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AFRICAN SOCIAL DEVELOPMENT INDEX: MEASURING HUMAN EXCLUSION FOR STRUCTURAL TRANSFORMATION

West Africa Report

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African Social Development Index: measuring human exclusion for structural transformation

West Africa report

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Acronyms

AfDB	African Development Bank
AGDI	African Gender and Development Index
ASDI	African Social Development Index
AWPS	African Women's Progress Scoreboard
AUC	African Union Commission
CDF	Constituency Development Fund
COMESA	Common Market for East and Southern Africa
CSOs	Civil Society Organizations
EAC	East African Community
ECOWAS	Economic Community of West African States
HDI	Human Development Index
EIU	Economist Intelligence Unit
GDP	Gross Domestic Product
HDR	Human Development Report
HDI	Human Development Index
ICPD	International Conference on Population and Development
ILO	International Labour Organization
MDGs	Millennium Development Goals
NEPAD	New Partnership for Africa's Development
NPRS	National Poverty Reduction Strategy
RCM	UN Regional Coordination Mechanism
RECs	Regional Economic Communities
SADC	Southern African Development Community

UNDESA	United Nations Department of Economic and Social Affairs
UNDP	United Nations Development Programme
UNECA	United Nations Economic Commission for Africa
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNICEF	United Nations Children's Fund
WB	World Bank
WDIs	World Development Indicators
WHO	World Health Organization

Executive Summary

Africa's positive economic growth during the past two decades has shown its resilience in the wake of the international crisis of 2008. Nevertheless, this positive performance has not yet translated its economic gains into meaningful social development.

The rise in average incomes has been accompanied by rising inequality, undermining the efforts made by many countries to reduce poverty and fuelling social and economic instability in the region. Indeed, the structural transformation under way on the continent, driven largely driven by capital-intensive sectors, – has not created sufficient productive employment to raise the standard of living of the people and create the conditions for inclusive and equitable development in Africa

Unequal access to social and economic opportunities and inadequate social protection have also limited the capacity of many individuals to contribute to and benefit from economic growth in their country. As a result, exclusion has become a real challenge for Africa's development. Nevertheless, no meaningful indicators exist to properly monitor the patterns of exclusion and help member States to develop appropriate, inclusive policies.

The African Social Development Index fulfils the need for a tool enabling African countries to measure the problems of development that are specific to the continent. The Index is built on the premise that development should be reflected in improved human conditions. By adopting a life-cycle approach, the Index can measure the extent of human exclusion in six key dimensions of well-being, namely, survival, health, education, employment, means of subsistence and life expectancy at 60. One of the key features of the Index is that it can be measured across time and disaggregated by gender and geographical location of residence, thereby helping to capture patterns of inequality and exclusion within and between countries. In this way, the Index offers a new conceptual framework for identifying the drivers of human exclusion in Africa, providing guidance for improving public policies in nutrition, education, employment and social protection.

The Index should assist member States in pursuing and formulating more inclusive social policies and guide them in the implementation of Agenda 2063 and the 2030 Agenda for Sustainable Development, both of which place a high premium on inclusion and the need to "leave nobody behind" as key conditions to regional and global development.

The application of the Index to the countries of West Africa has revealed the structural inequalities and the main exclusion factors in each phase of life and for each population group. The outcomes of the present report, reviewed and validated by national experts, provide important elements that can support countries in devising and implementing better targeted and more effective social policies.

Section I: Introduction

Introduction

Background

African countries have experienced unprecedented economic growth since the early 2000s, and shown strong resilience to the global downturn affecting most of the world's economies. Growth on the continent has averaged 5 percent yearly, with some countries posting 7 to 11 percent growth in gross domestic product (GDP) in recent years. Despite this remarkable stride, member States have yet to transform their economies and achieve the level of social development witnessed in other regions.

The continent is still fraught with inequalities and exclusion caused by differences in income, ethnicity, gender, age, disability and location among others. Indeed, evidence shows that poorer children in Africa are still about two and a half times more likely to be underweight and up to three times more likely to be out of school than those from the richest households (United Nations, 2012). Such inequalities often lead to a lack of social and economic opportunities in life – excluding the same individuals from development and full participation in society.

The dominant view is that Africa has for a long time focused on economic growth, with the expectation that improvement in social development would follow. One of the reasons for such a paradox hinges on the very nature of growth– largely driven by capital-intensive sectors – with limited value addition and job creation, and unfair redistribution of economic gains. In short, growth is not sufficiently inclusive and equitable – compromising its sustainability and fueling the risk of social and political instability in the region.

At the same time, limited coverage of social protection in many countries has exacerbated the exclusion of the most marginalized groups of the population. These groups, in addition to having limited access to social and economic opportunities, are also more vulnerable to external shocks that reduces their productive capacities, pushing them back, or further into poverty.

Promoting a more inclusive development path in Africa is an urgent priority and a pre-condition for building more sustainable and cohesive societies. However, policy interventions based on aggregate figures are generally not conducive to optimum decision-making and the inadequacy of relevant data and monitoring mechanisms are likely to lead to weak policy formulation and planning.

Rationale behind an African Social Development Index

In Africa, the emergence of social development as a central plank of economic development has gained impetus. The need for an inclusive and transformative growth strategy is a clear political intent firmly expressed by African leaders, in the context of the Africa Union Agenda 2063 and Agenda 2030 for Sustainable Development which are anchored on the principles of equality, sustainability and "leaving no-one behind" (AUC and ECA, 2013).

The recognition of the role of inclusiveness in sustaining development is not new. At the 1995 World Summit on Social Development held in Copenhagen, world leaders acknowledged the importance of social inclusion and integration for achieving sustainable development worldwide. For the first time, there was a shift from a simple model of deprivation to a holistic one of human poverty, exclusion and participation.

At the United Nations Conference on Sustainable Development in 2012, global leaders renewed their commitments to promote social integration through the creation of more cohesive and inclusive societies[1]. Following the Conference, the need to tackle exclusion as an objective per se started to gain resonance in the development discourse.

African governments have also become increasingly aware of the centrality of "inclusiveness" in the continent's development agenda. This is reflected in their commitment to the 1995 Copenhagen Declaration and Programme of Action, underscored by the 2008 Windhoek Declaration on Social Development and Social Policy Framework for Africa, which have been instrumental in advancing the New Partnership for Africa's Development (NEPAD) social development priorities across the continent. African countries have also taken action to address specific challenges of excluded groups – including youth, women and the elderly – using platforms such as the International Conference on Population and Development (ICPD), the Beijing Platform for Action, the Ouagadougou Plan of Action, the Abuja Declaration and the Madrid Plan of Action on Ageing, among others.

However, the implementation of these commitments has not led to the desired outcomes for a number of reasons. Firstly, until recently, only a few had a clear understanding of the challenge of "exclusion", and how it could be addressed and incorporated into national development planning (ECA, 2008).

Secondly, so far none of the internationally-agreed development goals, including the Millennium Development Goals (MDGs), have explicitly addressed the inclusive dimension of development, and their aggregate nature has failed to identify within-country inequalities that would require different policy interventions from those devised at national or regional levels.

Capacity gaps also persist, and there is a lack of monitoring mechanisms to assess inclusion in Africa, thereby leading to inadequate statistical follow-up and policy formulation.

To accelerate progress, governments need to develop policies that make equality and inclusion a choice of development strategies rather than their by-product, for Africa's structural transformation to be inclusive, the continent requires strong and responsive developmental states and long-term development planning that is consistent with a more inclusive development framework, as envisioned in the African Agenda 2063 and Agenda 2030 for Sustainable Development.

A new paradigm for inclusive development

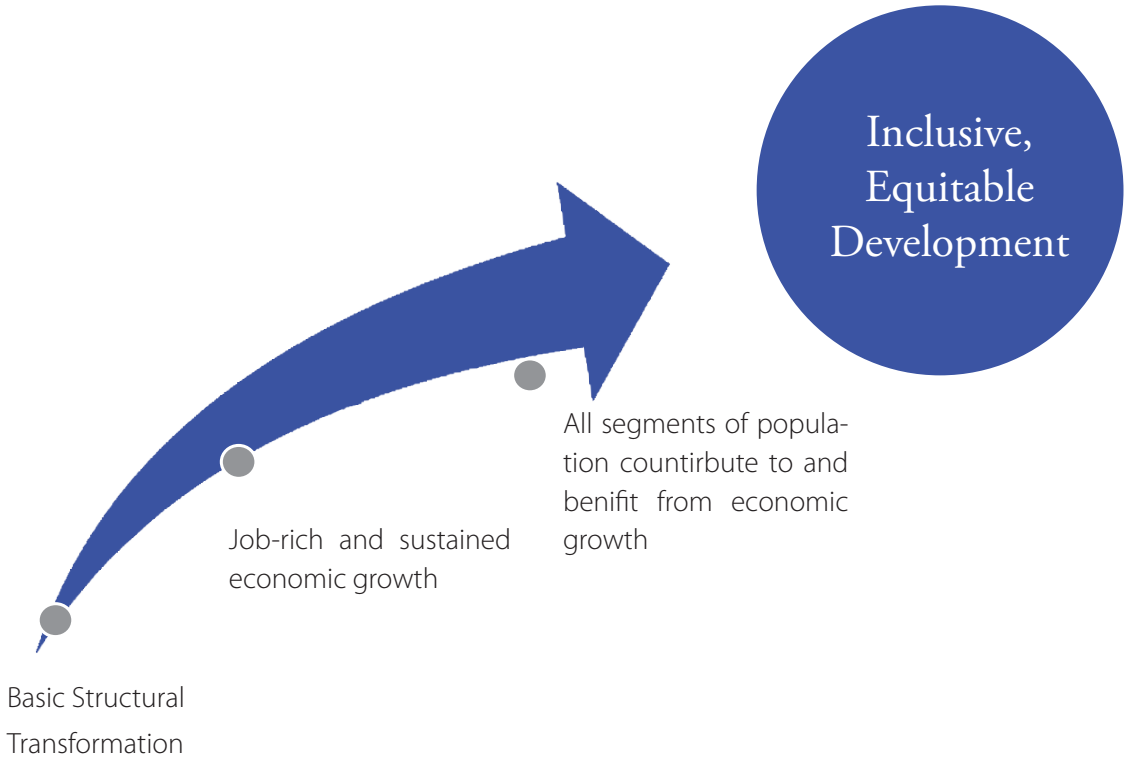
Exclusion is a multidimensional phenomenon, whose contours are difficult to define unless a clear framework is established on how it should be assessed and what aspects should be covered in the process. It is acknowledged that, despite strong economic growth, an "excluded" society is likely to limit the human and social development of its citizens. This is indeed what the continent is currently experiencing, with strong economic growth unable to ensure inclusive and equitable distribution of benefits across all sections of society.

There is evidence that progress towards inclusive development in Africa has been slow, and its drivers limited, to meet the needs of its people. This increases exposure to economic volatility and vulnerability to external shocks, particularly for the poorest and the marginalized groups. It is critical to ensure that

1 Inclusive society was defined as "a society for all, in which every individual, each with rights and responsibilities, has an active role to play". Such a society is based on the fundamental values of equity, equality, social justice, human rights and freedoms. It should also be equipped with appropriate mechanisms that enable its citizens to participate in the decision-making processes that affect their lives and shape their common future (United Nations, 1995).

these groups are included in the development process, accelerating the transition towards more equitable development (Figure 1.1).

Figure 1.1: From basic structural transformation to inclusive development



In this context, the economic transformation of the continent seems to be well defined and under way, with four essential and interrelated processes, namely: a declining share of agriculture in GDP and employment; a rural-urban migration that stimulates the process of urbanization; the rise of a labor-intensive industrial and modern service economy; and a demographic transition from high to lower mortality and fertility rates, associated with better health standards in both rural and urban areas (ECA, 2013b). However, the human and social development impacts underpinning this process require further analysis.

A key component of this framework is the need to address the needs of excluded groups for a balanced transformative agenda. This would provide the basis for redressing country-specific exclusion patterns, through effective policy formulation, both at national and sub-national levels.

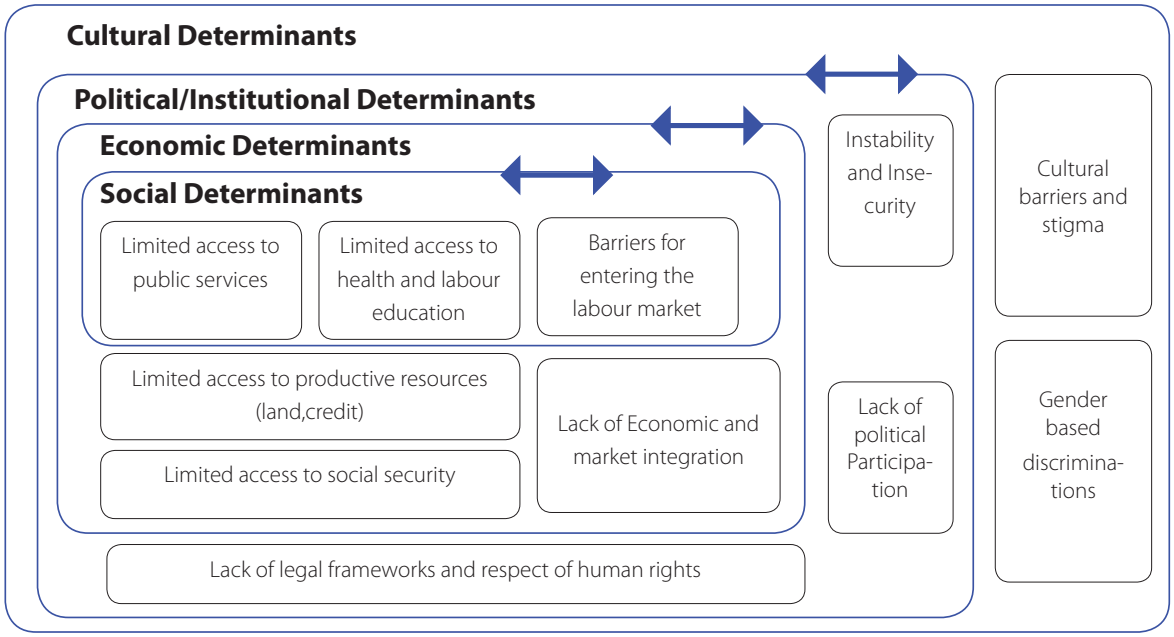
As part of this effort, a new paradigm is proposed for the social transformation of Africa, where reducing human exclusion is at the centre of this transformation. It is argued indeed that "human inclusion" should be a pre-condition to "social and economic inclusion" allowing individuals to be part of the development process as a first step to social and economic integration. The challenge for African countries is therefore to accelerate the path to structural transformation, while addressing the factors that contribute to exclusion.

Key drivers of human exclusion

Exclusion is structural and needs to be prioritized in order to sustain growth and maintain peace. Exclusion also skews development dynamics, economic opportunities and job creation, leaving the economy with a narrow base and higher vulnerability to external shocks. In addition to its economic impact, exclusion – whether based on income, gender, geographical, political or other factors – has critical social costs.

It is argued that the drivers of exclusion are often determined by the interaction of a series of contextual factors, as illustrated in Figure 1.2[2]:

Figure 1.2: Determinants of Exclusion



- **Social factors** include elements associated with access to basic social services, including health, education, and social security, among others;

- **Economic factors** take into account access to productive resources – including land and credit – as well as the degree of economic and market integration;

- **Political-institutional factors** encompass government policies and programmes aimed at addressing instability and insecurity, ensuring political participation and access to civil and human rights; and,

- **Cultural factors** define the norms and environment in which a person lives, in terms of traditions or gender-based barriers. These factors, often a consequence of policies and programmes, can have an impact on the likelihood of an individual to be either included or excluded from the development process. Within this framework, human exclusion can therefore be defined as 'the result of social, economic, political, institutional and cultural barriers that are manifested in deprived human conditions and that limit the capacity of individuals to benefit from and contribute to economic growth'.[3]

It is important in this context to highlight the distinction between human exclusion and the commonly-used term of social exclusion. Social exclusion generally refers to a person or a group's inability to participate in social, economic, political and cultural life and their relationships with others. Human exclusion, on the other hand, defines the individual's inability to participate in and benefit from the growth process itself. To that extent, human inclusion can be considered a stage prior to social inclusion – people need to be part of the growth process, and benefit from it, before they can participate meaningfully in society.

2 For more details, see also Macculi and Acosta (2014).

3 Other inhibiting factors, which are not explicitly included in this framework but are often found to be underlying determinants of exclusion, include the rural-urban divide, disability, ethnicity, HIV/AIDS status, internal and external conflicts, among others.

Human exclusion can manifest at different stages of a person's life. So while infants may receive adequate nutrition during the early stages of their lives, they may face discrimination in school or at the workplace. Exclusion based on gender and location is common in many countries.

Differential impacts of exclusion on women and men

In each phase of life, women and girls are affected by vulnerabilities to a different extent and in different ways than their male counterparts. This stems from the fact that women and men have different roles in society, different access to and control over resources, and different concerns that can impact their likelihood of being included or excluded from mainstream development.

Some of these differences are intrinsic to gender, while others are the result of cultural biases and social factors, which can affect women throughout their life cycle. Indeed, there are large number of studies showing that women and girls generally bear the brunt of unpaid care work; are generally paid lower wages, suffer more than boys the consequences of a truncated education; are more likely to enter into unskilled informal labour; and are more often victims of exploitation, violence or early marriage. All of this may critically affect their future development and ability to participate in social, economic and decision-making processes.

The effects, however, can vary across dimensions and stages in life. For instance, it is found that in developing countries, girls who survive early stages of life and reach adulthood have a life expectancy that approaches that of women in developed countries, a gap that will most likely narrow in the future, as mortality declines at younger ages. On the other hand, child malnutrition is higher among boys than girls in most developing countries, although results are not uniform across countries. In India for instance, because of their lower social status, girls are more at risk of malnutrition than boys (Smith and Haddad, 2000).

Early marriage and other traditional practices have also a significant bearing on girls' educational achievements, lowering their future life opportunities and aspirations. These differential outcomes – whether based on contextual factors or intrinsic to gender – need to be tackled, as indeed policies that do not adequately address such differences tend to perpetuate gender inequalities over time (Hedman, 1996, ECE and World Bank Institute, 2010).

Exclusion in urban and rural areas

Patterns of exclusion are also influenced by the geographical location in which an individual is born and lives. People in rural areas are more likely to lack the minimum social and economic infrastructure – including basic social services – that would allow them to develop to their full potential. Globally, 75 percent of those living in extreme poverty in 2002 resided in rural areas, despite the fact that only 52 percent of the world population was living in such areas (Ravallion et al, 2007).

The latest findings also point to higher rural poverty rates in Africa (UN, 2014). While this is true, African cities are also increasingly faced with other challenges, such as urban congestion, environmental and health hazards, poor infrastructure, social fragmentation, limited access to land as well as increased competition that bars unskilled workers from economic and social opportunities.

Section II: The African Social Development Index (ASDI)

African Social Development Index (ASDI)

The ASDI has been developed to assess the overall degree of human exclusion. It follows a life-cycle approach on the premise that exclusion manifests at different stages of an individual's life.

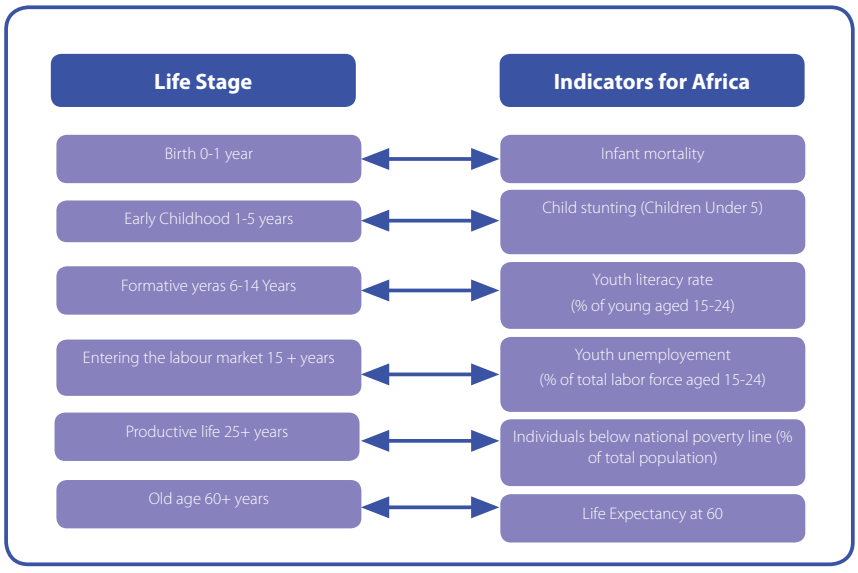
For each phase of life, a dimension of human development has been identified, from which individuals in that specific age group are more likely to be excluded - affecting their development and integration later in life (Table 2.1).

Table 2.1: Exclusion throughout the life-Cycle

Period	Stage in the life cycle	Key dimension
0-1 year	Birth	Survival
1 to 5 years	Early childhood	Health/Nutrition
6-14 years	Formative years	Quality education
15+	Entering the labour market	Productive employment
25+	Productive life	Means of subsistence
60+	Old age	Living a decent life

To make this framework operational, each dimension has been associated with one indicator that best captures the aspects of exclusion identified in the model (Figure 2.1).

Figure 2.1: Determinants of Exclusion



The value of each indicator ranges between 0 and 1 and the aggregate value of ASDI lies between 0 and 6. The higher the value of ASDI, the higher the extent of human exclusion.

The Index seeks to capture the differential impacts of exclusion based on gender and location. This allows capturing inequalities within countries and social groups that would otherwise remain unaccounted for. The findings should guide development-planning processes and improve policy targeting at the local level and on different population clusters.[4]

Selection of indicators

The selection of indicators is the result of a strong consultative/participatory process, involving experts from member States, regional institutions and development partners. Final selection was based on three main criteria: (I) relevance of dimensions/indicators in the African context; (ii) readily available data, possibly at various tiers of administration; and (iii) 'impact 'rather than 'output 'indicators.

While the selected indicators may not capture the full dimension of exclusion in each phase of life, they were chosen as the best proxy indicators based on available data and empirical evidence on exclusion in Africa. The methodological foundations of the Index are detailed in Annex 1.

Key features of the ASDI

The ASDI has a number of key features that distinguishes it from other indices:

- Developed on the basis of a request from member States;
- Uses national data, and so does not rank countries;
- Simple to comprehend and compute;
- Only index that measures human exclusion;
- Follows a life-cycle approach.

Implementation Strategy

The roll-out of the Index in 46 African countries has allowed testing and further refining the tool, making it more responsive to the needs of member States. More importantly, the training and application of the Index has contributed to strengthening national capacities in identifying policies and programmes that have contributed to reduce exclusion over time and across groups of population.

An important development of the ASDI has been its scale-up at the sub-regional level, through its applicability in select Regional Economic Communities (RECs), for monitoring implementation of their development plans and fostering economic and social integration.

Finally, a policy-mapping framework is being developed by the ECA to further assess the effectiveness of social policies in tackling human exclusion. This exercise will be a major step forward in using the ASDI for development planning and improved policy targeting. The setting of National Implementation Teams (NITs) is also being instrumental for ensuring the ownership and critical buy-in of Governments in the use of the Index for promoting and enhancing more inclusive development.

4 The application of the index in Africa is currently led by national implementation teams, which include senior experts from relevant ministries and national statistical offices. Data needed to compute the index are based on national statistics, mainly censuses and household, demographic and health surveys.

Section III: West Africa – A brief Introduction

West Africa: a brief introduction

Africa's economic growth declined sharply, from 3.7 per cent in 2015 to 1.7 per cent in 2016, after a significant growth spell of more than a decade at an average of 5 per cent. That drop was caused in part by continuing weak global conditions, a drop in commodity prices, in particular oil (although its price is now on the rise), and adverse weather conditions. Indeed, the economic growth rate of African oil exporters dropped from 4.6 per cent in 2013 to 0.8 per cent in 2016 (Economic Commission for Africa, 2017). The decline in the international price of oil has affected West African oil exporters in particular, with Nigeria, the largest economy, estimated to contract by 1.6 per cent between 2016 and 2017. The combined current account and fiscal deficits caused by decreasing export revenue have widened, with budget deficits in West Africa increasing from 1.8 per cent of GDP in 2015 to 2.8 per cent in 2016. That rise was once more driven by an increase in public spending in Nigeria, in particular on security matters, and by elections in Ghana and an increase in public spending in Côte d'Ivoire. Inflation increased dramatically within West Africa, from 8.6 to 13 per cent on average between 2015 and 2016, thus eroding the purchasing power of consumers. The slowdown in economic growth has made previous gains in social outcomes rather vulnerable to external shocks.

The West African countries reported a drop in poverty, as in all the other subregions of Africa, with the decrease mostly in urban areas. Indeed, in West Africa, rural poverty fell from nearly 70 per cent in 1996 to a little more than 40 per cent in 2012, while urban poverty dropped from approximately 30 per cent to 15 per cent during the same period. That was complemented by declining inequality, expressed as a Gini coefficient, in all West African countries, except Côte d'Ivoire and Ghana, where inequality increased, and Nigeria, which recorded a decline (but which is now rising). West African countries, except for Cabo Verde and Ghana, have a low Human Development Index score (<0.5), with per capita gross national income standing at $2,300 (African Development Bank et al., 2016). The life expectancy and expected years of schooling are the lowest in West Africa, with a clear gender bias. Women from West Africa post the highest gender gap in terms of schooling, and bias is also reported in access to public services (Economic Commission for Africa, 2017). An important social development feature in the West Africa subregion is that the average number of births per woman dropped from 6.53 in 1990 to 5.05 in 2014. On the other hand, the subregion continues to have the highest average fertility rate in Africa (United Nations, 2015). In addition, the fertility rate varies considerably throughout wealth quintiles, and West African countries report an average of 6.7 births per woman from the poorest quintile to an average of 3.7 births from the richest, indicating inequitable access to health services. Health services were severely challenged by the Ebola crisis that exposed the vulnerability of national health systems to epidemic shocks.

The aggregate figures on poverty, education and gender parity do not provide sufficient information for policy interventions. The marginalization of low-income groups, women and rural dwellers, among others, requires more country-specific analysis of the drivers of human exclusion as the subregion and the continent seek to achieve the objectives of the 2030 Agenda for Sustainable Development and of Agenda 2063 of leaving no one behind. The African Social Development Index assists in identifying the depth of human exclusion in the six indicators by using national data disaggregated by gender, location and subnational levels. The tool provides better opportunities for policy planning, monitoring and targeting. Subregional workshops were held in Cotonou, Benin, and Cairo for francophone and anglophone West African countries in order to train relevant national officials on the computations and use of the Index for policy analysis. The eight West African countries (Benin, Burkina Faso, Cabo Verde, the Gambia, Ghana, Guinea, Senegal and Togo) all attended the workshops and contributed significantly to the collection and computation of the Index.

