The Millennium Development Goals Report



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Regional Backgrounder

Sub-Saharan Africa

Sub-Saharan Africa has made impressive progress in many of the MDGs. However, the region faces daunting challenges, with rapid growth of population, high levels of poverty and conflicts.

Poverty and Hunger

Sub-Saharan Africa's poverty rate did not fall below its 1990 level until after 2002. Even though the decline of poverty has accelerated in the past decade, the region continues to lag behind. To date, more than 40 per cent of the population in sub-Saharan Africa still lives in extreme poverty. The poverty rate in sub-Saharan Africa has fallen only by 28 per cent since 1990, from 57 per cent to 41 per cent of population living on less than \$1.25 a day between 1990 and 2015.

Sub-Saharan Africa has shown limited progress in hunger reduction in recent years, remaining the region with the highest prevalence of undernourishment. In sub-Saharan Africa, projections for the 2014–2016 period indicate a rate of undernourishment of almost 23 per cent. The proportion of undernourished people in the total population has decreased from 33 per cent in 1990–1992 to 23 per cent in 2014–2016. While the hunger rate has fallen, the number of undernourished people has increased by 44 million since 1990, reflecting the region's high population growth rate.

The situation varies widely across the subregions. Northern, Southern and Western Africa have already met or are close to meeting the target. But in Central Africa progress has been hampered by rapid population growth and environmental fragility, as well as economic and political upheaval. The number of undernourished people in the subregion has doubled since 1990.

The proportion of underweight children under age five was reduced from 29 to 20 per cent from 1990 to 2015, a fall of only one-third. However, due to the region's growing population, the number of underweight children has actually risen. The number of stunted children has fallen in all regions except sub-Saharan Africa, where the numbers increased by about one-third between 1990 and 2013.

EDUCATION

Sub-Saharan Africa scored the best record of improvement in primary education of any region since the MDGs were established. The region achieved a 20 percentage-point increase in the net enrolment rate from 2000 to 2015, compared to a gain of 8 percentage points between 1990 and 2000. Its enrolment rate grew from 52 per cent in 1990 to 80 per cent in 2015. In absolute numbers the region's enrolment more than doubled between 1990 and 2012, from 62 million children to 149 million.

Over the past two decades sub-Saharan Africa has also achieved a large increase in youth literacy. However, the region faces daunting challenges, including rapid growth of the primary-school-age population (which has increased 86 per cent between 1990 and 2015), high levels of poverty, armed conflicts and other emergencies.

Of 57 million of global out-of-school children of primary school age in 2015, 33 million are in sub-Saharan Africa, and more than half (55 per cent) are girls. An estimated 50 per cent of out-of-school children will never go to school.

Girls continue to face high barriers to schooling in the region. In sub-Saharan Africa, the net primary enrolment rate for girls has risen substantially—from 48 per cent to 77 per cent between 1991 and 2015. Over the same period, the rate for boys rose from 59 per cent to 82 per cent. As a result, more girls are now in primary school—93 girls are enrolled in primary school for every 100 boys. Girls' school enrolment at the secondary and tertiary education levels however is the lowest among all regions. At tertiary level, the gender gap has actually widened between 2000 and 2015. Enrolment ratios of young women are significantly lower than those of young men in sub-Saharan Africa.



Gender Equality

Women's access to paid employment in the non-agricultural sector has been increasing slowly over the past two decades. The most impressive progress has been registered in sub-Saharan Africa, an increase of 10 percentage points over the period 1990–2015, from 24 per cent to 34 per cent.

Women in the region are gaining more power in politics. The proportion of seats held by women in single or lower houses of national parliament increased from 13 per cent in 2000 to 23 per cent in 2015. In 1995, Europe dominated the top 10 spots in world rankings of women in parliament. As of January 2015, 4 of the top 10 countries are in sub-Saharan Africa. The biggest gains in women's representation during the last 20 years have been made in Rwanda, with an increase of 60 percentage points.

CHILD MORTALITY

Although sub-Saharan Africa has the world's highest child mortality rate, the absolute decline in child mortality has been the largest over the past two decades. The under-five mortality rate has fallen from 179 deaths per 1,000 live births in 1990 to 86 in 2015.

Yet the region still faces an urgent need to accelerate progress. Not only does sub-Saharan Africa carry about half of the burden of the world's under-five deaths—3 million in 2015—but it is also the only region where both the number of live births and the under-five population are expected to rise substantially over the next decades. This means that the number of underfive deaths will increase unless progress in reducing the under-five mortality rate is enough to outpace population growth.

Nonetheless, there are signs that rapid progress is possible. Sub-Saharan Africa, despite its relatively high rate of under-five mortality, was able to step up the rate of decline from 0.8 per cent per year to 4.2 per cent per year—over five times faster during 2005–2013, than during 1990–1995.

Despite steep challenges, there have been notable reductions in the under-five mortality rate since 1990 and particularly since 2000 in some low-income countries in the region such as Eritrea, Ethiopia, Guinea, Liberia, Madagascar, Malawi, Mozambique, Niger, Rwanda, Uganda and the United Republic of Tanzania. Low income need not be an impediment to saving children's lives.

