FROM THE MILLENNIUM DEVELOPMENT GOALS TO SUSTAINABLE DEVELOPMENT GOALS: Path and additional efforts of West African countries towards achieving the objectives set for 2030

February 2016
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THE ACRONYMS AND ABBREVIATIONS

ODA Official Development Assistance
ADB African Development Bank
SRO-WA Sub-regional Office for West Africa
DAC Development Assistance Committee
ECA United Nations Economic Commission for Africa
AUC Commission of the African Union
MDRI Multilateral Debt Relief Initiative
IMF International Monetary Fund
OECD Organization for Economic Co-operation and Development
SDG Sustainable Development Goal
ILO International Labor Organization
WTO World Trade Organization
MDG Millennium Goal Development
UNO United Nations Organization
UNDP United Nations Development Program
PMTCT Prevention of HIV Transmission from Mother to Child
GNI Gross National Income
ODS Ozone depleting substance
MMR Maternal Mortality Ratio
USMR Under Five Mortality Rate
WAEMU West African Economic and Monetary Union
UNDESA Department of Economic and Social Affairs of the United Nations
UNSD United Nations Statistics Division
USD United States Dollar
NSI National Statistics Institute
ILO International Labor Organization
TFP Technical and Financial Partner
HILF High Intensity Labor Force
PIDA Program for Infrastructure Development in Africa
AICD Africa Infrastructure Country Diagnostic
PPP Public Private Partnership
1. INTRODUCTION

The year 2015 marks the end of the implementation of the Millennium Development Goals (MDGs), which, in September 2000, mobilized the world around a common program to overcome poverty by 2015. The eight Millennium development goals (MDGs) shared by all countries around the world and by all major global development institutions had an overall objective of meeting the needs of the poorest in the world. The overall aim of these globally agreed on, ambitious and measurable objectives was, among other development requirements, to eradicate extreme poverty and hunger, prevent deadly but curable diseases and improve the educational prospects of all children.

In the world at large and in Africa in particular, the direction taken and the rigor in implementing, the monitoring and evaluation of development policies and programs advocated by the MDGs have enabled considerable progress to be made, despite initial challenging conditions. Indeed, Africa has been able to achieve enrolment increase in primary schools, improved gender parity in primary education, stronger women's representation in national parliaments, reduction in child and maternal mortality and decrease in HIV/AIDS prevalence (ECA et al, 2015).

Like other sub-regions, West Africa takes part in the momentum created by the continent. Although many countries are still far from reaching most of the targets in 2015, considerable progress has been recorded, especially in enrolment and gender parity in elementary school, reduction in child and maternal mortality, fight against HIV/AIDS and access to drinking water. Although poverty reduction remains the overriding challenge of the entire sub-region, the results achieved over the last fifteen years highlight the importance and role of national commitment as a catalyst in achieving development goals, with the support of Global Partnership.

Determined to complete the development progress driven by the MDGs and ensure that no one is left behind, the world leaders gathered at the UN Headquarters in New York in September 2015 to adopt a new program on sustainable development. This new 2030 Development Agenda includes 17 new Sustainable Development Goals (SDGs), which will guide the development policy and financing for the next 15 years. This historic agreement is the culmination of collaborative efforts from governments, civil society and other partners in order to build on the momentum generated by the MDGs and set out an ambitious post 2015 development program. Unlike MDGs, SDGs apply to all countries with a view to promoting peaceful and open societies, creating better jobs and addressing today's environmental challenges, including climate change (ECA et al, 2015).

Thus, this report entitled "From Millennium Development Goals to Sustainable Development Goals" describing the steps forward in the sub-region towards achieving the MDGs and the transition to SDGs, has been drawn up in the context of the 19th Intergovernmental Committee of Experts (ICE) for West Africa, organized by ECA’s Sub-regional Office for West Africa. Its purpose is to inform Member States on the overall progress made by the sub-region since 2000 in terms of MDGs, draw the lessons and discuss the required strategic and operational directions for completion in the next 15 years, of the efforts made in the context of the MDGs. It will also be used as an advocacy tool for effective ownership and mobilization of Member States for successful implementation of the SDGs in 2030. The Report will then more specifically:
- Have an updated status on the total progress of the sub-regional countries in terms of achieving the MDGs over the period of 2000-2015, also identify unfinished MDGs and areas for improvement to guide the implementation of the SDGs;
- Inform and sensitize Member States and other stakeholders on the scope and challenges of SDGs to ensure greater ownership;
- Share the lessons and best practices learnt from the implementation of the MDGs in order to lay the foundations for a successful implementation of the SDGs;
- Discuss the strategic and operational directions to be undertaken by Member States and other development actors over the next 15 years.

The report was prepared by the ECA’s Sub-regional Office for West Africa, based on data from the UN database on MDGs monitoring, the Global\(^1\) and Continental\(^2\) monitoring Report on MDGs progress, as well as the country reports published in 2015. Some international databases (African development Bank, World Bank, OECD, etc.) were also used to fill the gaps in recent data from national sources. The preference for international sources is mainly due to the fact that they collect and provide comparable data on MDGs indicators. Irregular surveys and censuses, as well as different definitions and methods used to produce the indicators may explain the discrepancy between the base year and the various years for which statistics are available.

The rest of the report is divided into three main parts. After assessing the progress made by the countries in sub-region and the lessons learnt from the MDGs implementation, the third part presents the overall approach to defining MDGs and the related obligations by trying to demonstrate the complementary nature of SDG as compared to MDGs. The last part deals with the conclusion and proposed recommendations that would help step up the SDGs implementation.