Section IV: ASDI Country Analyses

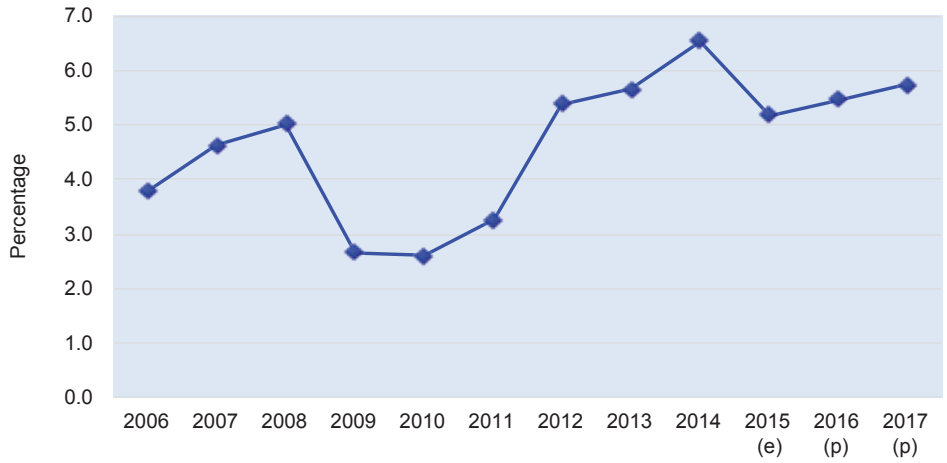
4.1. Benin

Socioeconomic conditions

Benin is one of the most effective African democracies, in which civil society plays a very active role. The country continues to benefit from a stable democratic system. Agriculture is the most important sector of the economy, and the vast majority of the population continues to depend on subsistence farming. More than 80 per cent of Beninese exports come from agriculture and agricultural products. Recently, the Government invested heavily in infrastructure, agriculture and tourism, offering the potential for strong economic growth in the near future.

The gross domestic product (GDP) of Benin increased by 5 per cent in the third quarter of 2016, compared with the same quarter of 2015. After climbing from 4.6 per cent in 2012 to 6.9 per cent in 2013, the annual GDP growth rate had fallen to 6.5 per cent in 2014 and to 5 per cent in 2015 (African Development Bank et al., 2016). Three principal reasons account for this decline: lower agricultural production as a result of lower rainfall, electricity shortages and load shedding and the downturn in business activities, in particular that of re-exports to Nigeria. In fact, Nigeria is one of Benin's main export partners, receiving 21 per cent of the country's exports (Ibid.).

Figure 4.1.1: GDP growth rate



Source: African Economic Outlook (2016).

Note: (e) = estimates (p) = projections.

Agriculture accounts for 36 per cent of GDP. Cotton alone accounted for 38.7 per cent of export revenue in 2013 (up by 41.8 per cent, compared with 2012), notwithstanding a sharp decline resulting from management problems in the sector and from the global easing of prices. Benin is the fifth-largest world producer of cashew nuts, supplying between 120,000 and 180,000 tons of nuts annually, accounting for 7 per cent of GDP. The secondary sector accounted for 13.4 per cent of GDP in 2011.

The economy of Benin continues to be dominated by the agricultural sector, in particular by cotton, which both directly and indirectly provides the income of a large sector of the population. Cotton and its re-exportation to neighbouring countries, especially Nigeria, on which it is broadly dependent, constitute the pillars of the Beninese economy.

Benin is ranked, for the second time, among the 10 countries in the world leading reform. In 2015, Benin reported three reforms on business creation indicators, construction permits and cross-border trade (World Bank, 2016). The structure of the economy of Benin is determined broadly by its strategic position on the West African coast, on the doorstep of the African giant, Nigeria.

Social development

Benin remains an extremely poor country, notwithstanding its moderate annual growth rates of between 4 and 5 per cent between 2000 and 2015. The national poverty rate stood at 37.5 per cent in 2006, 35.2 per cent in 2009, 36.2 per cent in 2011 and 40.1 per cent in 2015 (World Bank, 2016). Benin is a country with low human development, with a human development index estimated at 0.48 in 2014.

Persistent inequalities erode the gains made in terms of human development. In 2014, the inequality-adjusted human development index came in at 0.300. This means that 37.4 per cent of the level of potential human development is lost in Benin as a consequence of inequalities. High levels of inequality continue to dog education (44.8 per cent), life expectancy at birth (37 per cent) and income (29.4 per cent) (United Nations Development Programme, 2016a). Women are more vulnerable and continue to be penalized by a lack of access to economic opportunities. They are also underrepresented in high-ranking positions.

The education and health sectors continue to account for a substantial share of public spending (on average, 23 and 7 per cent, respectively, are allocated annually to these sectors). The Government must attempt to manage these sectors more effectively and ensure that financial resources are more equitably allocated to the regions. In 25 years, the prevalence of hunger was reduced by half, declining from 22.5 per cent in 1990 to 11.2 per cent in 2014. The incidence of underweight in children under five varies between 17 and 19 per cent.

Included among the factors that combine to enhance human development are education, health and income. Agriculture has played an important part in this because of its links with food, wealth creation, education, health and nutrition. Nevertheless, the contingent liabilities relating to State governance of the cotton sector represent a vulnerability factor.

Table 4.1.1: Socio economic indicators

Indicators	2000-2002	2005-2007	2012-2014
Total population, in millions of inhabitants	7.4	8.7	10.9 (2015)
Total GDP in CFA[a]	1 956 700	2 638 975	4 287 407
Per capita gross national income (Atlas method in current United States dollars)	380	660	860 (2015)
Population living below the national poverty line, as a population percentage[b]	…	37.5	40.1 (2015)
Gini coefficient	38.6 (2003)	…	43.4 (2011)
Unemployment, as a percentage of the total working population	0.7	1.1	1
Unemployment among young people, as a percentage of the total working population aged 15 to 24	0.8	2	1.7
Population growth, as an annual percentage	3.3	3.1	2.6 (2015)
Life expectancy at birth, in years	56	58	60

Source: World Bank world development indicators.

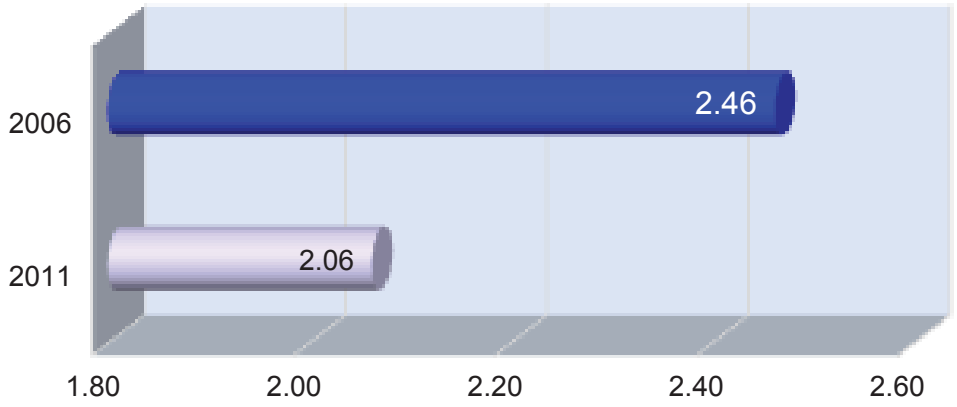
[a] International Monetary Fund world economic outlook database. Consulted 19 May 2017. Available from www.imf.org/external/pubs/ft/weo/2015/02/weodata/index.aspx.

[b] Using the $1.90 per day international poverty line.

Measuring human exclusion in Benin

Notwithstanding the many challenges that it faces, Benin recorded a drop in human exclusion from 2.46 in 2006 to 2.06 in 2011. This shows that the country has made progress in human exclusion, although its current social and economic prospects are insufficient to generate genuine change in the lives of the population (see figure 4.1.2). Food security and nutritional levels remain poor, owing to low agricultural production resulting mainly from inadequate access to production factors, such as fertilizers, pesticides, fungicides and agricultural credit. Furthermore, food commodities are stored, preserved and processed under inadequate conditions. Poverty levels, in terms of the national poverty line, increased, from 35.2 per cent in 2009 to 36.2 per cent in 2011 and 40.1 per cent in 2015 (World Bank, 2016).

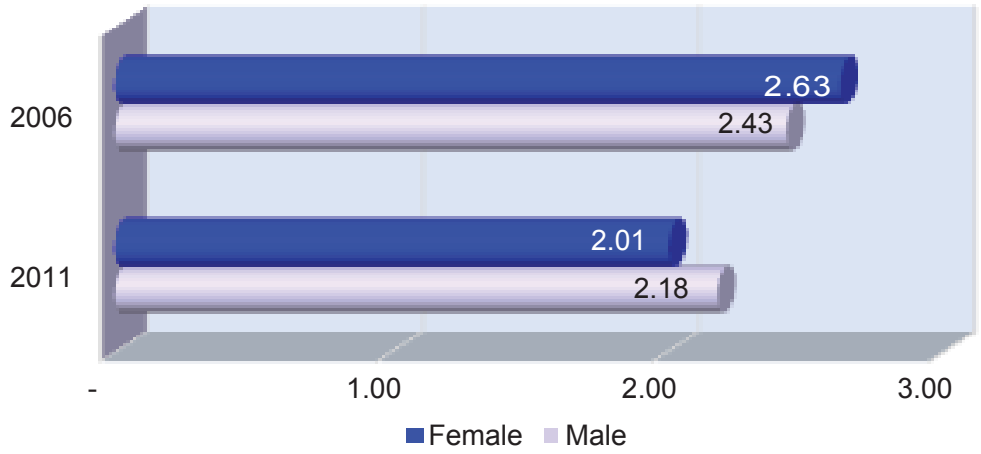
Figure 4.1.2: African Social Development Index in Benin



Source: Computed using national data.

Human exclusion in Benin has been reduced more swiftly among women than among men, perhaps the result of effective policies. Benin has adopted and implemented equitable policies. In 1990, the Constitution discrimination was prohibited on the basis of gender, religion and race and equal social and economic rights was granted to all citizens. In 2006, the strategic development plan for the period 2006-2011 was adopted within the framework of promoting gender equality, female empowerment and enhanced social protection (United Nations Development Programme, 2016a). The adoption of the national gender promotion policy in 2009, which is designed to achieve gender equality and sustainable human development by 2025, also explains the small deviation in gender-based exclusion. In 2012, a law on the prevention and suppression of violence against women was enacted; this legislation is also designed to promote equality (Ibid.). Nevertheless, it should be noted that, notwithstanding the attempts to promote gender equality, women in Benin are still faced with the problem of full and comprehensive participation in development.

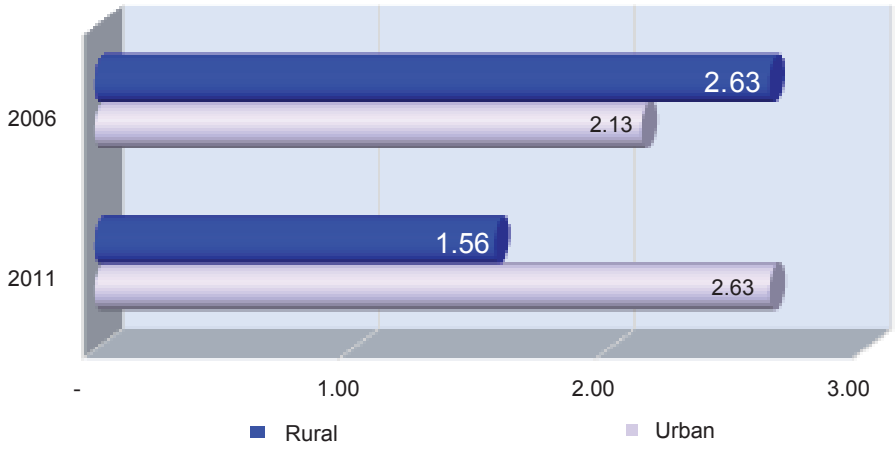
Figure 4.1.3: Human exclusion by gender



Source: Computed using national statistics

Human exclusion by location presents a paradox in Benin. Whereas in the rural areas, exclusion fell from 2.63 in 2006 to 1.56 in 2011, it increased by 19 per cent in the urban areas during the same period. The growth of exclusion in the urban areas of Benin may be attributable in part to the population explosion in the big cities. The very pronounced rural exodus to the cities has major implications for the provision of fair and balanced services. More than half the population lives in urban areas.

Figure 4.1.4: Human exclusion by location

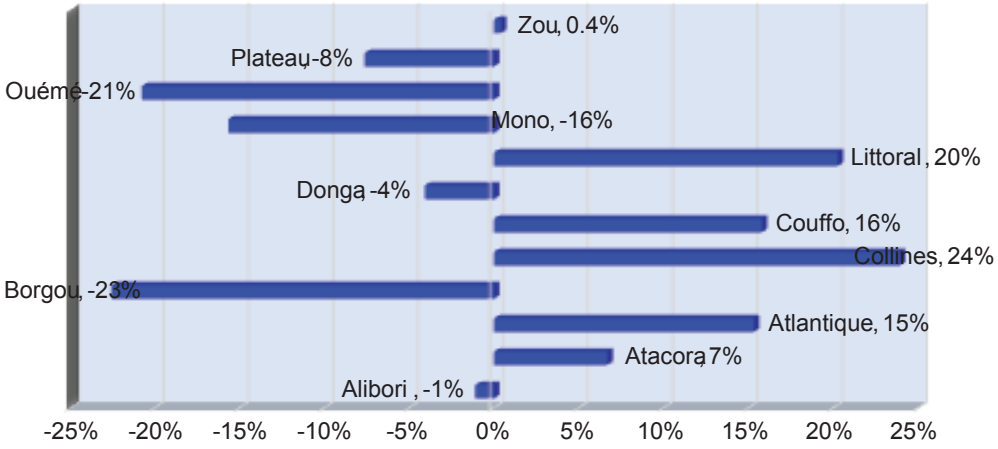


Source: Computed using national statistics

In contrast to other African countries, which have made progress with regard to exclusion over the years, exclusion in Benin, especially in the departments of Benin, Collines, Littoral, Couffo and Atlantique, has increased by 24 per cent, 20 per cent, 16 per cent and 15 per cent, respectively.

Atacora has also shown an increase in exclusion: 7 per cent between 2006 and 2011. On the other hand, exclusion actually decreased in Borgou, Ouémé and Mono, by 23 per cent, 21 per cent and 16 per cent, respectively, between 2006 and 2011.

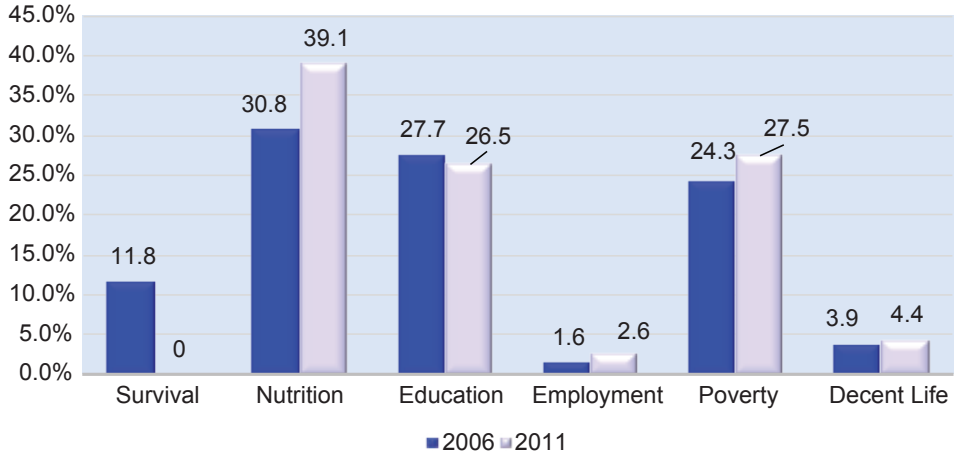
Figure 4.1.5: Change in ASDI at Sub-National Level



Source: Computed using national data.

It can be seen from figure 4.1.6 that the principal determinants of exclusion over time are child undernutrition. Poverty levels also determine exclusion, as was the case in 2011. Nutrition, which has always been the leading factor in exclusion in Benin, increased sharply in 2011. Malnutrition is common, in particular in the rural areas and among its vulnerable communities, a situation caused by recurrent floods and droughts, with the corollary of increasingly high prices of food commodities. Acute malnutrition affects 16 per cent of children under five years og age and 44.6 per cent of the same age group suffer from chronic malnutrition. This condition of malnutrition is worse in the rural areas, where it has a negative impact on school enrolment rates. Access to education, or the lack of it, has also made a considerable contribution to exclusion, notwithstanding a slight drop in 2011. Even though preschool and primary school education are free of charge, school enrolment ratios were low because of the shortage of teachers and resources. Furthermore, secondary school education is expensive, which restricts enrolment beyond the primary sector (Ambrecht, 2014). Although GDP has shown reasonable growth over the past two decades, poverty remains widespread and continues to rise. The contribution of poverty to human exclusion is high, but malnutrition continues to be the principal factor in exclusion.

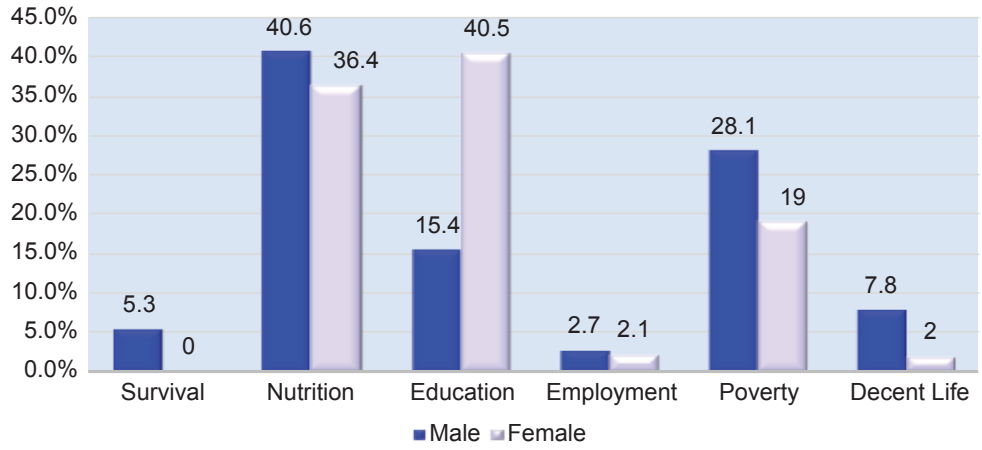
Figure 4.1.6: Drivers of human exclusion



Source: Computed using national data.

When disaggregated by gender, child undernutrition and poverty appear to to be the key drivers of exclusion among men, whereas education is the chief driver of exclusion among women. According to the World Bank (2017b), households headed by women experience lower poverty levels: 28 per cent compared with 38 per cent for households headed by men. The education of girls remains static. Statistics obtained from the United Nations Children's Fund (UNICEF) show that enrolment of girls in education is lower than that of boys, a situation that needs to be resolved by policy interventions.

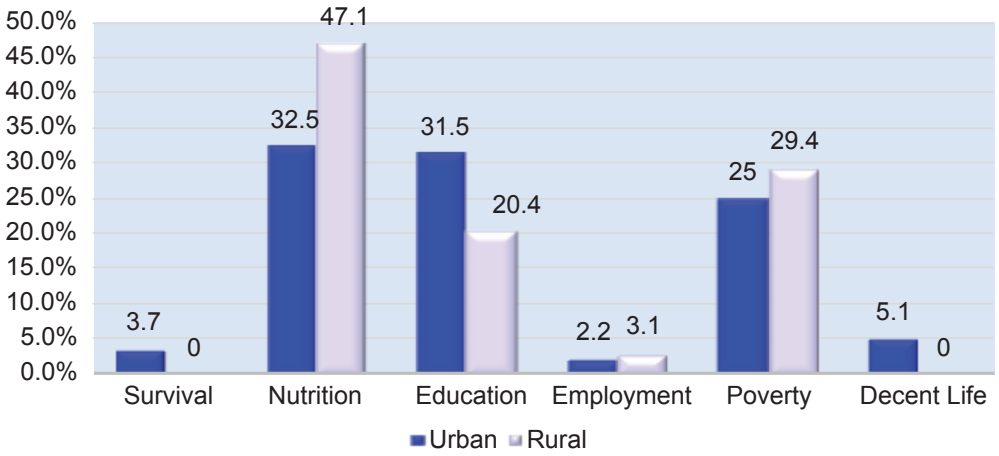
Figure 4.1.7: Drivers of human exclusion by gender



Source: Computed using national data.

Figure 4.1.8 illustrates many exclusion factors by residential location, including nutrition, education and poverty. Undernutrition has a major impact on exclusion in the rural areas, where malnutrition is very widespread. Approximately 4 out of 10 children suffer from chronic malnutrition, often requiring immediate hospitalization (34.6 per cent), in the north of the country (Yanke, 2014). Malnutrition is widespread in the rural areas, where cultural beliefs result in malnutrition. Undernuitrition in children in the rural areas is a driver of exclusion. Poverty has a greater impact on exclusion in the rural areas than in the urban areas.

Figure 4.1.8: Drivers of human exclusion by location



Source: Computed using national data.

Policy considerations

Child undernutrition, illiteracy and poverty are the key challenges faced by the country's authorities because they constitute human exclusion factors, in particular in the rural areas. It is therefore vital that improvements be made to the health sector, in particular in the rural areas, to prevent growth delay in children. To this end, policies geared towards poverty reduction and improvements in the education sector can be effective in combating exclusion.

Awareness-raising campaigns are under way in the rural areas, where cultural beliefs can create obstacles. In addition, medical staff in northern Benin have expressed the need to replace the prevailing mythology with other forms of knowledge, adding the further explanation that dealing with the cultural factors leading to malnutrition can make an effective contribution to reducing it (Yanke, 2014). In 2012, the Government launched the community nutrition education project, an educational programme that trained 12,607 grandmothers in various communities in ways to promote the health of pregnant women and children (Ibid.). With the same goal in mind, the World Bank approved the payment of $28 million in 2013 to provide nutrition services for children and train mothers and adolescents in nutritional skills. Notwithstanding this attempt, growth delay rates remain high and, consequently, there is still much to be done.

The education of girls is crucial to the reduction of social exclusion. UNICEF provides support for the Big Sister programme in which older girls are given the responsibility of motivating younger girls and ensuring that they attend school. In 2014, the Peace Corps and the organization Human Solidarity Benin organized a race to encourage women's empowerment and collect funds for the education of girls. Notwithstanding these efforts, girls' education remains at an unsatisfactory level, requiring continuing efforts to be made.

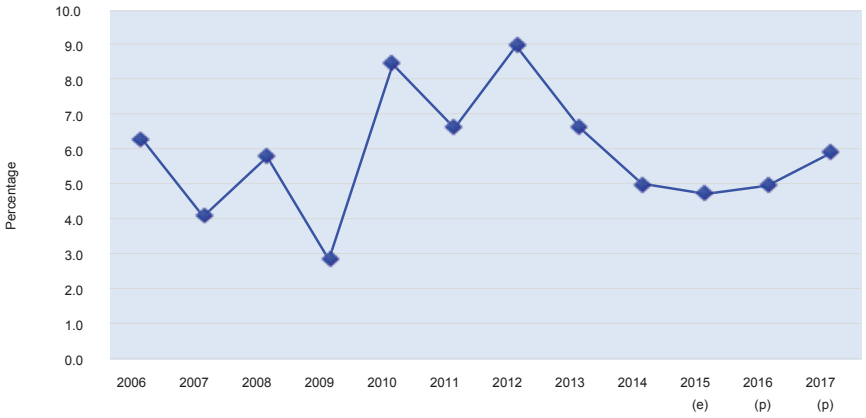
Human exclusion is high in the urban areas and increasing over time, a rise that is attributable mainly to the rural exodus obstructing the delivery of services. The Government should make greater efforts to halt the rural exodus and improve living conditions in the rural areas. Significant efforts are needed to bring about greater equity in the geographical division of resources.

4.2 Burkina Faso

Socioeconomic conditions

Burkina Faso is a landlocked country with limited natural resources, robust demographic growth, a population of 18.11 million inhabitants and an annual population growth rate of 3.1 per cent in 2015. It is heavily reliant on agriculture, with approximately 80 per cent of its population employed in this sector (World Bank, 2016). It is a low-income country, with an estimated per capita gross income of $615 in 2015. The economy has experienced high growth levels in recent years, fuelled by agricultural production. In 2014 and 2015, the country underwent a social and political crisis, as a result of prices of raw materials and the effects of the Ebola virus, among other factors, which slowed down economic growth considerably. Recorded growth of GDP stood at 5 per cent in 2014 and in 2015, which is lower than the average rate of 6 per cent recorded in the preceding decade (Ibid.). Cotton and gold are the principal exports. The country continues to be vulnerable to climate change and fluctuations in the prices of basic commodities.

Figure 4.2.1: GDP Growth Rate



Source: African Economic Outlook (2016).

Note: (e) = estimates (p) = projections

Social development

The country has made some advances in human development. The incidence of poverty declined from 46.9 per cent in 2009 to 40.1 per cent in 2014, and the country was ranked 183rd of 188 countries in the 2015 human development index.

The education sector has also shown improvement, with an increase in the gross enrolment ratio at the primary level climbing from 57 per cent in 2005 to 87 per cent in 2014 (World Bank, 2016). The secondary enrolment ratio, formerly lower, also increased, climbing from 20 per cent in 2005 to 39.7 per cent in 2014 (Ibid.).

There have been improvements in the health sector. The infant mortality rate declined from 65 per 1000 live births in 2010 to 43 per thousand live births in 2015. Life expectancy at birth was estimated at 58.6 years in 2014. Maternal mortality rates also showed a significant decline, from 484 deaths per 100,000 live births in 1995 to 341 deaths in 2010 (World Bank, 2016)

Table 4.2.1: Socioeconomic indicators

Indicators	2000-2002	2005-2007	2012-2014
Total population, in millions of inhabitants	12.3	14.3	18.1 (2015)
Total GDP in CFA[a]	2 234 958	…	3 245 246
Per capita gross national income (Atlas method in current United States dollars)	240	460	615 (2015)
Population living below the national poverty line as a population percentage[b]	…	46 (2009)	40 (2014)
Gini coefficient	43.3 (2003)	39.8 (2009)	…
Unemployment, as a percentage of the total working population		3.3	3.1
Unemployment among young people as a percentage of the total working population aged 15 to 24	4.7	5.3	5
Population increase as an annual percentage	2.9	3.1	2.9 (2015)
Life expectancy at birth, in years	51	55	59

Source: World Bank world development indicators.

