of the total surface area of Africa, i.e., about 6,142,978 square kilometers. There are sixteen sovereign countries in West Africa.\(^{13}\) In 1990, the estimated population of all these countries was 179,669,825; in 2000 the population was estimated at 233,797,776; and at 322,296,154 in 2012. Between 1990 and 2012, the population increased by 142,626,329 representing a percentage increase of 79.38 percent.\(^{14}\)

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\(^{13}\) Saharan Africa,” See Barimah and Diko (2013) — they examined the progress of five countries in achieving the MDG goals with emphasis on MDG 1. These were Ghana, Liberia, Nigeria, Rwanda and Uganda. Thus, the familiarity of the materials allows him to make appropriate examinations of the discussions for the West African Region.

\(^{14}\) The United Nations Statistics Division includes the island Saint Helena as part of the list of countries in the West African sub-region. However, predominantly, the region is identified without the island. This convention has been applied to this thesis.

\(^{14}\) These estimates are based on summations from the World Bank databases.
4.2.2 Official and Ethnic Languages

The predominant official language in the sub-region in West African is French — Benin, Burkina Faso, Côte d’Ivoire, Guinea, Mali, Niger, Senegal, and Togo followed by English — Gambia, Ghana, Liberia, Nigeria, and Sierra Leone — with Arabic (Mauritania), Portuguese (Guinea-Bissau and Cape Verde) and Spanish, the official languages of some West African countries.
However, there are about 27 ethnic languages across the region with some languages spoken in more than one country (Saylor Foundation, 2014). For instance, Akan is spoken by the Akan ethnic group in Ghana and Côte d’Ivoire; Ewe spoken in Ghana, Togo, and Benin; Fula from the Fulani people is spoken in Guinea, Nigeria, Senegal, Mali, Sierra Leone, Burkina Faso, Benin, Niger, Gambia, Guinea Bissau, Ghana, Mauritania and Togo. In addition, Hausa from the Hausa ethnic group, is spoken in Nigeria, Niger, Ghana and Cote d'Ivoire (Ibid.). These are among several other ethnic languages spoken in the sub-region.\(^\text{15}\)

4.2.3 Climate and Vegetation

The vegetation of the sub-region ranges from the Sahel in the north to the Guineo-Congolese zone in the south. This vegetation is characterized by tropical humid forests, dry forests and savannah. From Eastern Sierra Leone to Ghana, two types of tropical rainfall exist, namely: tropical rain forest and tropical deciduous forest, which end around the Volta River. Mostly, the tropical forests are found in the middle belts of countries along the West African coast. Moving north of these countries, the climates are drier characterized by woodlands and savannah. (Bellefontaine et al., 2000) These vegetation and climatic regions make some of the countries such as Côte d'Ivoire, Ghana and Nigeria among the most highly diverse ecologically in the world. (World Conservation Monitoring Centre, 1994 and De Vit and Parry, 2011)

4.3 Brief Profile of West African Countries

4.3.1 Population Growth Trends

The population of all the sixteen countries in West Africa has consistently grown since 1990. Cape Verde, which was the least populous country in 1990, has been in this position up to 2012. The population between 1990 and 2012 increased from 351,960 to 494,401, while the most populous country, Nigeria,

increased from 95,617,350 to 168,833,776. Over the past twenty years, all these countries have increased by at least 60 percent with the exception of Cape Verde, which grew by 40.5 percent and Sierra Leone which grew by 47.9 percent. The greatest in terms of population increase was Niger, which grew by 121.3 percent over the same period. Table 4.1 presents the population of the West African countries from the MDG base and 2012.

Table 4.1 Population Trends of West African Countries for 1990, 2000, and 2012

<table>
<thead>
<tr>
<th>Country</th>
<th>1990</th>
<th>2000</th>
<th>2012</th>
<th>Absolute ∆</th>
<th>% ∆</th>
<th>Population Density (sq. km)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td>5,001,271</td>
<td>6,949,366</td>
<td>10,050,702</td>
<td>5,049,431</td>
<td>101.0%</td>
<td>44.4</td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>8,811,033</td>
<td>11,607,944</td>
<td>16,460,141</td>
<td>7,649,108</td>
<td>86.8%</td>
<td>42.4</td>
</tr>
<tr>
<td>Cape Verde</td>
<td>351,960</td>
<td>442,426</td>
<td>494,401</td>
<td>142,441</td>
<td>40.5%</td>
<td>109.8</td>
</tr>
<tr>
<td>Côte d’Ivoire</td>
<td>12,115,806</td>
<td>16,131,332</td>
<td>19,839,750</td>
<td>7,723,944</td>
<td>63.8%</td>
<td>122.6</td>
</tr>
<tr>
<td>Gambia</td>
<td>916,811</td>
<td>1,228,863</td>
<td>1,791,225</td>
<td>874,414</td>
<td>95.4%</td>
<td>121.4</td>
</tr>
<tr>
<td>Ghana</td>
<td>14,628,693</td>
<td>18,825,034</td>
<td>25,366,462</td>
<td>10,737,769</td>
<td>73.4%</td>
<td>106.3</td>
</tr>
<tr>
<td>Guinea</td>
<td>6,020,113</td>
<td>8,746,128</td>
<td>11,451,273</td>
<td>5,431,160</td>
<td>90.2%</td>
<td>46.6</td>
</tr>
<tr>
<td>Guinea-Bissau</td>
<td>1,017,385</td>
<td>1,273,312</td>
<td>1,663,558</td>
<td>646,173</td>
<td>63.5%</td>
<td>46.1</td>
</tr>
<tr>
<td>Liberia</td>
<td>2,102,877</td>
<td>2,891,968</td>
<td>4,190,435</td>
<td>2,087,558</td>
<td>99.3%</td>
<td>37.6</td>
</tr>
<tr>
<td>Mali</td>
<td>7,964,066</td>
<td>10,260,577</td>
<td>14,853,572</td>
<td>6,889,506</td>
<td>86.5%</td>
<td>12.0</td>
</tr>
<tr>
<td>Mauritania</td>
<td>2,024,163</td>
<td>2,708,095</td>
<td>3,796,141</td>
<td>1,771,948</td>
<td>87.5%</td>
<td>3.7</td>
</tr>
<tr>
<td>Niger</td>
<td>7,753,907</td>
<td>10,989,815</td>
<td>17,157,042</td>
<td>9,403,135</td>
<td>121.3%</td>
<td>13.5</td>
</tr>
<tr>
<td>Nigeria</td>
<td>95,617,350</td>
<td>122,876,727</td>
<td>168,833,776</td>
<td>73,216,426</td>
<td>76.6%</td>
<td>182.8</td>
</tr>
<tr>
<td>Senegal</td>
<td>7,514,110</td>
<td>9,861,679</td>
<td>13,726,021</td>
<td>6,211,911</td>
<td>82.7%</td>
<td>70.0</td>
</tr>
<tr>
<td>Sierra Leone</td>
<td>4,042,678</td>
<td>4,139,757</td>
<td>5,978,727</td>
<td>1,936,049</td>
<td>47.9%</td>
<td>83.3</td>
</tr>
<tr>
<td>Togo</td>
<td>3,787,602</td>
<td>4,864,753</td>
<td>6,642,928</td>
<td>2,855,326</td>
<td>75.4%</td>
<td>117.0</td>
</tr>
</tbody>
</table>


4.3.2 Sex Structure

For many of these countries, there are more females than males. The highest proportion of female population is in Senegal where the female population constitutes 51 percent, while the least is Cote d’Ivoire where the proportion of women is 49 percent. Table 5.2 illustrates the proportion of the female population for these West African countries.
Table 4.2 Proportion of Female Population of West African Countries for 1990, 2000 and 2012

<table>
<thead>
<tr>
<th>Country</th>
<th>% of Female Population</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1990</td>
</tr>
<tr>
<td>Benin</td>
<td>51.7</td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>51.1</td>
</tr>
<tr>
<td>Cape Verde</td>
<td>52.2</td>
</tr>
<tr>
<td>Côte d’Ivoire</td>
<td>48.0</td>
</tr>
<tr>
<td>Gambia</td>
<td>49.7</td>
</tr>
<tr>
<td>Ghana</td>
<td>49.2</td>
</tr>
<tr>
<td>Guinea</td>
<td>50.5</td>
</tr>
<tr>
<td>Guinea-Bissau</td>
<td>50.5</td>
</tr>
<tr>
<td>Liberia</td>
<td>50.2</td>
</tr>
<tr>
<td>Mali</td>
<td>50.6</td>
</tr>
<tr>
<td>Mauritania</td>
<td>50.1</td>
</tr>
<tr>
<td>Niger</td>
<td>50.9</td>
</tr>
<tr>
<td>Nigeria</td>
<td>49.5</td>
</tr>
<tr>
<td>Senegal</td>
<td>50.2</td>
</tr>
<tr>
<td>Sierra Leone</td>
<td>50.6</td>
</tr>
<tr>
<td>Togo</td>
<td>50.7</td>
</tr>
</tbody>
</table>


The great leap in population for these countries is influenced by the changing dynamics of the population growth rates of these countries. With increased access to health care, mortality has been declining while fertility rates continue to persist (Bongaarts and Casterline, 2013). The fertility rate between 2005 and 2012 for Sub-Saharan Africa has averaged about five births per woman, with the most recent data for 2012 indicating a rate of 5.18 births per woman (World Bank, 2014). Figure 5.1 presents the declining trends of mortality.
As a result, the population of these countries has witnessed tremendous population growth. Akin to many other developing countries, the current growth has resulted in a current phenomenon where the urban population of these countries continues to increase; and for some countries like Cameroon, Cape Verde, Ghana, Guinea, Guinea-Bissau and Sierra Leone, there are now more people living in urban areas. Evidently, these growth trends will continue for the next 20 years, and, for many countries, beyond. (UNFPA, 2007)
Table 4.3 Population Growth Rates of West African Countries

<table>
<thead>
<tr>
<th>Country</th>
<th>Population Growth Rates</th>
<th>Percent (%) of Urban Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td>3.4</td>
<td>3.1</td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>2.7</td>
<td>2.8</td>
</tr>
<tr>
<td>Cape Verde</td>
<td>1.6</td>
<td>1.9</td>
</tr>
<tr>
<td>Côte d’Ivoire</td>
<td>3.4</td>
<td>2.1</td>
</tr>
<tr>
<td>Gambia</td>
<td>4.0</td>
<td>2.9</td>
</tr>
<tr>
<td>Ghana</td>
<td>2.7</td>
<td>2.4</td>
</tr>
<tr>
<td>Guinea</td>
<td>4.6</td>
<td>1.7</td>
</tr>
<tr>
<td>Guinea-Bissau</td>
<td>2.2</td>
<td>2.2</td>
</tr>
<tr>
<td>Liberia</td>
<td>-1.6</td>
<td>5.3</td>
</tr>
<tr>
<td>Mali</td>
<td>1.7</td>
<td>2.8</td>
</tr>
<tr>
<td>Mauritania</td>
<td>2.7</td>
<td>3.0</td>
</tr>
<tr>
<td>Niger</td>
<td>3.1</td>
<td>3.6</td>
</tr>
<tr>
<td>Nigeria</td>
<td>2.6</td>
<td>2.5</td>
</tr>
<tr>
<td>Senegal</td>
<td>3.1</td>
<td>2.5</td>
</tr>
<tr>
<td>Sierra Leone</td>
<td>1.2</td>
<td>2.7</td>
</tr>
<tr>
<td>Togo</td>
<td>2.8</td>
<td>2.6</td>
</tr>
</tbody>
</table>


4.4 Summary

Overall, the West African sub-region is a region with unique variety demographically, economically, politically and geographical. As much as there are some differences, some uniqueness pertains such as in ethnicity. This overview should thus provide a good foundation for the subsequent discussions that are made in the other sections of this research.
CHAPTER FIVE
BEYOND 2015 – THE INTERNATIONAL DEVELOPMENT DEBATE RAGES ON

5.1 Introduction
That the deadline for achieving the various targets and indicators of the MDGs is imminent is an understatement. Indeed, by 2015, the deadline would have been attained and the various country, regional, and global targets would have been expected to be achieved. Unfortunately, as good as the intentions of the MDGs have been, the progress thus far for countries and globally are mixed. While regions such as South America and parts of Asia are making tremendous progress, Sub-Saharan Africa and Southeast Asia have varied progress across the various targets. Together, these two regions are seen to be lagging compared to other regions globally, and they will not achieve several of the MDG targets. Similarly, in regions were progress is being made, not all targets would be achieved.

As indicated in earlier chapters, the progress and implementation of initiatives directed towards this global agenda have been in contention as to their relevance in terms of design, focus, and achievements. As a result, different schools of thought have emerged debating the way forward after the deadline of 2015. New sets of goals are being promulgated, and global deliberations and consensus have been initiated to inform what the new agenda on global poverty and development should be. Subsequently, the debate of a new global development agenda beyond 2015 is the focus of this chapter.

5.2 Rethinking Old Ways
5.2.1 The United Nations and Beyond 2015
An obvious way to starting rethinking about the MDGs is to appreciate the limitations of the framework for reducing global poverty. Clearly:

The MDG framework, however, has certain constraints: The MDGs focus more on human development and some claim do not give enough attention to the need for general
economic development; they lack explicit references to important dimensions of development such as quality of education, human rights, and good governance; and they have led in some cases to donor-driven development at the expense of national approaches to development. These limitations have contributed, among other things, to the uneven development progress among countries and between the goals themselves. (General Assembly of the United Nations, 2011)

As a result, many of the ideas that are being put forward for the next global development agenda aim to appreciate and understand the MDGs’ constraints so that it is possible to forge a new agenda that optimizes the strengths of the framework as well as offers alternatives to these constraints.

The United Nations is at the forefront of these deliberations, supported by other donor agencies, think tanks, NGOs, academicians, politicians and national agencies across the globe. The United Nations recognizes that it is “uniquely positioned to foster this inclusive multi-stakeholder process and advocate for an agenda informed by national and local priorities” (United Nations Development Group, 2012: 10). Evidently, the drive for a global agenda toward poverty reduction and human development would persist unabated. The challenge now is making the global agenda more effective and sustainable.

The United Nations effort for a global agenda beyond 2015 started in September 2010. In a September 2010 MDG Summit, steps were taken by member states to envision a new focus and direction for global action against development (United Nations, 2011). An open and all inclusive process unfolded and underpinned numerous consultations on a global agenda beyond 2015. Subsequently, a United Nations Development Group was established to facilitate “a set of eleven global thematic consultations and national consultations” in over 50 countries across the globe. This responsibility involves partnership and consultations with multiple stakeholders across these countries (United Nations, 2013a). The United Nations Development Group MDG Task Force was tasked with the oversight of these consultations. The aim of these consultative processes was to facilitate discussions and elicit ideas as to “The Future We
Want.” Guidelines were developed that provided information on the technical and financial assistance needed to support these efforts.\textsuperscript{16}

Similarly, several other preparations were made. The United Nations Secretary-General established a United Nations Task force\textsuperscript{17} to coordinate preparations towards the efforts beyond the MDG agenda in 2015 and also announced a twenty seven member High level panel\textsuperscript{18} in July 2012 to provide advice on a new development framework after the MDG deadline has been reached.

The High Level Panel delivered its final report dubbed “New Global Partnership: Eradicate Poverty and Transform Economies through Sustainable Development” in May 2013. It emphasizes that five main priorities should underpin efforts beyond 2015, namely: (1) leave no one behind — which redirected attention from reducing poverty to eradicating poverty; (2) put sustainable development at the core — aimed at mainstreaming social, economic and environmental nexuses into poverty and development interventions; (3) transform economies for jobs and inclusive growth — focused on “a quantum leap forward in economic opportunities and a profound economic transformation to end extreme poverty and improve livelihoods”; (4) build peace and effective, open and accountable institutions for all — which emphasizes the promotion of human rights, good governance, political stability, and (5) forge a new global partnership — based on “solidarity, cooperation, and mutual accountability” (United Nations High-level Panel, 2013: 7-11). In addition, the report identifies cross cutting issues that should guide the new

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\textsuperscript{16} The guidelines and other resources related to the United Nations Development Group are available online at http://www.undg.org/index.cfm?P=1627. (Assessed on February 8th, 2014)

\textsuperscript{17} This is made up of 58 members representing the 58 United Nations Regional and sectoral agencies. The full list is available at http://www.un.org/millenniumgoals/pdf/Task%20Team%20member%20entities.pdf. (Assessed on February 8th, 2014)

\textsuperscript{18} The 27 member panel is co-chaired by H.E. Mr. Susilo Bambang Yudhoyono, President of Indonesia; H.E. Ms. Ellen Johnson Sirleaf, President of Liberia, and H.E. Mr. David Cameron, Prime Minister of the United Kingdom. Members of the Panel is available online at http://www.post2015hlp.org/the-panel/. (Assessed on February 8th, 2014)
focus of a global agenda beyond 2015 comprising: “peace, inequality, climate change, cities, concerns of young people, girls, and women and sustainable consumption and production patterns.” (ibid: 16)

Two global surveys also followed these efforts. The first is the “My World Survey,” which is an online survey that allows visitors to the website to choose six from a list of development issues that affect them and their families.\(^{19}\) The second, the “World We Want” platform\(^ {20}\), complements the first survey and allows for citizens around the world to comment and provide inputs on the various consultative processes that are ongoing for the global development agenda beyond 2015.

Moreover, in June 2012, the United Nations Conference on Sustainable Development, which took place in Rio de Janeiro, Brazil, Rio+20, also sought to present a nexus between new and emerging development trends and challenges and the deliberations for a new agenda beyond 2015. This also emphasized sustainability as a critical issue for envisioning a new future and the efforts towards global development and a poverty agenda that countries should commit to — that the new agenda should comprise “goals [that] should address and incorporate in a balanced way all three dimensions of sustainable development and their inter-linkages” namely, social, economic, and environmental (United Nations, 2012a: 47). The resultant document from the conference dubbed “The Future We Want” recommended the formation of an intergovernmental working group that would focus on a set of goals known as Sustainable Development Goals (SDGs) for the 68\(^{th}\) session of the United Nations General Assembly (United Nations, 2012b). On the 22nd of January 2013, the Working Group on SDG was formed consisting for thirty members by the 67/555 of the United Nations General Assembly (United Nations, 2013b).


\(^{20}\) The World We Want home page is available online at http://www.worldwewant2015.org/
The first session of the Working Group on SDG convened on the 14th and 15th of March 2013, and since then seven additional sessions have been convened. As of 2014, the topics or issues for deliberation have numbered over thirty, notwithstanding the several others that were outlined in the Rio+20 outcome document; and at each session, it seems that a new set of issues comes to the fore for deliberation. The issues include poverty, employment, gender equality and women's empowerment, climate change, education, disaster risk reduction, biodiversity and ecosystems, sustainable transport, biotechnology, rural development, migration, demography, population and health, and many more.

