



Sub-Saharan Africa's progress towards anti-poverty goals is encouraging but needs to be accelerated to meet 2015 targets

*Development indicators remain below acceptable standards,
UN report shows*

JOHANNESBURG, 12 September 2008 – The proportion of the population in sub-Saharan Africa living below the World Bank's new international poverty line of \$1.25 a day decreased from 55.7 per cent in 1990 to 50.3 per cent in 2005 – showing some progress, but far from the pace needed to reach the over-arching Millennium Development Goal of halving the rate of poverty by 2015, according to a just-released UN report.

Because of population growth, the number of people in the region living in extreme poverty actually grew by 100 million over this period. One person in two lives in extreme poverty in sub-Saharan Africa; in Southern Asia, the region with the second highest poverty rate, the proportion is less than 40 per cent.

The Millennium Development Goals Report 2008 provides statistical evidence of the progress that sub-Saharan Africa has made in addressing the multiple dimensions and causes of this extensive poverty.

As a sign of potentially better prospects in the future, the region's total net enrolment ratio in primary education increased from 54 to 58 per cent between 1991 and 2000, and then accelerated to 71 per cent in 2006. Girls account for an increasing share of this total, with the gender parity index rising from 83 per cent in 1991 to 85 per cent in 2000 and 89 per cent in 2006. Despite these improvements, the region will have to intensify its efforts if it is to achieve the Goal of universal primary education by 2015 and the target of primary school gender equality, originally set for 2005. At the secondary level, there has been a slight deterioration in the gender parity ratio, with the number of girls enrolled falling from 82 per cent of the number of boys in 2000 to 80 per cent in 2006.

Improvements on AIDS and malaria, but not TB

The UN report also points to accelerated, but narrow and insufficient improvements on the health front. Most notably, primarily thanks to the increasing availability of anti-retroviral drugs, the number of deaths from AIDS has halted its seemingly inexorable increase. The corollary is that, because infected people now survive longer, the number of those living with the disease continues to increase. Among these, the majority are women, who now account for almost 60 per cent of those with the disease in the region.

The proportion of people living with HIV who need treatment and are receiving antiretroviral therapy rose from 21 to 30 per cent between 2006 and 2007, mostly thanks to the substantial amount of public and private external funding provided for this purpose. Here again, despite the progress, there remain some 5 million people in the region who do not have access to the therapy they require.

Malaria prevention is following a similar course. There has been a dramatic rise in the production of insecticide-treated mosquito nets – from a global total of 30 million in 2004 to 95 million in 2007 – but surveys suggest that far less than half of all children in the region sleep under such nets. Survey data also suggest that the proportion of children with a fever who received anti-malarial medication fell between 2000 and 2005.

In contrast with the downward trend in most other regions, the number of new tuberculosis cases per 100,000 people almost doubled between 1990 and 2004 and has declined only marginally since then. As a result, the number of TB cases has continued to rise, whereas it has declined in most other regions.

Progress in improving sanitation facilities and providing access to drinking water has been slow. Only 31 per cent of the region's population had access to improved sanitation facilities in 2006 – a modest improvement over the 26 per cent and 29 per cent that applied in 1990 and 2000 respectively. Progress has been better in the case of access to safe drinking water, with the proportion of the population using an improved source rising from 49 per cent in 1990 to 58 per cent in 2006.

Death rates for children and mothers still high

The lack of such services is among the factors that contribute to the high number of deaths of children under five years of age in the region. From 184 deaths per 1000 births in 1990, infant mortality fell to 157 in 2007, but this remains almost twice the figure for Southern Asia, the region with the second highest rate. The higher proportion of children being vaccinated against measles – up from 58 per cent in 2000 to 72 per cent in 2006 – should contribute to a further reduction in child mortality in future.

There was almost no improvement in the region's very high rate of maternal mortality between 1990 and 2005. A woman in sub-Saharan Africa has a 0.9 per cent chance of dying as a result of pregnancy or childbirth, again roughly more than twice the rate of the second-highest region, Southern Asia. A major reason is that, in 2006, less than half of all mothers-to-be were attended to by skilled health care personnel when giving birth. The intolerably high maternal mortality rate highlights the need for expanded and improved basic health services throughout the region, particularly in the rural areas.

The extent to which women are able to contribute to and benefit from development in the region has been increasing. Women accounted for 31 per cent of non-agricultural wage employment in 2006, compared to 25 per cent in 1990. But women are confined to the more unstable and insecure jobs: more than 80 per cent of women who work are self-employed or unpaid family workers. In terms of political participation, female representation in parliaments has more than doubled since 1990 and, at 17.3 per cent, is higher than the overall average in the developing world.

The Millennium Development Goals Report, an annual assessment of regional progress towards the Goals, reflects the most comprehensive, up-to-date data compiled by over 25 organizations both within and outside the UN System. Supervised and coordinated by the UN Department of Economic and Social Affairs, the Report is produced at the request of the General Assembly. A complete set of the data used to prepare the report is available at <http://mdgs.un.org>.

For more information and media contacts, please see www.un.org/millenniumgoals.