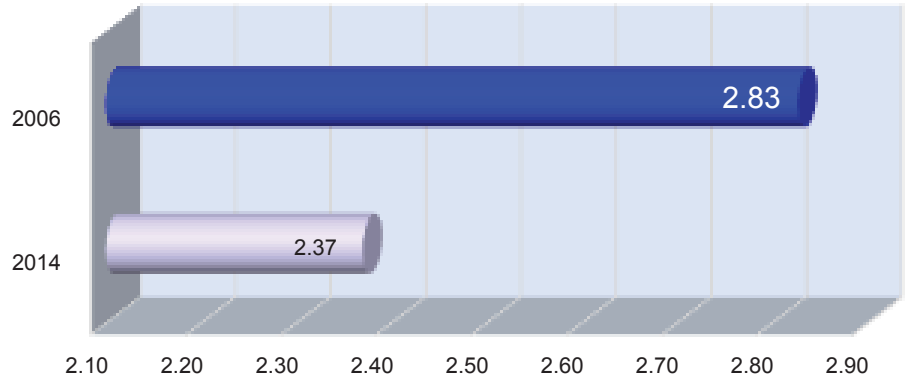
a International Monetary Fund world economic outlook database. Consulted 19 May 2017. Available from www.imf.org/external/pubs/ft/weo/2015/02/weodata/index.aspx.

b Using the $1.90 per day international poverty line.

Measuring human exclusion in Burkina Faso

General human exclusion is moderate, notwithstanding a slight fall of 16.2 per cent between 2006 and 2014 (see figure 4.2.2). This decline in human exclusion may be attributable to the general economic improvement occurring between 2009 and 2012, while at the same time the poverty rate decreased.

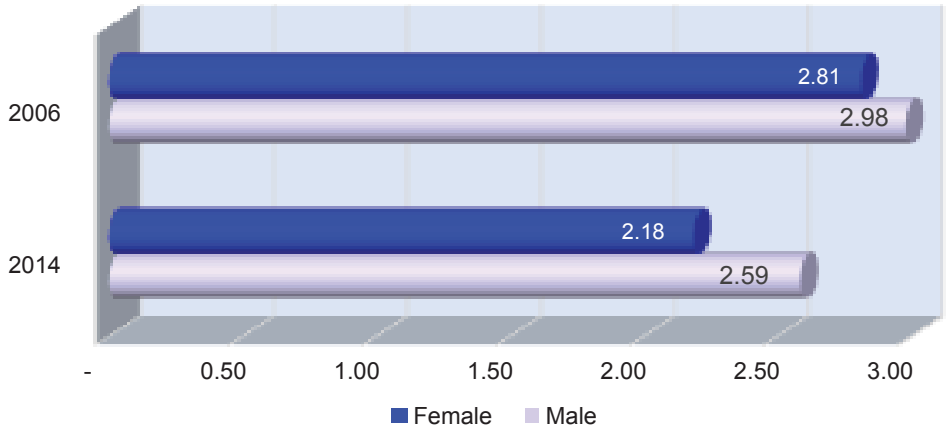
Figure 4.2.2 : African Social Development Index in Burkina Faso



Source: Computed using national data.

When disaggregated by gender, the African Social Development Index scores reveal a specific characteristic: exclusion appears to be higher among men than among women over time but with some slight differences. Between 2006 and 2014, the gap between the genders increased. This may be attributable to the introduction of gender equality projects, in particular in the sphere of education.

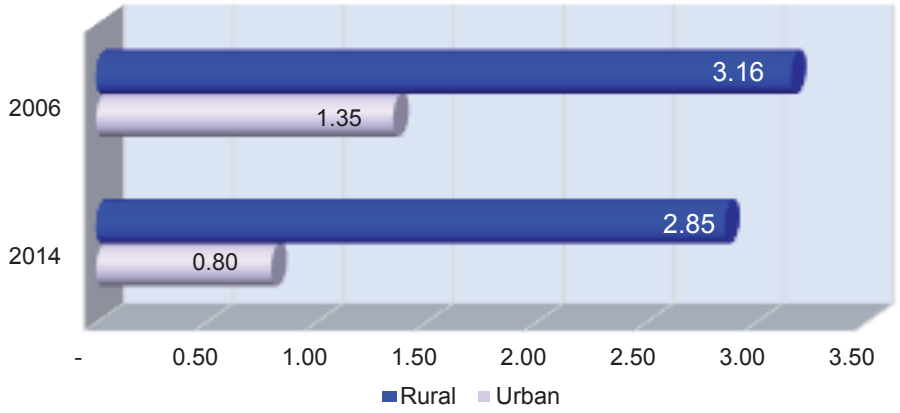
Figure 4.2.3: Human exclusion by gender



Source: Computed using national statistics.

The deviation between the rural and urban regions continues to pose a great challenge, with an increase in human exclusion over time (see figure 4.2.4). In 2014, exclusion in the rural areas was more than three times higher than in the urban areas, at 2.85 and 0.80, respectively. One possible explanation is the inequitable spatial distribution of public services, such as education, health, water and sanitation. Poverty principally affects the rural areas, where more than 70 per cent of the population lived in 2014. The chief causes of rural poverty are low agricultural productivity and the size of the population, underdeveloped communication and transport networks, subsistence farming and poor climate conditions, with fluctuations characterized by drought and desertification (International Fund for Agricultural Development, 2015). Rural areas face challenges such as poverty, persistent drought, low levels of education, inadequate housing, malaria and meningitis, to mention only a few (Compassion International, 2015a).

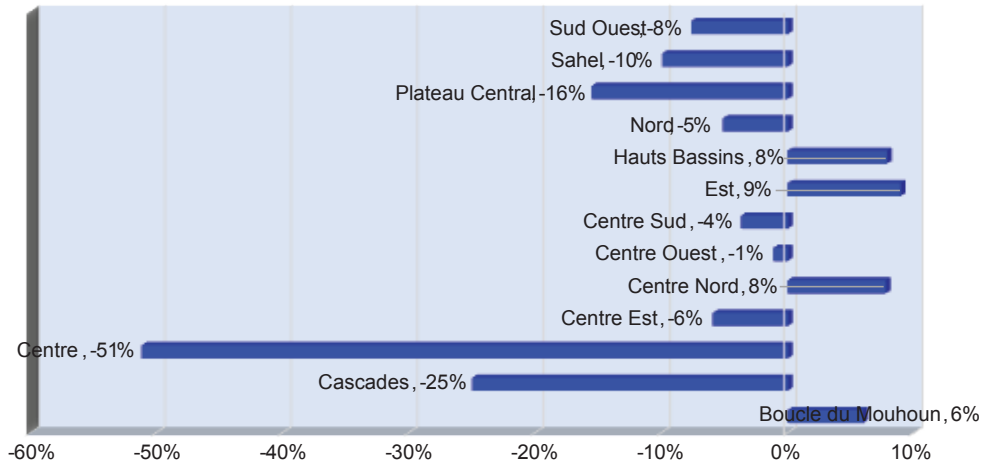
Figure 4.2.4 : Human exclusion by location



Source: Computed using national statistics.

As shown in figure 4.2.5, there has been an increase in exclusion in four administrative regions of the country. The Est region recorded the highest increase (9 per cent), the Hauts Bassins and Centre Nord 8 per cent and the Boucle du Mouhoun 6 per cent. On the other hand, nine regions reported a reduction in exclusion, which indicates an improvement in the African Social Development Index. The substantial regional variations mean that specific attention must be paid to the transfer of resources and capacities at the lower levels of government.

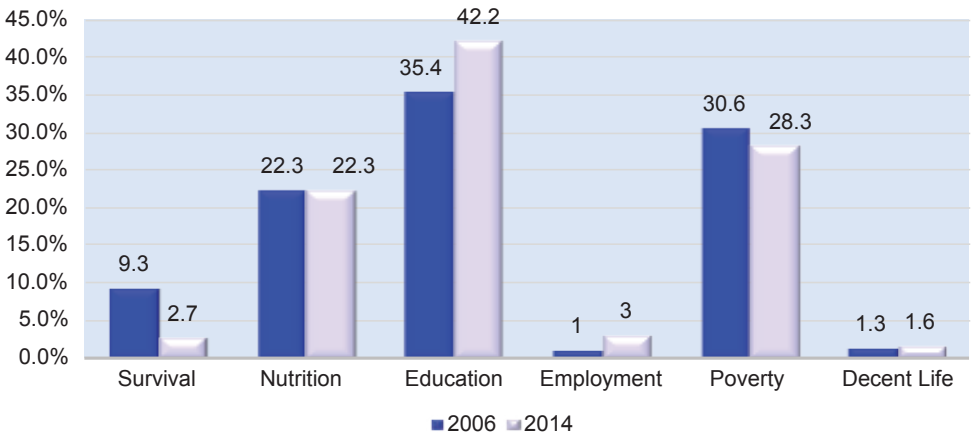
Figure 4.2.5: Change in ASDI at Sub-National Level



Source: Computed using national data.

When disaggregated by sector, education, poverty and malnutrition are the key drivers of exclusion in Burkina Faso. Growth delay (malnutrition) has made a significant contribution to general human exclusion, although it has decreased slightly over time. In common with the majority of African countries, basic education (primary and lower secondary) is free and compulsory. Nevertheless, levels of illiteracy remain high, and the country has the lowest literacy rate in the world (36 per cent). Literacy among men stands at 43 per cent, compared with 29.3 per cent literacy among women (United Nations Educational, Scientific and Cultural Organization, 2014). The contribution of poverty to general exclusion has reduced over time. This could be attributable to State interventions in the context of its poverty reduction strategy, in which various projects have been implemented, including an agricultural productivity and food security project in 2009, poverty reduction support credits (11) in 2011 and the agricultural diversification and market development project in 2015 (World Bank, 2017c).

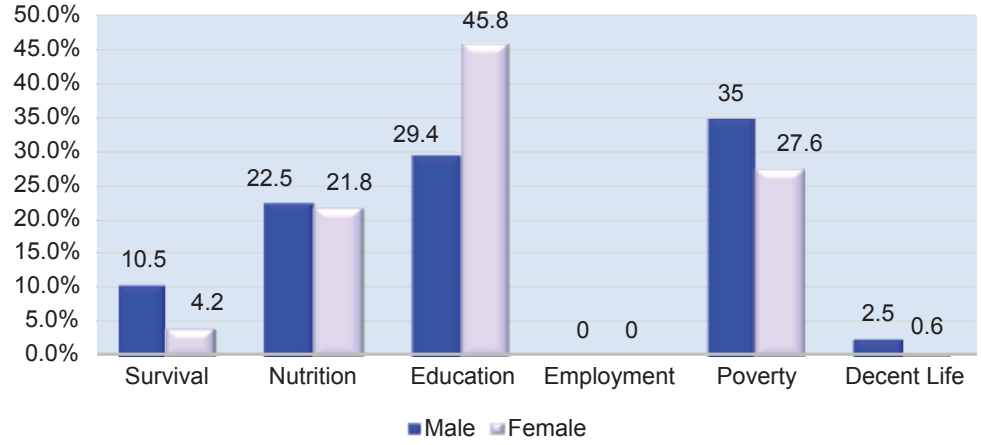
Figure 4.2.6: Drivers of human exclusion



Source: Computed using national data.

Once again, education, poverty and malnutrition appear to make a larger contribution to general exclusion when disaggregated by gender (see figure 4.2.7), a contribution that is even higher among women. This could be due in part to the cultural norms that restrict girls to domestic activities.

Figure 4.2.7: Drivers of human exclusion by gender

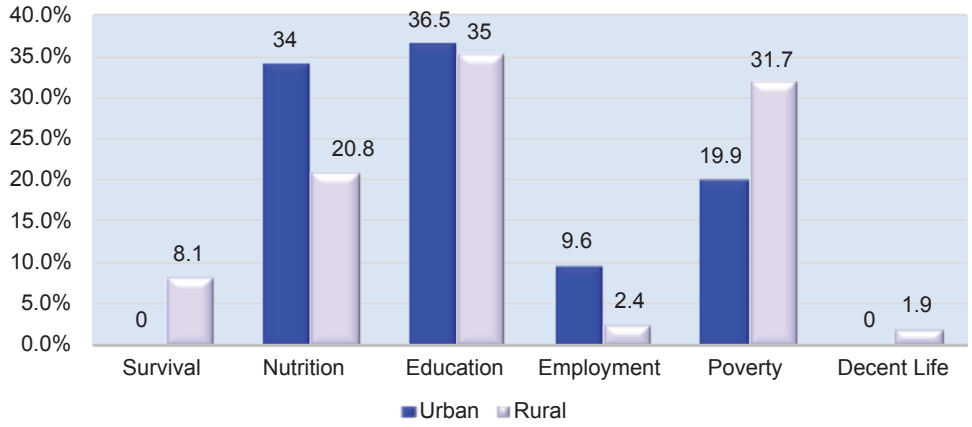


Source: Computed using national data.

Stunted growth in children (malnutrition), education and poverty are the key drivers of general exclusion when they are disaggregated by location. The urban areas report high levels of exclusion, compared with the rural areas in nutrition and education. This means that malnutrition and illiteracy are higher in the urban areas.

The economy of Burkina Faso is heavily reliant on agriculture, with more than 80 per cent of its population employed in the sector (World Bank, 2016). Malnutrition is higher in the urban areas perhaps because of extensive agricultural production in the rural areas and rural-urban migration, which limits the supply of public services in the urban areas. In addition, the level of food supplies is high in the rural areas, leaving the children in the urban areas malnourished. Nevertheless, poverty is higher in the rural areas than in the urban areas (see figure 4.2.8). Burkina Faso is principally rural, with more than 80 per cent of its population dependent on subsistence farming. Agriculture in rural Burkina Faso suffers from irregular rainfall and the use of outmoded and inefficient farming methods. This increases the levels of poverty in the rural areas (Compassion International, 2015a).

Figure 4.2.8: Drivers of human exclusion by location



Source: Computed using national data.

Policy considerations

The country's poverty rates are high and require rapid intervention. The Government has attempted to resolve this problem by taking a number of initiatives. One of these is the project to improve agricultural productivity and food security, supporting the agricultural, forest and pastoral sectors. There are many other projects, for example, the land management plan and the agricultural activities support project, designed and implemented to resolve the issue of poverty and human exclusion. The project to improve agricultural productivity and food security was launched in 2007 to increase competitiveness in order to stimulate growth in the agricultural sector in the four main value chains of onions, mangoes, beef and local poultry (World Bank, 2017a).

Of all the human exclusion factors, illiteracy has had the most significant impact on general exclusion and continues to do so at an increasing pace. That is why education should be put at the heart of the country's development plan. The Government has tried to meet the challenges of education by drafting a sectoral education and training plan for for the period 2012-2021. The goal of the plan is to improve access to and the quality of education in order to educate and train citizens and enable them to make a significant contribution to the social and economic development of the country (Global Partnership for Education, 2017). Furthermore, to combat inequality in school enrolment and improve access to and retention in the educational system, the ministries responsible for education have initiated a number of programmes, including the distribution of free school meals, school books and supplies. Other programmes were established to improve health and nutrition and to raise the level of enrolment of girls in education. Notwithstanding these initiatives, the country still faces problems with respect to education, such as its low literacy levels, meaning that additional interventions are needed. One of the initiatives takes the form of universal programmes and social equity programmes to ensure equal access to community resources. There are also gender-equality projects. Specific associations have worked on the disparities in the country, for example, the association for the promotion of non-formal education. Created in 2009, it has undertaken to promote gender equality through a legislative framework enabling the comprehensive participation of women in all development activities. In addition, in 2015, the project entitled "Let girls learn" was launched by the Office of the First Lady and the Peace Corps to enhance the opportunities for girls to have guaranteed access to quality education, to girls' leadership and to community engagement offering support to gender equality.

If the status of nutrition is to be improved, the community programmes provided by health workers and supply services must be expanded to the populations that do not currently have access to them. In addition, nutrition programmes must be properly financed and brought into line with other sectors that have nutritional goals. Sectors such as agriculture, social security safety nets and other important sectors could also play a role to ensure progress in the sphere of nutrition. In an effort to reduce unemployment among young people, the economy must be diversified and the agricultural sector, which employs 80 per cent of the labour force, must be reformed. The adoption of processes to transform and modernize agriculture, launch a shift from farming to non-agricultural economic activities, improve technology and bring in added value for enhanced performance and the creation of employment opportunities is therefore imperative. On the issue of reducing rural-urban migration (the rural exodus that is increasing the unemployment rate in the urban areas), non-agricultural economic activities could provide the solution, in particular when the absorption capacity of the few industrial sectors in the cities has become completely saturated. Encouraging small businesses other than agriculture in the rural areas can create employment opportunities and increase income. Encouraging women's rural entrepreneurship would increase employment and productivity. Providing and creating markets for these non-agricultural rural economic activities should be the core concern of the decision makers.

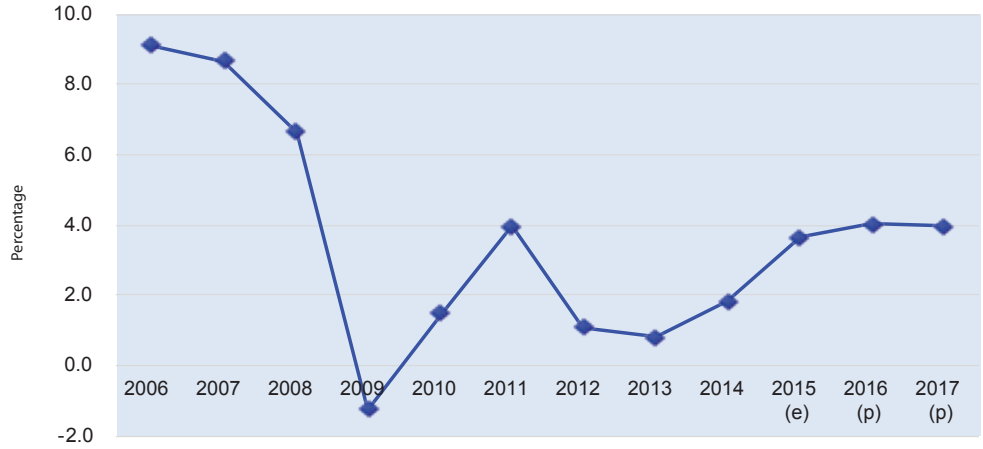
4.3. Cabo Verde

Socioeconomic conditions

Cabo Verde was the second African country after Botswana to graduate from the least developed countries category in 2007 (United Nations, 2008). The post-graduation "smooth transition" period that includes United Nations-led technical support, with the continuation of the special international measures specific to the least developed countries, was implemented in Cabo Verde, but it occurred at the same time as the global financial crisis of 2008-2009. The vulnerability of Cabo Verde's economy to exogenous shocks was further exposed by its dependence on the European market, which was going through a debt crisis. The mainstays of its economy, namely, tourism revenue, official transfers, remittances and foreign direct investment, dropped dramatically. The decline in economic growth between 2007 and 2009 improved of late through a counter-cyclical expansionary fiscal policy stance adopted by the Government to stimulate growth and mitigate the crisis. However, this in turn has led to a heightened budget deficit and indebtedness, thereby increasing Cabo Verde's vulnerability to exogenous shocks, with a public debt of 118 per cent of GDP in 2015, up from 94.7 per cent in 2013, and a budget deficit that was 6.2 per cent of GDP in 2015, up from 10.5 per cent in 2010 (African Development Bank, 2014).

Tourism and tourism-related foreign investment, including construction, continue to be the main engines of growth. In fact, economic growth recovered to approximately 3.6 per cent in 2015, from 1.8 per cent in 2014 and 0.8 per cent in 2013 (see figure 4.3.1), owing to the return of foreign direct investment, which grew by 13 per cent in 2014, especially in the tourism sector.

Figure 4.3.1 GDP Growth Rate



Source: African Economic Outlook, 2016.

Note: (e) = estimations (p) = projections.

It is widely acknowledged that Cabo Verde, notwithstanding its isolated and fragmented territory, the small size of its population, its dry Sahel climate and scarce natural resources, is home to one of the most impressive socioeconomic performances in Africa. Part of that success was due to a focus on human capital development and institutional growth. Cabo Verde remains a model for political rights, civil liberties and good governance in Africa (Mo Ibrahim Foundation, 2015). It is characterized by the quality of the democratic system, established in 1991 and consolidated over the years, which resulted in it receiving the second-highest ranking in Africa for performance in governance in 2012.

Social development

Cabo Verde was one of the best performers with regard to the Millennium Development Goals, achieving a literacy rate among young people of more than 80 per cent and a life expectancy of 71 years of age. The main health indicators are much higher than those of most African countries. Between 2000 and 2015, its Human Development Index value increased from 0.562 to 0.648, an increase of 15.4 per cent, which placed the country in the medium human development category and positioned it at 122 of 188 countries and territories. In addition, disaggregated Human Development Index indicators showed that life expectancy at birth increased by 7.8 years, mean years of schooling increased by 1.3 years and expected years of schooling increased by 2.5 years. Cabo Verde's per capita gross national income increased by 271.8 per cent between 1990 and 2015 (United Nations Development Programme, 2016). Furthermore, an important aspect is the equity focus of human development policies. The country's Human Development Index for 2015 was, as mentioned, 0.648. When the value is discounted for inequality, however, the Index falls to 0.518, a loss of 20.1 per cent. This is below the average loss to inequality for medium Human Development Index countries, which stands at 25.7 per cent (United Nations Development Programme, 2016).

National poverty rates dropped significantly, from 49 per cent in 1990 to 26.6 per cent in 2007. Unemployment among young people, who account for 50 per cent of the working-age population, is another issue of concern. The fiscal recovery plan for 2010/2011 helped to scale unemployment down from 13.1 per cent in 2009 to 10.7 per cent in 2010. Nevertheless, unemployment rose to 12.2 per cent in 2011 and to 16 per cent in 2012, and the plan did not create enough first-job opportunities for young workers. An estimated 20.1 per cent of young people 15 to 24 years of age were unemployed in 2010, rising to 27.1 per cent, or more than twice the overall average, in 2011 (African Development Bank, 2014).

While gender parity, as in other African countries, has made significant strides in Cabo Verde, this parity stops short in terms of active participation in labour markets. In 2013, the World Economic Forum ranked Cabo Verde twenty-fifth among 136 countries with regard to the political empowerment of women, with women accounting for 21 per cent and 47 per cent, respectively, of parliamentarians and government ministers. However, the country is ranked ninety-sixth for the economic participation of and opportunities for women. Gender disparities in unemployment rates, especially between young men and women, indicate an uneven access to resources. More than one third of women 15 to 24 years of age were unemployed in 2011, well above the 22.1 per cent unemployment rate recorded for men in the same age category. Access to jobs for women is especially important for further reducing poverty, given that that households headed by women tend to be one and a half times more likely to be poor than those headed by men. Poverty levels in Cabo Verde reflect a rural bias. Whereas poverty in urban areas decreased from 25 to 13.2 per cent between 2002 and 2007, poverty in rural areas decreased only from 51.1 to 44.3 per cent during the same period.

In Cabo Verde, the aggregate improvement in human development observed shows a variation in human exclusion and provides improved information for targeting policies.

Table 4.3.1: Socioeconomic indicators

Indicator	2000-2002	2005-2007	2012-2014
Total population (millions)	0.5	0.5	0.5 (2015)
Total GDP (escudos)	79 597	121 974	154 156
Per capita GNI (Atlas method, current US$)	1 270	2 780	3 290 (2015)
Population below the national poverty line (percentage of the population)	…	…	…
Gini coefficient	52.5 (2001)	47.2	…
Unemployment (percentage of total labour force)	9.7	9.4	9.2
Unemployment among young people (percentage of total labour force 15 to 24 years of age)	18.0	17.7	18.8
Population growth (annual percentage)	1.8	0.6	1.3 (2015)
Life expectancy at birth, total (years)	70	72	73

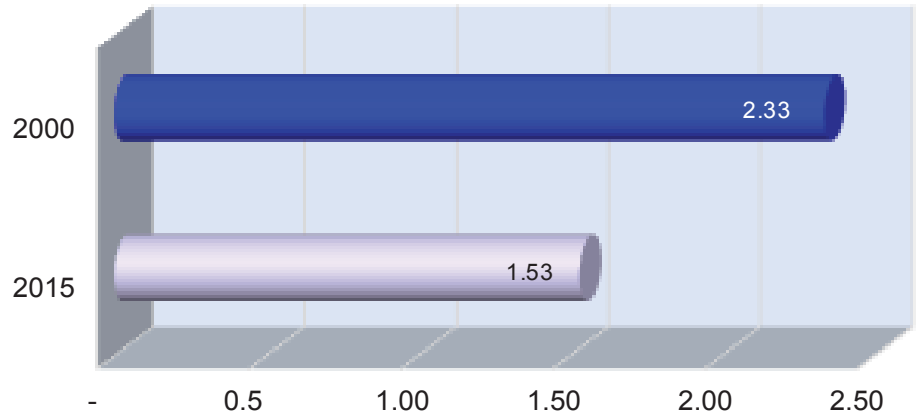
Source: World development indicators of the World Bank.

a Statistics for 2015 taken from the "World economic outlook database" of the International Monetary Fund. Available from www.imf.org/external/pubs/ft/weo/2015/02/weodata/ index.aspx.

Measuring human exclusion in Cabo Verde

There was a 34 per cent decrease in human exclusion in Cabo Verde during the period 2000-2015 (see figure 4.3.2). The overall improvement in human development mentioned above is also reflected in the improvement in human exclusion. This could be due to the national capacity in implementing inclusive social policies.

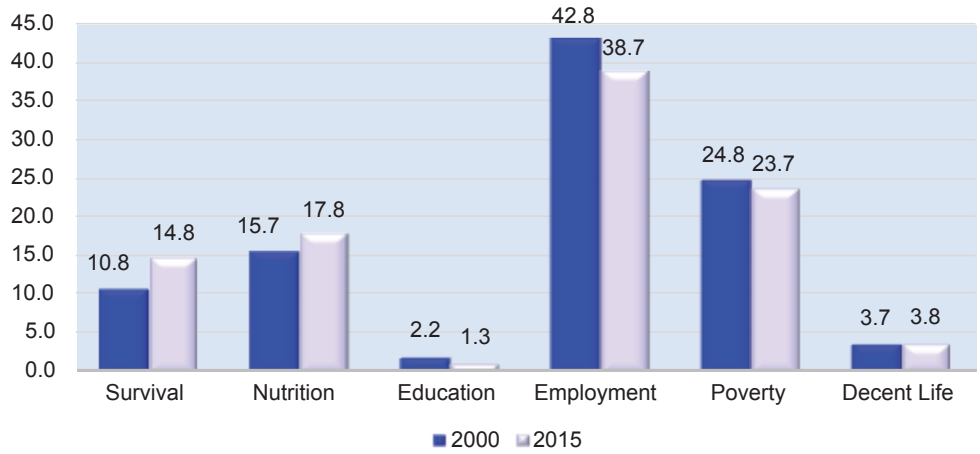
Figure 4.3.2 African Social Development Index in Cabo Verde



Source: Computed using national data.