In June 2013, the Leadership Council of the Sustainable Development Solutions Network in a report for the United Nations Secretary General, *An Action Agenda for Sustainable Development*, proposed ten goals to underpin the SDGs with a timeline of 2030. They are:

1. End extreme poverty including hunger;
2. Achieve development within planetary boundaries;
3. Ensure effective learning for all children and youth for life and livelihood;
4. Achieve gender equality, social inclusion, and human rights for all;
5. Achieve health and wellbeing at all ages;
6. Improve agriculture systems and raise rural prosperity;
7. Empower inclusive, productive, and resilient cities;
8. Curb human-induced climate change and ensure sustainable energy;
9. Secure ecosystem services and biodiversity, and ensure good management of water and other natural resources, and
10. Transform governance for sustainable development. (Sustainable Development Solutions Network, 2013)

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The latest of the Working Group on SDG sessions, the Eighth Session of the Working Group on SDG, was held from February 3rd through 7th, 2014 and deliberated on issues relating to: oceans and seas, forests, biodiversity; promoting equality, including social equity, gender equality and women’s empowerment; and conflict prevention, post-conflict peace building and the promotion of durable peace, rule of law and governance. In all these sessions and consultations, the SDGs are continually being fine-tuned to reflect expert opinions and consensus among actors in developed and developing countries. Evidently, the drive to envision a new global agenda suggests a more complex enterprise and is at times daunting. Owing to this complexity, despite some consensus on the dimensions of the SDGs, there is currently no clear cut consensus on the various goals, targets and indicators that would constitute the final set of the SDG and, subsequently, the new global agenda beyond 2015.

5.2.2 What are the United Nations’ Agencies Saying?

The literature on the issues that should inform a new global agenda for development and poverty is enormous, and the issues are similarly varied. While some of the issues are region specific, many others are cross cutting. This section looks at some of the critical issues that have been put forward and the arguments that are associated with them from the perspective of the United Nations and its agencies.

For starters, the United Nations System Taskforce has identified eighteen different issues for the post 2015 development agenda. The first of these issues is the emphasis on countries with special needs. The argument for this emphasis is that despite the progress of many countries toward socio-economic development, they are still several vulnerable countries across the globe characterized by economic growth with joblessness, aid dependency, slow progress in achieving MDGs compared to other developing countries, concentrated production and exports, and which are limited by virtue of their

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location in the world geography. (OHRLLS, 2012)  These countries are grouped into three categories, namely, least developed countries (LDCs), landlocked developing countries (LLDCs) and small island developing states (SIDS) and make up “the 90 most vulnerable member States of the UN.” (Ibid: 3) Subsequently, the OHRLLS argues that the new global development agenda beyond 2015 must reflect the challenges of these countries and proffer a new form of development approach that can facilitate a transformation in their economies emphasizing economic growth with employment creation, effective implementation of programs and projects on development and poverty reduction through development integration, rather than compartmentalization, and a greater international commitment to these countries.

The United Nations Educational, Scientific and Cultural Organization (UNESCO), on the other hand, stresses the need for optimizing the potential of culture for sustainable development. (UNESCO, 2012a) It argues that “Cultural heritage, cultural and creative industries, sustainable cultural tourism, and cultural infrastructure can serve as strategic tools for revenue generation, particularly in developing countries given their often-rich cultural heritage and substantial labour force” (Ibid.: 3). The agency intimates that culture provides a framework to which development interventions can be made multidisciplinary and sustainable while enhancing livelihoods and the rights of individuals. Subsequently, development interventions according to UNESCO should reflect first the cultural context of communities and countries while at the same time using culture in itself as a development strategy, i.e., conceiving, designing, implementing, managing, measuring, and rethinking development interventions beyond the 2015 global development agenda.

The United Nations International Strategy for Disaster Reduction (UNISDR) and World Meteorological Organization (WMO) also stress a need to mainstream “disaster risk and resilience” issues as part of the beyond 2015 global development agenda. They argue that despite the critical devastating effects and

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24 OHRLLS stands for the United Nations Office of the High Representative for the Least Developed Countries, Landlocked Developing Countries and the Small Island Developing States
trends of disasters across the globe, the MDGs did not incorporate disaster issues in its design and approach to global development. To them, managing risks is critical as it helps prevents loss of livelihoods and investments already made toward development, as well as provide an avenue to manage future disasters effectively. The agencies identify that disaster issues are cross cutting and threaten the sustainability of communities, countries or regions. They therefore identify that the next agenda should incorporate a disaster and resilience goal. They suggest a goal “To reduce risk and build resilience to disasters for all,” and targets of halving disaster mortality and disaster related economic loss, while developing national plans on disaster risk reduction and resilience (UNISDR and WMO, 2012).

While education is featured on the MDG agenda, it was mainly criticized for its overemphasis on basic rather than secondary, vocational and higher education. At the same, it was criticized for emphasizing enrollment rather than the quality of education. Subsequently, the focus beyond 2015 is one that ensures that education responds to the needs and aspirations of individuals contributing to their skills and livelihoods development as well as their empowerment, “sustainable human development, equity and inclusive growth” within the context of their lives, communities or country (UNESCO, 2012b: 7).

The International Labour Organization, on the other hand, emphasizes the economic dimension of development and poverty, but restricts its focus to employment. The ILO explains that the global workforce is increasing; thus, maintaining a decent supply of decent employment opportunities is one fundamental way of enhancing households and individuals’ capabilities to access social and economic services thereby reducing poverty. The ILO recommends that “Key development objectives are thus [required] to sustain a strong pace of employment growth and raise the earning power of the poorest” (ILO, 2012: 4). This, the agency argues, can be attained through relative labor intensive production, small and medium scale enterprise development, training and education, improving farm productivity, enhancing opportunities for social protection and, overall, the adoption of laws and regulations that can warrant these visions.
For social protection, the Economic Commission for Africa (ECA), ILO, United Nations Conference on Trade and Development (UNCTAD), United Nations Department of Economic and Social Affairs (UNDESA), and United Nations Children's Fund (UNICEF) suggest two potential goals that can be made part of the new global development agenda: “(1) By 2030 all people have social protection at least at the level of national floors for social protection. (2) By 2030 all people with contributory capacity enjoy higher levels of social protection that were determined in a participatory national dialogue” (ECA, ILO, UNCTAD, UNDESA, and UNICEF, 2012: 10).

Similarly, employment is part of the argument put forward by the thematic think piece of ILO, UNCTAD, UNDESA, and World Trade Organization (WTO) officials who suggest that “Macroeconomic stability, inclusive growth and employment” should be core to the discussions beyond 2015 global development agenda (ILO, UNCTAD, UNDESA, and WTO, 2012).

On the issues of hunger, the Food and Agriculture Organization (FAO), International Fund for Agricultural Development (IFAD), and World Food Programme (WFP) think piece, “Imagining a world free from hunger: Ending hunger and malnutrition and ensuring food and nutrition security,” underscores the justification of mainstreaming the issue of hunger in the development agenda beyond 2015 around five core issues, namely:

i. “Eradicating Hunger and Malnutrition and Ensuring Food and Nutrition Security.”

ii. “Responding to Pressing Needs” such as increasing resource assistance, access to land, balance in consumption patterns, finance, markets and distribution.

iii. “Addressing Emerging Threats” relating to volatility in food prices, effects of large scale agriculture on small holder farmers, declining agriculture productivity, climate change effects, urbanization, obesity, etc.

iv. “Meeting the Zero Hunger Challenge;” and

v. “A Bold Goal to Eradicate Hunger” (FAO, IFAD, and WFP, 2012: 3-9).
The UNDESA, United Nations Development Programme (UNDP) and UNESCO agencies on the other hand emphasize and justify the need for governance and development in the next global development agenda. To them, emphasis should be placed on a peaceful, stable and inclusive governance system at both national and local levels that is responsive to the development needs of member countries. They also recommend institutional capacity development, intersectoral linkages, citizen’s participation, transparency and accountability at all levels of government in addition to a strong and pluralistic media atmosphere. (UNDESA, UNDP, and UNESCO, 2012)

On the issue of human rights, the Office of the High Commissioner for Human Rights (OHCHR, 2012) argues that the new agenda should, first and foremost, help in liberating people’s fear and wants; promoting human dignity by ensuring that economic development improves access to social services and opportunities, as well as minimizing disparities and discrimination. At the same time, it stresses a need for human rights to be the lens through which development and poverty reduction interventions are conceived and implemented, while simultaneously demanding accountability and transparency from institutions that are the development bearers in member countries. Equally as important as human rights, the Peace-building Support Office (PBSO, 2012) stresses the importance of peace and security which, when not attained, can be an affront to development outcomes, emphasizing that many of the setbacks in achieving the MDGs are attributed to violent conflicts, which derailed achievements and also exacerbated existing development challenges across the globe. To this office, the drivers and consequences of violence are multifaceted requiring a broad and cross-cutting emphasis in the new global development agenda. To attain this, the PBSO suggests that the post-2015 development agenda could consider mitigating inequality as a cross-cutting issue while striving to attain the following three goals:

i. Peace and security, which could include targets on personal security and democracy, political participation or inclusive politics.

ii. Sustainable socio-economic or human development, which could include targets on poverty, jobs, food security and nutrition, health, education, energy and the environment.
iii. Human rights, rule of law and access to justice, which could include targets on equality and non-discrimination. (PBSO, 2012: 9)

In support of the need to incorporate inequality in the next agenda, the ECE, ESCAP, UNDESA, UNICEF, UNRISD, and UN Women (2012) explain that inequality should be at “the heart of the post-2015 agenda and the future we want for all.” To achieve this, they suggest that human rights, as also presented by OHCHR (2012), should be the filter or lens of development interventions by being the “standard against which all policies, including macroeconomic policies, are judged and held accountable, and not vice-versa.” (Ibid.: 6). They also recommend a transformational change in governance and development management including adopting specific programs such as legislation reforms, income distribution policies, social protection programs, access to information, opportunities and services, among many others.

On the issue of health, the UNAIDS, UNICEF, UNFPA and WHO (2012) argue that health is fundamental for promoting sustainable development, which is explicit in the global development agenda beyond 2015 based on the Rio+20 Conference. To them, while progress on the health MDGs was impressive, much more is needed — specifically, the MDGs have shown the importance of health to human development, which should subsequently be an integral part of the new development agenda. Therefore, a more interconnected process where health goals are linked explicitly to the achievement of other goals is imperative. Similarly, they appreciate that the goals must reflect changing dynamics of global health trends such as aging, rising health care costs, as well as ensure that these goals are country

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26 This reflects the title of the thematic think piece—“Addressing inequalities: The heart of the post-2015 agenda and the future we want for all”
specific and inclusive. Above all, they emphasize that “health” in itself should be the goal to which other goals such as maternal health, child mortality, malaria, among others, fall under.

In terms of population, three perspectives are drawn by different United Nations agencies, namely the UNDESA and UNFPA, which emphasize “population dynamics”, the United Nations Human Settlements Programme (UN-Habitat), centered on “sustainable urbanization”, and the International Organization for Migration (IOM and UNDESA, which stress “migration and human mobility.” The arguments put forward by (UNDESA) and UNFPA (2012) suggest that to be able to improve development outcomes and reduce poverty, there is a need to appreciate the structure and distribution of population, its growth, changing trends and how these impact the development of countries — especially on inequalities across all facet of a country’s population, including age, sex, ethnicity, location (rural/urban), migration, mobility, etc. To this end, understanding the complexities and opportunities that population dynamics place on development processes should be core to the new development agenda.

In support of the relevance of population issues in the new global development agenda, the IOM and UNDESA, who emphasize migration and human mobility, contend that these issues have become a global issue stemming from the challenge of immigration, as well as challenges of internal migration, on human development across the globe. They argue that migration and mobility are at times related to social, economic and demographic inequalities stemming from underdevelopment and poverty.

While there are different forms of the impact of migration and mobility for travel origins and destinations, the IOM and UNDESA (2012) argue there is a great opportunity to optimize, particularly at the international level, the issue of remittances. They make two recommendations for the beyond 2015 development agenda. The first is that migration and mobility should be mainstreamed in national and

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27 These were respectively the titles of their thematic think pieces on the UN beyond 2015 agenda.
local development planning, where policies and programs will demonstrate how the challenges of migration and mobility could be minimized if not prevented, while optimizing the benefits it offers for poverty reduction and human development.

For the UN-Habitat, while population issues are critical, the agency stresses the importance to appreciate the current state of population distribution in the world. That is, currently, there are more people in urban areas than in rural areas as a result of urbanization mostly in the developing world. In this regard, the UN-Habitat argues that “Urbanization is thus providing the setting, the underlying base, and also the momentum for global change” (UN-Habitat, 2012: 3). Hence, mainstreaming urbanization in the post-2015 global development agenda will enable countries to incorporate into national and local planning the new roles cities are assuming globally in steering regional and global development. The agency therefore suggests that countries examine and optimize the potential that cities offer so as to enhance human welfare, rather than accept the challenge of impoverishment that currently characterizes many cities of developing countries.

As important as all these issues are, the International Atomic Energy Agency (IAEA), International Telecommunication Union (ITU), UNESCO, United Nations Office for Outer Space Affairs (UNOOSA), and World Intellectual Property Organization (WIPO) observe that many of these rationalizations of the issues to be included in the new global agenda are dependent on science, technology, innovation and intellectual property rights. They argue that the world:

….cannot protect, feed, and educate our children, or keep them healthy, if we cannot find better, cheaper, smarter ways of producing goods and bringing them to markets [;]… cannot create sustainable jobs or robust economies, capable of withstanding fluctuations in global markets without being able to harness the power of knowledge, innovation and creativity [;]… cannot create fully functional health, education or social systems if the public and private sectors remain in separate silos. (IAEA, ITU, UNESCO, UNOOSA, and WIPO, 2012: 3)
As such, these three issues must drive all the efforts that the new development agenda would put forward. This, according to these agencies, must begin by building a relationship between science and development at all levels of governance; ensuring ‘development-driven’ scientific research; increasing information on scientific research, and promoting access to information, communication, and technology, as well as several actions by governments and the private sector. In the mist of all these, the ECE, ESCAP, UNDESA, United Nations Environment Programme (UNEP), and United Nations Framework Convention on Climate Change (UNFCCC) suggest that, while the world looks into the future, there is a need to build a link between the past (MDGs) and the future (SDGs), both of which comprise the three main pillars of sustainable development, namely social, economic, and environmental equilibrium. They argue that sustainable development has already become the definitive framework within which the new global development agenda is conceived. However, to better formulate this agenda, these agencies argue that “three criteria should guide the integration of sustainable development in the post-2015 development framework:

- Aim at universal and equitable human development (minimum social thresholds), while staying within a safe operating space of the planet (ecological ceiling);
- Balance and integrate economic, social and environmental dimensions to promote synergies and avoid trade-offs favouring one dimension over the others;
- Reflect the complexity of sustainable development in its multiple dimensions while keeping a concise, simple, focused monitoring framework. (ECE, ESCAP, UNDESA, UNEP, and UNFCCC, 2012: 6)

In all, then, eighteen different thematic issues are recommended for incorporation into the new global development agenda after 2015. A review of the thematic issues and the focus of the various organizations that put them forward show a strong relationship. It is as if each agency or department of the United Nations wanted to be included in the new development agenda. As Melamed rightly puts it, it seems to be a “‘scramble for goals’…creating a very real risk of a set of 50 [possible] goals that is so long that they are all ignored” (2011: 2). In addition to this scramble, there is some repetitiveness in the
suggestions that these agencies offer. Though some of the agencies identified their thematic think piece to be cross-cutting, the arguments and recommendations that they suggest reflect more of the need to consider uniquely their thematic think piece as one of the final products of the beyond 2015 deliberation process.

5.2.3 What are the Experts\textsuperscript{28} Saying?

Several experts have also made recommendations as to the way forward. While some look at sets of goals or themes, others attempt to justify why particular issue(s) should be mainstreamed in the next round of the international development agenda. The literature on these is enormous, and, as the countdown continues, the debates and the literature continue to gain momentum. The issues range from methodology, to cross-cutting issues to a single focus. Two main issues stand out though: economic development and sustainable development. Table 5.1 summaries some of the literature of expert opinions and their emphasis for the beyond 2015 global development agenda.

Experts’ discussions on the new agenda have been particularly critical of the MDG design. As indicated earlier in Chapter Two, questions of fairness in measures, sources of the data for tracking progress and whether the whole scheme of goals and indicators was the right framework for tracking global progress were mooted. Most importantly, the debates and critiques reiterate the need for a global development agenda that can effectively promote development thereby helping to reduce or possibly eradicate global poverty. Subsequently, Vandemoortele (2009) cautions actors to “hasten slowly” and that a “hasty definition of the post-2015 targets would be ill-advised.” After five years of his caution, several consultations and deliberations have been initiated. And though the process is by no means hasty, the recommendations and advocacy of what should inform the substantive issues seems to have already been almost declared in the form of the sustainable development goals (SDGs).

\textsuperscript{28} Here, experts refer to recommendations from outside the United Nations structure for the beyond 2015 agenda. This includes regional and national consultations from civil society groups, think thanks, and individuals.
### Table 5.1 Expert Opinion of the Beyond 2015 Global Development Agenda

<table>
<thead>
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<th>Authors</th>
<th>Year</th>
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<tbody>
<tr>
<td>Jan Vandemoortele</td>
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<td>Angeline M. Barrett</td>
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<td>Selim Jahan</td>
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<td>Cesar G Victora, Robert E Black, J Ties Boerma, and Jennifer Bryce</td>
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<td>Erik Solheim</td>
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<td>Barry Carin and Nicole Bates-Eamer</td>
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<td>Claire Melamed</td>
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<td>Deepak Nayyar</td>
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<td>Claire Melamed &amp; Andy Sumner</td>
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<td>Jan Vandemoortele</td>
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<td>Sakiko Fukuda-Parr</td>
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<td>Gina Bergh and Jonathan Couturier</td>
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<td>Pedro Martins, Jonathan Glennie and Shakira Mustapha</td>
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<td>Pedro Martins and Laura Rodriguez Takeuchi</td>
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<td>Elisabeth Prammer &amp; André Martinuzzi</td>
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<td>Paula Lucci</td>
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<td>Marta Foresti and Leni Wild, with Laura Rodriguez Takeuchi and Andrew Norton</td>
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Source: Author’s own illustration, 2014
However, Melamed (2011) cautions a move away from a definitive form of goal setting by first asking three fundamental questions that are preeminent for rethinking the new development agenda: What would a global agreement be for? Who would a global agreement be for? How should a new global agreement link to the national level? These concerns resonate with Nayar (2012) who argues that MDGs did not take into consideration the initial conditions or context of member countries, while they only specified the “destination but do not chart the journey.” Thus, by understanding who the new agenda is aimed at, the critical issues that delimit the progress of its goals would be the defining framework on which agreements would be based, while at the same time offering a needed apparatus to embark on the journey to reach the desired destination.

Since 2011, consultations on the SDGs have raged on unabated across the globe, and, despite the fact that different inputs have been made, the direction and focus still hover around the SDGs. In all these deliberations, there has been duplication and repetitiveness of the issues with some offering little means of being able to track them. The issues of equity, inequality, sustainability, and human rights are cross-cutting, which makes it difficult to separate them as unique goals or focal issues for discussion. Moreover, these manifest differently across countries and thus require more country based indicators and targets rather than global ones. Fukuda-Parr suggests that in rethinking a new agenda, therefore, requires that goals are “consistent with their function as normative instruments to promote inclusive and equitable development, rooted in the ethical commitments of the Millennium Declaration” (2012: 17). Specifically, the new agenda should, among other things, acknowledge the multidimensionality of development; “promote security from downside risks”; promote sustainability with emphasis on global climate change; promote equality and human; promote national and global development partnerships for development; and adapt global development goals to national contexts, while incorporating development inclusiveness and mutual consensus for goals to be owned and aimed at developed and developing countries. Unfortunately, this offers little as to how to mainstream such issues of equity, diversity, inequality, and sustainability, which manifest differently across member countries.
Apparently, these suggestions are no more different from the SDGs, and recommendations by several other experts (Carin and Bates-Eamer, 2011; Bates-Eamer et al., 2012; Melamed, 2012)

5.3 Summary

In all their arguments, the experts have also emphasized that the emerging trends of climate change, population growth, health and age, skills and education, financial development, international aid allocation, macroeconomic and microeconomic management, and effective development measure should inform the new agenda beyond 2015. One can hope and appreciate the enormity of the task at hand as all these processes unfold, but at the same time require a rethinking of the critical issues of translating all this macro-thinking into micro-think pieces for communities and households in the various member countries of the United Nations.
CHAPTER SIX

PROGRESS TOWARDS ACHIEVING MDG TARGETS BY WEST AFRICAN COUNTRIES

6.1 Introduction

So far, all the various discussions have looked at the different arguments on international aid and the MDGs as well as the debates for a new agenda beyond 2015. As the deadline for achieving the MDGs draw ever closer, one critical challenge remains — that is how can a new international agenda reflect regional uniqueness and contextual development dynamics? To answer such a question is to begin by understanding the progress of these regions to appreciate these contextual nuances.