MATERNAL MORTALITY

The maternal mortality ratio declined by 49 per cent in sub-Saharan Africa over the past two decades, from 990 maternal deaths per 100,000 live births in 1990 to 510 in 2013. However, it remained the highest among all regions. Sub-Saharan Africa, with the second lowest rates of deliveries attended by skilled professional, have increased attendance by 7 percentage points since 2000. However, only 52 per cent of deliveries are attended by a skilled health personnel, and only 49 per cent of pregnant women reported at least four antenatal care visits in 2014.

In sub-Saharan Africa, the proportion of women between the ages of 15 and 49, married or in union, who were using any method of contraception, more than doubled between 1990 and 2015 from 13 per cent to 28 per cent. The unmet need for family planning was among the highest of all developing regions, and the total demand for family planning was lower than in any other region. In 2015, 24 per cent of women between the ages of 15 and 49, married or in union and residing in this region, reported the desire to delay or avoid pregnancy but had not used any form of contraception. Large differences in contraceptive use between urban and rural residents, rich and poor households, and the educated and uneducated have persisted in sub-Saharan Africa.

Child Marriage

Child marriage (before age 18) is still common in sub-Saharan Africa and is closely associated with adolescent childbearing. The highest birth rate among adolescent girls aged 15–19 is in the region (116 births per 1,000 girls in 2015), which has made the least progress since 1990, both in relative terms and absolute numbers.

Health

The incidence of HIV is declining steadily in the region, with the estimated number of new infections per 100 people aged 15–49, dropping from 0.68 in 2001 to 0.29 in 2013, a decline of more than 50 per cent. Sub-Saharan Africa remains the region most severely affected by the HIV epidemic, with 1.5 million new infections in 2013. Of these, almost half occurred



in only three countries: Nigeria, South Africa and Uganda. However, it is encouraging that South Africa, the country with the largest number of people living with HIV, recorded the largest decline in the absolute number of new infections, with 98,000 fewer new infections in 2013 than in 2010. Since 1995, antiretroviral therapy has averted 7.6 million deaths globally, including 4.8 million deaths in sub-Saharan Africa.

A basic understanding of HIV and how it spreads remains low in sub-Saharan Africa. It is the region most affected by the HIV epidemic, but only 37 per cent of young men and 30 per cent of young women aged 15–24 had comprehensive correct knowledge of HIV. In the same region, condom use among young men and young women who had higher-risk sex reached 59 per cent and 40 per cent, respectively. These rates were far below the 95 per cent target agreed at the United Nations General Assembly Special Session on HIV/AIDS in 2001.

Between 2000 and 2015, increased worldwide attention and substantial expansion of efforts to combat malaria have helped avert over 6.2 million malaria deaths during this period, primarily in children under five years of age in sub-Saharan Africa. The estimated 69 per cent reduction in malaria mortality in the under-five age group in this region also helped improve child survival rates, directly contributing to the reduction of child mortality. The disease is still endemic in 97 countries and territories around the world—3.3 billion people are at risk of infection—and it accounts for a large proportion of health spending in low-income countries. Eighty per cent of global malaria deaths occur in just 17 countries, mostly in Africa.

Between 2004 and 2014, more than 900 million insecticide-treated nets were delivered to endemic countries in sub-Saharan Africa, significantly increasing household use of mosquito nets. Indoor residual spraying programmes were also expanded significantly across the region, but progress slowed between 2011 and 2013 due to funding constraints.

Access to prompt diagnosis has increased appreciably since 2000, contributing to more rational use of antimalarial medicines. Nonetheless, only approximately 20 per cent of children with fever in sub-Saharan Africa receive a malaria diagnostic test, according to household surveys from 2012 to 2014.

Sub-Saharan Africa is on its way to halting the spread and reversing the incidence of tuberculosis. The estimated number of new tuberculosis cases rose from 278 per 100,000 people in 1990 to 346 in 2002, but thereafter declined steadily to reach 282 in 2013.

Environmental Sustainability

In sub-Saharan Africa, where the initial coverage had been low, the proportion of the population with access to an improved drinking water source increased by 20 percentage points between 1990 and 2015, despite significant population growth. Water is not easily accessible to many households in sub-Saharan Africa. Many people, usually women or young girls, often need to join long queues or walk long distances to get to an improved water source.

More efforts are needed to improve the access to sanitation and the life of slum dwellers. Sub-Saharan Africa is one of the regions that remains furthest behind in terms of improved sanitation facilities. Between 1990 and 2015, the proportion of the population using an improved sanitation facility increased only from 24 per cent to 30 per cent. Sub-Saharan Africa continues to have the highest prevalence of slum conditions of all regions, estimated at 55 per cent in 2014. However, this represents a decline of almost 10 percentage points since 2000.

Sub-Saharan Africa, where less than 21 per cent of the population are using the Internet, remains one of the regions with the lowest penetration rate. More efforts must be made to make broadband available, affordable and truly high-speed for all.