The drivers of human exclusion reflect the relative contribution of the six dimensions towards the overall improvement registered. The drivers also provide information for the improved targeting of policies. The early stages of life, namely, survival and nutrition, increased their relative contribution to human exclusion during the period under review. The employment of young people remains, by far, the most important contributor, followed by poverty, but both have improved over time. The drop in tourism receipts and the halt in construction activity drove high levels of unemployment among young people and of poverty. In addition, the decrease in purchasing power due to macro conditions and unemployment catalysed a worsening of access to health and nutritional services during the early stages of life.

Figure 4.3.3: Drivers of human exclusion



Source: Computed using national data.

Policy considerations

The national focus on strengthening human capital as an exit strategy from the least developed country category has equipped Cabo Verde with a good basis for socioeconomic development. The Government is altering its strategies towards knowledge-driven services on the basis of its education and health policies (African Development Bank, 2014).

The quality of education from preschool through tertiary education has become a key concern with regard to the vision of economic transformation based on Cabo Verde becoming globally competitive in knowledge-driven services. In that sense, the Government has begun to implement more vocational and technical schooling programmes that are expected to alleviate the high rate of unemployment among graduates in all levels of education. The creation of few jobs and the mismatch of skills between the education system and labour market requirements demands careful monitoring to ensure age-specific policies, in particular those favourable to young people to ensure active participation in the labour market.

The exclusion of women from employment remains a concern. More than one third of women 15 to 24 years of age were unemployed in 2011, well above the 22.1 per cent unemployment rate recorded for men in the same age category. Access to jobs for women in Cabo Verde is especially important to further reduce poverty, given that households headed by women tend to be one and a half times more likely to be poor than those headed by men. Notwithstanding legal prohibitions against sex discrimination and provisions for full equality, including equal pay for equal work, a gender-based bias in employment remains. A gender-focused policy regarding employment, health and poverty reduction is therefore necessary.

4.4. The Gambia

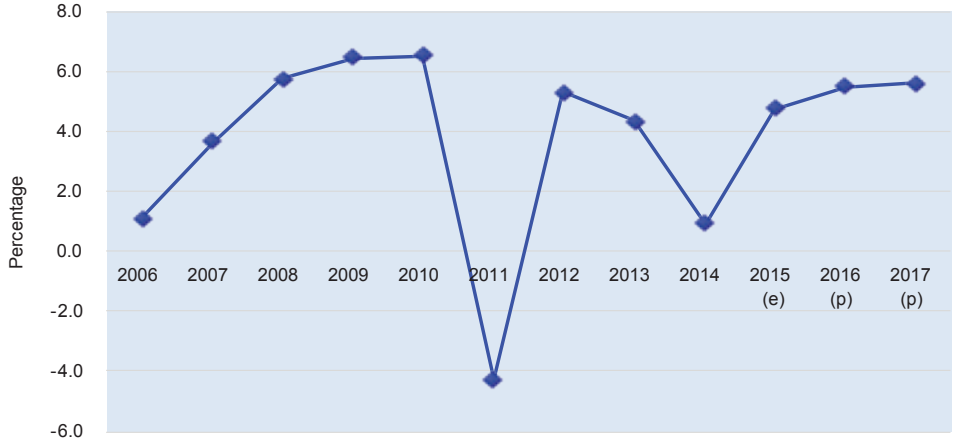
Socioeconomic conditions

The Gambia is the smallest country on the African mainland and boasts a population of 2 million, with an average annual growth rate of 2.8 per cent between 2006 and 2008 (World Bank, 2017d). The country is endowed with arable land, coastal, marine and wetland habitats and a rich cultural heritage, making it a destination for tourists. However, its economy is highly vulnerable to exogenous shocks, with negative knock-on effects on overall performance. In 2014, growth suffered from exogenous shocks induced by the contagion effects of the Ebola crisis, which affected tourism and overall investment in the economy.

Notwithstanding those shocks, the Gambia's growth has shown resilience and it rebounded to an estimated 4.7 per cent in 2015 from a low of -4.3 per cent in 2011. Strong economic performance continued in 2012, at 5.9 per cent, while 2014 posted a sharp dip of 0.9 percent (Economic Commission for Africa, 2016) (see figure 4.4.1). Economic performance was further projected to exceed 5 per cent in 2016 and in 2017, contingent upon the Government implementing prudent fiscal reforms (African Development Bank et al., 2016) and the rule of law. The country's economic growth relies mostly on tourism, rain-fed agriculture, fisheries, services and trade. In addition, private remittances from Gambians living abroad have begun to play a prominent role in the socioeconomic development of the country.

Notwithstanding its recent strong economic performance, the Gambia has experienced macroeconomic instability caused by policy slippages and financial difficulties in public enterprises, which have led to large fiscal deficits. The World Bank notes that a widening fiscal deficit, ad hoc monetary policy shifts and central bank financing of the deficit caused the macroeconomic environment to continue to weaken in 2016, and that it was expected to dampen growth and private investment.[1] In addition, public debt rose from just below 70 per cent of GDP at the end of 2010 to 108 per cent by the end of 2015, raising concerns about debt sustainability. Consequently, interest payments on public sector debt increased to comprise 40 per cent of government revenue in 2015, up from 25 per cent in 2013 (African Development Bank et al., 2016). If not addressed, the rising national debt might lead to debt distress, with negative effects on growth. In addition, the lingering effects of policy slippages from previous years were expected to continue in 2016, with considerable consequences in the short-term and medium-term economic outlook of the country.

Figure 4.4.1: GDP growth rate



Source: African Economic Outlook 2016.

Note: (e) = estimate, (p) = projection

Social development

Notwithstanding political instability in recent years, the Gambia has posted notable gains in some social indicators. In 2014, it had a primary school net enrolment of 100 girls for every 110 boys and nearly achieved parity in 2015 (African Development Bank et al., 2016). The infant mortality ratio dropped to 34 deaths per 1000 live births in 2014, beating the 2015 target of 42 deaths per 1000 live births. During the same period, under-five mortality recorded similar progress, declining from 109 deaths per 1000 live births in 2010 to 54 deaths per 1000 live births, below the 2015 target of 67.5 deaths per 1000 live births. Those achievements are attributed mostly to expanded health services leading to improved access, in particular in urban areas.

Nevertheless, the country faces challenges in reducing maternal mortality. In 2013, the rate of maternal mortality stood at 410 deaths per 100,000 live births, which was almost twice the African regional average of 210 deaths per 100,000 live births. The major causes of high maternal mortality are haemorrhage, early pregnancy and obstructed labour. Other contributing factors are low standards of health care for obstetric referrals, lack of transport and substandard primary health care.

In addition, poverty remains endemic, especially in rural areas where the majority engage in subsistence agriculture. In recent years, rainfall has been erratic, leading to frequent droughts and heightened food insecurity among the poor. Of the rural poor, women account for more than 50 per cent of the agricultural labour force and represent 70 per cent of the unskilled labourers (ReliefWeb, 2015). Although head-count poverty declined from 58 per cent in 2003 to 48 per cent in 2010 (according to the latest data) (World Bank, 2017d), some 70 per cent of the rural population lived on less than $1.25 a day, compared with 32.7 per cent of the urban population, showing that growth has not been adequately inclusive (African Development Bank et al., 2016). According to the African Development Bank et al. (2016), the difference between the levels of rural and urban poverty is attributed largely to the vulnerability of agriculture to climate-related shocks and low productivity in the sector arising from the limited adoption of modern farming technology and the inefficient management of available agricultural water from rainfall and river flooding, the inefficient utilization of resources and poorly functioning input and output markets.

The Gambia also suffers from relatively high levels of income inequality, compared with other countries in West Africa. With a Gini coefficient of 0.473 (Economic Commission for Africa, 2017), it was ranked as the fourth-most unequal country in West Africa in 2013. High income inequalities have serious implications for social and political cohesion in a country and tend to minimize the poverty-reducing impact of economic growth. In addition, the Gambia suffers from pervasive unemployment among young people, standing at 44.3 per cent between 2012 and 2014 (see table 4.3.2), signifying that many young people are excluded from formal labour markets and therefore subsist in the informal sector with low incomes.

Table 4.4.1: Socioeconomic indicators

Indicators	2000-2002	2005-2007	2012-2014
Total population (millions)	1.3	1.5	2.0 (2015)
GDP total (dalasi)	10 629	19 871	38 203
Per capita GNI (Atlas method, current US$)	480	450	460
Population below the national poverty line (percentage of the population)	…	…	…
Gini coefficient	…	…	…
Unemployment (percentage of total labour force)	7.3	7.1	7
Unemployment among young people (percentage of total labour force 15 to 24 years of age)	…	…	44.3[b]
Population growth (annual percentage)	3.2	3.2	3.2 (2015)
Life expectancy at birth, total (years)	57	59	60

Source: World development indicators of the World Bank.

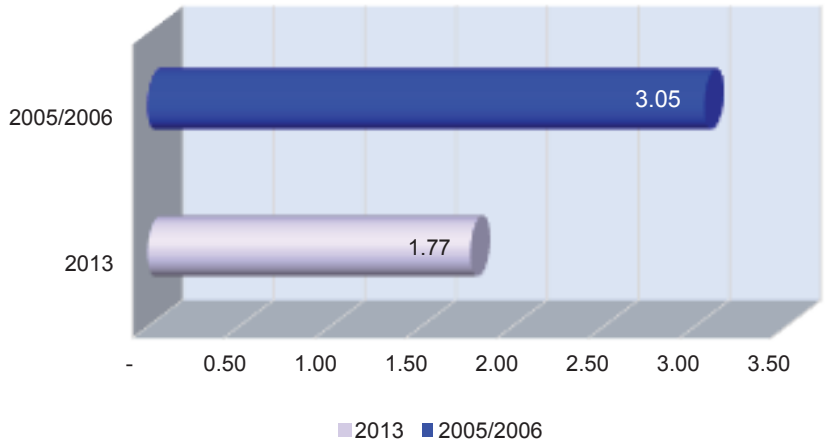
a Statistics for 2015 taken from the "World economic outlook database" of the International Monetary Fund. Available from www.imf.org/external/pubs/ft/weo/2015/02/ weodata/index.aspx.

b Economic Commission for Africa country profile, 2016.

Measuring human exclusion in the Gambia

Human exclusion in the Gambia dropped significantly, at almost 42 per cent, from 3.05 in 2005-2006 to 1.77 in 2013 (see figure 4.4.2). That decrease was due mainly to appreciable declines in overall head-count poverty between 2003 and 2010. There have also been general improvements in social services delivered, in particular with regard to quantity or to access to education.1 Notwithstanding those achievements, the country's Human Development Index remains low relative to other countries. For example, the Gambia's Human Development Index value for 2014 was 0.441, which placed the country in the low human development category and at 175 of 188 countries and territories (Rådelius, 2016).

Figure 4.4.2: African Social Development Index in the Gambia

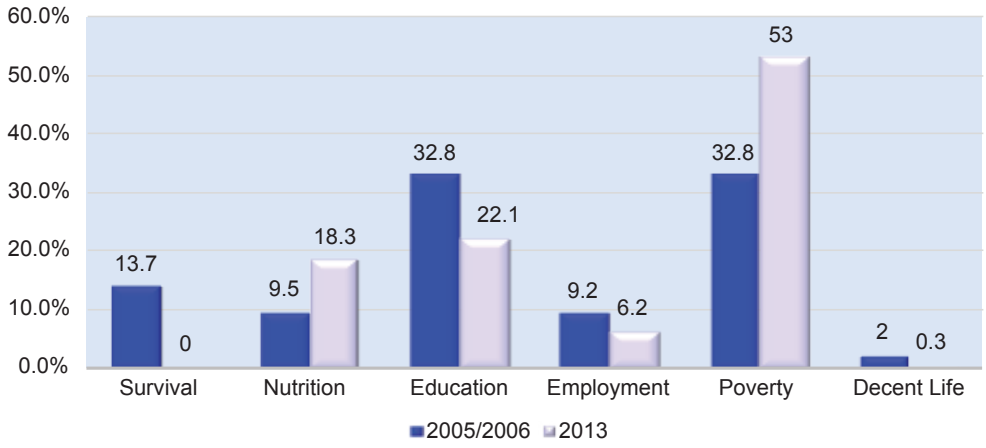


Source: Computed using national data.

The major drivers of human exclusion in the Gambia in 2013 were poverty (53 per cent), illiteracy (22 per cent) and child undernutrition (18 per cent) (see figure 4.4.3). Together, those factors accounted for 93 per cent of changes in human exclusion, clearly suggesting the need for strong anti-poverty policies and inclusive education and health interventions in the country. In fact, the contribution of poverty to human exclusion rose by 20 per cent between 2005-2006 and 2013, which is indicative of depressed economic

opportunities, especially in the formal labour markets, and, by implication, of limited access to social services for the majority.

Figure 4.4.3: Drivers of human exclusion



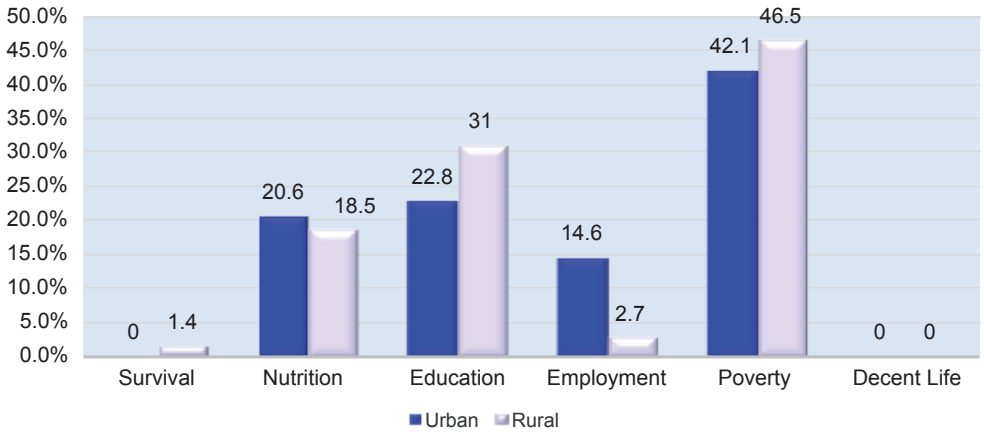
Source: Computed using national data.

There are stark spatial differences between rural and urban areas, with the former posting higher levels of human exclusion relative to the latter (see figure 4.4.4). Exclusion in rural areas is driven mostly by poverty and illiteracy. Taken together, the contribution of poverty and illiteracy to overall exclusion was 77 per cent in 2013. Poverty in the Gambia is primarily a rural phenomenon, although it is also becoming a concern in urban areas (Government of the Gambia, 2011). This is not surprising, given that there are limited economic opportunities, especially decent jobs, in rural areas, resulting in a situation that leaves them susceptible to income poverty and its attendant effects. Rural areas have a slightly higher unemployment rate (31.1 per cent) than urban areas (28.4 per cent). Moreover, unemployment is highest for the 15 to 24 years of age cohort, standing at 44.3 per cent (Economic Commission for Africa, 2016).

Exclusion in urban areas was also an outcome of poverty and illiteracy, with an overall contribution of nearly 65 per cent in 2013. As in rural areas, urban areas are increasingly facing limited job opportunities, especially for young people, leaving the majority of them trapped in the informal sector doing low-paying jobs (Economic Commission for Africa, 2016). Informal sector jobs make it almost impossible for young people to escape poverty. In addition, many young people do not possess the needed tertiary and vocational skills, thus placing them at a disadvantage in terms of competing for limited formal jobs in the labour market.

During the same reference period (i.e., 2005/6-2013), minor but notable differences were also observed in child undernutrition, with urban areas recording almost a 21 per cent contribution to overall human exclusion, while rural areas had an 18 per cent contribution. This suggests that malnutrition is more of an urban menace than a rural problem. Undernutrition has been on the rise in urban areas, affecting between 13 and 16 per cent of women in most vulnerable urban dwellings2. Indeed, high food prices in urban areas in the face of limited job opportunities, coupled with low incomes, exacerbate vulnerability among the poor, given that they are unable to meet the required daily calories for healthy bodies. The African Union Commission-led Cost of Hunger studies in Africa have demonstrated the debilitating and irreversible cumulative effects of undernutrition in children that affect their health, education and labour productivity later in life.

Figure 4.4.4: Drivers of human exclusion by location



Source: Computed using national data.

Policy considerations

Given that human exclusion in the Gambia is a function of poverty, illiteracy and child undernutrition, it is instructive to look at some of the existing interventions by the Government that target poverty, illiteracy and malnutrition. The authorities have formulated specific pillars to attain social and economic development, including: (a) creating an enabling policy environment; (b) enhancing the capacity and output of the productive sectors; (c) improving the coverage of basic social services and social protection; (d) enhancing governance systems and building the capacity of local communities and civil society organizations to play an active role in growth creation and poverty reduction; and (e) mainstreaming cross-cutting issues, namely, gender equality, young people, population, HIV/AIDS, nutrition and the environment, into the development process (Government of the Gambia, 2011).

A review of the five pillars in the programme for accelerated growth and employment during the period 2012-2015 revealed significant progress in the social sectors, health and education, given that they were receiving an average of 18 per cent of government resources through the national budget, probably an indication of strong political will to reverse the tide of weak social and economic development. The programme was the successor to the Gambia's second programme for accelerated growth and employment and its thrust was to improve employment levels, per capita incomes, social services, gender equity and the country's economic competitiveness (Government of the Gambia, 2011).

With regard to poverty, the Government is rolling out social protection interventions in collaboration with cooperating partners. Through social protection, the Government aims to establish more resilient and inclusive programmes and systems centred on four key elements: poverty and risk reduction; inclusive growth and capacity-building; human security as a basic right; and contributions to internationally agreed development goals (World Food Programme 2014b). While these policies appear quite comprehensive, high poverty has persisted, especially in rural areas, for a number of reasons. First, the Gambian population, in particular in rural areas, relies on rain-fed agriculture that, in recent years, has suffered from frequent droughts, resulting in low productivity and food insecurity. Second, economic instability coupled with fluctuating food prices has had an adverse impact on the welfare of the poor. This points to a need for more robust policies and strategies in order to address the multidimensional nature of poverty.

In order to address illiteracy, the Government has put in place a number of policies and instruments. For example, the education policy during the period 2004-2015 and the education sector strategic plan during the period 2006-2015 provided an enabling environment for the realization of education policy, which is one of the internationally recognized subsectors of education (Government of the Gambia, 2012). The overall purpose of the national non-formal education policy framework during the period 2010-2015 was the development of a well-planned, organized and coordinated non-formal education operating system that would provide opportunities for adults and young people to gain access to relevant and quality learning programmes to enable them to participate effectively in the economic, sociocultural and political development of the Gambia. To effectively implement the education policy, total government expenditure on education averaged 16.6 per cent between 2008 and 2013, increasing to 17.3 per cent in 2014 (Economic Commission for Africa, 2016). Notwithstanding those interventions, the quality of education in the Gambia remains a challenge, affecting the capacity of young people to smoothly make the transition from school to the world of work. For example, it was noted in the education policy during the period 2004-2015 that the quality and relevance of the curriculum and learning materials were a concern for both teachers and parents (Manjang, 2012).

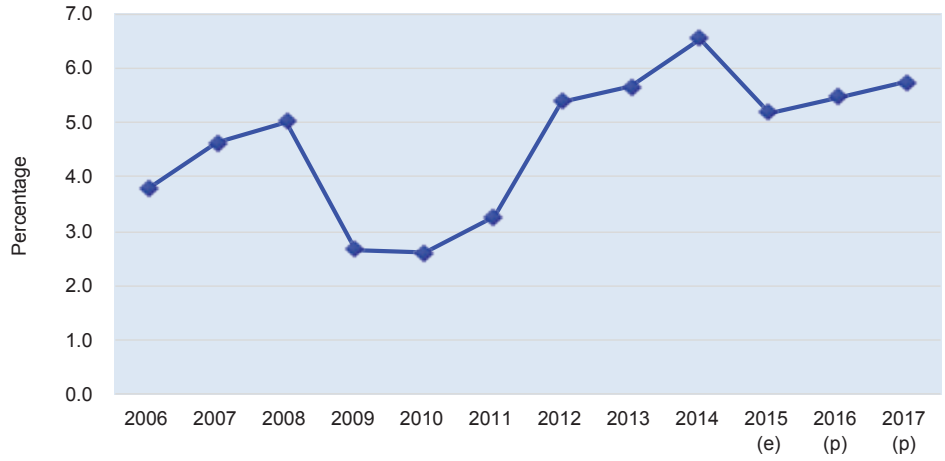
The Government has an elaborate national nutrition policy for the period 2010-2020 to address malnutrition in its various forms. The policy has several interrelated goals, including to reduce the prevalence of malnutrition among women of child-bearing age; to improve the nutritional and health status of children; to attain a reliable supply and the proper utilization of a variety of safe, adequate and nutritious foods at affordable prices at all times; and to prevent and control micronutrient malnutrition among the population, especially women and children. Nevertheless, the continued persistence and widespread cases of child undernutrition may be indicative of challenges in implementing the national nutrition policy. There is therefore a need to refocus national efforts by increasing resources to fund nutrition strategies in a more robust and sustainable manner to prevent further episodes of malnutrition.

4.5. Ghana

Socioeconomic conditions

The economy has undergone several changes. Available data from the African Development Bank et al. (2016) show that the GDP had recorded a low growth rate of 3.4 per cent in 2010 and a high growth rate of 14 per cent in 2011. Moreover, the economy was estimated to have slowed from 9.3 per cent in 2012 to 3.7 per cent in 2015, slightly higher than the 3.5 per cent projected in the 2015 budget. The slowdown was indicative of the stress on the economy from a number of factors, including: macroeconomic challenges experienced since 2013; the three-year power crisis and associated power rationing that increased the cost of doing business; the depreciation of the cedi, although at a slower rate than in 2014; lower world prices for gold and crude oil exports; and low export volumes of gold and cocoa. Economic growth was, however, expected to recover to 5.8 per cent in 2016 and to 8.7 per cent in 2017 as macroeconomic stability was restored, the power crisis resolved and new gas and oil wells made operational in 2016 and 2017 (African Development Bank et al., 2016).

Figure 4.5.: GDP Growth Rate



Source: African Economic Outlook 2016.

Note: e = estimates and p = projections.

Ghana's external position was vulnerable to external shocks, mainly from the volatility of market prices for major exports and the slowdown in gold and cocoa production. Its exports were dominated by primary commodity exports of gold (32 per cent), cocoa (24 per cent) and oil (19 per cent). During the first 10 months of 2015, there was a 42.3 per cent decline in total export earnings, to $6.9 billion, compared with 2014, owing to low crude oil and gold prices. While the realized price of cocoa beans increased by 22.2 per cent in 2015, the total volume exported decreased by 21per cent. As a result, the earnings from cocoa were not significantly different from those in 2014. Ghana is a net importer of oil, and the sustained decline in international oil prices continues to have an adverse impact on public revenue (African Development Bank et al., 2016).

Social development

Ghana has managed to put in place a comprehensive social development strategy in recent years and raise its level of development, reaching the category of lower middle-income country at the global level. Its Human Development Index value improved from 0.46 in 1990 to 0.58 in 2014, recording an average annual increase of 0.5 per cent (United Nations Development Programme, 2015a). Ghana met target 1 of the Millennium Development Goals to halve the proportion of the population living in extreme

poverty ahead of 2015 target date. Even less-urbanized, historically marginalized, poorer regions in the north were able to reduce poverty. This was in line with the nation-wide trend of poverty reduction that included 9 of 10 regions. Moreover, the pace of reduction was higher for urban areas: the reduction in poverty incidence for urban areas was 62.8 per cent, compared with 35.9 per cent for rural areas between the periods 2005-2006 and 2012-2013.

Notwithstanding that growth, inequality has been increasing and poverty remains prevalent in many areas. According to the most recent Ghana living standards survey, estimates shows that at least one quarter of Ghanaians remain below the poverty line (Ghana Statistical Services, 2014). Perhaps even more serious is the higher than average poverty levels in the north. In 2013, when the national poverty average was 24.2 per cent (see table 4.5.1), it was 44.4 per cent in the Upper East, 70.7 per cent in the Upper West and 50.4 per cent in the Northern region. The country is currently making concerted efforts to mainstream the Sustainable Development Goals at the subnational level, with special emphasis on the northern regions, which are home to the most vulnerable segment of the population.

Most people in the economically active age range are working (i.e., some 75 per cent of the population 15 years of age and older). However, this masks a number of serious issues relating to the quality of the job market. Some 80 per cent of the workforce is in the informal economy, which is unregulated and known for seasonal or irregular incomes and poor job security. Although unemployment is said to be low overall, at 5.2 per cent table 4.5.1), there is a serious challenge regarding unemployment among young people (Ghana Staistical Services, 2014).

In relation to access to health, a large proportion of the population had access to primary health care (97.5 per cent), with approximately 67 per cent coverage under national health insurance. The coverage gap and challenge in paying premiums is highest in poorer, rural areas (African Development Bank et al., 2016).

Government social spending on education has contributed immensely to the attainment of a more than 95 per cent gross enrolment rate and a more than 89 per cent net enrolment rate. Although these rates have improved over the years, in the most recent Ghana living standards survey it is reported that 20 per cent of Ghanaians 15 years of age and older have never been to school, while 44.6 per cent have attained a level below the basic education certificate examination and only 14.7 per cent have acquired a senior secondary school or higher level of education. Moreover, there has been much concern about the quality of schooling outcomes, given that many students leave basic school with mediocre grades (Ghana Statistical Services, 2014; Institute of Statistical, Social and Economic Research, 2015).