Thus for West African countries, understanding the trends made towards achieving the MDGs and the challenges thereof are imperative. This is the object of this chapter — to appreciate three main issues. First, to explore the trends of West African countries towards achieving the MDGs, second to identify which countries are making good progress, and thirdly, to identify countries lagging behind.

6.2 West African Countries and MDGs Achievements

This section looks at the progress made by West African countries towards achieving the MDGs. This has been done in some the available country specific data from the MDG global database by of the United Nation. In addition, comparison to the Sub-Saharan targets were made especially when projection as to whether countries will attain specific targets by 2015. These projections were based the MDG global monitoring report by the World Bank.

To appreciate the trajectory of West African countries, some context has been provided in terms of progress thus far for developing countries and Sub-Saharan African countries. Overall, the trends in Sub-Saharan Africa and developing countries for the main indicators considered by the World Development report — extreme poverty, under nourishment, primary school completion, education gender parity, under five mortality, infant mortality, maternal mortality, access to improved drinking water, and access to
improved sanitation — show that many countries in Sub-Saharan Africa and developing countries overall will not attain their targets by 2015. For instance, 11 countries out of 36 countries in Sub-Saharan Africa will achieve their targets on extreme poverty, 11 will achieve the target on under nourishment, 5 countries for the target on primary school completion, 13 education gender parity, 7 for under five mortality, none for infant mortality and maternal mortality, 14 for improved water accessibility and none for improved sanitation (Figure 6.1). In other words, 38% of Sub-Saharan Africa countries will not achieve their target on extreme poverty, 51% for under nourishment, 30% for primary school completion, 15% for education gender parity, 36% for under-five mortality, 66% for infant mortality, 45% maternal mortality, 38% for improved water accessibility and 74% for improved sanitation.

**Figure 6.1 Progress Status of MDGs in Sub-Saharan Africa and Developing Countries**

6.2.1 MDG 1: Eradicate Extreme Poverty and Hunger

6.2.1.1 Target 1.A, is halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day.

There are three targets under the MDG 1. The first, Target 1.A, is “halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day.” For many of the data available it is difficult to appreciate any trend. On the surface and for those countries that have data for two or more years, some normative assumptions were made — that progress was linear and recent trends are more reflective of the trends leading to 2015 targets. On the surface, using the most recent available data for some of these countries, it was clear that progress was being made in terms of reducing the proportion of population below the poverty line of US1 per day at purchasing power parity (PPP). For instance, the proportion of the population below the poverty line in Burkina Faso in 1994 was 71.2%. By 2009, this had declined to 44.6%, a reduction of 26.6%. The poverty level in Senegal in 1991 was 65.8, in 1994, this declined to 53.6%, 44.2% in 2001 and 33.5% by 2005. In 2009, the proportion had reached 29.6%. The Gambia has also experienced some level of decline. In fact, between 1998 and 2003, poverty levels declined by 32% from 65.6% to 33.6%.

More so, the poverty level in Guinea went down tremendously — from 92.6% in 1991 to 43.3% in 2007 representing a decline of 49.3%. And while the poverty level in Ghana declined by 22.5% by the 2008, down from 51.1% to 28.6%, Cote d'Ivoire and Guinea Bissau had their poverty levels increase by 6% by 2008 and 7.6% by 2002 respectively. As at 2006, Ghana was the first country in West Africa to have achieved the first MDG1 target. The data on the first indicator for these West African countries are presented in Figure 6.2.
Similarly, there was a challenge of a consistent trend data for the Poverty Gap Ratio (PGR) indicator. Nonetheless, the most recent available data for these countries provides some indication as to how they have been doing over the years. PGR measures that average gap in terms of ratio to the poverty line. It thus measures on the average the magnitude of poverty in relation to how far the population below the poverty line is far or close to the poverty line. As different countries of West Africa have different data points, it is not adequate to present a comparative view. Taking these countries individual helps to manage this situation.

From the MDG Global Database, the lowest average captured for West African countries occurred in Togo, at 8.8% in 2011. This declined by 2.6% from 11.6% in 2006. The only available data for Benin was recorded in 2003. In that year, the PGR was 15.7%. The PGR of Burkina went down from 34.7% in 1994
to 14.7% in 2009, 6.1% for Cape Verde in 2002, a decline of 33.8% in 1998 to 11.7% in 2003 for Gambia, and from 18.3% in 1992 to 9.9% in 2006 for Ghana.

To add further, Guinea over a period of 16 years reduced its PGR from 63.3% to 15%, while Guinea-Bissau reduced its PGR from 21.7% in 1991 to 16.6%. The most recent records for the rest of the West Africa countries are 40.9% in 2008 for Liberia, 6.8% in 2008 for Mauritania, 16.4% in 2010 for Mali, 12.4% in 2008 for Niger, 21.8% in 2011 for Nigeria, 9.1% in 2011 for Senegal, and 16.6% in 2011 for Sierra Leone. This is presented in Figure 6.3 below.

![Figure 6.3 Poverty Gap Ratio at $1 a Day (PPP), Percentage](image)

**Figure 6.3 Poverty Gap Ratio at $1 a Day (PPP), Percentage**


Interestingly, the poorest 20% of the population in all the countries of West African accrue less than 10% of their countries’ national consumption or income. All records since 1990 up to the years with the most recent data show none of these countries has their share of the poorest quintile accruing more than 10% of
their national income. This is clearly an indication of the extent of income inequality within these countries. Figure 6.4 gives the plotted data on the poorest quintile in these countries.

![Chart of the Poorest Quintile's Share in National Income or Consumption, Percentage](chart.png)

**Figure 6.4 Poorest Quintile's Share in National Income or Consumption, Percentage**


The “Trends and projections of each MDG indicator for each country” by the World Bank gives some indication of how countries are faring. It must be noted here that the data basis from World Bank is different from the MDG Global database — and these projections were based on World Bank data which are different from the latter. Nonetheless, this resource provides a great way to appreciate the trajectory of some of the MDG indicators for these West African countries.

In Figure 6.5, the projected target attainment for MDG 1 indicator of halving the proportion of population below $1 (PPP) per day by 2015 shows that several of West African countries will not achieve this target. Only Cape Verde, Gambia, Ghana, Guinea, and Senegal will be able to achieve their set targets by the MDG deadline. It is however apparent that many will also not achieve the regional targets. Using the Sub-
Saharan Africa indicator of achieving 22.3% of the population in the region to be below $1 (PPP) per day by 2015, four countries show much progress towards achieving the MDG indicator — namely, Cape Verde, Cote d'Ivoire, Ghana, and Togo.

![Graph showing the projected 2015 level, target, and sub-Saharan Africa target for various countries.]

**Figure 6.5 Projected Path Based on Recent Progress for West African Countries for MDG Indicator on Halving Extreme Poverty by 2015**


6.2.1.2 **Target 1.B: Achieve full and productive employment and decent work for all, including women and young people**

In all West African countries, unemployment was high, averaging between 20% and 30% from 1990 to 2010. The MDG Global database had records for twelve out of the sixteen West African countries identified for this research. Benin recorded productive employment levels of 74.6% in 2003. In 1994,
Burkina Faso recorded 76.6%, 83.8% in 2005 and 76.2% in 2007. For Ghana, full and productive employment was recorded in 1992 as 73% and, by 2006, this had declined to 68.8%. Many other countries also experienced declines in the proportion of active full and productive employment — from 68% in 2009 to 60.5% in 2010 in Liberia, from 57.7% in 2001 to 53.7% in 2005 in Niger, 57.6% in 1991 to 55.3% in 2002. Full and productive employment in Mali, however, increased, from 36.7% in 1997 to 70.2% in 2007 (Figure 6.6).

Unfortunately, many of those employed still live under the poverty line. In 2003, the proportion of those living below the poverty line was 43.6% in Benin and 55.5% in Burkina Faso, 32.4% in Gambia, and 54.1% in Togo. It was 58.2% in 2004 in Nigeria. In 2006, it was 25.8% in Ghana, 51.3% in Gambia, and 35.8% in Togo. In 2007, it was 44.4% in Guinea, 83.8% in Liberia and 40.3% in Niger. The record of this indicator in 2008 for Cote d'Ivoire was 23.8% (Figure 6.7). Thus as much as people are employed, it seems that more people were working and earning less making it difficult for their source of livelihood to move them out of poverty in these countries.

![Figure 6.6 Employment-to-Population Ratio, Both Sexes, Percentage](image)

Figure 6.7 Proportion of Employed People Living below $1 (PPP) per Day, Percentage


6.2.1.3 Target 1.C: Halve, between 1990 and 2015, the proportion of people who suffer from hunger

In relation to the hunger target, it is worth noting that across the various West African countries, the data points at different times reveal that the proportion of children under five who are moderately or severely underweight is declining. Indeed, the lowest decline per any given two data points for each country (using first record and last record available difference) was 0.1% recorded in Togo. In 2006, Togo recorded 16.7% of children under five who were moderately or severely underweight. By 2010, this declined slightly to 16.6%. Though small, Togo’s progress is one that was challenging. After 1996, the recorded estimates increased to 23.8% in 1998 before recording a continuous downward trajectory to the 16.6% in 2010, which reflects 7.2% decline compared to the 0.1%. Burkina Faso, Guinea, Niger and Sierra Leone followed a similar trajectory of initial increase then declines after 2000.
The most recent record for West African countries showed signs of progression. In 1996, Benin recorded 26.2% for children under five who were moderately or severely underweight. By 2006, this had declined to 20.2%. In Burkina Faso, it was 29.6% in 1993 and 25.7% in 2010, 20.3% in 1994 to 15.7% in 2011 in Cote d'Ivoire, 23.2% in 1995 to 18.1% in Gambia, 23.7% in 1993 to 14.3% in Ghana, 37.6% in 1995 to 18.9% in 2010 in Mali, and 43.3% in 1990 to 14.7% in 2010 in Mauritania. Figure 6.8 illustrates these observations for all West African countries considered in this research.

Figure 6.8 Children under 5 Moderately or Severely Underweight, Percentage


The trends for percentage of the population undernourished are revealing. While Burkina Faso and Cote d'Ivoire had rising trends between 1992 and 2000, many other countries such as Benin, Cape Verde, Gambia, Guinea, Guinea-Bissau, Liberia, Mali, Niger, Senegal, Sierra Leone and Togo had fluctuating trends. Ghana and Nigeria declined steadily throughout the period, and even until 2012, the most recent available data point. Again Burkina Faso, and Cote d'Ivoire experienced declines compared to their 1992
statistics. Nonetheless these countries have strived and made steady progress in reducing the percentage of the population who are undernourished with the exception of Cote d’Ivoire and Senegal as indicated in Figure 6.9. In 2008, the percentage of the population undernourished in Cote d’Ivoire was 19% and 15.6% in Senegal. By 2012, this had increased to 20.5% and 21.6% for these two countries respectively.

![Figure 6.9 Population Undernourished, Percentage](http://unstats.un.org/unsd/mdg/Data.aspx)

**Figure 6.9 Population Undernourished, Percentage**


Per the World Bank’s projections, seven out of the sixteen West African countries will reach their targets by 2015. These countries, namely Benin, Ghana, Guinea-Bissau, Mali, Niger, and Togo, have already achieved this target or are close to achieving them. All the above countries will also attain the regional target for Sub-Saharan Africa of 18% by 2015. While Cape Verde, Mauritania, and Nigeria will not be able to achieve their country specific target, they are projected to attain the Sub-Saharan Africa target. These World Bank projects are presented in Figure 6.10.
Figure 6.10 Projected Path Based on Recent Progress for West African Countries on MDG Indicator on Proportion of Population Undernourished


6.2.2 MDG 2 Achieve Universal Primary Education

6.2.2.1 Target 2.A: Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling

The starting point, 1990, of total net enrolment ratio in primary education for many of the West African countries was very low. In the early parts of 2000s, steady strides had been made. For instance, Benin recorded a total net enrolment ratio of 40.9% in 1990, and this rose to 85.6% by 2003. Nonetheless, such significant improvements were not cross-cutting. While some countries improved dramatically, the total net enrolment ratio in primary education for others increased only marginally.
Cape Verde has the highest total net enrolment ratio among these countries. The ratio as at 2011 was 93.8%, although it has been declining since 1990. Ghana’s total net enrolment in 1999 was 61.5%, but this increased to 82.6% in 2012, a slight decline from the 2011 ratio of 84.3%. In 1990, Gambia recorded 26.9% of total net enrolment ratio, and, in 2012, it recorded 83%. Mauritania and Senegal had a total net enrolment ratio of 75.3% and 78.9% respectively in 2011. Liberia has the lowest ratio per current available data with a 41.1% total net enrolment ratio in 2011. In 1991, Burkina Faso’s total net enrolment ratio was 25.3% rising to 36.9% by 2003. Figure 6.11 presents the total net enrolment ratio in primary education for West African countries.

Figure 6.11 Total Net Enrolment Ratio in Primary Education, Both Sexes

The proportion of pupils starting grade one who reached their last grade in primary in these countries suggests that steady progress is being made by these countries for this indicator too. The most recent available data for these countries, mainly in 2010 and 2011, show a minimum of 40% of pupils starting grade one progressing to reach the last grade of the their primary education across these countries. In 2010, Benin recorded 55.8%, 89.3% in Cape Verde, 63% in Gambia, 75.5% in Mali, 69.3% in Niger, 59.2% in Senegal and 51.7% in Togo. Mauritania recorded 73.3%, 58.6% in Guinea and 69% in Burkina Faso in 2011. It was 72.2% in Ghana, 60.8% in Cote d’Ivoire and 67.8% in Liberia in 2008, while Nigeria recorded 79.9% in 2009. These represent statistics from the most recent data available for these countries (Figure 6.12).

The literacy levels of these countries also varied. Countries with higher total net enrolment ratio and higher percentage of pupils starting grade one who reach the last grade of primary were associated with a
higher literacy level. For example, Cape Verde in 2010 had 89.3% pupils starting grade one who reach the last grade of primary education, 93.8% of total net enrolment ratio in 2011, and 98.4% literacy rates of those 15-24 years old. Conversely, Guinea had 83% of total net enrolment ratio in 2012, 58.6% of pupils starting grade one who reach the last grade of primary in 2011, and 31.4% literacy rates of those 15-24 years old in 2010. The data available do not form a definitive conclusion to establish such a critical association. Nonetheless, they give some indication as to the relationship among these three indicators.

The literacy rates of those 15-24 years old in Togo was 79.9%, 73.2% in Guinea, 69% in Mauritania, 68.1% in Gambia, 67.5% in Cote d’Ivoire, 61% in Mauritania and 46.9 in Mail — all in 2011. In Ghana, the literacy rate of those 15-24 years old was 85.7 in 2010, 66.4% in Nigeria in 2008 and 65% in Senegal in 2009. Figure 6.13 illustrates this distribution for the current available data for these countries since 1990.

![Figure 6.13](image-url)  
**Figure 6.13** Literacy Rates of 15-24 Years Old, Both Sexes, Percentage  
Unfortunately, none of these countries will be able to achieve the target on the percentage of pupils starting grade one who reach the last grade of primary. However, some countries will have achieved more and recorded gains closer to the 100% target. Per the World Bank estimates, projections based on recent progress of these countries show that Sierra Leone and Guinea are making the greatest progress towards this indicator as presented in Figure 6.14.

Figure 6.14 Projected Path Based on Recent Progress for West African Countries on MDG Indicator on Percentage of Pupils Starting Grade One Who Reach Last Grade of Primary, Both Sexes

6.2.3 MDG 3 Promote Gender Equality and Empower Women

6.2.3.1 Target 3.A: Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015

The Gender Party Index is a ratio of girls to boys. For the MDGs, this measure has been applied to primary, secondary and tertiary education where the index is used to measure the ratio of the number of female to male students enrolled at primary, secondary and tertiary levels. Gender parity between female and male students from these countries is strong at the primary level of education. However, the ratio declines as one moves to higher the levels of education in these countries. By implication, it seems that the education of girls declines moving from primary to tertiary education. The average index across these countries in 2011 was 0.92, 0.77, and 0.54 for primary, secondary and tertiary education respectively.

Figure 6.15 Gender Parity Index in Primary Level Enrolment

Figure 6.16 Gender Parity Index in Secondary Level Enrolment


Figure 6.17 Gender Parity Index in Tertiary Level Enrolment

In 2011, the highest, 1.07, was recorded in Senegal at the primary school level, 0.92 at the secondary school level and at the tertiary level, it was 1.37 recorded in Cape Verde. Across all the countries, the ratio at the tertiary level was low — 0.5 in Burkina Faso, 0.36 in Guinea, 0.46 in Mali, 0.42 in Mauritania and 0.38 in Niger in 2011. Ghana record 0.62 in 2011 and 0.63 in 2012, while the most recent available data for Benin were in 2009 with a ratio of 0.38. Furthermore, 0.6 was recorded in Nigeria in 2010. Figures 6.15, 6.16, and 6.17 present the data on the Gender Parity Index for primary, secondary and tertiary level education enrolment respectively.

Gender parity in governments across the West African countries is also low. The percentage of seats held by women in national parliament is less than 25% in all the countries, with the exception of Senegal whose parliament currently has 42.7% women occupying those seats. Since 1990, the percentage of seats occupied by women at the national parliament has remained less than 25% and at times has been in the single digits. The percentage of seats held by women in the national parliament in Benin is 8.4%, 7.5% in Gambia, 6.7% in Nigeria, 10.3% in Ghana, 10.4% in Cote d'Ivoire, 11% in Liberia, 11.1% in Togo, 12.4% in Sierra Leone, 13.3% in Niger, 14% in Guinea-Bissau, 15.7% in Burkina Faso, 20.4% in Cape Verde and 22.1% in Mauritania. Figure 6.18 provides the historical trends for this indicator.
Figure 6.18 Seats Held by Women in National Parliament, Percentage


6.2.4 MDG 4: Reduce Child Mortality

6.2.4.1 Target 4.A: Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate

There are three indicators under this target. The first two are the children under five mortality rate per 1,000 live births and the infant mortality rate (0-1 year) per 1,000 live births. For all these countries, there have been consistent declines from 1990 to 2012. The greatest decline for the former occurred in Niger dropping from 326.1 under five child deaths per 1000 live births in 1990 to 113.5 deaths per 1000 live births in 2012. This reflects a decline in under five deaths of 212.6 per 1000 live births. Guinea, Liberia, and Mali all reduced the number of children under five deaths by more than 100 deaths over the same period. The 2012 data show that the number of children under-five mortality rate in Benin is 89.5, 102.4 in Burkina Faso and 22.2 deaths per 1000 live births in Cape Verde. In addition, there were 107.6 under-five deaths per 1000 live births in Cote d’Ivoire, 72.9 in Gambia, 72 in Ghana, 101.2 in Guinea and 129.1 in Guinea-Bissau. The rest are 74.8 in Liberia, 128 in Mali, 84 in Mauritania, 113.5 in Niger, 123.7 in
Nigeria, 59.6 in Senegal, 181.6 in Sierra Leone and 95.5 in Togo. For the infant mortality rate (0-1 year) per 1,000 live births, Benin recorded 58.5 deaths in 2012, 65.8 in Burkina Faso, 18.9 in Cape Verde, 76.2 in Cote d’Ivoire and 49.2 in Gambia. Ghana also recorded 48.6 deaths in 2012, 65.2 in Guinea, 80.8 in Guinea-Bissau, 56 in Liberia, 79.6 in Mali, 64.8 in Mauritania and 62.8 in Niger. Furthermore 77.8, 45.2, 117.4, and 62 deaths per 1000 live births were recorded in Nigeria, Senegal, Sierra Leone and Togo respectively. Figure 6.19 and 6.20 present these trends.