Table 4.5.: Socioeconomic indicators

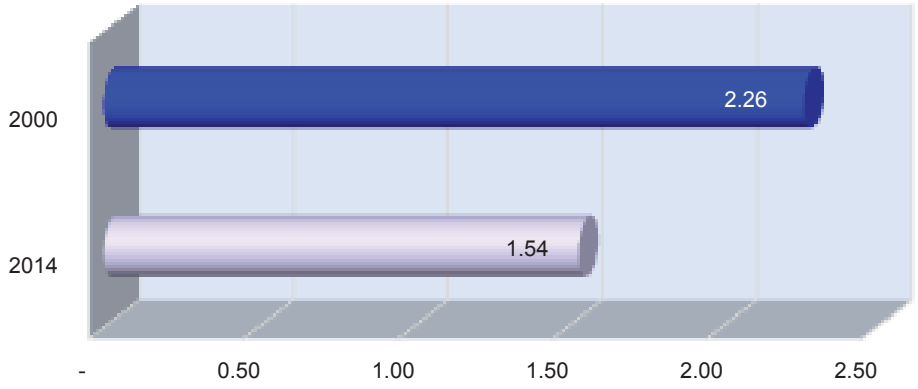
Indicators	2000-2002	2005-2007	2012-2015
Total population (millions)	20.1	22.7	27.4
GDP total in billions of Ghanaian cedi	4.89	23.15	139.93
Per capita GNI (Atlas method, current US$)	280	800	1480
Population below the national poverty line (percentage of the population)	…	31.9	24.2
Population below the poverty line of $ 1.90 per day (percentage of the population)	33.85	25.19	…
Gini coefficient	40.07 (1998)	42.77	…
Unemployment (percentage of total labour force (national))	10.4	3.6	5.2
Population growth (annual percentage)	2.5	2.6	2.3
Life expectancy at birth total (years)	57.4	59.6	61.3

Source: World development indicators of the World Bank. Accessed April 2017, http://data.worldbank.org/data-catalog/world-development-indicators.

Measuring human exclusion in Ghana

Human exclusion in Ghana is estimated to have been reduced by almost 32 per cent during the period 2000-2014. (see figure 4.5.2). This is likely to have been on account of healthy economic growth during that period, complemented by targeted social policies that include specific measures for improved inclusive health through the national health insurance scheme and programme packages, such as the Livelihood Empowerment Against Poverty initiative and social security payments that provide a basic and secure income for the most vulnerable and free access to the health-care services for the extreme poor in society.

Figure 4.5.2 African Social Development Index in Ghana



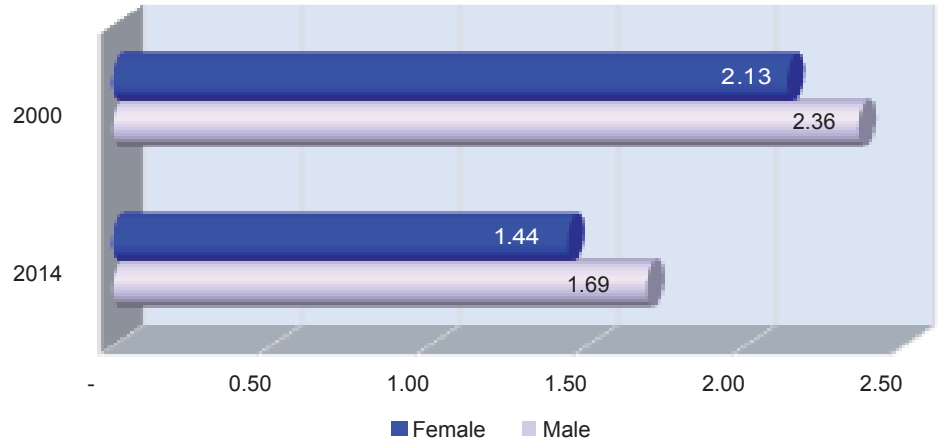
Source: Computed using national data.

The reduction in human exclusion in Ghana could be associated with the social protection investments made in the past two decades. In addition, many policies have been passed and organizational bodies established to implement and regulate the implementation of various social protection provisions that were intended to improve income distribution, such as an increase in the percentage of the district assemblies common fund from 5 to 7.5 per cent; capitation grants for public basic schools; feeding programmes and supplies for deprived schools; and an exemption policy for vulnerable groups under the national health insurance scheme. In addition, the expansion of the Government's flagship Livelihood Empowerment Against Poverty programme, which targets orphans, vulnerable children, older persons and people with disabilities, benefited the poorest people and was on track to expanding its coverage

by 62 per cent in 2015 to reach 144,980 households. An additional 100,000 households were scheduled to be added in 2016-2017 (African Development Bank et al., 2016). The recent implementation of these programmes and practices, however, have faced challenges owing to resource constraints and financial sustainability issues.

In terms of gender dynamics, the exclusion of women decreased by more than 32 per cent, while the exclusion of men decreased by 28 per cent between 2000 and 2014. One interesting result is a reduction in gender disparities in terms of exclusion, which clearly reflects the Government's effort to improve lives and provide opportunities to women. Moreover, the African Social Development Index results show that the exclusion of women is slightly lower than the exclusion of men (see figure 4.5.3). This could be associated with the relatively low level of poverty among women, compared with men, and affirmative policy interventions (Institute of Statistical, Social and Economic Research, 2015; African Development Bank et al., 2016).

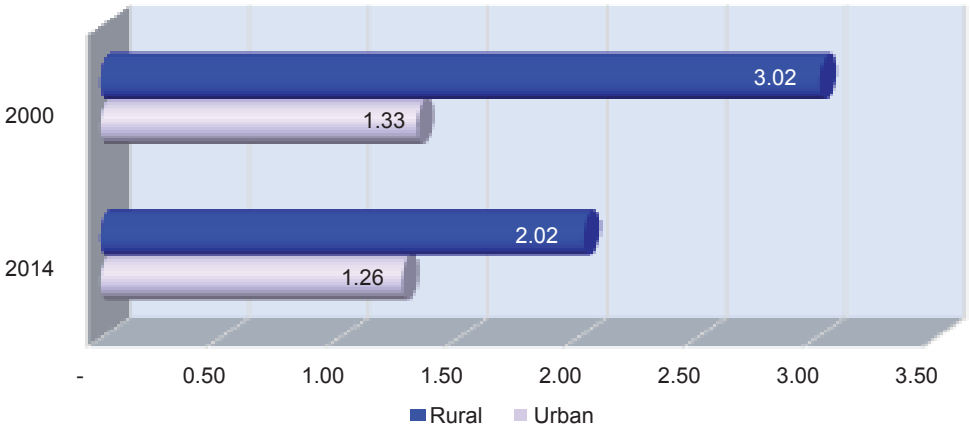
Figure 4.5.3: Human exclusion by gender



Source: Computed using national data.

The difference in the levels of exclusion are particularly significant when disaggregated by location. In fact, the African Social Development Index fell by 33 per cent in rural areas, from 3.02 to 2.02, during the period 2000-2014, while the fall in urban areas was more modest, thereby reducing spatial disparities with respect to exclusion. Moreover, human exclusion by location has been a rural phenomenon in the past one and half decades (2000-2015) and continues to be reducing at a slow annual rate of 2.4 per cent (see figure 4.5.4).

Figure 4.5.4: Human exclusion by location



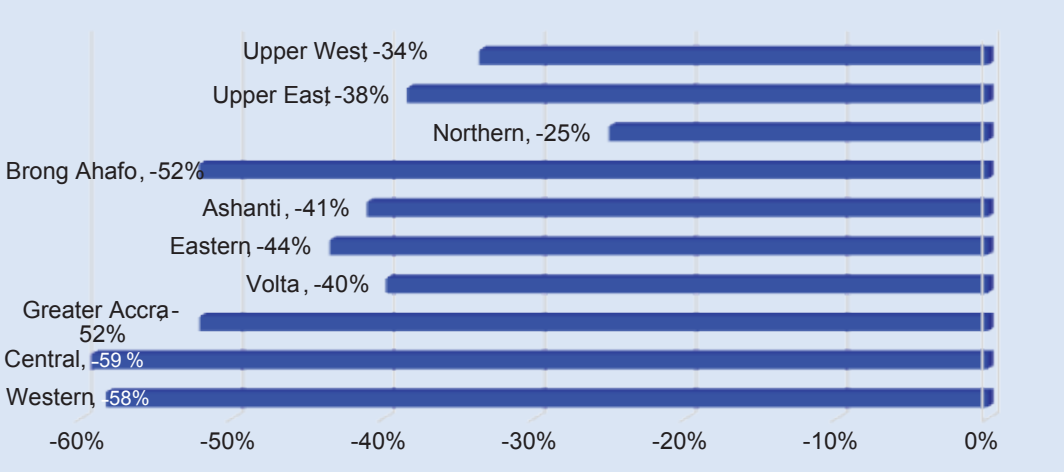
Source: Computed using national data.

Moreover, according to a national poverty study conducted in 2016, households in urban areas had, on average, a much lower poverty rate (10.6 per cent in 2013) compared with households in rural areas (37.9 per cent). Although both rural and urban poverty rates declined during the period 1990-2013, in the early 1990s, rural poverty was twice as high as urban poverty. By 2012, that factor had doubled and rural poverty is now almost four times as high as urban poverty. This could be the reason why a significant difference in spatial human exclusion is emerging (Cooke et al., 2016).

According to the same study, because of urban economic opportunity, the general population has continued to shift to urban zones, with a 12 percentage point move from rural to urban areas since 2006. As a result of the rural-urban shift, the urban population grew from from 37.7 per cent in 2006 in to 50.1 per cent in 2013, signifying that human exclusion could be transferred from rural to urban areas if appropriate urban planning interventions are not put in place.

Similarly, the rise in human exclusion at the subnational level confirms a significant rise in almost all 10 regions in Ghana. However, the rate was lower in the Northern, Upper West and Upper East regions (less than 2.7 per cent annually) compared with the strong-performing Central, Greater Accra and Western regions (more than 3.7 per cent annually) during the period 2000-2014 (see figure 4.5.5).

Figure 4.5.5: Change in ASDI at Sub-National Level



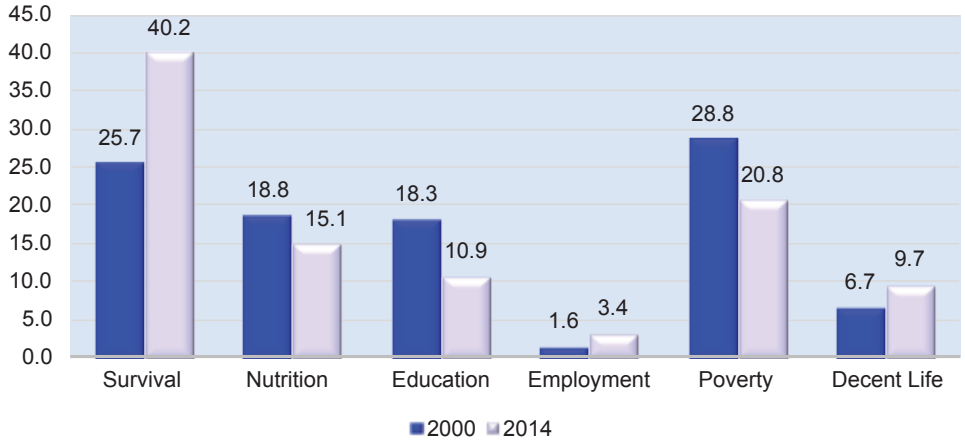
Source: Computed using national data.

Similarly, according to a national poverty study carried out in 2016, the highest rates of poverty continue to be observed in the Northern, Upper East and Upper West regions. There was a significant reduction in poverty in almost all regions between 1992 and 2013. However, the rate of poverty was by far the highest in the Upper East, Upper West and Northern regions during the same period. An important region of concern is the Northern region, which saw a marginal decline in poverty, from 55.7 per cent in 2006 to 50.4 per cent in 2013. Its combination of a relatively high poverty rate and a relatively large population means that the Northern region holds the highest number of poor people in Ghana (Cooke et al., 2016). This is also consistent with the finding of a low rise in human exclusion in the Northern region and, most important, the finding that indicates a direct correlation between poverty and human exclusion, driven by the level of poverty.

Notwithstanding the improvements in human inclusion, the six indicators/dimensions have a varying contribution to the African Social Development Index, which have changed over the period under review (2000-2015) (see figure 4.5.6). Although the actual data on infant mortality dropped from 77 to 41 deaths per 1000 live births during the period 2000-2014, human exclusion is driven predominantly by

infant mortality (survival) and poverty. The contribution of infant mortality to overall human exclusion increased from 25.7 per cent in 2000 to 40.2 per cent in 2014. The substantial increase in the contribution of infant mortality to human exclusion warrants specific health policies for mothers and infants. Although the contribution of poverty to overall exclusion had declined, it remained rather high, at nearly 21 per cent, in 2014 (see figure 4.5.6).

Figure 4.5.6: Drivers of human exclusion



Source: Computed using national data.

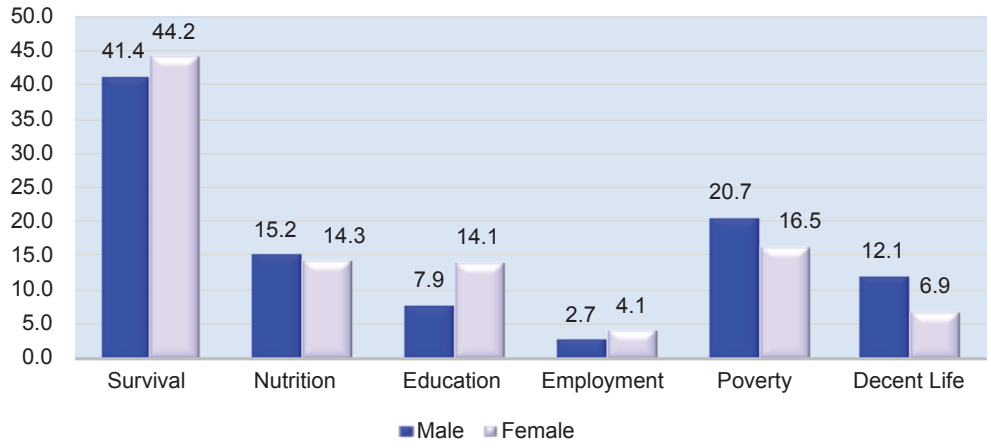
Ghana continues to face challenges in bridging the gap between population growth and economic development, given that its youthful population is characterized by high levels of unemployment and underemployment. Accordingly, the share of unemployment among young people towards human exclusion also increased during the period 2000-2014. That was due to the increase in the unemployment rate from 3.6 per cent in 2006 to 5.2 per cent in 2013 (see table 4.5.1). Young people, in particular, were at risk. The unemployment rate among young people increased from 3.6 in 2000 to 4.9 in 2010 and further increased to 6.4 in 2012-2013 (Institute of Statistical, Social and Economic Research, 2014). To tackle the problem, Ghana launched its national employment policy in April 2015.

On the other hand, the contribution of decent life for older persons to overall human exclusion is on the rise, calling for urgent attention by policymakers.

Appreciable progress, however, has been made in terms of nutrition and education. As indicated above, the contribution of child stunting to overall exclusion is declining. In a recent African Union Commission-led Cost of Hunger in Africa study of Ghana, the authors confirmed the progress made in terms of reducing child malnutrition and recommended further investment on nutrition, in particular during the early stages of life. Similarly, the contribution of education to overall human exclusion dropped from 18.3 to 10.9 per cent during the period under review (2000-2014), thanks to a policy of universal free education in primary schools, which is reflected in its contribution to decreasing human exclusion.

The same trends are observed when human exclusion is disaggregated by gender. Infant mortality and poverty are critical hindrance to human inclusion in Ghana. Moreover, the gender gap is more pronounced in the area of education, which contributes to 14 per cent of exclusion among women, compared with 7.9 per cent among men. The contribution of poverty, malnutrition and decent life to overall human exclusion is higher for men compared with women. Overall human exclusion for women is higher with regard to education and unemployment (see figure 4.5.7).

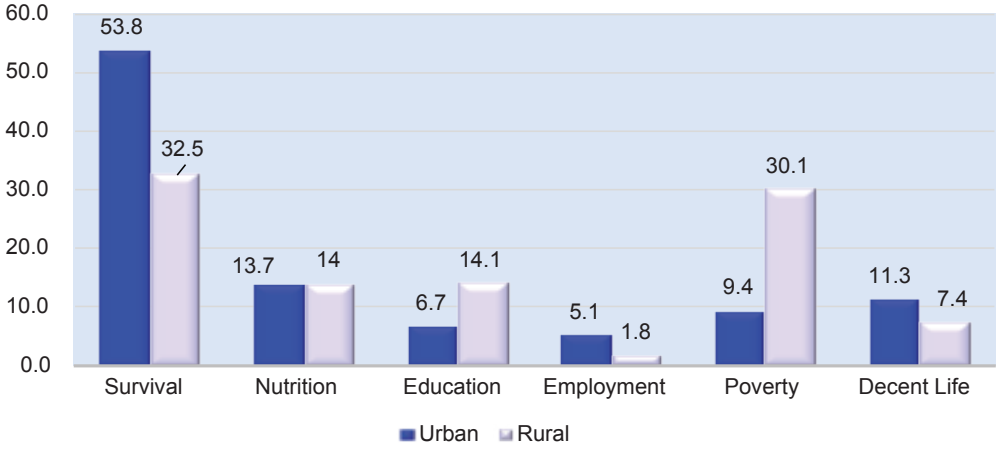
Figure 4.5.7: Drivers of human exclusion by gender



Source: Computed using national data.

The variation in rural and urban areas could be further assessed by examining its drivers across dimensions (see figure 4.5.8). The positive urban bias on poverty and education does indicate that spatial variations in basic development and public services remain an important feature of human exclusion. Urban areas, however, are confronted with a high rate of unemployment among young people, possibly as a result of a high level of informality outside the major cities.

Figure 4.5.8: Drivers of human exclusion by location



Source: Computed using national data.

Policy considerations

The smooth conduct of the general election of December 2016 and transfer of power to a new President and Government in January 2017 provides Ghana with a strong foundation for political stability in the coming years, which will positively contribute to continuing the existing social development agenda.

Ghana has made substantial progress in terms of access to education thanks to a policy of universal free education in primary schools, which is reflected in its contribution to dropping exclusion over time. Moreover, the new Government recently announced a new policy to provide free senior high school education, along with free vocational and technical training, which is expected to improve the required technical skills of people, especially young people. An intense debate is occurring, however, on how the Government intends to fund such a programme (Economist Intelligence Unit, 2017).

Ghana has also made appreciable progress in terms of nutrition on the basis of the passage of five new policies put forward by the Ministry of Gender, Children and Social Protection: the national social protection policy, the school feeding policy, the justice for children policy, the child and family welfare policy and the national gender policy programme. Moreover, the Livelihood Empowerment against Poverty programme was launched to address nutritional, wasting and stunting among extremely poor households with pregnant women or children under 12 months of age. The implementation of these programmes is being done through the use of the national household registry and electronic payment mechanisms, which have played a significant role in improving efficiency.

The national gender policy, launched in late 2015, has better enabled the country to improve many of the international development frameworks and conventions that it has signed and endorsed. Specifically, women's empowerment and livelihood and economic opportunities for women have made good progress in recent years. Moreover, gender parity in education has improved considerably, but there are fewer highly qualified women to take up senior appointments in Government, compared with men. Legislation on affirmative action, which was submitted to Parliament in 2016, is another policy expected to promote gender equality and women's empowerment.

Although Ghana managed to reduce the level of poverty in half, it remains a major challenge and obstacle to development, which intensified migration from the poorest areas towards the main cities, thus exacerbating spatial and economic inequalities. The current demographic trends are likely to intensify these flows and trigger social tensions, calling for improved urban planning and a more equitable distribution of resources and social protection coverage. Empirical evidence suggests that increasing inequality can have a range of negative impacts on a country's development, including poverty reduction, human inclusion and improved social development. Tackling various forms of inequality should be done sooner rather than later.

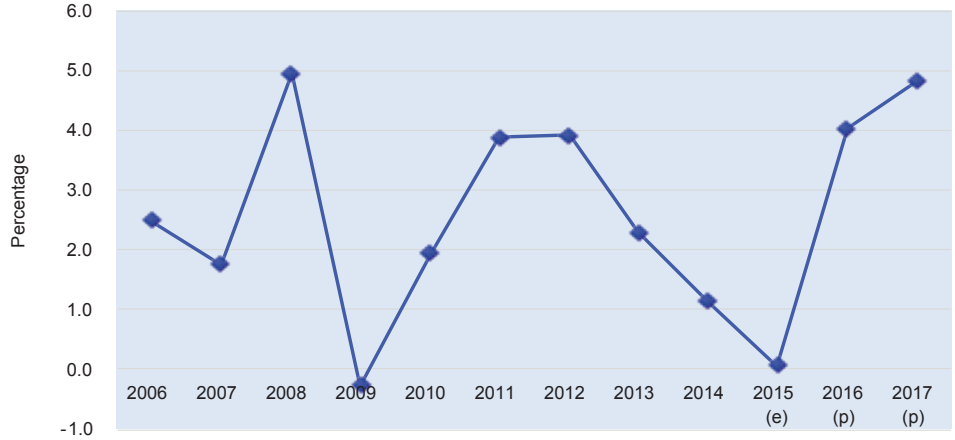
The present analysis includes calls for appropriate policy action and resource commitments to be undertaken that would sustainably promote the optimal development of the nation with the goal of attaining human, social and economic capital over time. These include restructuring of the education system to make it more skill-oriented; creating an enabling environment to create more jobs, especially for unemployed young people; improving the efficiency of health service delivery; further reducing gender inequality; creating a balance between rural and urban development; properly targeting poverty reduction interventions, in particular for people living in the Northern, Upper East and Upper West regions; and ensuring full commitment to the implementation of the national ageing policy.

4.6. Guinea

Socioeconomic conditions

With a surface area of 245,857 km^2 and a population of 10,523,261 habitants (Government of Guinea, 2014), Guinea has significant quantities of natural resources (e.g., mineral, water and forests), making it the geological wonder of West Africa. Notwithstanding its enormous natural and human potential, Guinea continues to be one of the poorest countries in Africa, with per capita GDP of $551 in 2015. The economic growth rate fell from 3.9 per cent in 2012 to 2.9 per cent in 2013, to 1.4 per cent in 2014 and to 0.2 per cent in 2015, far from the 7 per cent required in the least developed countries to significantly reduce poverty and the 6.1 per cent regarded as the average for the member countries of the Economic Community of West African States. This economic underperformance is the result of the fall in the world price of raw materials and the health crisis following the emergence of the Ebola virus in 2014, which led to the country's isolation and caused investors to shy away. The disease slowed down investment in the mining sector, reduced the electricity supply and created obstacles to the diversification of the economy. Because of the slowdown, the State budget recorded a revenue shortfall of more than $500 million. Economic growth was projected to reach 4 per cent in 2016 and 4.8 per cent in 2017, supported mainly by the resumption of activities in the mining sector.

Figure 4.6.1: GDP growth rate



Source: African Economic Outlook (2016)

Note: (e) = estimates (p) = projections

In 2014, economic growth was driven by the tertiary sector (36.2 per cent of GDP), followed by the secondary sector (32.5 per cent) and, lastly, the primary sector with the lowest contribution (22.9 per cent). Analysis of the growth factors reveals the country's dependence on public investment (more than 12 per cent in 2010) and mining sector investment (more than 6.4 per cent in 2010) (Government of Guinea, 2011). The mining sector attracts more foreign direct investment than any other sector. Such investment in the mining sector alone represented 29 per cent of GDP in 2014. Southern Guinea, with the largest unexploited deposit of iron ore in the world, has been designated "the Eldorado of iron ore". But the emergence of the Ebola virus placed an obstacle in the way of new investment in this sector.

Social development

Notwithstanding its assets in the agricultural, mining and energy sectors, Guinea continues to be one of the countries with the highest poverty levels in the world. The dynamic of poverty and the mapping of employment highlight the need for structural economic transformation to successfully combat poverty

and create jobs. During the period 2007-2012, poverty worsened. This finding continues to stand, irrespective of the measurement indicator used. The proportion of people living below the poverty line (estimated on the basis of the national poverty line) rose from 53 per cent in 2007 to 55.2 per cent in 2012 (Government of Guinea, 2012).

According to the Government of Guinea (2014), the population is estimated at 10,523,261 inhabitants. Life expectancy at birth climbed from 54 years in 1996 to 58.9 years in 2014. Infant mortality (0-1 year) fell from 67 per 1,000 in 2012 to 44 per 1,000 in 2016. Infant and child mortality (0-4 years) dropped from 123 in 2012 to 88 per 1,000 in 2016. The gross mortality rate is 11 per 1,000, according to the Government of Guinea (2014). The maternal mortality ratio, which was 980 maternal deaths per 100,000 live births between 2001 and 2005, fell slightly, from 724 maternal deaths per 1,000 live births in 2012 to 515 in 2016 (United Nations Children's Fund, 2016). Nevertheless, it continues to be one of the highest in the subregion, given that the desired value stands at 100 per 100,000 live births. The new Government decreed free Caesareans and basic neonatal care (Government of Guinea, 2011). Neverthless, malaria is the chief cause of illness and death among children.

The quality of education still poses problems, with high school dropout levels. Nevertheless, Guinea recorded an improved net enrolment ratio in primary schools, climbing from 53.3 per cent in 2002 to 66.7 per cent in 2013. The primary education completion rate also climbed from 40.4 per cent in 2002 to 61.9 per cent in 2013 as a result of government efforts to make primary education free and compulsory for all children between 7 and 13 years of age. The enrolment level in secondary education is slightly lower than in primary education and is even lower among girls (29.4 per cent) than among boys (46.6 per cent). Between 1990 and 2015, the average number of years spent in education increased by 1.4 and the expected number of years in education increased by 5.9 years.

The unemployment rate continues to be high among young people, with a rate of 20 per cent among those between 25 and 30 years of age. In the urban areas, there is an unemployment rate of 10 per cent among young people, including 64 per cent in Conakry. A total of 59 per cent of the urban unemployed are men and 41 per cent are women (Economic Commission for Africa, 2015a). It should be noted that unemployment for those between 15 and 24 years of age is relatively lower than that of the other age groups (1.7 per cent between 2012 and 2014).

Table 4.6.1: Socioeconomic indicators

Indicators	2000-2002	2005-2007	2012-2014
Total population in millions of inhabitants	9,1	10,2	10,5 (2015)
Total GDP in GNFa	5 829 132	17 354 234	50 921 866
Per capita gross national income (Atlas method, current United States dollars)	330	310	470 (2015)
Population living below the national poverty line as a population percentageb	…	…	…
Gini coefficient	43	39.4	33.7 (2012)
Unemployment as a percentage of the total working population	2	2	1.8
Unemployment among young people as a percentage of the total working population aged 15 to 24	2	2.4	1.7
Population increase as an annual percentage	1.8	2.5	2.7
Life expectancy at birth in years	51	54	59

Source: World Bank world development indicators.