Figure 6.19 Children under Five Mortality Rate per 1,000 Live Births


Unfortunately such consistencies in the declines experienced in the other two indicators for MDG Target 4A were not experienced for the percentage of children 1 year old who have been immunized against measles. The trends for all the countries have been consistently fluctuating since the 1990s as seen in Figure 6.20
Figure 6.20 Infant Mortality Rate (0-1 year) per 1,000 Live Births


Figure 6.21 Children 1 year old Immunized against Measles, Percentage


From the World Bank estimates, only three countries are projected to be on track in achieving their target on children under-five mortality rate and only one can attain the Sub-Saharan target of 29 deaths per 1000.
live births by 2015. While Cape Verde, Liberia, and Niger can meet their country specific targets by 2015, Cape Verde and Senegal are projected to also meet the Sub-Saharan African target by 2015 as indicated in Figure 6.22.

![Figure 6.22 Projected Path Based on Recent Progress for West African Countries on MDG Indicator on Children under-Five Mortality Rate per 1,000 Live Births.](image)

Figure 6.23 Projected Path Based on Recent Progress for West African Countries on MDG Indicator on Infant Mortality Rate per 1,000 Live Births


6.2.5 MDG 5: Improve Maternal Health

6.2.5.1 Target 5.A: *Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio*

Two indicators measure this target. The first, the maternal mortality ratio per 100,000 live births has been declining for all countries. While Niger experienced the greatest decline from 1200 deaths per 100,000 lives in 1990 to 590 in 2010, Cape Verde experienced the least decline of 121 deaths from 200 deaths per 100,000 live births in 1990 to 79. Nonetheless, it is the only country in West Africa with maternal mortality below 100 deaths. Per the recent available data on this indicator, Sierra Leone had the highest rate with 890 deaths per 100,000 births. All the other countries, with the exception of Cape Verde, had maternal mortalities of at least 300 in 2010 (Figure 6.24).
While several factors may contribute to this situation, the second indicator under this target provides some insight into the probable causes of high mortality rates in West Africa. Access to a skilled birth attendant has many repercussions on the health of women during delivery. Current available data show that the access to skilled health personnel who attend to births during delivery, though rising, is still low across many of the countries. In 2012, 84.1% of births were attended to by skilled health personnel in Benin. In Cote d’Ivoire, the figure was 59.4%. For Ghana, 68.4% births were attended to by skilled health personnel, while in 2011, 65.9% of births were attended to by skilled health personnel, 56.6% in Gambia, 43% in Guinea-Bissau, 62.5% in Sierra Leone and 59.4% in Togo. Figure 6.25 presents the trends in births attended by skilled health personnel across these West African countries.
Figure 6.25 Births Attended by Skilled Health Personnel, Percentage


6.2.5.2 Target 5.B: Achieve, by 2015, universal access to reproductive health

Under Target B of MDG 5, there are four indicators. The first measures the prevalence rate of contraceptives, the second looks at birth rates among adolescents, the third measures antenatal care, while the last measure looks at the unmet need for family planning in countries.

The statistics for all, as presented in Figures 6.26 to 6.29, show that progress on these indicators is mixed. Contraceptive use in countries like Benin, Burkina Faso, Gambia, Ghana, Guinea, Nigeria and Togo are declining slightly as per the most available data for these countries. On the other hand, countries like Cape Verde, Cote d’Ivoire, Guinea-Bissau, Mali, Niger, Senegal and Sierra Leone are experiencing increases in the use of contraceptives. (Figure 6.26)
Figure 6.26 Current Contraceptive Use among Married Women 15-49 Years Old, Any Method, Percentage


Disturbingly, adolescent birth rates are still high among West African countries. Many are over 100 live births per 1000 women. In 2010, 94.02 live births were recorded in Benin, 128 in Cote d'Ivoire, 118 in Gambia, 146 in Guinea, 206 in Niger and 113 in Nigeria. (Figure 6.27)

However, it is refreshing to note that there are signs of increased antenatal coverage across these countries. Data available indicate that 85.8% women made at least one antenatal visit in 2012 in Benin — an increase from 84.1% recorded in 2006. Cote d'Ivoire for instance, recorded 84.8% of women making at least one antenatal visit in 2006, but by 2012, this had increased to 90.6%. The most recent available data suggest that the percentage of antenatal care coverage, at least one visit, was 96.4% in Ghana in 2011 and 93.3% in Senegal. Similar improvements are also observed for the percentage of antenatal care coverage of at least four visits for many of these West African countries. (Figure 6.28 and Figure 6.29)
Figure 6.27 Adolescent Birth Rate, per 1,000 Women


Figure 6.28 Antenatal Care Coverage, at Least One Visit, Percentage

Figure 6.29 Antenatal Care Coverage, at Least Four Visits, Percentage


Figure 6.30 Unmet Need for Family Planning, Total, Percentage

Unfortunately, the total unmet need for family planning is high in many of these countries averaging a minimum of 25.3% from all West African countries since 2005 based on available country data (Figure 6.30).

The World Bank projections based on recently available data suggest that only Cape Verde will achieve its target on maternal mortality by 2015 and also attain the Sub-Saharan African target of 85 deaths per 100,000 live births. Figure 6.31 demonstrates this observation.

Figure 6.31 Projected Path Based on Recent Progress for West African Countries on MDG Indicator on Maternal Mortality Ratio per 100,000 Live Births


6.2.6 MDG 6: Combat HIV/AIDS, Malaria and Other Diseases

6.2.6.1 Target 6.A: Have halted by 2015 and begun to reverse the spread of HIV/AIDS

For most countries in the West African sub-region, the trajectory of HIV/AIDs has either been halted or is on the decline. Indeed, this is very welcoming as the disease is a great pandemic, which threatens the
livelihoods and productivity of people. The trend between 1990 and 2000 was, however, depressing. Most importantly, the spreading of the disease gained momentum between 1996 and 2000 although this was not evident in all the countries (Figure 6.32).

Figure 6.32 People Living with HIV, 15-49 Years Old, Percentage


The spread of the disease peaked in 1999 in Cape Verde (1%), Ghana (2.2%), Guinea-Bissau (2.5%), Liberia (2.5%) and Mali (1.7%). In the early 2000s, countries like Nigeria, Sierra Leone, Senegal, Niger, Mauritania, Guinea-Bissau and Gambia continued to increase — and for some until 2011. Condom use among men and women between 15 and 24 years continues to remain a challenge. While data available for some of these countries such as Benin indicate some signs of increased use, countries like Ghana and Mali show that condom use among men and women is on the decline (Figure 6.33 and Figure 6.34).
Figure 6.33 Condom Use at Last High-Risk Sex, 15-24 Years Old, Women, Percentage


Figure 6.34 Condom Use at Last High-Risk Sex, 15-24 Years Old, Men, Percentage

Unfortunately, the percentage of men and women between 15 and 24 years old with comprehensive correct knowledge of HIV/AIDS is less than 50% for all countries per the most recent available data. Such observations suggest that there are more people at risk of infection, while at the same time they may not be aware of the resources available to them to manage the disease if infected.

6.2.6.2 Target 6.B: Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it

All the countries under consideration between 2009 and 2011 experienced a consistent increase in access to treatment, with the exception of Mauritania, and Senegal, which declined by 5%, 0.3% and 11.6% respectively. Antiretroviral therapy coverage among people with advanced HIV infection was highest in Benin in 2011. Benin recorded 60.5% coverage, while the least was recorded in Mauritania at 20.9%. The greatest increase in coverage occurred in Gambia (33%), followed by Ghana and Liberia with an increase in coverage of 19.5% and 19.4% respectively. At the same time, the least increment occurred in Cote d’Ivoire with a 4.3% increase in coverage. Figure 6.35 presents this antiretroviral therapy coverage among people with advanced HIV infection for these countries.
Figure 6.35 Antiretroviral Therapy Coverage among People with Advanced HIV Infection


2.2.6.3 Target 6.C: Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases

While malaria and tuberculosis are still the predominant challenges to health in many developing countries, there seems to be little progress in mitigating this threat, especially for West African countries. The maximum number of cases was recorded in Guinea with a record of 38,479 of notified cases of malaria per 100,000 population (Figure 6.36). On the hand, Cape Verde recorded the least with only 217 notified cases. On the average, there were 28076.35 malaria cases notified per 100,000 of the population. This suggests that the disease remains a dominant feature of the health of the people in these countries thus requiring critical attention. This is especially so when the average malaria death rate per 100,000 population for all ages is 105. Cape Verde continues to be the country standing out in relation to this indicator with only 1 malaria death rate per 100,000 population (Figure 6.37 and 6.38).
Figure 6.36 Notified Cases of Malaria per 100,000 Population in 2010


Figure 3.37 Malaria Death Rate per 100,000 Population, All Ages in 2010

Evidently, as per available recent data on each of these countries, the prevention of malaria is also a challenge. This is evident from the indicators on the percentage of children under 5 sleeping under insecticide-treated bed nets and the percentage of children under 5 with fever being treated with antimalarial drugs. In West African countries, the most recent data show that the percentage is less than 50%. On the percentage of children under 5 sleeping under insecticide-treated bed nets, only Benin (71% in 2012), Mali (70.2% in 2010), Niger (63.7% in 2010) and Togo (57.1% in 2010) had proportions greater than 50%.

While the prevention of malaria in West African countries remains a challenge, the curative measures also remain inadequate. For instance, the proportion of children under 5 with fever who are treated with antimalarial drugs remains less than 50% in many most of these countries. As of 2010, only Guinea-Bissau (51.2%) and Sierra Leone (62.1%) had proportions greater than 50% of children under five who were...
treated with anti-malaria drugs. In 2011, the available data indicated that only Ghana (52.4%) and Liberia (57.1%) were higher than 50%. Figures 6.39 and 6.40 provide the records of the available data for these countries. These two indicators suggest why the malaria death rate among children (0-4) and the death rate among all ages are high. They thus provide an impetus for rethinking how the health promotion, prevention and curative strategies are being implemented in these countries, while it is important to appreciate these trends, they should inform a critical rethinking of the needed interventions to mitigate these challenges.

![Figure 6.39 Children under 5 Sleeping under Insecticide-Treated Bed Nets, Percentage](image)

**Figure 6.39 Children under 5 Sleeping under Insecticide-Treated Bed Nets, Percentage**

Although available evidence shows that malaria prevention and treatment in West African countries pose a great challenge and are in dire need of amelioration, the trends in tuberculosis prevention and treatment are much more optimistic. Between 1990 and 2011, many countries experienced declines in the prevalence rate, incidence rate, detection and deaths associated with tuberculosis. The evidence shows that between 1990 and 2000, Benin, Burkina Faso, Cape Verde, Ghana, Guinea, Mali and Niger experienced declines in the tuberculosis prevalence rate. The greatest drop in absolute and percentage terms occurred in Niger, which declined by 416 cases per 100,000 population (52.33%), while Burkina Faso experienced the least decline — 8 cases per 100,000 population representing a 6.84% decline.

On the other hand, Côte d'Ivoire, Gambia, Guinea-Bissau, Mauritania, Senegal, Sierra Leone and Togo experienced increases in their tuberculosis prevalence rates. Sierra Leone had the highest increase in absolute terms of 288 cases per 100,000 population. The change represented a 59.38% increase in cases compared to the 90.87% increase in cases recorded in Mauritania. Gambia, however, recorded the least
increment of 6.57%. By 2011, the number of countries experiencing decline in the prevalence rate of tuberculosis had increased from seven to thirteen. All but Gambia (27.45%), Liberia (0.89%), Mauritania (42.62%) and Sierra Leone (77.49%) had a decline in their prevalence rate as presented in Figure 6.41. The rates in these countries have been increasing since 1990. In 2011, the tuberculosis prevalence rate in Sierra Leone was highest with a rate of 1372 cases per 100,000 population while the minimum prevalence rate was recorded in Burkina Faso with a rate of 85 cases per 100,000 population.

Overall, Benin, Burkina Faso, Cape Verde, Ghana, Guinea, Mali and Niger experienced a continuous decline between 1990 and 2011. Additionally, countries like Côte d'Ivoire, Guinea-Bissau, Nigeria, Senegal, and Togo, which hitherto were experiencing increasing trends between 1990 and 2000, experienced declining trends between 2000 and 2011.

![Figure 6.41 Tuberculosis Prevalence Rate per 100,000 Population (Mid-Point)](image)

Figure 6.42 Tuberculosis Incidence Rate per Year per 100,000 Population (Mid-Point)


The observations made for the number of cases of tuberculosis in a population at a given point in time (prevalence rate) were similar to the estimated number of new tuberculosis cases arising yearly (incidence rate) in these countries. From Figure 6.42, Benin, Burkina Faso, Cape Verde, Ghana, Guinea and Niger experienced continuous decline between 1990 and 2011. The yearly tuberculosis death rate has been generally low among these countries with the exception of Gambia, Liberia and Sierra Leone. In 2011, Gambia recorded 49 deaths per 100,000 population, while in Liberia and Sierra Leone, the death rates were 45 and 159 deaths per 100,000 population respectively. Ghana recorded the least with 7.5 deaths per 100,000 of the population in 2011. An interesting trend from the data available is that many of these countries have been on the decline since 1990. Between 1990 and 2000, seven countries, namely, Benin, Burkina Faso, Cape Verde, Ghana, Guinea, Mali and Niger experienced declines in their yearly tuberculosis death rate. Between 2000 and 2011, the number of countries doubled to fourteen to include
Côte d'Ivoire, Guinea-Bissau, Liberia, Nigeria, Senegal and Togo. Only Gambia, Mauritania and Sierra Leone continued on an increasing trajectory. These trends are presented in Figure 6.43.

![Tuberculosis Death Rate per Year per 100,000 Population (Mid-Point)](image)

**Figure 6.43 Tuberculosis Death Rate per Year per 100,000 Population (Mid-Point)**


This can be explained in part by looking at the tuberculosis detection rate under directly observed treatment (DOTS). The proportion has been increasing while at the same time tuberculosis treatment success cases under DOTS have also been increasing in many of these countries in the 2000s — most especially after 2007. Figures 6.44 and 6.45 illustrate these trends.
Figure 6.44 Tuberculosis Detection Rate under DOTS, Percentage (Mid-Point)


Table 6.45 Tuberculosis Treatment Success Rate under DOTS, Percentage

6.2.7 MDG 7: Ensure Environmental Sustainability

6.2.7.1 Target 7.A: Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources

Environmental sustainability is a critical challenge in West African countries. The available statistics between 1990 and 2010 show that these countries have constantly experienced depletion in the total land area covered by forest. There are some exceptions though. While fourteen out of the sixteen countries considered for this research experienced consistent depletion of forest cover, Cape Verde, Côte d’Ivoire and Gambia increased the proportion of land area covered by forests — 14.4% in 1990 to 21.1% in 2010 in Cape Verde, 32.1% to 32.7% in Côte d'Ivoire, and 44.2% to 48% in Gambia. On the whole, between 1990 and 2000, the median percentage loss of land area covered by forest across these countries was 1.95%, while it was 3.80% between 2000 and 2010. Ghana, since 1990, has been losing the greatest proportion of land area covered by forest. These trends are presented in Figure 6.46.

Figure 6.46 Proportion of Land Area Covered by Forest

At the same time Carbon dioxide (CO2) emissions have been increasing astronomically in these countries. Measured as thousand metric tons of CO2 emissions a year, the median increase between 1990 and 2000 was 23.72% while between 2000 and 2010, the median increase was 62.12%. Overall, between 1990 and 2010, the median increase has been 77.12%. Benin between these periods has experienced the greatest percentage in CO2 emissions between 1990 and 2010 — increasing from 715 thousand metric tons of CO2 emissions a year in 1990 to 5189 in 2010, a percentage change of 625.73%.

In absolute terms, however, Nigeria remains the country with the largest yearly emissions. On average, between 1990 and 2010, Nigeria emitted 69297.19 thousand metric tons of CO2 a year, far more than any other country in West Africa. Between 1990 and 2000, it increased by 74.51%, while it declined marginally by 0.34% between 2000 and 2010. Nonetheless, between 2009 and 2010, it increased again from 71,719 thousand metric tons of CO2 emissions to 78,910. Only a few countries experienced decline in CO2 emissions. Between 1990 and 2000, the number of countries was four, namely, Guinea-Bissau, Liberia, Mauritania, and Niger. By 2010, the number had been reduced to only Guinea-Bissau and Mauritania. Over the period between 1990 and 2010, these two countries reduced their emissions by 5.93% and 16.92% respectively. Figure 6.47 presents the CO2 emissions, total, per capita and per $1 for these West African countries.
6.2.7.2 Target 7.B: Reduce biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss

While the proportion of land area covered by forests is in decline for many West African countries, the proportions of protected terrestrial and marine areas has increased in all countries, with the exception of Senegal. It declined marginally by 0.07% between 1990 and 2012 per the most recent available data. The median increase in proportion of protected terrestrial and marine areas is 2.48%. Among all these countries, Guinea-Bissau experienced the greatest increase and also has the current highest proportion of protected terrestrial and marine areas of 27.12%. The lowest proportion was recorded in Cape Verde (Figure 6.48).
Figure 6.48 Proportion of Terrestrial and Marine Areas Protected


6.2.7.3 Target 7.C: Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation

Access to improved drinking water and improved sanitation has increased tremendously for all countries. There have been consistent increases from 1990 to 2011 for both indicators. The greatest increase in the proportion of the population with access to safe drinking water was recorded in Burkina Faso. Between 1990 and 2011, the proportion of people who had access to safe drinking water increased by 31% from 49% to 80%. The lowest was recorded in Côte d’Ivoire, which recorded an increase of 3% from 77% to 80%. Cape Verde and Gambia had the highest proportion of people with access to safe drinking water in 2011 with 89%, while the lowest was 50%, which was recorded in Mauritania and Niger.
Figure 6.49 Proportion of Population Using an Improved Drinking Water Source


Figure 6.50 Proportion of Population Using an Improved Sanitation Facility

Remarkably, for access to improved drinking water and sanitation facilities, as can be observed in Figures 6.49 and 6.50, the trends have been progressive. Yet not all of these countries will attain the targets on water and sanitation by 2015. The World Bank projections reveal that Cape Verde, Côte d'Ivoire, Mauritania, Niger, Nigeria, Senegal, Sierra Leone and Togo will be able to achieve their 2015 target on the proportion of the population with access to improved water sources (Figure 6.51).

![Projected Path Based on Recent Progress for West African Countries on MDG Indicator on Proportion of Population Using an Improved Drinking Water Source](image)

Figure 6.51 Projected Path Based on Recent Progress for West African Countries on MDG Indicator on Proportion of Population Using an Improved Drinking Water Source


However, in relation to the Sub-Saharan African target, only Mali, Mauritania, Niger, Nigeria, Sierra Leone and Togo will be able to attain the targeted 75% of the population with access to improved drinking water sources. The projections on access to improved sanitation facilities are better than those of water for West African countries. Out of the 17 countries being studied, 16 will achieve their country
specific targets, while 15 of these countries will achieve the Sub-Saharan African targets of 66%. Only Cape Verde will not be able to achieve its country specific target by 2015 — with a target of 65.9%, the World Bank projects that by 2015 the proportion of the population with access to improved sanitation facilities will be 69.04%.

Together with Gambia, Cape Verde will also not be able to attain the Sub-Saharan Africa target of 66%. The proportion of the population with access to improved sanitation facilities in Gambia is estimated to be 68.63% by 2015, a little short of the country-specific target of 79.02% and 2.63% short of Sub-Saharan Africa target (Figure 6.52).

Figure 6.52 Projected Path Based on Recent Progress for West African Countries on MDG Indicator on Proportion of Population Using an Improved Sanitation Facility

6.2.7.4 Target 7.D: By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers

The population of West African countries has been increasing rapidly. Across the sub-region, the urban population has increased systematically since 2005 and is projected to continue to 2050. In 2000, the urban population of West Africa was estimated around 90.7 million representing 38.5% of the entire sub-regional population. By 2010, the proportion of the urban population was estimated at 44.3%. UNDESA (2012) projects that the sub-region will become urbanized by 2025. Table 6.1 presents the urban trends and projections for the West African Sub-Region.

Table 6.1 Urban Population Dynamics of West Africa*+

<table>
<thead>
<tr>
<th>Population</th>
<th>Urban (*000)</th>
<th>Urban (%)</th>
<th>Rural (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>90 777</td>
<td>38.5</td>
<td>61.5</td>
</tr>
<tr>
<td>2005</td>
<td>110 832</td>
<td>41.4</td>
<td>58.6</td>
</tr>
<tr>
<td>2010</td>
<td>134 810</td>
<td>44.3</td>
<td>55.7</td>
</tr>
<tr>
<td>2015*</td>
<td>163 104</td>
<td>47.1</td>
<td>52.9</td>
</tr>
<tr>
<td>2020*</td>
<td>195 879</td>
<td>49.9</td>
<td>50.1</td>
</tr>
<tr>
<td>2025*</td>
<td>233 022</td>
<td>52.7</td>
<td>47.3</td>
</tr>
<tr>
<td>2030*</td>
<td>274 819</td>
<td>55.4</td>
<td>44.6</td>
</tr>
<tr>
<td>2035*</td>
<td>321 401</td>
<td>58.1</td>
<td>41.9</td>
</tr>
<tr>
<td>2040*</td>
<td>372 864</td>
<td>60.7</td>
<td>39.3</td>
</tr>
<tr>
<td>2045*</td>
<td>428 878</td>
<td>63.2</td>
<td>35.8</td>
</tr>
<tr>
<td>2050*</td>
<td>488 886</td>
<td>65.7</td>
<td>34.3</td>
</tr>
</tbody>
</table>

*Estimations and projections include St Helena

* Projections


One of the reasons for this massive growth in urban populations has been attributed to urbanization. According to United Nations estimates, “1,017 urban areas exceeding 10,000 inhabitants and about 104 agglomerations exceeding 100,000 inhabitants in the sub-region, and an estimated 481 localities will become ‘urban’ between 2000 and 2020” (UN-Habitat, 2014: 100). While population continues to grow
and urbanization gains momentum, the resultant effect from inadequate systems to manage urban population growth has resulted in the development of slums. In West African countries, the data available between 1990 and 2007 suggest a dire situation. Although growth on the proportion of the urban population living in slums has not been persistent, with some countries witnessing declines, the proportions are still high. The least of these proportions as of 2007 was recorded in Senegal at 38.1%. Niger in 2007 recorded 81.9% and Benin, 71.8%. The challenge with slums is that their manifestations and development ramifications are multifaceted and complicated. They represent the worst forms of urban settlement, and access to social and economic services is poor. Table 6.2 presents the current available information on the proportion of urban populations who are living in slums in West African countries.

Table 6.2 Proportion of urban population living in slums

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td>79.3</td>
<td>76.8</td>
<td>74.3</td>
<td>71.8</td>
<td>70.8</td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>78.8</td>
<td>72.4</td>
<td>65.9</td>
<td>59.5</td>
<td>59.5</td>
</tr>
<tr>
<td>Cape Verde</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Côte d’Ivoire</td>
<td>53.4</td>
<td>54.3</td>
<td>55.3</td>
<td>56.2</td>
<td>56.6</td>
</tr>
<tr>
<td>Gambia</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Ghana</td>
<td>65.5</td>
<td>58.8</td>
<td>52.1</td>
<td>45.4</td>
<td>42.8</td>
</tr>
<tr>
<td>Guinea</td>
<td>80.4</td>
<td>68.8</td>
<td>57.3</td>
<td>45.7</td>
<td>45.7</td>
</tr>
<tr>
<td>Guinea-ßíssau</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Liberia</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Mali</td>
<td>94.2</td>
<td>84.8</td>
<td>75.4</td>
<td>65.9</td>
<td>65.9</td>
</tr>
<tr>
<td>Mauritania</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Niger</td>
<td>83.6</td>
<td>83.1</td>
<td>82.6</td>
<td>82.1</td>
<td>81.9</td>
</tr>
<tr>
<td>Nigeria</td>
<td>77.3</td>
<td>73.5</td>
<td>69.6</td>
<td>65.8</td>
<td>64.2</td>
</tr>
<tr>
<td>Senegal</td>
<td>70.6</td>
<td>59.8</td>
<td>48.9</td>
<td>38.1</td>
<td>38.1</td>
</tr>
<tr>
<td>Sierra Leone</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>97</td>
<td>NA</td>
</tr>
<tr>
<td>Togo</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>62.1</td>
</tr>
</tbody>
</table>

Source: UN-Habitat (2009). *Global Urban Indicators (GUI)* 2009, see Table 7

6.2.8 MDG 8: Develop a Global Partnership for Development

The focus of this goal is inspired in part by the need for cooperation among countries, a focus on the exchange of information, technology and the realization that through global actions development can be promoted throughout the world. It also comprises the strengthening of commitment towards development finance, a need for ensuring aid effectiveness as well as promoting mutual trade among countries. In terms of development finance, two indicators readily come to fore. The first relates to the amount of debt relief granted to developing countries and aid disbursements. The importance of debt relief rests on the freeing of resources for countries to promote development as against debt servicing. It is, however, difficult to ascertain whether the quantum of debt relief has been increasing or not for West African countries. This is because the data available on this indicator only exist for 2009. Two main types exist, namely, debt relief committed under the HIPC initiative and debt relief delivered in full under MDRI. These are measured in terms of their cumulative amounts as is seen in Figures 6.53 and 6.54.

![Figure 6.53 Debt Relief on under HIPC Initiative, Cumulative Million US$ in End-2009 NPV terms](http://unstats.un.org/unsd/mdg/Data.aspx)

Another dimension of development finance for this goal is the total amount of aid disbursement to these West African countries. Between 1990 and 2012, the total aid flows to these countries have increased from US$5,797.61 million to US$19,502.41 million. Nonetheless, the proportion of aggregate aid disbursed to all these countries increased from 5.64% in 1990 to 10.8% in 2002. By 2012, this had decreased to 3.92% of all total global aid disbursement. Burkina Faso, Ghana, Liberia, Mali, and Senegal have been countries which have received relatively more aid flows in West Africa. Figure 6.55 presents some of these trends.
In relation to technology, particularly access to telecommunication technology, the countries of West Africa increased their accessibility greatly. Many individuals and countries as a whole in West Africa continue to increase their access to landlines, mobile phones and the internet. These are remarkable trends as many continue to argue that the transformations that are needed in many developing countries can be achieved through diffusion and adoption of technology that can help change agriculture production, doing

Notes: Net disbursements are defined as total disbursements less repayments of loan principal during the period. DAC deflators, used for producing constant price estimates, are adjusted both for inflation in the domestic currency and changes in the exchange rate between the domestic currency and the US dollar. Maps were prepared by the author using data from OECD.
business, enhancing development understanding, monitoring development progress, and, overall, the promotion of economic development (Table 6.3).

Table 6.3 Fixed Telephone Lines per 100 Inhabitants

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td>0.31</td>
<td>0.5</td>
<td>0.79</td>
<td>1</td>
<td>1.51</td>
<td>1.68</td>
<td>1.68</td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>0.17</td>
<td>0.28</td>
<td>0.43</td>
<td>0.64</td>
<td>0.87</td>
<td>0.83</td>
<td>0.81</td>
</tr>
<tr>
<td>Cape Verde</td>
<td>2.37</td>
<td>5.45</td>
<td>12.5</td>
<td>15.14</td>
<td>14.51</td>
<td>14.88</td>
<td>13.9</td>
</tr>
<tr>
<td>Cote d'Ivoire</td>
<td>0.58</td>
<td>0.79</td>
<td>1.59</td>
<td>1.43</td>
<td>1.44</td>
<td>1.33</td>
<td>1.3</td>
</tr>
<tr>
<td>Gambia</td>
<td>0.64</td>
<td>1.71</td>
<td>2.57</td>
<td>2.93</td>
<td>2.82</td>
<td>2.84</td>
<td>3.52</td>
</tr>
<tr>
<td>Ghana</td>
<td>0.3</td>
<td>0.37</td>
<td>1.11</td>
<td>1.49</td>
<td>1.14</td>
<td>1.14</td>
<td>1.12</td>
</tr>
<tr>
<td>Guinea</td>
<td>0.2</td>
<td>0.14</td>
<td>0.29</td>
<td>0.28</td>
<td>0.18</td>
<td>0.18</td>
<td>0.17</td>
</tr>
<tr>
<td>Guinea-Bissau</td>
<td>0.59</td>
<td>0.65</td>
<td>0.9</td>
<td>0.7</td>
<td>0.33</td>
<td>0.32</td>
<td>0.32</td>
</tr>
<tr>
<td>Liberia</td>
<td>0.44</td>
<td>0.21</td>
<td>0.24</td>
<td>NA</td>
<td>0.15</td>
<td>0.08</td>
<td>0</td>
</tr>
<tr>
<td>Mali</td>
<td>0.13</td>
<td>0.17</td>
<td>0.35</td>
<td>0.58</td>
<td>0.75</td>
<td>0.66</td>
<td>0.69</td>
</tr>
<tr>
<td>Mauritania</td>
<td>0.29</td>
<td>0.4</td>
<td>0.72</td>
<td>1.35</td>
<td>2.07</td>
<td>2.04</td>
<td>1.8</td>
</tr>
<tr>
<td>Niger</td>
<td>0.12</td>
<td>0.15</td>
<td>0.18</td>
<td>0.18</td>
<td>0.54</td>
<td>0.53</td>
<td>0.6</td>
</tr>
<tr>
<td>Nigeria</td>
<td>0.3</td>
<td>0.37</td>
<td>0.45</td>
<td>0.87</td>
<td>0.66</td>
<td>0.44</td>
<td>0.25</td>
</tr>
<tr>
<td>Senegal</td>
<td>0.61</td>
<td>0.98</td>
<td>2.17</td>
<td>2.45</td>
<td>2.75</td>
<td>2.71</td>
<td>2.58</td>
</tr>
<tr>
<td>Sierra Leone</td>
<td>0.33</td>
<td>0.43</td>
<td>0.46</td>
<td>0.54</td>
<td>0.24</td>
<td>0.27</td>
<td>0.29</td>
</tr>
<tr>
<td>Togo</td>
<td>0.29</td>
<td>0.53</td>
<td>0.89</td>
<td>1.16</td>
<td>3.54</td>
<td>3.57</td>
<td>3.58</td>
</tr>
</tbody>
</table>


Access to mobile technology in West African countries has increased remarkably. The median proportional change for mobile cellular subscriptions for these countries between 2000 and 2012 was 69.45 subscriptions per 100 inhabitants. Mauritania had the greatest increase between 2000 and 2012 increasing from 0.58 to 111.06 subscriptions per 100 inhabitants. As of 2012, eleven countries had a minimum of 50 subscriptions per 100 inhabitants. Only Guinea, Niger and Sierra Leone were countries with less than 50 subscriptions per 100 inhabitants (Figure 6.56).
Figure 6.56 Mobile Cellular Subscriptions per 100 Inhabitants


Figure 6.57 Internet Users per 100 Inhabitants

In addition, internet users per 100 habitants increased for many of these countries. In 2012, Cape Verde (34.74), Gambia (12.45), Ghana (17.11), Nigeria (32.88) and Senegal (19.2) made the most significant progress in internet use in West Africa (Figure 6.57).

6.3 Summary

Overall, and as the chapter has shown, different levels of progress are associated with these countries. These variations occur across indicators and countries, while at the same time projections and targets for Sub-Saharan Africa seem to be a challenge for some countries. The trends present some dynamics for inquiry. Particularly, why are some countries making progress whereas others are not? This is the thrust of the next chapter. While this research does not occupy itself with a comprehensive dissection of the reasons behind these trends, attempts will be made to appreciate the discussion as to the potential factors that are producing these trends. This will, therefore, form the foundation for further in-depth inquiry into the influence of these factors.

These observations call for concern in appreciating what factors work and do not work. Indeed, this research does not offer such a comprehensive diagnosis. Nonetheless, the identification of these factors will help to inform critical attention and understanding of the specific factors influencing these trends. To begin with, the next section looks at the factors that are helping these countries to make progress towards the MDGs.
CHAPTER SEVEN

FACTORS SUPPORTING PROGRESS IN WEST AFRICAN COUNTRIES

7.1 Introduction

As presented in the research framework, the factors that influence the development progress of developing countries, of which West African countries are no exception, are cross cutting. Indeed, these factors influence the progress towards development in part as single entities of a systemic whole, while at the same time operate in part as a variant of the holistic system. In order words, they exist both as mutually exclusive and inclusive factors shaping how the quality of life of individuals are improved or otherwise.

The preceding chapter examined the trends in relation to country progress on the MDGs in West Africa. Although the challenges of data availability may have restricted in-depth appreciation of progress, there have been some revelations that need attention. The questions that continue to remain a challenge to development researchers are the factors that influence change in developing countries and how they do so. Several studies continue to espouse some evidence, yet the learning process to induce change continues to elude many countries. This chapter will explore two main issues. Firstly, it will discuss which countries are making some progress. Second, using literary materials, the chapter will explore the probably factors that may have shaped the process of change and development progress towards the MDGs in these countries. It must be noted here once again that this research does not attempt to answer how these factors shape the development process towards achieving the MDGs.

7.2 Factors Supporting Progress towards MDGs

7.2.1 Goal 1: Eradicate Extreme Poverty and Hunger

In relation to MDG 1, Cape Verde, Gambia, Ghana, Guinea and Senegal are the countries that are on track to achieve their country-specific targets by 2015. Although these may be the only countries that may
be on track, the statistics presented in the previous chapter shows that countries continue to make strides forward — though the momentum is not enough to achieve these targets. National programs on poverty in these countries have helped focus national investments in directly mitigating poverty and its ramifications.

In Cape Verde for instance, the implementation of the National Programme for the Fight against Poverty and Promotion of Social Disadvantaged Groups project has played an important role towards progress on MDG 1. Specifically,

The expansion and improvement of electrification and supply of drinking water to the population and the introduction of butane gas in the production of food, the expansion supply of schools (especially in rural areas) are important factors for poverty reduction that are enabling many women and children to diversify their daily routine. (Ministry of Finance, 2010: 7) [Google Translation]

Similarly, the use of social protection systems in the country has enabled the government to cushion poverty endemic households from economic and social deprivation. Accordingly,

Social Protection System in Cape Verde integrates different management systems, the contributory, the non-contributory and a special regime. This Social Protection System is under reform, characterized by legal and institutional measures, particularly the integration of civil servants in the system of social security and the establishment of a unique social pension for poorer people. (Republic of Cape Verde and United Nations, 2009:10)

In addition to these programs, macroeconomic stability interventions during 2008 and 2009, such as reduction in taxation, improving the coverage and amount of social pensions, and investments in infrastructure helped to reduce poverty. These macroeconomic interventions were also complemented by microeconomic interventions, which were directed at improving revenue generating activities, improving access to micro-credits and training programs to enhance the productivity of small and medium scale enterprises. While all these are important, the government recognized that the success of these interventions rests on the anchor of proper, efficient and effective allocation of public resources as well as
implementation of national programs on poverty. This has been attained in part through the development of strong partnerships with United Nation agencies to implement reforms aimed at transforming the development processes. Overall, good governance, promotion of growth and economic opportunities, environment, energy, disaster prevention and response, human capital and social protection continue to shape the successful broad development process in Cape Verde.

Similarly, Ghana, Gambia, Guinea and Senegal all place emphasis on poverty reduction in their national policies. All these countries have Poverty Reduction Strategy Papers (PRSP) in which they emphasize particular priority areas and national programs to mitigate and reduce poverty. In Gambia, the Vision 2020, Poverty Reduction Strategy Papers I and II, outline the various poverty reduction programs that are being implemented. (National Development Commission, 2010) In Ghana, the Ghana Poverty Reduction Strategy (2003-2005), the Growth and Poverty Reduction Strategy (2006-2009) and the Shared Growth and Poverty Reduction Papers (2010-2013) outline the national priorities for promoting development. Although the implementation of national poverty policy papers and programs continues to enhance the progress towards achieving MDG 1, they are not without challenges. Funding and global economic shocks for the urban population have limited the full implementation of these programs. The global economic crisis and rising food prices are identified as potential threats against progress on poverty. Ghana subsequently intensified investments in social protection programs like Gambia, Cape Verde and Guinea. These included a capitation grant, which allowed pupils to attend school without paying directly for tuition, the implementation of a school feeding program, which provides pupils with one meal a day at school, and the Livelihoods Empowerment against Poverty Program (LEAP), which provides the direct transfer of money to households which were severely vulnerable or poverty endemic (National Development Planning Commission, NDPC, 2010). Furthermore, the NDPC recognizes that all these efforts on reducing poverty in Ghana are as a result of continuous economic development. Thus, “High GDP growth rate supported by increased foreign investment outlays, government development expenditures and debt relief accounts for the decline in poverty” in Ghana (Ibid: 11).
The experience in Senegal confirms the role macroeconomics plays in reducing poverty. According to the 2010 progress report on the MDGs, the Ministry of Economics and Finance (2010: 2) notes that:

These results [on reducing poverty] were achieved through a proactive economic policy for Senegal [based on] strong and sustainable growth committed since the devaluation of the CFA franc in 1994. The country also found during this period the fundamental balances and other reforms undertaken (privatization, tax reforms), which helped offset the fiscal deficits and to devote more resources to investment. [Google Translation]

This confirms the commentary that probably the MDGs were weak on emphasizing economic development as a paradigm through which development could be achieved by clearly articulating economic development as part of the goals. In addition, allusions are made to improvement in infrastructure for education, health, transportation, drinking water and energy, which confirm that MDG 1 may in part have been arbitrary as all the other goals are reflective or better still converging towards it. Thus, multidimensional measurements such as the multidimensional poverty index would have better reflected MDG 1 rather the generic measure of less than US$1 a day.