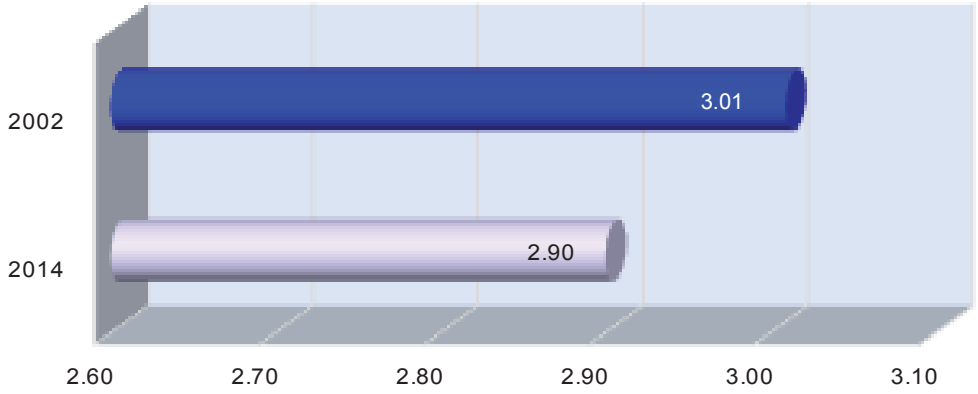
[a] International Monetary Fund world economic outlook database. Consulted 19 May 2017. Available from www.imf.org/external/pubs/ft/weo/2015/02/weodata/index.aspx.

[b] Using the $1.90 per day international poverty line.

Measuring human exclusion in Guinea

Overall social performance is reflected in reduced levels of human exclusion, estimated at 2.90 in 2014, compared with 3.01 in 2002 (see figure 4.6.2). Strangely enough, the emergence of the Ebola virus in 2014 did not accelerate human exclusion as expected. Instead, it had a serious impact on general economic performance. The impact of this deadly disease may have increased social exclusion in the following years, although this study covers the African Social Development Index only up to 2014.

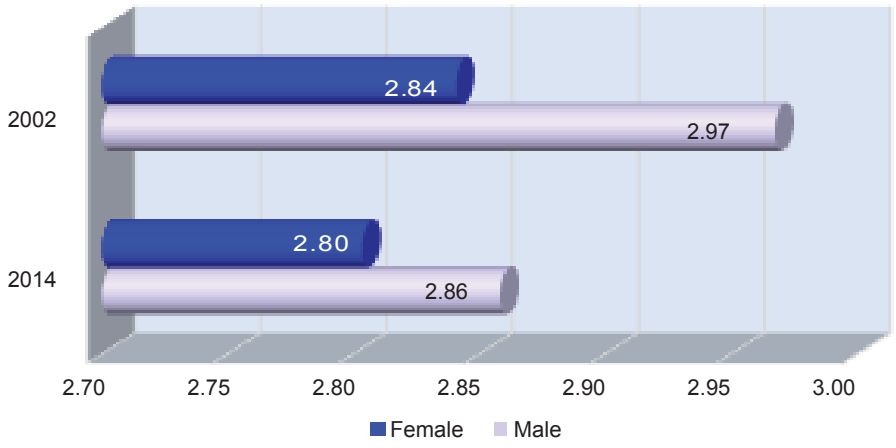
Figure 4.6.2: African Social Development Index in Guinea



Source: Computed using national data.

The African Social Development Index score reveals a characteristic specific to Guinea. Despite a positive change in the Index for both men and women, exclusion appears to be higher among men than among women. Considering exclusion factors by gender, the combined contribution of illiteracy and poverty to general exclusion was found to stand at 70.4 per cent among women and 61.5 per cent among men. Infant mortality and undernourishment of children remain higher among men than among women. This could be attributable to gender equality policies implemented in Guinea, such as the ratification of the Convention on the Elimination of All Forms of Discrimination Against Women (Government of Guinea, 2011). The country has made remarkable strides in gender inequality reduction in the education and health sectors. According to the Government of Guinea Ibid.), the gender relationship rose from 0.76 and 2005 to 0.92 in 2010 in primary education and from 0.45 to approximately 0.59 in secondary education.

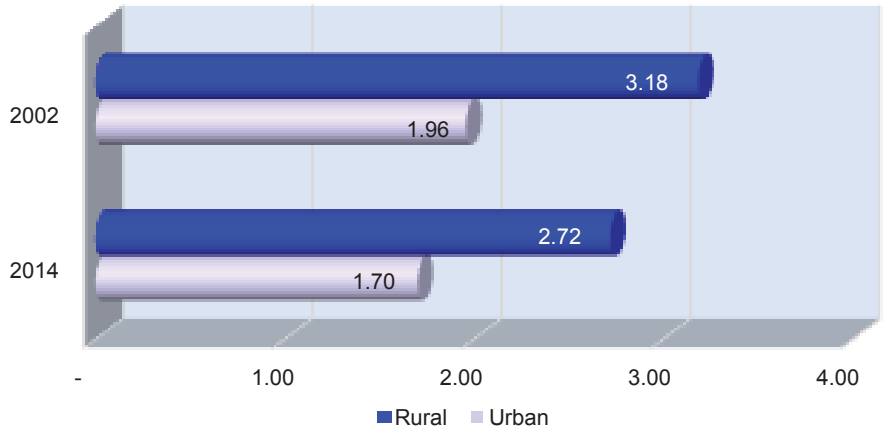
Figure 4.6.3: Human exclusion by gender



Source: Computed using national statistics.

In common with other West African countries and many African countries in general, the rural population of Guinea has experienced higher levels of human exclusion, with a high rate of 3.18 in 2002 and 2.72 in 2014, compared with urban areas, at 1.96 and 1.70 in 2002 and 2014, respectively. Poverty in Guinea is an essentially rural phenomenon. The number of poor people at the rural poverty line (percentage of the rural population) stood at 59 per cent between 2002 and 2003 and 66 per cent in during the period 2011-2012 (So, 2015). In the urban areas, the poverty rate at the urban poverty line (percentage of the urban population) stood at 22 per cent between 2002 and 2003 and 34 per cent in during the period 2011-2012.

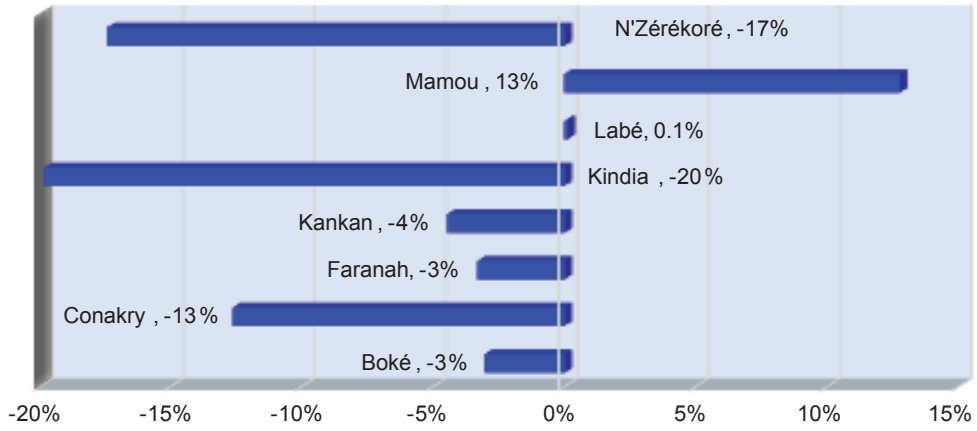
Figure 4.6.4: Human exclusion by location



Source: Computed using national statistics.

Figure 4.6.5 shows that human exclusion decreased overall in the principal subregions, with the exception of Mamou, where exclusion increased by 13 per cent. In general, the capitals (like Conakry) are likely to have more resources than other areas. Malnutrition, for example, is unevenly spread. In 2010, growth delay was reported to stand at 30 per cent countrywide, except in Conakry (Food and Agricultural Organization of the United Nations, 2010). Consequently, the African Social Development Index improved between 2002 and 2014 in Guinea.

Figure 4.6.5: Change in ASDI at Sub-National Level



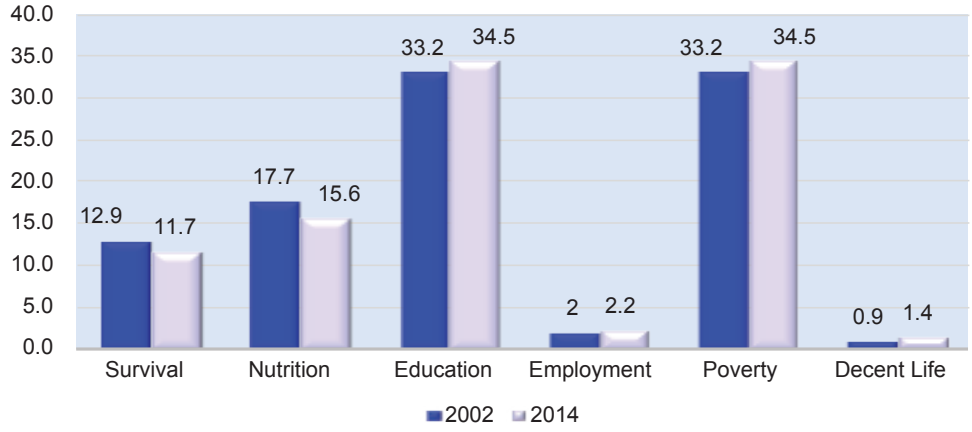
Source: Computed using national data.

When exclusion is broken down into aspects, illiteracy and poverty are identified as the key drivers of exclusion, with a contribution to general exclusion of almost 70 per cent and increasing over time. This demands the swift intervention of the Government and policymakers. The quality of education remains poor, with high dropout levels. Notwithstanding the improvement in the net enrolment ratios in pri-

mary education (53.3 per cent in 2002 to 66.7 per cent in 2013), the primary completion rate in 2013 stood at 61.9 per cent. This is due to internal inefficiency, with a low capacity to reduce school dropout rates (Economic Commission for Africa, 2015a). According to the Government of Guinea (2011), the gross enrolment ratio had stagnated at approxiamtely 79 per cent since 2007, and at 70 per cent for girls. In the rural areas, it stood at 60 per cent. It is a cause for concern that the dropout rate climbed from 5.9 per cent in 2007 to 11.6 per cent in 2010, thereby reducing the primary education completion rate to 57 per cent in 2010.

The poverty level has been increasing for years. Poverty estimated on the basis of the national poverty line of 8,800 Guinean francs ($1.10) daily has shown a persistent increase in poverty levels, climbing from 49.1 per cent in 2003 to 53 per cent in 2007 and 55.2 per cent in 2012 (Economic Commission for Africa, 2015a). The study done by the Government of Guinea (2012) reflects the high poverty rate between 2004 and 2012, the increased prices of basic food commodities, inadequate incomes (relating to the poor structure of the job market), mass rural-urban migration and the high levels of corruption. The contribution to global exclusion of other aspects, such as delayed growth in children and infant mortality, are relatively low and have decreased over the years. This could be due to the improved profile of public health, in which infant mortality stood at 39 and 33 deaths per 1,000 live births in 2005 and 2013, respectively.

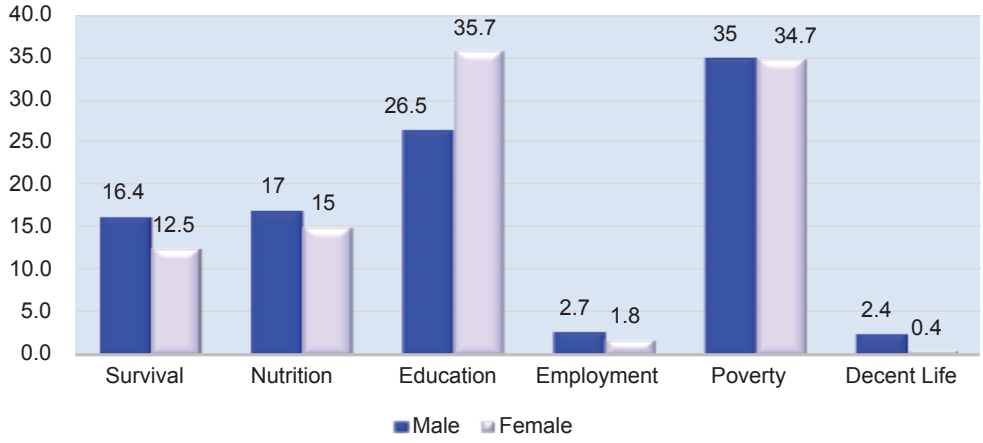
Figure 4.6.6: Drivers of human exclusion



Source: Computed using national data.

The disaggregation of drivers of exclusion by gender is a key element in formulating social policy. The various indicators of the life cycle show variable aspects and contributions to social exclusion when broken down by gender. Exclusion appears to be determined by infant mortality, malnutrition, employment and life expectancy at 60 among men, whereas women are excluded with respect to education. Guinea has made efforts to put legislation in place to improve gender equality. Nevertheless, additional efforts are still needed that are geared towards improving education for girls. According to the Economic Commission for Africa (2015a), in 2013, the net enrolment ratio for girls was 69.4 per cent, compared with 80.7 per cent for boys, resulting in a global gender parity index of 0.85, girls to boys. The survival rate of women at birth is higher than that of men. Life expectancy at birth is 59.7 for women and 58.7 for men (United Nations Development Programme, 2015b).

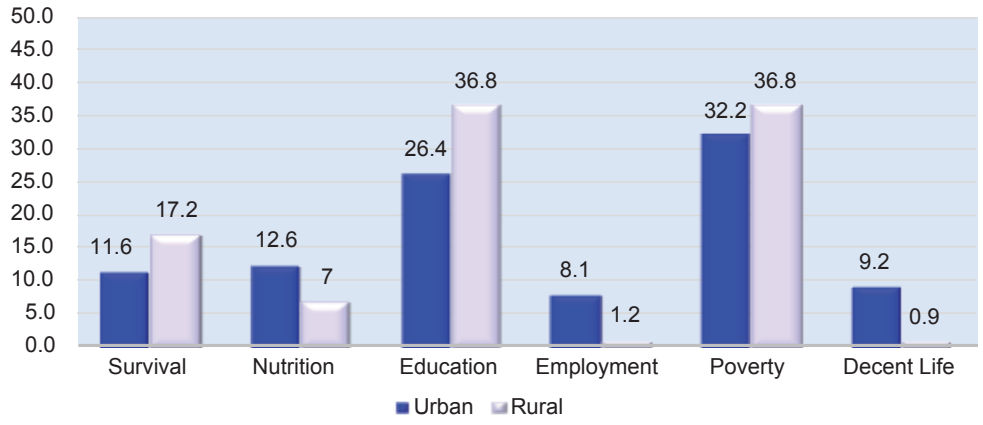
Figure 4.6.7: Drivers of human exclusion by gender



Source: Computed using national data.

Exclusion factors by location are found mainly in education, poverty and child mortality rates. These factors result in exclusion in the rural areas. This suggests that poverty, illiteracy rates and child mortality rates are higher in the rural areas than in the urban centres. A greater proportion of the population is living in poverty. This phenomenon appears to be concentrated in the rural areas, where 63 per cent of the rural population was living below the poverty line, compared with 31 per cent of the urban population in 2010 (Government of Guinea, 2011). Although the contribution of rural poverty to global exclusion is higher, urban poverty makes a not insignificant contribution. This is due to the high and uncontrolled level of urbanization, which has aggravated income inequality in the big cities, such as Conakry (Economic Commission for Africa, 2015a). The health services are in sharp decline because of the budget cuts, given that they have not received a significant share of GDP. That share fell from 1 per cent in 1993 to 0.2 per cent in 2010 (Government of Guinea, 2011). All the indicators demonstrate the need for more inclusive policies for the rural areas and fairly redistributive policies in the urban centres.

Figure 4.6.8: Drivers of human exclusion by location



Source: Computed using national data.

Policy considerations

Notwithstanding its vast economic potential, mainly in the mining sector, Guinea faces a number of socio-oeconomic constraints. Unemployment, poor social protection, household poverty, gender inequality in access to resources, unsatisfactory health and education facilities, to mention only a few, create obstacles to social development, especially in the rural areas. The African Social Development Index scores show that human exclusion in Guinea is attributable in large part to the poor quality of education and to poverty, in particular in the rural areas. Growth delay and child mortality also make a substantial contribution to exclusion. This means that incentives are needed to strengthen public interventions, with more efforts being deployed in the rural areas

In order to reduce poverty and promote decent work, a tripartite agreement between the Government, employers and workers was concluded in 2015, which led to the adoption of the decent work country programme, with the support of the International Labour Organization in 2015 (Government of Guinea, 2015).

Literacy rates among young people are low, notwithstanding the efforts of the Government to provide free and compulsory primary education between 7 and 13 years of age. The primary completion rates are low because of high school dropout rates, in particular in the rural areas. Additional efforts are needed to improve the quantity and quality of education. The strategic plan for general education was put in place to enhance access to quality education and good governance in the sector, in both the rural and urban areas, and to promote gender parity between girls and boys. It is also hoped that the plan will improve access to junior secondary education and increase the transition rates from primary to secondary education for all children. Nevertheless, enrolment rates in secondary education are still very low. Gender inequality continues to prevail at the upper levels of education, with 32 per cent of girls and 41 per cent of boys moving on to secondary education. In the university system, the number of boys exceeds that of girls by a ratio of almost 10.4. Consequently, capacity-building and the training of teachers and the adaptation of the educational system to fit market requirements are essential.

Growth delay, an indicator of chronic malnutrition, stands at 30 per cent countrywide, with the exception of Conakry. Malnutrition is unevenly distributed and is at its highest in the rural areas. Swift intervention is needed in relation to the provision and improvement of health services, in particular in the context of the rural areas.

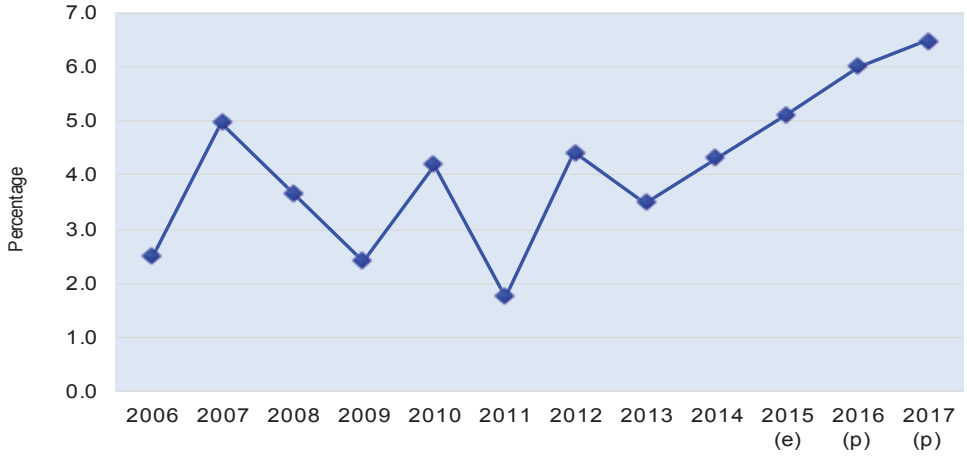
The nature of exclusion in Guinea highlights the need for massive investment in education, health and nutrition and in the reduction of poverty. Given that Guinea needs to build a solid foundation of human capital, rapid action should be taken to remedy these various forms of exclusion, given that they are likely to have increasingly alarming implications for decision makers.

4.7 Senegal

Socioeconomic conditions

Senegal recorded a remarkable macroeconomic performance in 2015 and 2016. In 2015, it achieved a GDP growth rate of 6.5 per cent, a rate that had not been achieved since 2003; making it second fastest-growing economy in West Africa after Côte d'Ivoire. In the first quarter of 2016, GDP growth remained high (6.4 per cent) following structural transformation, based mainly on the services sector (Economic Commission for Africa, 2015b). Prior to this excellent economic performance, the economy achieved relatively low growth of an average of 5 per cent between 2003 and 2014. In 2014, the growth rate was estimated at 4.7 per cent. Higher growth rates are projected for 2016 and 2017 (6 and 6.5 per cent, respectively).

Figure 4.7.1: GDP growth rate



Source: African Economic Outlook 2016

Note: (e) = estimates (p) = projections

Notwithstanding climate uncertainties, the primary sector is the economic sector, experiencing the most rapid growth thanks to fishing, mining and agriculture. In 2014, the primary sector achieved growth of 3.6 per cent, compared with 2.6 per cent in 2013. The industrial and manufacturing sectors account for less than 10 per cent of GDP, and industrial performance has slowed down slightly, notwithstanding good performances in the construction, chemical and energy sectors. Growth in the secondary sector declined to 2.9 per cent in 2014, from 3.3 per cent in 2013. The tertiary sector (services) accounts for more than half of total GDP and was estimated at 58 per cent in 2014 (Economic Commission for Africa, 2015b).

Social development

In common with many African countries fighting poverty, Senegal has also succeeded in reducing its poverty level over the years, from 57.3 per cent in 2001 to 46.7 per cent in 2011 (estimated on the basis of the national poverty line). This is attributable in part to positive economic growth, with an average of 3.8 per cent between 2001 and 2011 (Economic Commission for Africa, 2015b)

Child mortality has decreased over the years, although these levels remain very high. The child mortality rate fell from 121 deaths per 1,000 live births in 2000 to 78.7 deaths per 1,000 live births in 2013 as a result of improved access to health services and antimalarial policies.

In the education sector, the school enrolment rate is showing rapid improvement, rising from 67.2 per cent in 2000 to 93 per cent in 2013, and with 83.5 per cent of teachers possessing the required skills and

qualifications. However, more than one third of children of school-going age do not complete primary school education (Economic Commission for Africa, 2015b). This is the result of the high dropout rate, in particular among girls, who are required to do domestic work. In 2013, the completion rate of primary education was assessed at 65.9 per cent.

Senegal is one of the most stable countries in Africa, something seen even in the employment sector. Unlike other countries in West Africa, Senegal has relatively low unemployment rates (13.4 per cent in 2015), compared with 24.9 per cent for Nigeria. The unemployment rate is higher among women (16.7 per cent) than among men (9.5 per cent) (Economic Commission for Africa, 2015b). Unemployment among young people, in particular, stood at 13 per cent between 2012 and 2014. There is quite a high level of equal access to opportunities. The enrolment rate in secondary education for girls is 39.1 per cent and 42.9 per cent for boys. Gender equality is also evident in the continuing increase in women's political participation. Approximately 42.7 per cent of parliamentary posts are occupied by women. However, disparities continue to exist in relation to property ownership because men constitute the majority of property owners.

Table 4.7.1: Socioeconomic indicators

Indicators	2000-2002	2005-2007	2012-2014
Total population in millions of inhabitants	10.4	11.9	15.1 (2015)
Total GDP in CFAa	3 717 639	5 408 296	8 251 322
Per capita gross national income (Atlas method, in current United States dollars)	470	870	1000 (2015)
Population living below the national poverty line as a population percentageb	…	…	…
Gini coefficient	41.1 (2001)	39.2 (2005)	40.3 (2011)
Unemployment as a percentage of the total working population	5.7	8.8	10
Unemployment among young people as a percentage of the total working population aged 15 to 24	8.5	12.6	13
Population increase as an annual percentage	2.6	2.7	3.1 (2015)
Life expectancy at birth, in years	59	62	66

Source: World Bank world development indicators and National Institute of Statistics and Economic Studies of Burundi.

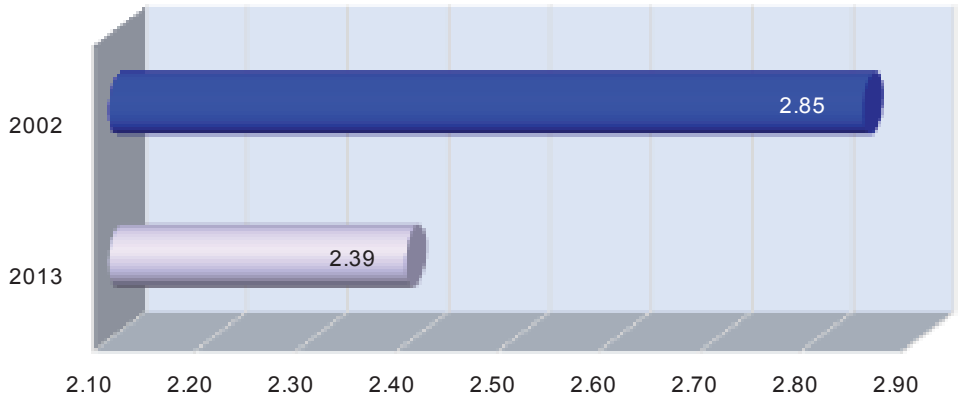
[a] International Monetary Fund world economic outlook database. Consulted 19 May 2017. Available from www.imf.org/external/pubs/ft/weo/2015/02/weodata/index.aspx.

[b] Using the $1.90 per day international poverty line.

Measuring human exclusion in Senegal

There is an enhanced level of human development, with a decline in the human exclusion index from 2.85 in 2002 to 2.39 in 2013, an indication of an improvement in general social performance. This could be attributable to the national social protection strategy adopted by the Government to increase access by vulnerable groups to basic social services and to opportunities in a fair and sustainable manner. Furthermore, the continuing participation of community-based organizations offers a credible alternative to government interventions.

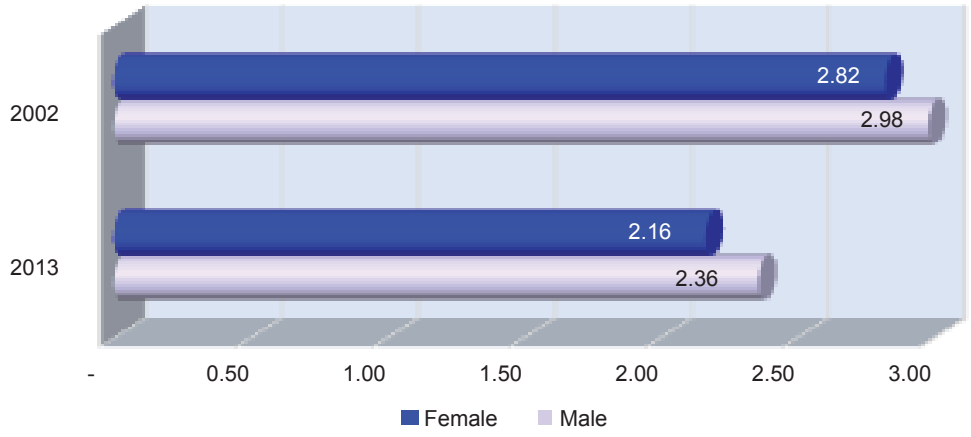
Figure 4.7.2: African Social Development Index in Senegal



Source: Computed using national data.

When disaggregated by gender, the African Social Development Index score reveals a small difference. Over time, exclusion has been reduced among both men and women, although exclusion appears to be slightly higher among men than among women. This could be due to policies designed to reduce gender inequality, for example, the adoption of the right to gender equality in 2010, which led to significantly enhanced access by women to education, employment and political representation.

Figure 4.7.3: Human exclusion by gender

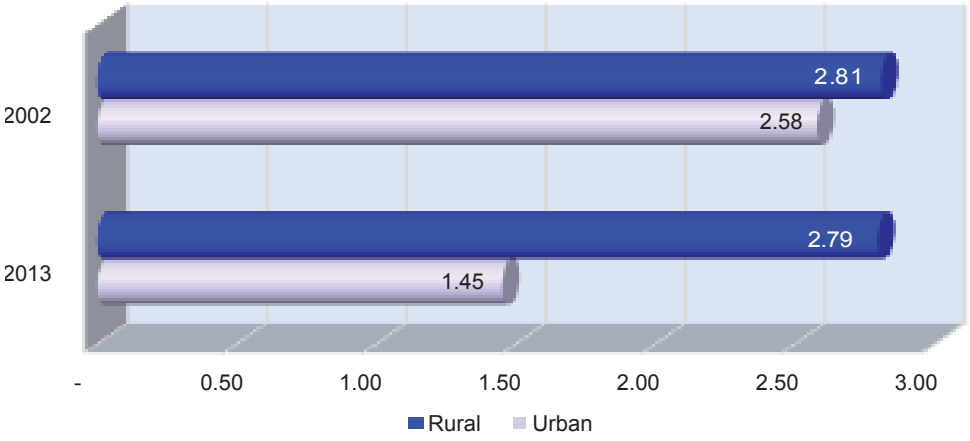


Source: Computed using national statistics.

Human exclusion occurs primarily in the rural areas. Although exclusion in the urban areas has diminished considerably over time, (from 2.58 in 2002 to 1.45 in 2013) the rural areas continued to be excluded during the same period. It was worse in 2013, given that exclusion in rural Senegal was twice as high as in the urban areas, owing mainly to poverty and illiteracy. The country suffers from acute rural poverty. However, more than half its population lives in the rural areas, and the majority of this rural population (some 60 per cent) draws its income from agriculture, an unstable undertaking. In 2006, for example, agriculture stagnated as a result of, among other things, inadequate access to working capital, inputs, knowledge, decreased quality of seed stocks and limited diversification (World Bank, 2013). The Govern-

ment then proceeded to adopt many projects designed to improve agriculture and rural development in general, such as the national eco-village network, which also improved agriculture.

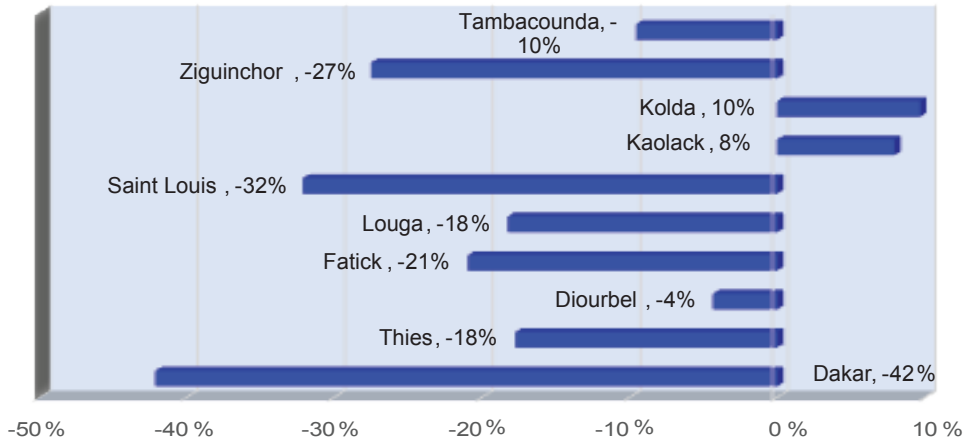
Figure 4.7.4: Human exclusion by location



Source: Computed using national statistics.

Senegal shows a substantial reduction in exclusion in many subregions, with the exception of Kolda (known as Haute Casamance) and Kaolack. These two towns have, in fact, undergone an increase in the rate of exclusion of 10 per cent and 8 per cent, respectively. This could be attributable to conflicts and political instability in the regions of Casamance. The most significant progress was noted in Dakar, with a drop of 42 per cent in human exclusion. This is due to the concentration of facilities and administrative units in the capital, factors that helped to create economic opportunities. Saint Louis and Ziguinchor also recorded a startling decline in exclusion of 32 per cent and 27 per cent, respectively, between 2002 and 2013. This is due to the strategic location of Saint Louis (the former capital of Senegal from 1872 to 1957) on an island, which attracts tourism and development in the region. The development support project for rural Casamance at Ziguinchor may explain this improvement in social development in the region. Many other Senegalese subregions also report a drop in human exclusion. This could be attributable in part to the implementation in 2012 of the national eco-villages network in three regions: Fatick, Louga and Thiès. This approach to rural development is designed to achieve economic development, environmental protection and enhanced living conditions for the rural populations in these regions.

Figure 4.7.5: Change in ASDI at Sub-National Level



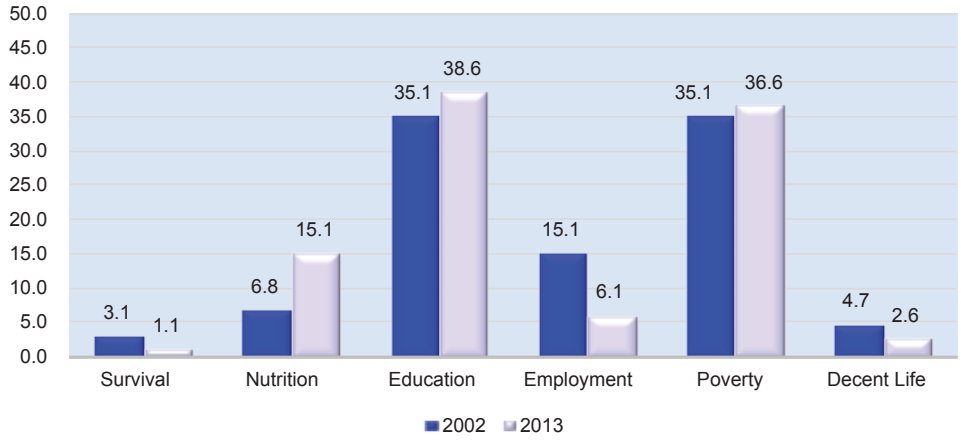
Source: Computed using national data.

An analysis of individual aspects reveals illiteracy and poverty as the key drivers of exclusion. These factors have increased over time. Notwithstanding the sharp increase and rise in the gross intake rate in the first years of primary education, at 87.1 per cent and 108.9 per cent in 2003 and 2013, respectively (the result of free and compulsory primary education for children up to the age of 16), there is a low primary education completion rate (65.9 per cent in 2013) and a school dropout rate of 12.5 per cent (Economic Commission for Africa, 2015b). This is also due to a low level of implementation in the sphere of Islamic education.

Poverty remains high, although its impact on economic life dropped from 57.3 per cent in 2001 to 46.7 per cent in 2011 (estimated on the basis of the national poverty line). According to Zobre (2013), a more extensive segment of the population suffers from chronic poverty than from transitional poverty, with a high risk of passing it on to the next generation.

The contribution of childhood growth delay to exclusion is rising as a result of the poor harvest, in particular in the regions of Diourbel and Matam, which has led to severe malnutrition. The floods that affected Diourbel and other regions in the western part of the country (Zucker, 2015) served to worsen the situation by destroying crops and health centres in the regions.

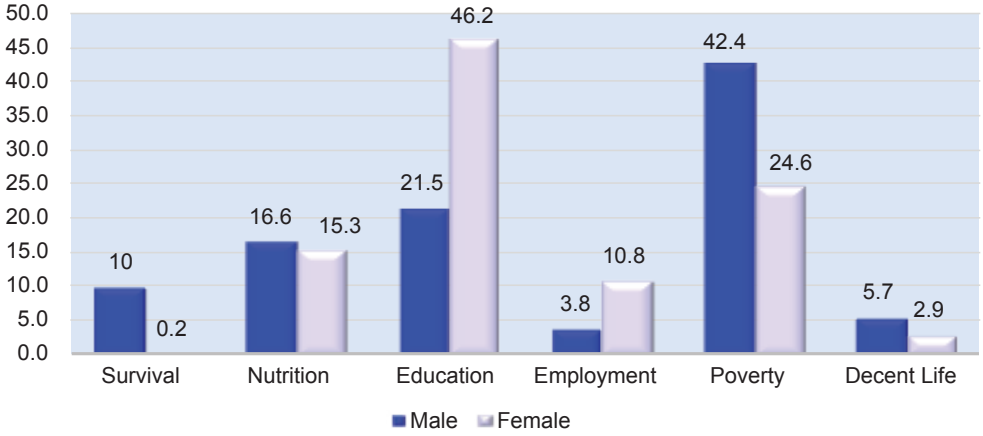
Figure 4.7.6: Drivers of Human exclusion



Source: Computed using national data.

When disaggregated by gender, education and poverty make the biggest contribution to exclusion, with different characteristics over the years. The African Social Development Index scores show that illiteracy rates among girls make a greater contribution to exclusion and that this gap is almost twice as high as the literacy rates among boys in the same age group. Approximately one third of children of school-going age do not complete primary education. The completion rate for primary education was estimated at 65.9 per cent, with a dropout rate of 9.8 per cent in 2013 (Economic Commission for Africa, 2015b). The school dropout rate is high, in particular among Senegalese girls, because they are forced to leave school to work as domestic help. Consequently, the education of girls should be at the heart of the design and implementation of policies. On the other hand, poverty among men appears to make a greater contribution to exclusion than among Senegalese women. Households headed by women have been found to be less impoverished (incidence of poverty of 34.7 per cent), compared with households headed by men (50.6 per cent).

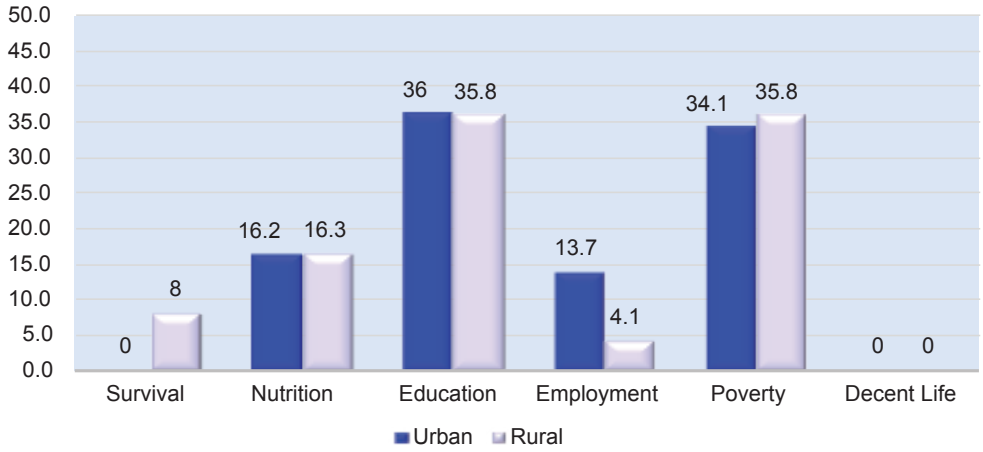
Figure 4.7.7: Drivers of Human exclusion by gender



Source: Computed using national data.

Poverty and education are the key drivers of exclusion by location, showing broad differentiation from other aspects, such as child mortality and unemployment among young people. The rural and urban areas reveal high levels of exclusion in education. Low literacy levels affect both girls and boys of school-going age in the rural and urban areas. Poverty in the rural areas makes a relatively greater contribution to exclusion than in the urban areas. In 2011, approximately 57.3 per cent of the poverty estimates were in rural areas, compared with 26.1 per cent in Dakar and 41.3 per cent in other urban areas.

Figure 4.7.8: Drivers of Human exclusion by location



Source: Computed using national data.

Policy considerations

Given that human exclusion in Senegal is principally the result of illiteracy and poverty among the country's young people, policies geared towards these factors are required. Notwithstanding the efforts made by the Government to provide universal access to education (free and compulsory primary education), the quality of education is still severely limited. The Government should improve the quality of education through, among other things, the use of educational resources, an enhanced educational environment and higher-quality teacher training.

In order to stimulate rural development, the Government has invested $198 million to improve access to facilities, food security and the spirit of enterprise in the rural areas. This has restored hope for rural development and the reduction of rural poverty (United Nations Development Programme, 2015b). Furthermore, the implementation of the national eco-villages network programme during the period

2012-2016 in the regions of Fatick, Thiès and Louga is to be applauded. Other investment is needed in this regard. The Government has made an effective attempt to combat poverty, in particular in the rural areas. Another effort was project 2 of the agricultural and producer organizations, which increased access by small producers to sustainable and diversified agricultural services and innovations, which, in turn, led to a significant increase in agricultural productivity and food security (World Bank, 2013). Amid those interventions, however, poverty persists, in particular in the rural areas. It could prove essential to implement new phases of these projects or similar projects.

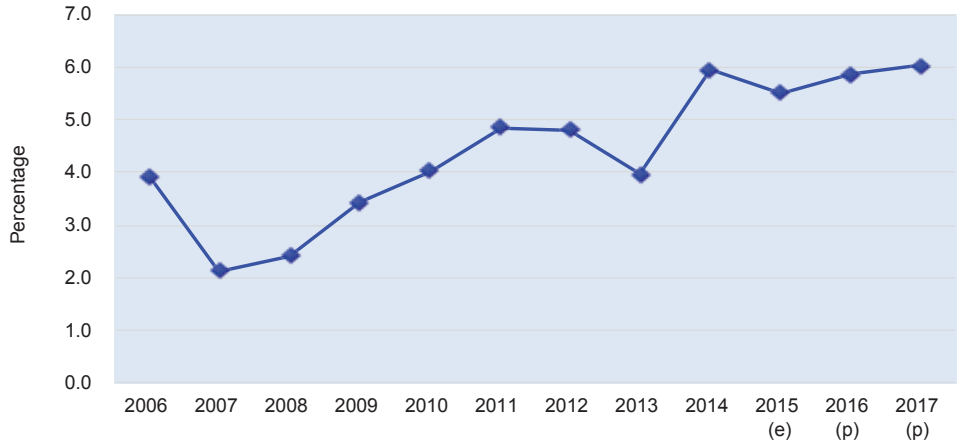
In order to promote the well-being and human capital of its poorest citizens, the Government has sought to accelerate the roll-out of the national family social protection bursaries. This programme offers grounds for considerable optimism.

4.8 Togo

Socioeconomic conditions

The country has experienced strong economic growth during the past three years with a GDP growth rate averaging approximately 5 per cent, relatively higher than the majority of the West African economies. The economy relies mainly on agriculture, which accounted for 47.6 per cent of GDP in 2015. The services sector accounted for 36.2 per cent, the industrial sector for 16.2 per cent and the manufacturing sector for only 6.4 per cent (Government of Togo, 2016). The country is faced with occasional shocks accelerated by the decline in basic commodity prices affecting its exports, the economic slowdown in Nigeria and other factors. Although the growth rate fell in 2014 and 2015 following the presidential elections, the country overcame those shocks with high growth rates (see figure 4.8.1). The key driver of economic growth has been agricultural production (strengthened by favourable climate conditions), accounting for more than half of GDP and employing morethan 60 per cent of its citizens (World Bank, 2017d). The extractive industries and commercial activities have also made significant contributions to economic growth.

Figure 4.8.1: GDP growth rate



Source: African Economic Outlook 2016

Note: (e) = estimates (p) = projections.

Social development

At the social level, Togo is ranked among those lagging furthest behind with respect to progress in human development. In fact, in 2015, the *Human Development Report* ranked the country 162nd of 188 countries, with a human development index of 0.484. The incidence of poverty remains high, although it has diminished over the years, declining from 61.7 per cent in 2006 to 58.7 per cent in 2011 and to 55.1 per cent in 2015 (Government of Togo, 2016). Social economic inclusion is restricted mainly by underemployment, which rose from 22.1 per cent in 2011 to 24.9 per cent in 2015.

The health sector has undergone improvement over the years, although the Millennium Development Goals were not satisfactorily achieved. The child mortality rate decreased from 78 per cent in 2010 to 49 per cent in 2014. The maternal mortality rate decreased significantly, from 478 deaths per 100,000 live births in 1998 to 401 in 2014, although this figure does not meet the Millennium Development Goaltarget of 160 deaths per 100,000 by 2015. Access to health services continues to pose a challenge, especially in the rural areas. Notwithstanding the commitment made by the State to devote 15 per cent of its budget allocation to health in 2014, the health sector actually received an allocation of only 3.62 per cent (Government of Togo, 2016).

Education is provided free of charge in State primary schools, and this will considerably improve the gross enrolment ratio in primary education, which climbed from 98 per cent for the academic year of 2007-2008 to 127.1 per cent in 2013-2014. On the other hand, secondary enrolment rates are very low because of the small budget allocated to the sector. In 2014, notwithstanding the undertaking of the State, vocational training received only 6 per cent of the education budget, compared with 73 per cent for primary education (Government of Togo, 2016).

Although improvements have been made in recent years, driven by the national policy for fairness and equality in gender affairs, discrimination against women continues to be a problem. Access for girls to education is negatively affected by beliefs and cultural traditions, as is the representation of women in public office. According to the Government of Togo (2016), there are fewer girls in secondary education than boys (i.e., 36.7 per cent, compared with 48.8 per cent). Women's literacy stands at 50 per cent, compared with 77 per cent for men's literacy. Only 17.6 per cent of the country's parliamentary representatives are women.

Table 4.8.1: Socioeconomic indicators

Indicators	2000-2002	2005-2007	2012-2014
Total population in millions of inhabitants[a]	4.6	5.4	6.8
Total GDP in CFA[b]	3 717 639	5 408 296	8 251 322
Per capita gross national income (Atlas method in current United States dollars)	470	870	1 000 (2015)
Population living below the national poverty line as population percentage[c]	…	61.7 (2006)	55.1 (2015)
Gini coefficient	41.1 (2001)	39.2 (2005)	40.3 (2011)
Unemployment as a percentage of the total working age population	5.7	8.8	10
Unemployment among young people as a percentage of the total working population aged 15 to 24	8.5	12.6	13
Population increase as an annual percentage	2.6	2.7	3.1 (2015)
Life expectancy at birth, in years	59	62	66

Source: World Bank world development indicators and National Institute of Statistics and Economic Studies of Burundi.

a Demographic projection of the directorate general of statistics and national accounts of Togo.

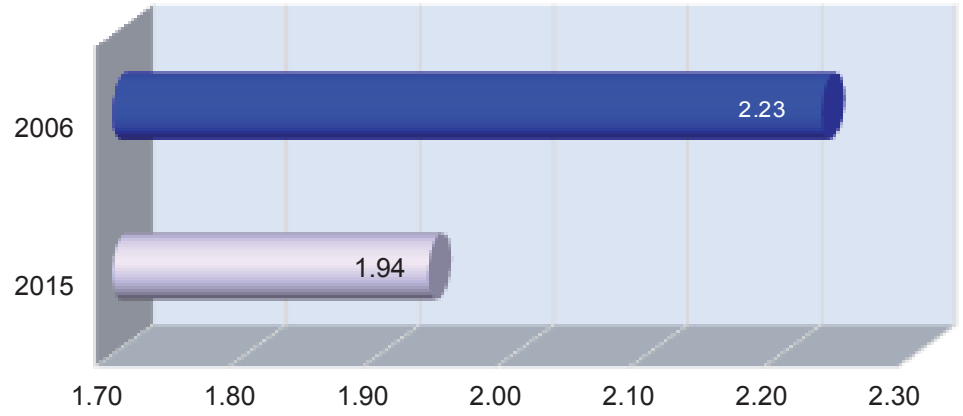
b International Monetary Fund world economic outlook database. Consulted 19 May 2017. Available from www.imf.org/external/pubs/ft/weo/2015/02/weodata/index.aspx.

[c] Using the $1.90 per day international poverty line.

Measuring human exclusion in Togo

Togo has a relatively moderate human exclusion index, falling from 2.04 in 2006 to 1.77 in 2015, which represents a reduction of 13.2 per cent. This could be attributable in part to the outcomes of projects such as the Togo agricultural support project adopted in 2011, the goal of which is to strengthen and rehabilitate the productive capacity of the agricultural sector in selected areas in order to achieve growth and poverty reduction (World Bank, 2017d). The cash transfer programme for vulnerable children in northern Togo in 2013 may have contributed to reducing human exclusion. The actions of the Government are intended to promote inclusive growth, as demonstrated by the adoption in 2013 of its strategy for accelerated growth and promotion of employment, projects such as the economic recovery and governance grant, additional financing for the community development and security project in 2014 and the launch of phase 1 of the mining development project in 2015, to mention only a few. Nevertheless, the main challenge consists of translating these projects into actions having a significant impact on households.

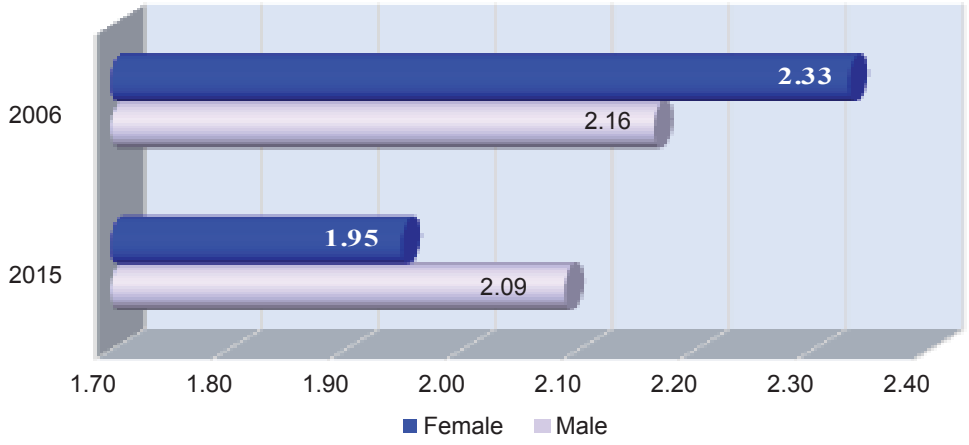
Figure 4.8.2: The African Social Development Index in Togo



Source: Computed using national data.

Gender disparities in the context of human exclusion are low because conditions have improved more for women (from 2.33 in 2006 to 1.95 in 2015) and slightly for men (from 2.16 in 2016 to 2.09 in 2015). The small deviation in exclusion between men and women is an indication of the existence of good redistribution policies. In fact, Togo has adopted distributive tools to strengthen gender equality, with the introduction in 2013 of the African Gender and Development Index, designed to remedy the lack of statistics for the implementation of its global and regional undertakings with respect to gender equality and the empowerment of women.

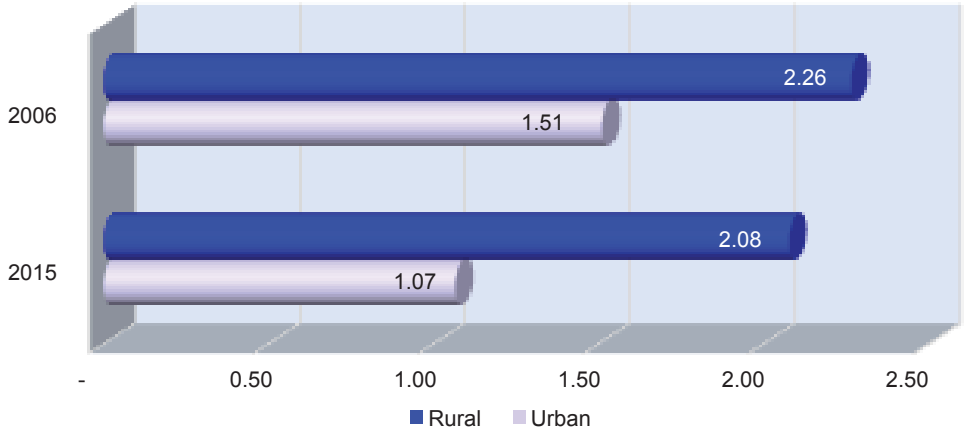
Figure 4.8.3: Human exclusion by gender



Source: Computed using national statistics.

Disaggregation by location shows that the rural areas record higher levels of exclusion than the urban areas, although such exclusions decreased between 2006 and 2015 in these environments. The rural areas continue to suffer from inadequate access to services. Neverthless, approximately 60 per cent of the population lives in these areas and engages in subsistence farming in order to survive (World Bank, 2011). Approximately 81.2 per cent of the rural population lives below the world poverty line (Provencher, 2016). Challenges such as malnutrition, poor quality education, early marriage, poor sanitation and inadequate housing are widespread in the rural environment. Swift intervention is needed to reduce the exclusion gap between rural and urban areas (Compassion International, 2015b).

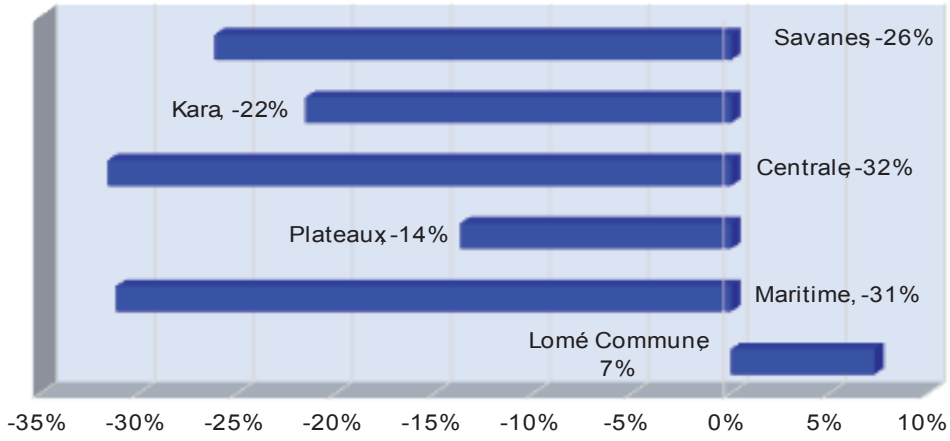
Figure 4.8.4 : Human exclusion by location



Source: Computed using national statistics.

Disparities in the context of exclusion are more obvious between the regions. Exclusion increased by approximately 7 per cent in the commune of Lomé owing to high population density and a high growth rate. The rural exodus continues to aggravate unemployment in this city. Unhealthy urban living conditions and the city's dumpsters continue to pose a challenge. According to the International Monetary Fund (2014), the regional distribution of persons living below the poverty line included 33 per cent in Lomé. Human exclusion shows a decline in other regions studied, decreasing by 32 per cent, 31 per cent, 26 per cent, 22 per cent and 14 per cent, respectively, in the Centrale, Maritime, Savanes, Kara and Plateaux regions (see figure 4.8.5).