In relation to malnourishment, the trends so far indicate that the majority of West African countries have experienced improvements — with the exception of Côte d’Ivoire and Senegal. Furthermore, World Bank projections show that Benin, Gambia, Ghana, Guinea-Bissau, Liberia, Mali, Mauritania, Niger, Nigeria and Togo will attain their country specific targets. While many of the factors can be attributed to the various national programs and economic development policies, there are some specific factors that these countries testify to, such as increased agricultural production and national awareness programs on nutrition.
7.2.2 Goal 2: Achieve Universal Primary Education

All the countries in West Africa studied here have made immense progress towards the goal of achieving universal primary education. In many of the countries, such as Benin, Ghana, Burkina Faso and Cape Verde, there have been tremendous investments in educational infrastructure and involvement of the private sector in providing educational facilities and services.

For instance in Benin, the annual expenditure on education continues to increase. In 1996, spending on education constituted 15.07% of the budget, but was 22.9% in 1999 and 23.13% in 2004. On average, spending on education has stabilized at 20-22% of the national budget. (UNDP, 2010) In addition, the preparation of a Ten Year Plan for the Development of Education Sector (PDDSE) — supported by performance indicators — allowed investment decisions and development partners to focus funding on the critical aspect of the education sector.

In Burkina Faso, national programs, such as the Integrated Early Childhood National Development Strategy which was adopted in 2007, Phase 2 of the Annual Development Plan on Basic Education, the National Policy on Technical Education and Vocational Training, and overall investments in educational infrastructure proved very important in enhancing progress towards achieving universal primary education by 2015. Particularly, developing strong partnership with NGOs, CSOs, and the private sector in the construction of educational facilities has helped to lower the supply and demand gap for education in the country. More so, the provision of free textbooks, extension of free school feeding programs, promotion of informational education classes (turbofan), multi-grade classes and satellite schools, non-formal education, innovations such as bisongo in preschool and Centers Teaching of non-formal basic (CBNEF) for 9-17 year olds have all helped to improve progress towards the goal. (Ministry of Finance, 2010)
In many cases, the approaches to improving education by promoting universal access to primary education are not different across the countries. For instance, in Côte d’Ivoire, the strategies adopted to ensure progress included:

The construction and rehabilitation of classrooms, the revision of the method of recruiting teachers to increase the number of teachers, stimulating demand for education sustainability measures, organization and expansion of alternative deals to enable children who are several years behind the typical age of entry into CP1 or have left early primary school to have formal classroom education on accelerated basis. (Republic of Cote d'Ivoire: 31) [Google Translation]

In addition, the introduction of programs related to Human Resource Development in the Education/Training industry in 1991 (PVRH), the preparation of an education sector National Action Plan for All (EFA/NAP); the implementation of the National Plan Sector Development Education and Training (PNDEF) in 1997 — from 1998 to 2010, and improving stakeholder dialogue and participation in educational policies and programs are not peculiar to Côte d’Ivoire. Similar interventions are evident in Ghana, Gambia, Nigeria, Liberia, Guinea and the rest of the other West African countries. For instance, the 2008 annual progress report for Ghana notes that:

Quite a number of policy interventions were carried out to reinforce the attainment of universal primary education; chiefly among them are the construction/rehabilitation of classrooms, strengthening the capitation grant initiative and expanding coverage of the school feeding program. Others included enforcing laws that support the implementation of Free Compulsory Universal Basic Education (FCUBE) expanding non-formal education in partnership with community groups, NGOs and private providers, and developing a national policy on distance learning. (NDPC, 2010: 22)

And in the case of Gambia, the 2009 progress report noted that:

Improvements in enrolment can partly be attributed to improved access to schools with the construction of new schools in many parts of the country. Another factor which can explain the rapid improvement in enrolment, particularly for girls, is the Girls Scholarship Trust Fund which has considerably reduced the burden of educating the girl-child and encouraged parents to enroll and retain their children in school. …the government attaches great importance to non-formal education. The non-formal sector primarily focuses on the provision of literacy skills to persons who are less fortunate to have attended formal school. (National Planning Commission, 2010: 19-20)
7.2.3 Goal 3: Promote Gender Equality and Empower Women

Cape Verde, Mauritania and Senegal, according to World Bank projections, are the countries that might attain their targets on promoting equality and empowering of women. That notwithstanding, all the other West African countries are making good progress towards this goal to varying degrees depending on the indicator. The gender parity index on primary education is one area where all these countries are doing dramatically well. The trends, as indicated in the previous chapter, show that the gaps between male and female enrolment at the primary school continues to decline. Conversely, there are still challenges with secondary and tertiary education. A lot of the education interventions that enabled many of these countries to promote progress towards achieving MDG 2 also contributed to progress towards MDG 3.

However, there are some specific exceptions, such as the efforts towards economic empowerment of women and the role they play in politics. In Cape Verde, partnerships with NGOs and development partners ensured the preparation and implementation of a National Action Plan on Gender Equality and Equity as well as the promotion of advocacy of gender issues in the country. At the same time:

The State of Cape Verde drafted the Social Cohesion Program (2010-2012) which part is of the ‘Youth and Social Cohesion’ project that carries out specific actions to single mothers and female heads of family, through training as a tool to fight against poverty, in partnership with institutions public and private. In 2008, guidelines were given in the area of vocational training and discriminatory actions/positive for women and promoting their access to work in traditionally masculine areas. Another strategy to promote employment and poverty reduction is implemented by ensuring women’s access to credit. With this purpose close to$ 42,000 were available for the period 2010-2011, to be run by women's NGOs. (Republic of Cape Verde and United Nations, 2009: 18)

In Burkina Faso, the promotion of women’s empowerment was undertaken through three main initiatives, which focus on the implementation of microcredit programs — this is a fund that supports women in the informal sector to have funding for their economic activities — and programs that focus on promoting the financial independence of women and young girls by alleviating their economic impoverishment. (Ministry of Finance, 2010) Such economic empowerment interventions persist also in other West
African countries. In many of these nations, the rural and informal economies are predominant. In addition, women are conspicuous in these economies engaging in economic activities in the form of petty trading, food crop farming and street vending, among many others. Thus, such microcredit programs offered a great opportunity to build economic empowerment and reduce poverty simultaneously.

Senegal, on the hand, has made significant improvement when it comes to the political empowerment of women. Indeed, the most recent statistics on the percentage of national parliamentary seats occupied by women is 42.7% in 2013, which is a stark increase from 22.7% in 2012. Webb (2012) attributes this to a recently passed law on gender parity in the country, which allows an equal number of men and women on candidate lists. The Inter-Parliamentary Union (IPU) notes that:

Senegal’s 2012 elections were the first to be held since the adoption of a gender parity law in 2010. It requires that all candidate lists for legislative, regional, municipal and rural elections comprise equal numbers of men and women candidates, with men’s and women’s name alternated. Non-compliance with the gender parity requirement disqualified parties from the electoral process. In addition to enforcing the law, the government and women’s organizations conducted a large-scale public awareness campaign and training sessions for women candidates. (IPU 2013: 4)

In addition, several other laws have been adopted by countries to promote gender empowerment. Some of these laws have also been targeted at reducing domestic violence and enhancing women’s rights. After embracing the Beijing Declaration, Sierra Leone adopted several policies and laws to promote gender equality and the empowerment of women. According to the 2010 progress report on the MDGs for Sierra Leone:

In 2007 the government enacted, the Domestic Violence Act, the Devolution of Estates Act, the Registration of Customary Marriage and Divorce Act and the Child’s Right Act. All of these Acts have been specifically tailored to address issues of abuse against women. Women are traditionally not accorded equal rights with men in chieftaincy matters. As a result in 2009, the Chieftaincy Act was passed in Parliament to allow women equal rights with men in chieftaincy matters. (Republic of Sierra Leone, 2010: 28)
Furthermore, several other initiatives are underway to pass laws and acts related to sexual offences, matrimonial causes, and registration of customary and divorce marriages. Several other West African countries continue to ratify their laws and sign international conventions and treaties on gender equality and women’s empowerment. Although all these West African countries, with the exception of Mauritania, had ratified the United Nations Convention on the Elimination of All Forms of Discrimination against Women before 2000\(^\text{30}\); many had not consciously mainstreamed the principles and element in their national development policies. In 2001, Mauritania ratified and adopted the International Convention on the Elimination of All Forms of Discrimination against Women. Although this has not put a stop to violence against women — such as excision, early marriage, gavages, etc. — it has provided an impetus for the national government to set in motion efforts geared towards the elimination of all forms of discrimination against women. Accordingly, “sexual violence is now recognized, and actions are supported gradually implemented.” (Islamic Republic of Mauritania (2010: 22 [Google Translation])

7.2.4 Goal 4 Reduce Child Mortality

Only Cape Verde, Liberia, and Niger are projected by the World Bank to attain this goal per their current rate of progress. While this may be true, it is also worth noting that all the West African countries have shown persistent decline in the number of under-five child mortalities per 1000 births since 1990. Liberia, Mali and Niger have reduced the number of deaths of children under five significantly.

In Liberia, there was recognition that poor infrastructure and access to adequate health care services was part of the reason why child mortality was predominant in the 1990s. The frequent disruption of childhood preventable disease, especially six vaccine preventable diseases, namely, tuberculosis diphtheria, whooping cough, tetanus, polio and measles, were hampering progress towards reducing child

mortality in the country. According to the Liberia 2010 Millennium Development Goal Progress Report, preventable diseases such as polio, measles, malnutrition, inadequate access to safe drinking water and improved sanitation limited the government’s effort and progress towards reducing child mortality.

In response, the country initiated a comprehensive immunization program throughout Liberia with significant results. For example, the 2009 EPI Cluster Survey showed that immunization of children against measles increased from 15.6% to 59.7% between 1986 and 2009, while overall immunization rates, according to the World Development Indicators, stood at 64% in 2007. (Ministry of Planning and Economic Affairs, 2010) Immunization remains one of the key factors explaining why child mortality in West Africa continues to decline. Niger, Ghana, Nigeria, Sierra Leone and the other countries, including Cape Verde, all allude to this as a reason why child mortality has been declining. The country progress report for Niger explains that:

In 1992, the proportion of 1 year old children immunized against measles was 20.4%. This proportion changed in 2009 to 65.9%. Maintaining this trend would result in a rate of nearly 82% in 2015. As such, if improvement observed since 2006 continues, all the children will be covered by the vaccination against measles by 2015. (National Institute of Statistics, 2012: 55) [Google Translation]

The Integrated Regional Information Networks (IRIN) in an article titled NIGER: Child Mortality Slashed, noted that Niger’s significant progress towards reducing child mortality is attributed in part to “the benefits of free universal health care for children and pregnant women as well as increased donor funding for health.” According to IRIN, the implementation of universal primary health care in the mid-1990s increased construction of health centers in remote regions of the country, and free medical care for under-five children increased the access of women and children to health care services leading to a reduction in mortality rates associated with malaria, pneumonia, diarrhea and measles. Hercot et al. (2013) confirm this observation. Their research suggests that universal access to primary health care, mass campaigns and nutrition programs are in part some of the driving forces that enabled Niger to make such strides in reducing child mortality.
National programs that directly emphasize child health and mortality issues are defining progress interventions towards MDG 4. In Nigeria, similar factors and policy programs also influence the progress that the country is making on MDG 4. The *Saving Newborn Lives in Nigeria: NEWBORN HEALTH in the context of the Integrated Maternal, Newborn and Child Health Strategy*, published in 2011, reflects the set of national programs that Nigeria together with her development partners under the Countdown to 2015 for Maternal, Newborn and Child Health have identified as germane to the country’s progress. This global movement — consisting of governments, academics, agencies, non-governmental organizations and healthcare professionals, and the Lancet — is helping participating countries to track their programs and progress towards MDGs 4, 5 and 6; identify challenges and opportunities with an emphasis on data driven accountability and interventions; and, above all, reduce child mortality and improve maternal health in participating countries (Federal Ministry of Health, 2011).

Immunization, national primary health care programs and investment in health facilities — especially in remote areas — are some of the reasons progress is being made. Cape Verde provides another case in point. Similar to Cape Verde and other West African countries, the factors contributing progress in Ghana include the adoption and implementation of Child Health Policy and Strategy, Infant and Young Child Feeding Strategy, Prevention of Mother-to-Child Transmission (PMTCT)” policy and strategy, decoupling children from their parents for NHIS coverage, developing guidelines for neonatal care, providing high vaccination coverage,… sustaining the Expanded Program on Immunization (EPI) and reaching every district, expanding community-based health service delivery, etc. (NDPC 2010: 30-31)

What is apparent is that these interventions are not new. For instance, the Alma-Ata Declaration, which came out of the International Conference on Primary Health Care in Alma-Ata in September 1978, emphasized universal primary healthcare. The declaration reaffirmed the broad perspectives of health as:
…a state of complete physical, mental and social wellbeing, and not merely the absence of disease or infirmity, is a fundamental human right and that the attainment of the highest possible level of health is a most important world-wide social goal whose realization requires the action of many other social and economic sectors in addition to the health sector. (World Health Organization, 1987 Section I)

It also articulated that:

Primary health care is essential health care based on practical, scientifically sound and socially acceptable methods and technology made universally accessible to individuals and families in the community through their full participation and at a cost that the community and country can afford to maintain at every stage of their development in the spirit of self-reliance and self-determination. It forms an integral part both of the country’s health system, of which it is the central function and main focus, and of the overall social and economic development of the community. It is the first level of contact of individuals, the family and community with the national health system bringing health care as close as possible to where people live and work, and constitutes the first element of a continuing health care process. (World Health Organization 1987, Section VI)

Evidently, the questions are not merely a matter of awareness of the fact that health is important, but a matter of translating the knowledge to benefit the people in need. More of this will be presented in the concluding section of this chapter. Nonetheless, it must be appreciated herein that much of the progress that has been achieved can be attributed to the momentum and global impetus the MDG agenda has emphasized.

7.2.5 Goal 5: Improve Maternal Health

Many of the interventions that were aimed at reducing child mortality were integrated with interventions for improving maternal health. All the West African countries experienced significant declines. Although none of the West African countries will attain their country specific and Sub-Saharan Africa target (except Cape Verde) by 2015, the progress and trends are much more optimistic.

Cape Verde’s 2010 progress report emphasizes that the implementation of the National Health Policy, provision and construction of health facilities, as well as “production of instruments for improving the
delivery of integrated health care for women” and emphasis on reproductive health education are among some of the factors that have helped improved maternal health. (Ministry of Finance, 2010: 28 [Google Translation])

In Burkina Faso, the implementation of maternity care and neonatal emergency measures, as well as free preventive care for pregnant women between 2003 and 2006, contributed to progress towards MDG 5. In addition to these interventions, measures such as the subsidy on deliveries and emergency obstetric and neonatal care, which was started in 2006, and increased provision of contraceptives and family planning helped to improve maternal health. Furthermore, the following measures supported progress towards MDG 5 in Burkina Faso:

(iv) the adoption of laws and regulations in favor of women and child (v) the development of normative and strategic documents for improving the health of women and children, (vi) the regionalization of recruitment of staff to improve their availability at the rural level, (vii) promotion of risk-sharing systems at the community level, (viii) improving health coverage through the construction of health facilities first-level medical centers with surgical antenna (ix) taking Integrated Management of Childhood Illness (IMCI) in all districts health, (x) the implementation of the program for the prevention of transmission of HIV from mother to child (PMTCT) since 2002. (Ministry of Finance, 2010: 28) [Google Translation]

Similarly, these interventions are not unique to these two countries. They are evident in other West African countries. Niger, while recognizing that it has one of the highest maternal mortality rates in the world, put in place similar measures. Between 1995 and 2010, maternal mortality was reduced from 1100 deaths per 100,000 live births to 590 deaths per 100,000 live births. The interventions implemented over these period included:

…free prenatal consultations, cesarean section, and contraceptive condoms; the Health Development Plan; National Population Policy and Program of Demographic Multisectoral (PRODEM, 2005); National Program of Reproductive Health (NRHP, 2005); the roadmap for accelerating the reduction of maternal and neonatal mortality; and the national IEC strategy for reproductive health. (National Institute of Statistics, 2012: 60) [Google Translation]
These similarities on intervention across countries suggest that there is awareness of, first, the challenges that exist in relation to maternal health and, second, the interventions needed to mitigate them. While policies and national programs do not necessarily translate to benefits, they provide some impetus as to where actions may be needed to enhance progress. Indeed it might be that new development goals and interventions may not be an alternative course of action but rather placing more emphasis on the effectiveness of development actions.

7.2.6 Goal 6: Combat HIV/AIDS, Malaria and Other Diseases

HIV/AIDS also remain a challenge for all West African countries. The statistics show that declines in the percentage of the population between 15 and 45 years remain marginal, although Burkina Faso, Côte d’Ivoire, Ghana, Liberia, Mali and Togo all experienced declines between 2009 and 2011. Conversely, the percentage of people living with HIV/AIDS in Guinea-Bissau and Nigeria increased marginally, while the percentage in the rest of the West African countries remained constant.

National programs with specific emphasis on HIV/AIDS, malaria and tuberculosis influenced much of the progress of countries towards MDG 6. In Senegal, progress in the fight against chronic diseases is attributed to “the successful implementation of projects and sector programs” (Ministry of Finance, 2010: 12 [Google Translation]) The National Health Development Program, which began in 2009 and is expected to end in 2018, has helped reduce the prevalence of HIV/AIDS in the country. In addition, the National Program on the Fight against Malaria (NMCP) and National Program on the Fight against AIDS (NAP) both significantly lowered deaths resulting from malaria and HIV/AIDS. (Ibid.)

In Ghana, similar national programs are associated with progress. These programs ensured the training of health care personnel in districts to adequately manage issues related to HIV/AIDS. In addition, there have been improvements in the “monitoring, supervision and supporting sites providing ART services and also assessing potential sites for ART accreditation; and providing nutritional support for
PLHIVs/AIDS.” There have also been intensified campaigns on voluntary counseling and testing and “support to the most-at-risk-population” (NDPC, 2010: 40).

Evidently, to increase progress towards the prevention and treatment of chronic diseases in these countries, national programs on health — particularly for HIV/AIDS, malaria, and tuberculosis — were designed and implemented. For HIV/AIDS, the emphasis in many cases was on prevention through encouraging people to use contraceptives or practice abstinence as well as encouraging people to test for their HIV/AIDS status. In Côte d’Ivoire, “counseling and testing and PMTCT are progressively integrated in health facilities.” (Republic of Côte d’Ivoire, 2010: 46 [Google Translation]) The aim, as in many other countries, is to help people know their status so as to adopt good sexual behaviors to minimize and stop the spread of infections. To make these services available, decentralized and de-concentrated services on HIV/AIDS have been implemented, while multi-sectoral partnership and collaboration between private and public agencies have been promoted. Typically, to decentralize and de-concentrate services, Côte d’Ivoire adopted the following measures:

(i) communication services for behavior change, (ii) counseling and screening, (iii) services for the Prevention of Mother to Child Transmission (PMTCT), the fight against stigma and discrimination associated with HIV, the correct treatment of STIs based approach syndromic, HIV prevention in case of accidental exposure to blood and other fluids biological are also priority areas for action. (Ibid.: 48) [Google Translation]

In terms of malaria control, many of the interventions have been the provision of free or subsidized mosquito treated nets. In Burkina Faso, the:

…prevention efforts have focused on the distribution of mosquito nets treated primarily among children under 05 years and pregnant women. Furthermore, a national campaign to distribute mosquito nets to all population is expected in 2010 with more than 8 million ITNs, and this should significantly reduce the incidence of malaria. (Ministry of Finance, 2010: 29) [Google Translation]

Similarly, all these were fashioned in the form of national programs of intervention. This is also the case of interventions to manage tuberculosis in these countries.
7.2.7 Goal 7: Ensure Environmental Sustainability

The goal for environmental sustainability is one that clearly eluded many West African countries. Especially for the indicator on the percentage of land area covered by forest, only Côte d’Ivoire and Gambia saw an increment in forest cover. The promotion of re-afforestation projects and protection of wildlife are among some of the factors that have helped these two countries witness some marginal increase in forest cover.