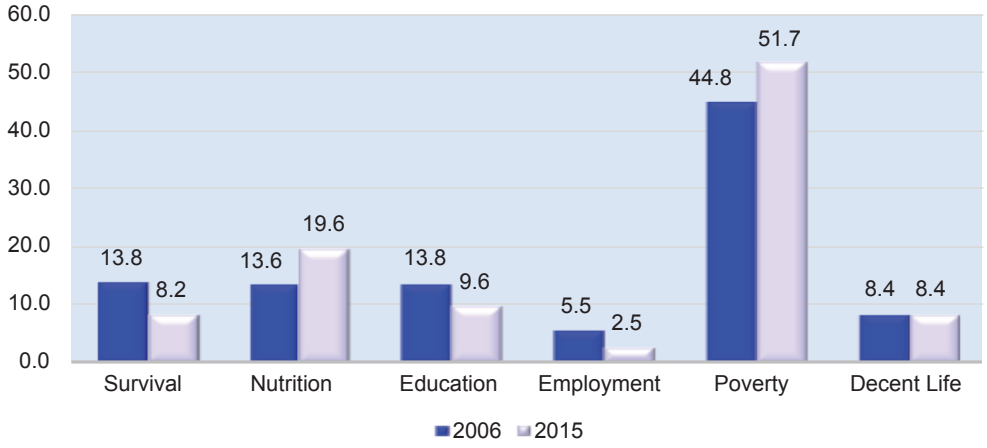
Figure 4.8.5: Change in ASDI at Sub-National Level



Source: Computed using national data.

To a large extent, general exclusion is caused by poverty. In 2006, poverty was the biggest factor contributing to human exclusion; in 2015, its contribution was even greater. Although poverty decreased between 2006 and 2015, it has made a definite contribution to human exclusion, in particular in the rural areas. Malnutrition (childhood growth delay) also contributed to the increase of human exclusion between 2006 and 2015. The data also reveal that malnutrition has an impact on the urban environment and may be linked to the rural exodus.

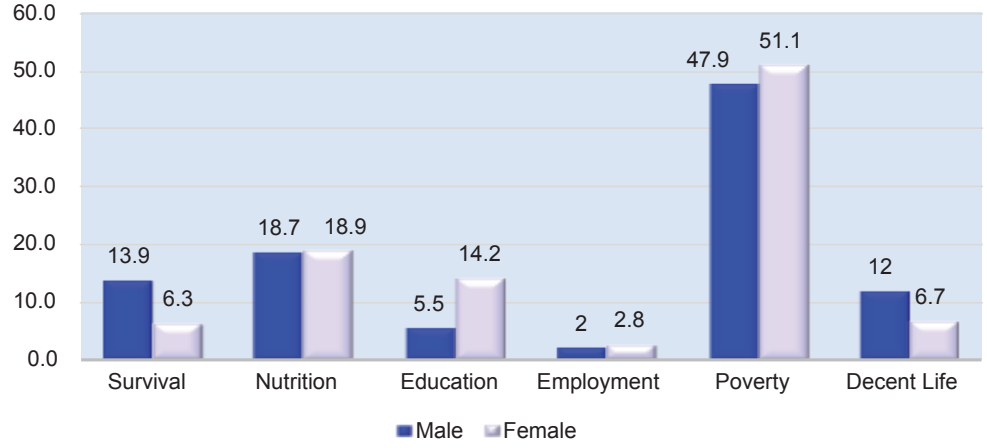
Figure 4.8.6: Drivers of Human exclusion



Source: Computed using national data.

Disaggregation by gender shows that poverty has made the highest contribution to general exclusion, with a greater impact among women than among men. Even though women are still subject to legal and social restrictions, their status has improved over the years. Nevertheless, in the event of divorce or the death of the husband, the rights of the wife in respect of inheritance and financial benefits are limited. All these factors contribute to the deepening of the poverty divide between men and women. Social and cultural norms also contribute to the social exclusion of women.

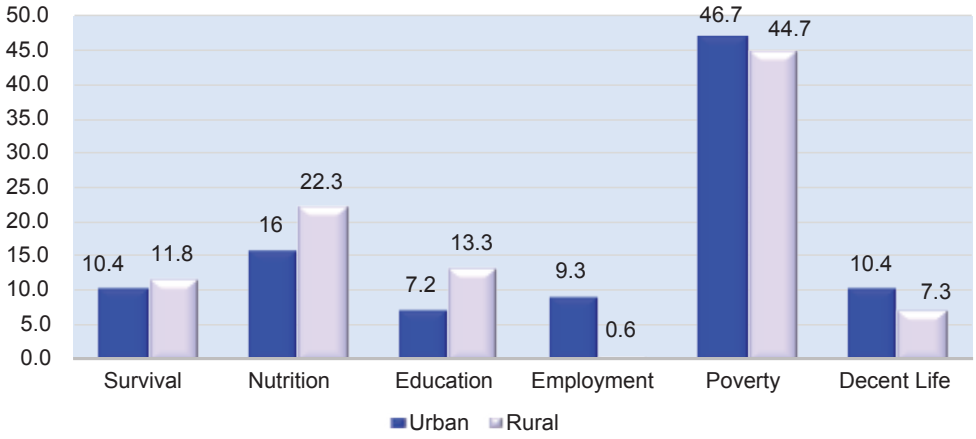
Figure 4.8.7: Drivers of Human exclusion by gender



Source: Computed using national data.

Malnutrition (childhood growth delay) and unemployment among young people appear to make the greatest contribution to human exclusion, more so in the urban areas than in the rural areas. This can be attributed to the mass rural exodus of the majority of poor families. They leave the rural areas in search of better living conditions and work, which simply subjects them to even more depressing human conditions in the urban areas such as Lomé. Malnutrition, unemployment among young people, a lack of clean water, inadequate housing, poor sanitation and other factors pose major challenges in the urban areas (Compassion International, 2015b).

Figure 4.8.8: Drivers of Human by location



Source: Computed using national data.

Policy considerations

Considerable efforts have been made by the Government to improve education. For example, in 2015, the World Bank approved the education and institutional capacity-building project, which is (designed to improve the quality of primary and secondary education, strengthen the provision of education services and strengthen access to and fairness in primary education. This project, worth $27.8 million, is scheduled to end in 2018 and is expected to generate good outcomes.

The African Social Development Index scores show that poverty, in particular among women, makes the highest contribution to general exclusion. Although general exclusion has been reduced, the exclusion of women continues and the State should engage in urgent action to improve the legal framework and the social aspects of gender inequality and the empowerment of women. Over the years, the Government has also adopted projects targeting inclusive development, such as the community financing project, the security network project in 2014, the security and basic services projects in 2017 and the recent additional financing of the project to support the agricultural sector in 2017. The implementation of these projects should produce better results and growth with the side effect of more inclusive growth.

Growth delay (height for age) being a major rural challenge, it is vital for the political decision makers to focus efforts on this area. In 2014, the Government launched a project in support of maternal and infant health services and nutrition. This project proved very successful, although malnutrition remains high, in particular in the rural areas. The main development challenges for Togo include strengthening governance, reinforcing economic infrastructures and promoting more balanced, participatory and sustainable development. These factors must be tackled in order to enjoy the full benefits of the results in the future.

Conclusion

The African Social Development Index report for West Africa is prepared on the basis of 8 of 16 country studies in the region. Consequently, specific commonalities are indicative only of the sub region's performance on human exclusion.

Results from West Africa have shown that, notwithstanding high economic growth in the past two decades (1992-2013), countries are still confronted with the challenge of making growth more inclusive and equitable. The dependence on primary commodities in economic growth spells makes West African countries vulnerable to exogenous shocks and the persistence of excluded and marginalized groups. Unequal access to social and economic opportunities limits their capacity to become productive and effective agents of change, thereby undermining their potential and overall social progress. The analysis of the drivers of human exclusion provide critical insights on the structural causes of exclusion in each country (table 5). Poverty is the major/significant driver of human exclusion in all the countries studied and illiteracy is the key contributor to exclusion in at least in five of the eight countries. Nutrition (stunting) is another important diver of exclusion in Benin, Burkina Faso and Togo.

Poverty and education appear to be the major drivers of human exclusion in West Africa. The emergencies faced by many West African countries, for example, the Ebola outbreak of 2014, has had lingering effects on food inflation and household disposable income for its allocation to education services (Economic Commission for Africa, 2016). The cost of education to households reinforces the bias towards higher income quintiles and the exclusion of lower income quintiles and urban versus rural dwellers.

This study has justified in part the subregion's prominent policy focus on educational development. However, several challenges confront the subregion with regard to education, relating mainly to quality, quantity and gender disparities. Even though access is gradually improving and the gender gap has marginally narrowed, although not at the rate required to effectively influence poverty reduction, quality remains a major problem. Furthermore, the result of the African Social Development Index for West Africa highlighted the need for countries to focus their development agenda in order to address human exclusion more effectively and deal with both its underlying and structural drivers.

Lastly, the African Social Development Index serves as an important tool for ECA member States to identify policy gaps and formulate appropriate interventions to bridge the gap between the haves and the have-nots. In addition, the disaggregation of the Index by gender and location and its application at subnational levels are critical to capturing within-country inequalities and reorienting and placing inclusive policies at the centre of national and subnational planning. Indeed, global and regional frameworks such as the 2030 Agenda and Agenda 2063 offer an important opportunity to move beyond economic growth and place human and social dimensions at the centre of the development process.

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Annex I: Methodological foundations of the African Social Development Index

Theoretically, the Index seeks to measure the distance between people who are able to participate in development and those who are excluded from development processes. Hence, the "distance" between the included/excluded groups may be measured as follows:

$$[dEx^{v}] = \frac{\alpha P_x^{v}}{1 - \alpha P_x^{v}}$$

where (P^{v}) measures the degree of exclusion of an individual for a specific dimension of development or vulnerability (v), such as the prevalence of children undernourished or the proportion of individuals below the poverty line, in a particular population group (x).

If $P_x^{v}>0.5$, the formula will establish a maximum value of 1, as more than 50 percent of the population excluded would represent a disproportional situation (normalization).

In the case where the indicator measures the degree of inclusion (or "non-exclusion"), for instance the proportion of people NOT affected by a specific vulnerability(αP_x^{v}); as is the case of literacy rate, the indicator is transformed by applying:

$$\alpha P_x^{v} = 1 - (\alpha P_x^{v})$$

Hence the "distance" in the level of exclusion can be calculated by applying the inverse equation:

$$[dEx^{v}] = \frac{\alpha P_x^{v}}{1 - \alpha P_x^{v}}$$

Similarly, if $P_x^{v}<0.5$, the formula will establish a maximum value of 1.

After normalization, the level of human exclusion will result in a score that will range between ($0 < dE_x \leq 1$), indicating the proportional distance between those participating in the specific dimensions of development and those excluded from those processes. In the case of indicators where there is no national comparative value, such as the case of mortality rates and life expectancy, a comparable reference is applied to estimate the distance to a desired or expected situation, as follows:

$$[dEx^{v}] = \frac{P_x^{v} - P_x^{r}}{P_x^{v}}$$

Where(r) is a reference value established as a comparative parameter for a given population (P) and age group (x).

In case the indicator presents a situation of "inclusion", such as life expectancy at 60, the following reverse equation should be applied:

$$[dEx^{v}] = \frac{P_x^{r} - P_x^{v}}{P_x}$$

Table A.1: Infant mortality

Indicator	Infant mortality
Dimension of exclusion:	**SURVIVAL** The number of children who do not survive the first year of life can be used to gauge survival or access to life. It is estimated that roughly 45 per cent of deaths among children under-five occur during this period.[17] This situation is often a reflection of exclusion from and the quality of health facilities. The measurement of exclusion in this area is computed using infant mortality rates at national levels, as compared to the average infant mortality rate in (lower) middle-income countries.
Definition:	Number of children who die between 0 and 1 year, expressed per 1,000 live births (WHO)
Formula :	$[dEx^{Im}] = \frac{Im^{n}_{0\_1} - Im^{r}_{0\_1}}{Im^{n}_{0\_1}}$ $[Im^{n}_{0-1}]$: Degree of exclusion from basic health services Im^{r}_{0-1} : Reference value for neo-natal mortality, given by the average value of lower middle income countries Im^{r}_{0-1} : National estimates of child mortality
Computation :	**National, Rural / Urban, Male / Female** Applying the formula; $[dEx^{Im}] = \frac{Im^{n}_{0\_1} - Im^{r}_{0\_1}}{Im^{n}_{0\_1}}$ (*) In Excel, use the following condition IF: IF $Im^{n}_{0-1} < Im^{r}_{0-1}$ give the value 0 IF NOT apply the formula (*)
	Sub-National Level The procedure is as follows: We determine the *minimum value* of mortality at the sub-national level, i.e. taken among all sub-regions within the country in a given year. This becomes our new reference value, and referred to as $min(Im_{0-1})$ OR $min(Im_{0-1}) = Im^{SubRef}_{0-1}$ Hence, the new formula becomes: $[dEx^{Im}]_i = Im_{0-1} - min(Im_{0-1}) / Im_{0-1}$ (**) Where Min (Im_{0-1}) is the minimum reference value for infant mortality at the sub-national level. And Im_{0-1} is the sub-national estimates of infant mortality [0 – 1] year for each subregion i. In Excel, use the following condition IF : If $Im_{0-1} < Im^{SubRef}_{0-1}$, give the value 0 If not, apply the formula (*)

Table A.2: Child stunting

Indicator	Child Stunting
Dimension of exclusion:	**NUTRITION** The second dimension of exclusion is the diminished capacity of children to meet their basic nutritional needs. The life-long consequences of early child malnutrition have been widely documented, and its prevalence indicates, among others, exclusion from the adequate delivery of health services (ECA, 2013a).
Definition:	Percentage of children under five who are stunted – i.e. whose height for age is more than two standard deviations below the median for the international reference population aged 0-59 months (WHO).
Formula :	$[dEx^{ChM}] = \frac{ChM^{n}_{28d-59m}}{1-ChM^{n}_{28d-59m}}[dEx^{ChM}]$: Degree of exclusion from health/ nutrition $ChM^{n}_{28d-59m}$: Proportion of children between 28 days and 59 months suffering from chronic malnutrition at the national level
Computation :	**National/sub-national, rural/urban, women/men:**
	In Excel, use the following condition IF: IF $ChM^{n}_{28d-59m} \succ 50$, give the value 1 IF NOT, apply the formula (*): (*) $[dEx^{ChM}] = \frac{ChM^{n}_{28d-59m}}{1-ChM^{n}_{28d-59m}}$

Table A.3: Literacy Rate (15-24 years)

Indicator	Literacy Rate (15-24 years old)
Dimension of exclusion:	EDUCATION A third manifestation of exclusion in the life cycle may be associated with access to quality education, which provides the means for larger opportunities later in life. Literacy rates observed after educational years (15-24 years) provide a good proxy for the effectiveness of educational efforts, at the impact level.
Definition:	Percentage of population between 15 and 24 years of age who can read and write (UNESCO)
Formula :	$[dEx^{Lr}] = \frac{1 - Lr^{\tilde{v}}_{15-24}}{Lr^{\tilde{v}}_{15-24}}$ $[dEx^{Lr}]$:Degree of exclusion from access to quality education $Lr^{\tilde{v}}_{15-24}$: Literacy rate among 15-24 years old
Computation :	National and Sub-national : In Excel, use the following condition IF: IF $\propto Lr^{\tilde{v}}_{15-24} \prec 50$ give the value 1 IF NOT apply the formula (*): (*) $[dEx^{Lr}] = \frac{1 - Lr^{\tilde{v}}_{15-24}}{Lr^{\tilde{v}}_{15-24}}$

Table A.4: Youth Unemployment (15-24 years old)

Indicator	Youth Unemployment (15-24 years old):
Dimension of exclusion:	ACCESS TO LABOUR MARKET Another form of exclusion faced by individuals when they complete their educational cycles is reflected in their capacity to access decent job opportunities. The school-to-employment transition is often determined by the capacity of an economy to generate job opportunities for this key age group.
Definition:	Share of the youth labour force who is without work but available for and seeking employment (ILO definition).[18]
Formula :	$[dEx^{Yu}] = \frac{Yu^{n}_{15-24}}{1 - Yu^{n}_{15-24}}$ $[dEx^{Yu}]$:Degree of exclusion from access to the labor market Yu^{n}_{15-24} : Proportion of individuals aged 15-24yearswho are unemployed, measured at national level
Computation :	National and Sub-national In Excel, use the following condition IF: IF $Yu^{n}_{15-24} \succ 50$, give the value 1 IF NOT, apply the formula (*): (*) $[dEx^{Yu}] = \frac{Yu^{n}_{15-24}}{1 - Yu^{n}_{15-24}}$

Table A.5: National-based Poverty

Indicator	National-Based Poverty
Dimension:	MEANS OF SUBSISTENCE A major form of exclusion during adulthood can be reflected in the inability of an individual to ensure the basic needs for them and their families to live a decent life. This is reflected in the level of poverty, based on consumption, calorie in-take or income (according to the poverty threshold set at national level).
Definition :	Proportion of population below the national poverty line
Formula :	$[dEx^{Np}] = \frac{Np_h^n}{1 - Np_h^n}$ $[dEx^{Np}]$:Degree of exclusion from basic means of subsistence Np_h^n : Proportion of population living below the national poverty line
Computation :	National and Sub-national
	In Excel, use the following condition IF: IF $Np_h^n \succ 50$ give the value 1 IF NOT apply the formula (*): (*) $[dEx^{Np}] = \frac{Np_h^n}{1 - Np_h^n}$

Table A.6: Life Expectancy at 60

Indicator	Life Expectancy at 60
Dimension :	A key form of inclusion in later stages of life deals the ability of the elderly to remain socially integrated and live a decent life. In this regard, life expectancy at 60 may be a good proxy of their quality of life and a reflection of the social security provided to them by the state. The measurement of exclusion in this area is computed using national life expectancy at 60, as compared to the average life expectancy at 60 in lower middle-income countries.
Definition:	Average number of years that a person of that age can be expected to live, assuming that age-specific mortality levels remain constant. (WHO)
Formula :	$dEx^{Le}] = \frac{Le_{60}^{Ref} - Le_{60}^{n}}{Le_{60}^{Ref}}$ $[dEx^{Lr}]$:Degree of exclusion from surviving at old age Le_{60}^{Ref} : Reference value of life expectancy at 60 years Le_{60}^{n} : National average life expectancy at 60 years
Computation :	National Level
	Applying the formula: $dEx^{Le}] = \frac{Le_{60}^{Ref} - Le_{60}^{n}}{Le_{60}^{Ref}}$ (*) In Excel, use the following condition IF IF $Le_{60}^{Ref} \prec Le_{60}^{n}$ give the value 0 IF NOT apply the formula (*):
	Sub-National Level

The methodology used here to determine not the scores of the ASDI, but the values of life expectancy after 60 at sub-national levels, is drawn from UNDP (2009)[19]. This method requires two sets of data:
(a) national life expectancy at 60 years of age, and
(b) The proportion of population that is above national life expectancy at 60 years of age.
Therefore, the computation entails the following:
Determine the proportion of population aged 60 and older in a given year and for each sub-region (for this, we will need demographic data disaggregated at sub-national level). We call this Xydis;
Determine the median (m) of this proportion, for a given year.
Then, apply the following criteria:
If Xydis> m, then Lei = Len*[1 + (Xydis / 100)]
If Xydis< m, then Lei = Len*[1 - (Xydis / 100)]
If Xydis = m, then Lei = Len
Once the life expectancy at 60 has been determined for each sub-region, the formula for computing the ASDI for Indicator 6 at sub-national level is the following:
After having obtained the estimations fir life expectancy at 60 at sub-national level, the computation of the ASDI at sub-national level is as follows:
We determine the maximum value of life expectancy at sub-national level, which becomes our new reference value, in a given year. It is called $Max\left(Le_{60}^{Sub}\right)$ and the

new formula becomes:

$$[dEx^{Le}]_i = \frac{Max\left(Le_{60}^{Sub}\right) - Le_{60}^{Sub_i}}{Max(Le_{60}^{Sub_i})} \quad (*)$$

where $Max\left(Le_{60}^{Sub}\right) = Le_{60}^{SubRef}$ is the maximum reference value of life expec-

tancy at 60 at the sub national level
And $Le_{60}^{Sub_i}$: are the sub-national estimates of life expectancy at 60 for each sub-re-

gion I.
In Excel, use the following condition IF:
IF $Le_{60}^{SubRef} \prec Le_{60}^{Sub_i}$, give the value 0

IF NOT, apply the formula (*).

Aggregation of the Index

In order to assess the overall degree of human exclusion throughout the life cycle, we aggregate the levels of exclusion in each of the six dimensions. Using a simple arithmetic sum, the overall level of exclusion can therefore be defined as:

$$HEx^{v} = dEx^{im} + dEx^{chm} + dEx^{Lr} + dEx^{Yu} + dEx^{np} + dEx^{Le}$$

As each indicator has a value ranging between 0 and 1, the overall score will take a value between $0 < HEx^{v} = < 6$, reflecting the degree of exclusion of an individual throughout his or her life cycle. The total value of the Index will therefore represent an absolute value of exclusion, reflecting the likelihood of an individual to be excluded from the six dimensions of development described above. In case of missing values in one of the dimensions, an expansion factor will be applied to facilitate the computation of results. Missing information for two or more dimensions will prevent proper assessment of exclusion, making it necessary to eliminate the country concerned from the exercise.

Estimations at sub-national levels and across time

The same conceptual and methodology frameworks can be applied to assess levels of exclusion at sub-national levels and over different periods of time. Data can be used at different tiers of government to estimate exclusion across sub-regions. The approach can also be used with longitudinal data sets to identify the drivers of exclusion across time for each sub-region. These outcomes will provide powerful information on the type of policies that have contributed to reduce or increase exclusion over time and across sub-regions.

Exclusion between subgroups of population

Similarly, the Index can be applied across gender and urban and rural settings. Maintaining the same decomposition in six dimensions, this method allows for a cross-sectional analysis of exclusion between groups, helping identify the driving factors of exclusion for each subgroup of population, as illustrated in the report.

Annex II: Review of social development and exclusion indices

For a very long time, per capita GDP was used as the sole indicator of economic growth in most countries and regions in the world. In 1990, UNDP made a major breakthrough in the measurement of human development with the publication of its first Human Development Report (UNDP, 1990). The Human Development Index was then introduced on the assumption that economic growth, using traditional income-based measures such as GDP per capita is not sufficient to reflect progress in human and social development. The index comprises three main dimensions of well-being, namely, life expectancy at birth, educational attainment and real GDP per capita. UNDP has since refined some of these components and developed supplementary measures, such as the Gender-related Development Index and the Gender Empowerment Measure, which reflect the degree of gender equality and women's empowerment in development across countries.[20]

While the HDI has had much resonance in the development discourse over the years, some people believe that the HDI indicators are still too broad and that they fail to capture critical aspects of development, such as inequalities, vulnerability or environmental issues. Others have questioned the implications of arithmetically folding the three component indicators of the HDI into a single index, a method that presumably masks the trade-offs between the various components of the same index (Desai, 1991; McGillivray, 1991; Sen., 1993). However, the HDI's simplicity has been vital in positioning it as arguably the most popular development index globally.

At the Millennium Summit in 2000, global leaders made another breakthrough with the adoption of the Millennium Development Goals (MDGs) as a major global framework to help countries monitor and accelerate progress towards economic and social outcomes by the year 2015. Each of the eight internationally agreed goals includes a list of quantifiable and time-bound targets and indicators for monitoring progress in the areas of poverty (Goal 1), universal primary education (Goal 2), gender equality (Goal 3), child and maternal mortality, health and major diseases (Goals 4, 5 and 6), environmental sustainability (Goal 7) and global partnership for development (Goal 8). Since their adoption, the MDGs have probably become the most important framework for development cooperation worldwide, catalyzing efforts among all regions and countries and setting up the path for the development agenda beyond 2015.

A number of institutions and countries have developed and used a range of other tools and indicators to track specific social development outcomes:

- **The Economist Intelligence Unit (EIU, 2005)** developed a "quality of life" index in 2005, based on a methodology that links the results of subjective life-satisfaction surveys to the objective determinants of the quality of life across 111 countries. The model comprises nine factors: health, material well-being, political stability and security, family relations, community life, climate change, job security, political freedom and gender equality - the first three being the most important according to their weights (EIU, 2005).

- **The ILO decent work indicators (ILO, 2012a)** are based on 10 substantive elements of decent work, including equal opportunities at work, adequate earning, productive work, social security and

social dialogue. Elements of social inclusion exist, but refer to the legal framework underpinning employment conditions and opportunities.

- **The OECD social indicators (OECD, 2011)** have been recently developed to assess social progress among OECD countries in four broad policy areas, including self-sufficiency, equity, health status and social cohesion. The latter is particularly important in terms of exclusion, as it measures the extent to which people participate in their communities or trust others. Equity includes the ability to access social services and economic opportunities, while self-sufficiency comprises indicators such as employment and student performance.

- **The European Union indicators** of social inclusion are a series of measures, clustered in five key dimensions, which measure poverty, inequality, employment, education and health outcomes among EU countries.

- **The Multidimensional Poverty Index[21]** (MPI, 2011) was developed by the Oxford Poverty and Human Development Initiative and UNDP. It is a composite index based on a combination of income and non-income based measures, following an approach pioneered by Townsend (1979) and later by Sen. (1985). It has been so far applied to 91 countries globally, and is considered as the main metrics in the application and monitoring of the new sustainable development goals and post-2015 development agenda.[22]

Two additional indices are particularly important, as they have been developed specifically for Africa:

- **The Ibrahim Index of African Governance** measures African national governance against 88 criteria, divided into four overarching categories: (a) Safety and rule of law; (b) Participation and human rights; (c) Sustainable economic opportunity; and (d) Human development. The index aims to capture the quality of services provided to citizens by African governments.
- **The African Gender Development Index** was developed by ECA as a multidimensional and region-specific tool to assess the status and progress towards gender equality and women's empowerment in Africa (ECA, 2012). The second phase of the Index– which was first piloted in 12 countries in 2009 – was carried out in 14 countries in 2012. The Index is based on a quantitative assessment of gender gaps in the social, economic and political spheres of life – through the Gender Status Index. The second component of the African Gender Development Index is the African Women's Progress Scoreboard, which provides a qualitative evaluation of governments' efforts to implement global and regional commitments affecting women and their rights.

Despite the wide array of development indicators available, the approach used in the Index is novel, insofar as it seeks to capture the impacts of exclusion throughout the life cycle, assessing the effects of being excluded from early childhood to old age in key dimensions of development. Its computation across time and for different subgroups, both at the national and sub-national levels, makes it possible to capture inequalities within and between countries and groups of population.

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