In terms of water supply, national water supply programs that facilitated investment in rural and urban water infrastructure, as well as maintenance of facilities, helped people have access to safe drinking water. In Côte d’Ivoire, for example, the rehabilitation and building of drinking water supply systems funded by the state and donors helped to improve access. (Republic of Côte d’Ivoire, 2010) Similarly, the adoption and implementation of national rural water supply programs in Ghana and Benin in the 1990s and the intensification of these programs in the 2000s helped provide a comprehensive framework for ensuring access to water supply — particularly in rural areas. Among other things, these strategies focused on decentralization of the water supply decision making processes, financial participation of communities in water supply through demand driven initiatives, community participation, ownership and management of water supply systems through community management teams, and the promotion of domestic private sector participation in water supply in both rural and urban areas. (NDPC, 2010; UNDP 2010) For instance in Ghana, about “1,838 new water points and 15 new pipe systems” were constructed between 2000 and 2008 in the drive to enhance access to potable water. In addition, the Government provided full subsidies in providing safe water in guinea worm endemic areas in the country, while donor initiatives such as HIPC provide funding for many of these projects. (NDPC, 2010: 48) In Cape Verde, emphasis was placed on building, strengthening and modernizing the water supply infrastructure in the country in both rural and urban areas through an integrated and multi-stakeholder process.
As already noted in an earlier chapter, nine countries, namely, Cape Verde, Côte d’Ivoire, Mauritania, Niger, Nigeria, Senegal, Sierra Leone and Togo are on course to attain the target on access to improved drinking water. The interventions adopted across these countries are not so different. Undeniably, the adoption of national water and sanitation policies continue to emphasize the need for access to safe drinking water and sanitation. However the latter continues to remain a daunting challenge in all these countries.

7.2.8 Goal 8: Develop a Global Partnership for Development

The issue of global partnership for development embodies three main themes: international aid, international trade and information communication technology. International aid is mostly out of the control of receiving countries; thus, it is not so surprising that many of the country reports virtually did not discuss interventions that are being put in place. However, what is obvious is the seeming allusion and emphasis of the need to ensure aid effectiveness and to lessen debt servicing by these countries. As daunting as these issues are, West African countries remain optimistic in appreciating the role international aid could play in their development.

In the area of trade, there have been great strides in improving access to the international markets. All these West African countries are constantly signing bilateral and multilateral agreements with their development partners to improve funding for development projects and programs. However, it must be noted that the Economic Partnership Agreement remains unsigned by West African countries — although many have signed the interim agreement — as they continue to weigh the options and effects on their domestic economy.31

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31 This is not an affirmation and otherwise of the Economic Partnership Agreement. The author identifies that this is not an appropriate avenue to discuss the potential or otherwise of the agreement for West African countries.
The benefits some of these agreements can be seen in Côte d’Ivoire. These trade treaties and partnerships have allowed access to the markets of developed countries enabling West African countries to have foreign exchange to support their development. It also helped improve product standards and provided access to new productions methods and crops. The Millennium Challenge Account, for instance, in Ghana has supported the construction of roads and bridges, and provided farmers with micro-credits and inputs to support their farming activities.\(^ {32}\)

On technology, all West African countries are experiencing waves of telecommunication and technological diffusion. The media, radio, television and, most importantly, the internet and mobile telephone have gained dramatic momentum. The reasons are mostly associated with technological transfer from the developed world to these countries, as well as the declining cost of productions related to these products. The trade pacts signed by these countries also allow them to import these technologies. However, most importantly, the development of the environment that allows business and investments related to these ventures to thrive is the greatest leap that has allowed the diffusion of information communication technology in these countries. For example:

> In mobile telephony, Burkina Faso has made significant progress with the liberalization of the sector from 2000. Telephone operators were also able conduct promotional strategies that have allowed a large segment of the population to have a line. These strategies have focused in particular on the extension of coverage to all urban centers and much rural area policies promotional pricing. (Ministry of Finance, 2010: 34) [Google Translation]

And in Nigeria:

> “…. the involvement of private sector operators in the telecommunications sector has brought competition, innovation and wider coverage, mobilized new financing for the industry and increased its contribution to GDP. (Government of the Federal Republic of Nigeria, 2010: 53)

\(^ {32}\) See MCC website for publications on the achievement of the intervention in Ghana on water supply, education, agriculture and transportation. http://www.mcc.gov/pages/countries/program/ghana-compact
7.3 Summary

Evidently, there are some commonalities that stand out in this chapter. The progress made by these countries clearly illustrates the role of national programs that were sector specific — or goal specific — and implemented by West African countries in the drive to achieve the MDG targets by 2015. Again, the role of economic development was evident, especially in attaining MDG 1. While this may be seen, it is also obvious that economic development, while reducing poverty, is manifested more comprehensively in terms of improving education, health care, water and sanitation accessibility and in improving economic activities and women empowerment. The role of the international economy has also influenced the progress of these countries towards the MDGs. The preparation of national development and sectoral policy documents, as well as treaties and conventions, paved the way for West African countries to have access to international aid in support of their development. This notwithstanding, the approaches to development and poverty reduction were not different in the 1990s and 2000s. In both of these eras, national policy and sectoral programs were identified and implemented. The only difference is the momentum that the MDGs inspired in terms of international commitments and pressure from donor partners to demand development effectiveness. Despite all these successes, there were challenges, and this is the object of the next chapter.
8.1 Introduction
In Chapter Seven, some factors were identified that are helping countries to make progress towards the MDG goals. As much as some of these factors were positive, there are other factors that have also hindered progress in many of these countries — both those in the process of attaining the targets of the MDGs and those who are projected to attain these targets.

8.2 Factors in Inhibiting Progress
8.2.1 Goal 1: Eradicate Extreme Poverty and Hunger
The link between economic growth and development and poverty has been exhaustively discussed (See Chapters Two and Five). Indeed, the lack of a coherent goal emphasizing the promotion of economic growth for member countries involved in the implementation of the MDG agenda has been one of the major critiques of the MDG agenda. Apparently, through economic growth and development, countries are better positioned to manage their development progress. By implication, the absence of a consistent economic growth pattern implies a potential retrogression in the MDG agenda.

The economic arguments comprise the economic structure of countries, their capacity to resist external shocks, their ability to be less dependent on international aid, as well as the capacity to ensure macroeconomic stability. Throughout the country reports of these sixteen West African countries, directly and indirectly, these issues were alluded to as the challenges militating against progress. In the 2008 MDG progress report of Ghana, “Dependence on Primary Products and Limited Diversification,” “Vulnerability to Internal and Global Shocks,” “Low Domestic Resource Mobilization and Over-dependence on Aid,” and the “lack of absorptive capacity of government institutions, due to a low skills base” were all identified as critical factors affecting progress — even though Ghana is projected to attain
its country specific target by 2015. In the 2011 report, the NDPC confirms the following, among other factors:

- **Macroeconomic bottlenecks:** Although Ghana’s growth has been fairly robust, the source of growth has always been biased in favor of extractive and capital intensive services sector which do not have direct poverty reducing effect;
- **Infrastructural constraint:** poverty endemic areas are often constrained by basic infrastructure such as feeder roads that links their economic activity, mostly farming, to urban market centers. (2012: 15)

Economic and administrative governance was also seen as a factor inhibiting the efforts towards poverty reduction. Challenges with the public finance processes encompassing ensuring effective resource allocation, budget execution and monitoring of expenditures affected the progress towards poverty alleviation. These observations from West African countries are critical in that the impact of economic fragility and instability affects employment opportunities as well as the income levels of citizens. This, in turn, affects their disposable income and capacity to access their basic needs, including food, water, health and shelter, among others.

In Cape Verde, the effects of macroeconomic conditions were also observed in terms of food availability and affordability domestically. The reliance on importation of food — due to low production in the agricultural sector caused by dependence on rain-fed agriculture— led to a structural deficit and a dent in the balance of payments of the country. This was predominant in the 2004-2005 and 2009-2010 cereal growing seasons. (Ministry of Finance, 2010) A similar remark on agriculture production was made in the country 2010 report of Liberia, which noted that:

> Liberia looks to its agro-industry for growth. Most non-government wage employment is derived from agriculture, primarily rubber, oil palm, coffee and cocoa, but volatility in these markets affects growth rates and MDG targets. Inadequate absorptive capacity of government institutions due to a low skills base and inadequate infrastructure impede the progress-industry in Liberia. These twin problems will continue to impact the level of poverty in the country for the near and intermediate terms. (Ministry of Planning and Economic Affairs, 2010: 10-11)
This suggests that for these countries to be able to make progress towards meeting their country specific targets on poverty and even beyond, the challenge on reducing poverty in their countries must explore the options of restructuring their economies as well as enhancing agriculture productivity and production. This is particularly important as agriculture continues to be the dominant sector of many of these countries. In Gambia for instance, “more than 70 per cent of the population depend on agriculture, where earnings are generally lower than the other sectors of the economy.” Thus “there is need to invest in the development of the sector so as to increase the earnings of the poorest segment of the population.” (National Planning Commission, 2010: 7)

Similarly, the implementation challenges of national and sectoral programs on poverty and hunger were identified. The challenges of institutional capacity in the form of inadequate skilled human resources, as well as funding, were ubiquitous in these reports. Particularly, funding during the period of 2007 to 2010 hindered progress in these countries as the global economic and financial crisis reduced the flow of international aid, while at the same time export earnings declined. In Senegal, the global economic and financial crisis affected the country’s “exports, commodity prices, and the flow of foreign capital (transfers workers and private capital)” (Ministry of Economics and Finance, 2010: 21).

Another major observation was the effects of conflicts on the progress of countries. A case in point is Côte d’Ivoire. The political conflict between 2002 and 2004 did not only stall progress but also exacerbated the poverty conditions in the country. Between 1998 and 2002, the poverty rate had declined from 24.1% to 23.3%. After the conflict, in 2008, the poverty level was 23.8%; this is despite the fact that this was four years after the conflict. This is an indication that conflicts have a long lasting negative effect on development processes of countries. Obviously, such conflicts divert resources from development programs into managing the conflicts and also block some forms of international aid. Again, around the same period in Côte d’Ivoire, the commitment between the Republic of Côte d’Ivoire and the Bretton Woods Commission in relation to the development of the Interim Poverty Reduction Strategy Paper
which was approved in March 2002 was derailed by the conflicts. When the military and political crisis occurred in September 2002, any hope of Côte d’Ivoire benefiting from the debt relief package from the Bretton Woods Commission was halted (Republic of Côte d’Ivoire, 2010).

8.2.2 Goal 2: Achieve Universal Primary Education
The conflict situation in Côte d’Ivoire did not only affect poverty reduction targets. It also affected all the progress towards the other MDGs, including the goal on education. From the 2010 country MDGs progress report, the military and political crisis disrupted the academic calendar and limited investment in the national education system. (Ibid.)

Other factors identified in these reports included inadequate availability of educational infrastructure to support increasing student population across these countries. While efforts to improve access to primary education were yielding fruits, the capacity of national governments to supply the necessary infrastructure to support this rise was inadequate. Similarly, factors including poor institutional performance at the local and national level to support education, inadequate teaching staff and materials, insufficient public funding and poor capacity in planning and monitoring education sector strategies hindered progress.

While the supply side remains a challenge, there are challenges with the demand side of education too. Even though in many countries free primary education and feeding programs were in place to influence enrollment, there are other challenges that have limited parents from sending their children to school. From these reports, the high cost of school supplies and tuition in countries where free primary education does not exist is identified as an inhibiting factor.

8.2.3 Goal 3: Promote Gender Equality and Empower Women
For goal three, the predominant inhibiting factor was seen to be cultural and religious. In Gambia, “early marriage, particularly in rural areas, parental preference of boy’s education to girl’s education, parental
preference of Quranic education for their daughters and “cultural beliefs that consign women to marriage and home keeping instead of employment outside the home” affected progress towards MDG 3 (National Planning Commission, 2010: 27-29). This was not peculiar to Gambia as Nigeria, Niger, Burkina Faso and Mauritania, among others, whose dominant religion is Islam have a strong inclination to Quranic education and also limited education for girls as against boys. In Ghana, “challenges facing girl-child education include socio-cultural practices such as early marriages, customary fostering, gender socialization, female ritual servitude (Trokosi) and puberty rites. (NDPC, 2010: 28) Such practices persist in all these countries, especially in the rural areas limiting the opportunity for girl child education and empowerment.

8.2.4 Goal 4: Reduce Child Mortality
The availability of health facilities, health personal and funding to support sector programs is the critical factor in progressing towards this goal. While countries have made significant progress, there are still differences and inequality in access to adequate health care. These are much more pronounced in rural areas and the hinterlands. In Gambia, the availability of essential drugs and equipment at public health facilities, and the reluctance of health personnel to move into the hinterlands, have posed a challenge to progress (National Planning Commission, 2010). In addition, cultural and socio-economic factors, such as illiteracy, poverty, and poor health seeking behavior as documented by the NDPC (2010) in Ghana, are all factors that have affected not only progress in Ghana but other West African countries too. In Liberia, these socio-cultural factors were identified to include: “human, capital and physical resource constraints; management of increased operations; malnutrition due to poverty; and high incidence of communicable diseases” (Ministry of Planning and Economic Affairs, 2010: 20).

8.2.5 Goal 5: Improve Maternal Health
Similarly, the factors that affected progress towards MDG 4 were also identified in the country reports for MDG 6 — comprising poor implementation of national health programs, inadequate health facilities,
personnel, and drugs, as well as socio-economic factors such as illiteracy. In Gambia, the 2010 country report noted the following as some of the specific challenges to country's progress:

...all unmet need for emergency obstetric care services due mainly to inadequate basic reproductive health equipment and supplies; Inadequate functional blood transfusion services and theatres; Inadequate functional basic laboratory services (e.g. hemoglobin test, blood film, venereal disease reference laboratory and urine analysis); Acute shortage of skilled health professionals especially in the rural health facilities; Weak referral system especially from the community to health facility levels; Inadequate financial resources for maternal and reproductive health services; Lack of resources to conduct Demography and Health Survey (DHS); [and] Availability of essential medicine and other medical supplies. (National Planning Commission, 2010: 43)

8.2.6 Goal 6: Combat HIV/AIDS, Malaria and Other Diseases

The greatest challenge to the fight against HIV/AIDS in these countries has been the stigma and discrimination against people living with HIV/AIDS. This was observed in all the countries and continues to pose a challenge to free voluntary testing and counsel. The cultural and social misconceptions about the disease also prevented people from accessing treatment in many areas, typically in the rural areas. Coupled with this is the poor capacity of health institutions in these countries to monitor and effectively track persons with HIV/AIDS. At the same time, many people still practice unsafe sex. For instance, in Liberia, it was observed that:

Low condom use; low voluntary counseling and testing coverage due to gaps in awareness and service provision and the inability of providers to provide same-day results; limited capacity for prevention of mother to child transmission; weak health systems and severe shortage of skilled staff for expansion of anti-retroviral therapy and directly observed therapies; low provision of appropriate sexual and gender-based violence services; and overcrowding in cities and health facilities has affected progress towards the goal. (Ministry of Planning and Economic Affairs, 2010: 28)

Additionally, the absence of a sustained resource base for HIV/AIDS program implementation, poor health seeking behavior, barriers to diagnosis and treatment of HIV/AIDS have also led to a slow progress in meeting universal access targets on ARVs in these countries. Unfortunately defaults during treatment
for HIV/AIDS and tuberculosis are also negatively affecting progress towards MDG 6 in West African countries.

8.2.7 Goal 7: Ensure Environmental Sustainability

The greatest challenge to promoting environmental sustainability has been urbanization and economic development in these countries. While urbanization consumes land for built environment activities, the reliance on natural resources for foreign exchange presents stark setbacks for these West African countries. The United Nations Economic Commission for Africa (2011: 33) notes that:

Economic performance improved in most West African countries in 2010. Important growth factors included high oil prices and revenue as well as increased non-oil activity (Nigeria), greater activity in the construction and services sector (Ghana), strong performance in agriculture and mining (Sierra Leone) and increased rubber export earnings (Liberia).

The country profiles on international trade illustrate this even further. The statistics from the organization shows that, “agricultural products” — which refers to raw materials and “fuels and mining products” - which encompasses ores and other minerals; fuels and non-ferrous metals — tend to dominant the exports of these countries. Unfortunately, all this involves, in one way or another, the direct exploitation of natural resources thereby leading to the depletion of forest cover. Conversely, manufacturing — which “refers to iron and steel, chemicals, other semi-manufactures, machinery and transport equipment, textiles, clothing and other consumer goods” constitutes the least of the products exported by these countries (Table 8.1).

Such reliance on natural resources is undermining the progress towards ensuring environmental sustainability in many of these mineral rich countries. The conflict between economic development and environmental sustainability thus implies not an abrupt move away from this resource potential, but a realization of the need for harmony and sustainable practices. Even as the awareness of this dilemma
increases in these countries, institutional capacity to track both legal and illegal operations of agriculture, lumbering and mining seemingly eludes these countries, thus hindering progress on this goal.

**Table 8.1 Breakdown in Economy's Total Export***

<table>
<thead>
<tr>
<th>Country</th>
<th>Agriculture</th>
<th>Fuels and Mining Products</th>
<th>Manufactures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td>28.6</td>
<td>0.3</td>
<td>5</td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>20</td>
<td>0.3</td>
<td>1.8</td>
</tr>
<tr>
<td>Cape Verde</td>
<td>84</td>
<td>0</td>
<td>13.5</td>
</tr>
<tr>
<td>Côte d'Ivoire</td>
<td>47.6</td>
<td>25.4</td>
<td>8.6</td>
</tr>
<tr>
<td>Gambia</td>
<td>79</td>
<td>10.1</td>
<td>10.4</td>
</tr>
<tr>
<td>Ghana</td>
<td>45.1</td>
<td>36.9</td>
<td>7.7</td>
</tr>
<tr>
<td>Guinea</td>
<td>5</td>
<td>52.6</td>
<td>10.4</td>
</tr>
<tr>
<td>Guinea-Bissau</td>
<td>25.7</td>
<td>0.2</td>
<td>0</td>
</tr>
<tr>
<td>Liberia</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Mali</td>
<td>25.1</td>
<td>1.9</td>
<td>14.5</td>
</tr>
<tr>
<td>Mauritania</td>
<td>22.2</td>
<td>76.9</td>
<td>0.8</td>
</tr>
<tr>
<td>Niger</td>
<td>11.6</td>
<td>54.5</td>
<td>4.5</td>
</tr>
<tr>
<td>Nigeria</td>
<td>7.9</td>
<td>89.4</td>
<td>2.5</td>
</tr>
<tr>
<td>Senegal</td>
<td>28.6</td>
<td>18.4</td>
<td>39.1</td>
</tr>
<tr>
<td>Sierra Leone</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Togo</td>
<td>18.8</td>
<td>16.8</td>
<td>50.9</td>
</tr>
</tbody>
</table>


*Please note that due to the products not classified in the three main product groups, the sum of shares may not add up to a 100.

At the same time, high population growth rates and urbanization also derail progress towards this goal. In Gambia, the country report observed that the high population density of 127 persons per square kilometer and population growth place pressure on forest resources. This has resulted in an increased demand for land for settlement and land for agricultural activities to feed growing populations, as well as land for socio-economic infrastructure such as roads, schools and hospitals. Additionally, uncontrolled bush fires and illegal lumbering in forest reserves affect efforts towards promoting conservation and wild life protection. For all these countries, it is evident from their country reports that over cultivation of agricultural farmlands, deforestation, bush fires, over grazing, fuel wood extraction and illegal lumbering,
poaching and uncontrolled hunting, over fishing of marine products and illegal mining activities are deteriorating the environment, thereby hindering the progress towards ensuring environmental sustainability. These events are augmented by poor institutional set-ups and little capacity to respond to these challenges in addition to ensuring the implementation of interventions that would prevent further decline.

These did not only affect targets related to forest cover and biodiversity. These challenges were observed by these countries for water and sanitation. Using Benin as a case in point, the government realized that the challenges of institutional capacity manifested in the form of deficiencies in the collection and management of information, in the warning systems on climate change risks, continuous centralization of sanitation services and facilities, and the inadequacy of local authorizes to manage the challenges associated with water, sanitation and climate change, have affected progress (UNDP, 2010) This suggests that national capacities in managing the development process are critical to first unraveling the development process and subsequently instituting measures to adequately tackle them.

8.2.8 Goal 8: Develop a Global Partnership for Development

Two main factors have affected West African countries. These are trade and international aid flows and have had the compounding effect of reducing the development funds available in these countries. The obvious challenge here was the global economic crisis, which reduced the international aid flows as well as reduced demand in some cases for products from these nations. At the same time, despite several debt relief initiatives, West African countries are seemingly inundated in debt despite the pressure by IMF and the World Bank, as well as other donor partners, to emphasize macroeconomic stability in aid negotiations. While this poses a challenge to development by restricting the available financial resources to invest in the needed infrastructure, it also reveals a weakness in the national systems of these countries for promoting macroeconomic management. In effect, countries have tended to over rely on donor
support for their development, thus making them even more vulnerable to international and domestic shocks.

Table 8.2 General Government Revenue as Percent of Gross Domestic Product

<table>
<thead>
<tr>
<th></th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td>19.00</td>
<td>19.21</td>
<td>23.75</td>
<td>21.32</td>
<td>21.74</td>
<td>20.05</td>
<td>20.12</td>
<td>20.67</td>
<td>21.35</td>
<td>20.46</td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>17.23</td>
<td>40.75</td>
<td>20.10</td>
<td>16.86</td>
<td>19.58</td>
<td>19.76</td>
<td>21.21</td>
<td>22.68</td>
<td>23.78</td>
<td>22.27</td>
</tr>
<tr>
<td>Cape Verde</td>
<td>27.54</td>
<td>28.28</td>
<td>28.56</td>
<td>29.04</td>
<td>26.89</td>
<td>27.92</td>
<td>25.61</td>
<td>22.42</td>
<td>24.80</td>
<td>24.29</td>
</tr>
<tr>
<td>The Gambia</td>
<td>15.83</td>
<td>17.42</td>
<td>18.37</td>
<td>17.47</td>
<td>20.46</td>
<td>18.85</td>
<td>21.23</td>
<td>25.41</td>
<td>22.18</td>
<td>22.87</td>
</tr>
<tr>
<td>Ghana</td>
<td>16.69</td>
<td>17.06</td>
<td>17.50</td>
<td>15.95</td>
<td>16.44</td>
<td>16.71</td>
<td>19.13</td>
<td>19.06</td>
<td>20.17</td>
<td>20.89</td>
</tr>
<tr>
<td>Guinea</td>
<td>15.24</td>
<td>15.89</td>
<td>15.10</td>
<td>16.13</td>
<td>16.55</td>
<td>15.70</td>
<td>20.23</td>
<td>22.85</td>
<td>20.71</td>
<td>22.41</td>
</tr>
<tr>
<td>Liberia</td>
<td>11.54</td>
<td>15.24</td>
<td>18.61</td>
<td>18.95</td>
<td>22.80</td>
<td>26.82</td>
<td>26.04</td>
<td>28.81</td>
<td>28.82</td>
<td>28.19</td>
</tr>
<tr>
<td>Niger</td>
<td>18.18</td>
<td>60.09</td>
<td>22.39</td>
<td>24.33</td>
<td>18.89</td>
<td>18.24</td>
<td>18.13</td>
<td>22.48</td>
<td>24.27</td>
<td>25.35</td>
</tr>
<tr>
<td>Nigeria</td>
<td>36.30</td>
<td>32.29</td>
<td>26.90</td>
<td>32.02</td>
<td>17.81</td>
<td>20.03</td>
<td>29.89</td>
<td>25.53</td>
<td>24.45</td>
<td>23.14</td>
</tr>
<tr>
<td>Sierra Leone</td>
<td>16.10</td>
<td>15.07</td>
<td>33.05</td>
<td>12.70</td>
<td>15.14</td>
<td>15.22</td>
<td>17.02</td>
<td>15.23</td>
<td>13.89</td>
<td>13.03</td>
</tr>
<tr>
<td>Togo</td>
<td>16.87</td>
<td>18.42</td>
<td>18.52</td>
<td>17.03</td>
<td>18.43</td>
<td>20.94</td>
<td>21.41</td>
<td>20.51</td>
<td>22.86</td>
<td>24.16</td>
</tr>
</tbody>
</table>

Source: International Monetary Fund (2013). World Economic and Financial Surveys. World Economic Outlook Database. Available online:


Obviously, the reliance on international aid could only mean that these countries are not generating enough revenue internally to support their development. Table 8.2 illustrates how little the governments of these countries earn from economic activities. It is unfortunate to note that the median value for the general government revenue as a percent of GDP for West African countries has ranged from 17% to 22% between 2005 and 2014. On the contrary, that of developed countries has ranged from 38% to 41%. Two implications can be deduced from this information — first, West African countries are not generating enough economic activities that will allow them to mobilize revenue, and, second, they do not have the necessary capacity to mobilize revenue in their countries. Thus, they are over reliant on international aid to support their development while they engulf themselves in debt.
8.3 Summary

Apparently, the factors hindering progress towards the MDGs are not new challenges facing developing countries in their development endeavors. Poor implementation of national programs, macroeconomic instability, institutional weaknesses, socio-cultural and religious limitations to accessing health care and education, and dependence on international aid are not new. Despite the fact that there has been tremendous momentum towards global poverty reduction and human development since the 2000s, the persistence of these challenges suggests that the MDG agenda may not have mainstream national structural dynamics as to how poverty can be reduced. This suggests that promoting sustainable development outcomes needs to reorient any development agenda for global poverty reduction to aim at rectifying institutional and national capacities. Does this mean that beyond 2015, the new agenda should focus on some of these observations? The discussion is presented in Chapter Nine, which follows.
CHAPTER NINE

CONCLUSION: DO WEST AFRICAN COUNTRIES NEED INTERNATIONAL DEVELOPMENT GOALS?

9.1 Introduction

So far different perspectives have been drawn on the debates regarding international aid, the MDGs, discussions on a new agenda beyond 2015 and the progress of West African countries towards the MDG timeline. In addition, the challenges facing global progress as well as that of West African countries have been discussed in the preceding chapters. Certain observations come to fore, which need critical examination. This is the focus of this Chapter. Although several proposals have been made by other studies for a new set of development goals, the focus of this examination takes on another dimension. Particularly, it draws from the different perspectives of the discussions so far and presents dilemmas that are germane for international development — especially beyond 2015. Four core dilemmas and their implications for international development with respect to West African countries are explained in the concluding section of this research.

9.2 Matters Arising for International Development

9.2.1 The Illusion of Development Progress?

In 1978, the World Bank initiated a comprehensive program on tracking global poverty in its annual World Development Report series. Following this, the United Nations Development Program in 1990 also initiated the Human Development Report series, which together outline the state of global human welfare and poverty annually. While the former leans more on economic development and its ramifications for other welfare issues — such as water, education, sanitation and health, among others — the Human Development Report series emphasizes a more systematic approach and perspective on development and poverty reduction, i.e., multidimensional poverty. These reports provide in-depth analysis as to global
trends and examples of progress that countries, regions and the world make annually on development and poverty reduction.

So far, the onset of the MDG agenda has increased momentum for tracking development progress and provided an impetus to intensify efforts on poverty reduction. At the global level, it is evident there are ample data on how development and poverty reduction are being promoted. Yet there are still gaps in measurements that affect the reports on progress. For country specific cases, the measurement of development and poverty indicators are incredibly lagging. National tracking systems are virtually inadequate and outdated for many of these development indicators. Already, as the research on West African countries has shown, country specific data are absent in many cases. As such, it begs to wonder what kinds of data are informing decisions in developing countries — and, in the case of this research, West African countries.

An in-depth overview of the data sources that inform the MDG database illustrates that much of the data is based on national reports, surveys and research by these countries. By implication, a challenge with these national data illustrates a missing link in data in the global database. For this reason, it is important to appreciate the magnitude of tracking global development poverty as these basic indicators are not comprehensive enough to present a good trajectory of development interventions and their impacts in West African countries. In Missing Millions and Measuring Development Progress, Roy Carr-Hill rightly points out that the blunder in measuring development progress. According to Carr-Hill

> Population undercounting means that any social program risks ignoring the poorest of the poor. This blindness is a public scandal affecting an estimate of between 300 and 350 million of the poorest in developing countries, leading to an over-estimate of progress toward development goals and a substantial under-estimate of inequalities. (2013: 11)

Already, there exist complexity and challenges in understanding the convoluted structures that facilitate development in developing countries. With measurement challenges of development progress in West African countries, it is apparent that national and global agencies may be getting the fundamentals wrong.
These fundamentals, unfortunately, influence the setting of goals and identification of targets as well as the understanding of whether progress is being made or not. This in turn affects the momentum as well as the interventions being put in place. Inadequate measurements of progress also suggest that West African countries are not adequately measuring whether their interventions are actually working to reduce poverty or promote human development.

The role of information in planning and measurement of progress to rethink the development process is indubitable. For this reason, it is imperative that the basics are gotten right. Development and poverty, or progress on human welfare and the understanding of what works and does not work, need to be critically examined in any form of international development agenda. Melamed (2011) may be right in the light of these observations to suggest that being hasty to come out with a new set of international development goals or an agenda may be premature when the fundamentals still have not been adequately bolstered. Subsequently, even before West African countries get themselves inclined towards a new international development agenda, they must develop the necessary national capacity to adequately track development progress and the impact of poverty reduction interventions.

9.2.2 International Aid and National Financial Capacity

The arguments from international aid critics such as Dambisa Moyo and William Easterly emerged during the discussions of West African countries. It is apparent that development is inherently dependent on resource availability to sustain its implementation, effectiveness and sustainability. Indeed there are other factors that ensure the successful implementation of projects and programs on development and poverty reduction. Nonetheless, there is a fine thread that runs through this that relates to funding. Moyo and Easterly both argue that international aid is a bane to national development for many developing countries, and until such a strain of some dependence is eliminated, these countries will continue to lag behind in progress to achieve poverty reduction and human development.
As much as the argument on dependency is critical, it should also be appreciated that international aid plays a critical role in providing alternative resources for funding development programs and projects. The challenge rather relates more to ensuring their effectiveness and “regenerative capacity.” In the sense of “regenerative capacity,” international aid should be seen as investments that are supposed to replenish themselves in the short to long term. Donors should stringently demand that international aid is used for the structural transformation of countries’ socio-economic development endeavors such that it creates employment and builds the capacity of countries towards self-sufficiency and sustenance. As Easterly notes in his book, *The White Man’s Burden*, it is apparent that the World Bank, IMF and other donor partners should emphasize value for money and ensure more stringent but flexible mechanisms for delivering international aid.

One way to do this is to deemphasize international aid for social programs. These interventions, while being critical for providing social safety nets for poor and vulnerable people, do not allow for investments that can directly replicate themselves economically. The evidence from these West African countries shows clearly that many of these investments ended up in national programs that were socially oriented and provided subsidies for social services without recourse to a comprehensive focus on promoting economic development that could sustainably replenish the investments earlier made.

One such area to promote economic development in these West African countries is developing national capacities to collect internal revenues and block leakages in the national economy. As already illustrated, developed countries are able to, on average, generate revenue that constitutes about 40% of their GDP. On the other hand, in these West African countries, the proportion of revenue generated to GDP is only half of this figure. Developing structural reforms and institutional capacities that mainstream such objectives will allow for countries to begin to build self-sufficiency and reduce their dependence on international aid.
9.2.3 Development Trendiness; A Bane or an Opportunity?

Another observation made across these West African countries is the similarities among the development interventions — particularly national programs and policies — dedicated to achieving the MDGs. On national policies for poverty reduction in all these countries, National Poverty Reduction Strategy Papers (PRSPs) were identified as the national policy framework for managing the challenges of poverty. Clearly, this smacks of a connection to donor influences in the development planning process in these countries. PRSPs were introduced in 1999 by the World Bank as one of the requirements for receiving international aid. This was made as a precondition to receive debt relief and concessionary funding under the HIPC initiative. Four main components characterizes this framework, namely, a description of the participatory process that was used; comprehensive poverty diagnosis; clearly presented and costed priorities for macroeconomic, structural, and social policies; and appropriate targets, indicators, and systems for monitoring and evaluating progress. While this was to ensure domestic accountability and focus national investment on poverty reduction, it was not without challenges.

First, it allowed for trendiness in development interventions as set guidelines provided by the World Bank coaxed West African countries to focus on key areas that the World Bank saw as imperative for national development. In essence, development interventions became almost arbitrary or generic and were similar across West African countries without recourse to country specific nuances. At the onset, PRSPs were intended to facilitate country specific identification of the causes and solutions to poverty while recognizing general “common ingredients of a sound poverty reduction strategy.” (IMF and the World Bank, 1999) This was not to be as these “common ingredients” became dominant across these countries. Subsequently, the specificity of interventions to country circumstances was lost, and policy and program ownership was declined. In addition, national goals became arbitrary, meaningless, and showed less realism, while institutional capacity for implementing these PRSPs were inadequate and sometimes.

absent. Over the course of the implementation of the PRSPs, it had become obvious that developing countries — including West African countries — needed to be more innovative and creative, contextualizing national programs and priorities to fit their poverty and human development agenda circumstances, and developing the needed national capacity to implement these strategies.

Another challenge with these PRSPs is that they have a short to medium term focus, which limits the potential for a long term vision for countries. As such as it is understandable that nations will opt for simplistic national programs. It is equally relevant to realize that the results are mostly fleeting rather than sustainable and structural.

The momentum of the MDG agenda also consolidated such trendiness. The race to show results annually allowed for the replication of many interventions, which have been less innovative and creative and are non-“regenerative in nature.” The desire to show immediate impact led the way for increased subsidized social interventions that provided temporary impact for the poor. Prevention strategies were mostly sacrificed for curative strategies in many cases — especially for health — while quality was also sacrificed for quantity in the case education.

Clearly, every country has its own uniqueness. Development partners, while recognizing the need for such uniqueness, should also show flexibility in the way international aid agreements are adduced. West African countries also need to realize that international aid negotiations are participatory — that they have a say in how this aid translates into benefits. As such, West African countries should show leadership as to how development should be promoted in their own states. By doing this, the seeming similarities that emerge among West African countries as a result of adopting, without adapting, international development and poverty reduction guidelines to national knowhow will be minimized.
Obviously, there is a need to rethink structurally the development process. The emphasis on sustainable development in the on-going debate on development goals provides some dimensions that can be explored particularly for economic development, i.e., employment generation and macroeconomic stability. However, the lessons from the MDG agenda should be made ubiquitous such that in identifying strategies and national programs for development and poverty reduction, their impacts could be conceived in both the short and long term.

9.2.4 “Think Globally, Act Locally”

The MDG agenda obviously falls within the school of thought that emphasizes thinking globally while acting locally. This idea recognizes that several other factors outside the confines of specific places such as countries or communities can influence how development takes place. (Hale and Mauzerall, 2004; Devine-Wright, 2013) While this holds true for environmental sustainability, this notion can also be applied to economic and political forces that have ramifications on a country’s development process. Robert F. Bruner for instance notes that:

When you take a look around, it certainly does seem as if the economy has gone global. Foreign outsourcing, brands from around the world in car dealers’ showrooms, the World Wide Web, and even globalization protesters all seem to offer proof that globalism has arrived and borders have vanished (Bruner, 2004: 2)

This notion suggests that West African countries should examine their role in the global economy to identify how they can benefit from it and avoid the risks and shocks to which they are susceptible. Evidently, the global economic and financial crisis presents some revelations that should inform West African countries and their interaction at the global stage. Economically, thinking globally should allow West African countries to explore how they can contribute and benefit from international trade. This self-introspection should enable West African countries to examine international markets and strategize to optimize the potential of industrial activities that international trade and globalization offer. This would imply developing the necessary infrastructure and the needed human resources base, as well as the
domestic environment that is congenial to investments and at the same time beneficial to West African countries.

The global economic and financial crisis, as well as spikes in global food prices, tends to affect local prices and affordability of goods and services. West African countries should, therefore, begin to appreciate a need for self-sufficiency in the provision of certain basic needs. It is interesting that while all the continents around the world have attained some form of a green revolution where agriculture productivity and production have reached levels of sustainable sufficiency, Africa, including West Africa, still lags behind. West African countries import a majority of their food from other countries, which tends to weaken their economic fundamentals. Thinking globally and acting locally should help West African countries identify the various opportunities that globalizations provides while developing the necessary potential to optimize these benefits. The diffusion of technology in the form of increased subscriptions to mobile telecommunication and the internet are some evidence from the review of progress by West African countries towards the MDGs that show this thinking has potential for poverty reduction and human development there.

However, there are weaknesses in translating global ideas to the national and, subsequently, to the local. These weaknesses currently exist for international aid interventions. While this aid presents alternative potential for ameliorating some of the funding challenges of these West Africa countries, these states are missing the point. They are not able to effectively access and use these financial opportunities to develop their economies and promote development. This has arisen as a result of the poor internal systems to harness this potential. Subsequently, the transition from a global agenda to a national agenda, as the progress on the MDG agenda has shown, has been limited. Poor human resources, poor national systems, and low ownership of interventions are limiting the potential that globalization brings to West Africa. As such, “...without local input and re-fashioning of global knowledge, its [i.e. thinking globally and acting locally] application can be inappropriate, misconceived and perverse” (Stone, 2001: 2).
9.3 The Way Forward

The way forward for West African countries relies on their ability to optimize the potential that international development offers. This is true whether it takes shape in the form of international development goals or some other form of an international development agenda. It is worth noting that before the MDGs, there were several other international development agendas that were available to these countries. Like the MDGs, the outcomes of these interventions were mixed; the difference is that the MDGs offered greater momentum and coordination among donor partners to help ameliorate global poverty.

The four critical issues identified suggest that there are some factors that need to be taken into consideration if an international development agenda is to be effective and sustainable. This has two parts, which are the role of the global society as well as that of national governments and their agencies. It necessary for these partners to help structure an international development agenda so that it presents a structural transformation and delivers better outcomes from any international development agenda.

9.4 Future Research

One central theme of this research is international aid. As the debate on the effectiveness of international aid continues, it will be interesting to look at the relationships between the MDGs and aid flows. To contribute to these debates, two hypotheses can be tested. These hypotheses would be to examine whether international aid has a positive or negative bearing on the progress of the MDGs in West African countries. This would be aimed at finding some of the reasons for and associations between international aid and the MDGs.

In addition, as the research shows, there are countries that have had tremendous success, while others have been “ugly.” Although this research explored the factors supporting and/or hindering progress, the
next step is to examine comprehensively the influence of these factors in each country so as to appreciate how they are manifested and affect progress.
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Chapter Nine