2. **ASSESSMENT OF THE PROGRESS ACHIEVED IN WEST AFRICA AND LESSONS LEARNT FROM THE IMPLEMENTATION OF THE MILLENNIUM DEVELOPMENT GOALS**

2.1. **Overall progress of West Africa towards achieving the MDGs**

The implementation of MDGs helped over a billion people emerge from extreme poverty, helped achieve remarkable progress in the fight against hunger, made it possible for an ever larger number of girls to go to school and contributed in protecting our planet. The mobilization of all national and international development actors around the MDGs has led to new and innovative partnerships, galvanized public opinion and emphasized the extreme importance of setting up ambitious goals. By bringing people and their immediate needs to the forefront, the MDGs have reshaped decisions in both developed and developing countries (United Nations, 2015).

West Africa has made remarkable progress in implementing the Global Millennium Development agenda, notwithstanding the initial challenging conditions in all countries. Despite the weak National Statistical Systems in sub-region, analysis of available data shows that West Africa has made significant progress on key socio-economic indicators related to MDGs. Thus, it has been noted, inter alia, a primary school enrolment increase, a gender parity in primary school enrollment, a reduction in child mortality, a reduction in HIV/AIDS prevalence and an improved access to drinking water.

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\(^1\) 2015 Report of the UN Secretary-General prepared by the Department of Economic and Social Affairs.
\(^2\) 2015 Monitoring Report on MDGs’ Progress in Africa prepared by ECA, UNDP, AU and ADB.
Table 1 gives an overview of MDGs status in West Africa and shows that progress towards achieving the MDGs has been uneven among the countries and the targets. The goal of extreme poverty reduction will not be achieved by most countries. Two countries have achieved it; five countries have made significant progress although they have not reached the target. West Africa has made remarkable progress in eradicating hunger. Two countries have met the goal before the deadline; seven countries have made impressive progress.

Concerning universal primary education, the goals are being achieved for six countries. Insufficient progress has been made in the field of gender equality and women’s empowerment. Although significant progress has been made towards achieving gender parity in primary education with seven countries having made remarkable progress and two countries having achieved the goals, progress is insufficient on other indicators of gender equality. On child mortality reduction, three countries have reached the goal. Two countries were not far from it, but for the majority (nine countries), the goal still lies ahead. West Africa has made insufficient progress in the area of maternal health. Nine countries are lagging behind, one country has achieved the goal and seven countries have made significant progress. Overall, the sub-region has made good progress in combating HIV/AIDS, malaria and other diseases, but one third of the countries are far from the target.
### TABLE 1: Overview on the achievement of MDGs in West Africa, 2015

<table>
<thead>
<tr>
<th>Goals</th>
<th>Status</th>
<th>Targets and indicators</th>
<th>Countries with the best results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goal 1: Eradicate extreme poverty and hunger</td>
<td>Not achieved</td>
<td>Target 1A, Halve, between 1990 and 2015, the proportion of people living with less than one dollar a day</td>
<td>Guinea, Senegal, Ghana, Niger, Burkina Faso, Cape Verde, Mali</td>
</tr>
<tr>
<td></td>
<td>Not achieved</td>
<td>Target 1C, Halve, between 1990 and 2015, the proportion of people who suffer from hunger</td>
<td>Ghana, Mali</td>
</tr>
<tr>
<td>Goal 2: Achieve universal primary education</td>
<td>Not achieved</td>
<td>Target 2A.2, Proportion of pupils starting grade 1 and reaching grade 5</td>
<td>Cape Verde, Benin, Togo, Ghana, Senegal, Côte d’Ivoire</td>
</tr>
<tr>
<td>Goal 3: Promote gender equality and empower women</td>
<td>Not achieved</td>
<td>Target 3A.1, Ratio of girls to boys in primary, secondary and higher education</td>
<td>Cape Verde, Zambia, Ghana, Senegal, Sierra Leone, Burkina Faso</td>
</tr>
<tr>
<td>Goal 4: Reduce child mortality</td>
<td>Not achieved</td>
<td>Target 4A.1, Reduce by two thirds, between 1990 and 2015, the under-five mortality rate.</td>
<td>Niger, Cape Verde, Senegal, Burkina Faso, Mali, Benin, Guinea</td>
</tr>
<tr>
<td>Goal 5: Improve maternal health</td>
<td>Not achieved</td>
<td>Target 5B, Achieve by 2015, universal access to reproductive health.</td>
<td>Cape Verde, Ghana, Burkina Faso, Sierra Leone, Mali, Senegal</td>
</tr>
<tr>
<td>Goal 6: Combat HIV/AIDS, malaria and other diseases</td>
<td>Not achieved</td>
<td>Target 6A, Have halted by 2015 and begun to reverse the spread of HIV/AIDS</td>
<td>Cape Verde, Liberia, Niger, Burkina Faso, Mali, Guinea</td>
</tr>
<tr>
<td>Goal 7: Ensure environmental sustainability</td>
<td>Not achieved</td>
<td>Target 7A.1, Proportion of land covered by forests</td>
<td>Cape Verde, Côte d’Ivoire, Gambia</td>
</tr>
<tr>
<td></td>
<td>Not achieved</td>
<td>Target 7A.2, CO2 emissions, total, per capita and per $1 GDP (PPP).</td>
<td>Côte d’Ivoire, Guinea, Guinea-Bissau, Liberia, Mali, Niger</td>
</tr>
<tr>
<td></td>
<td>Not achieved</td>
<td>Target 7C.1, Proportion of population using an improved drinking water source</td>
<td>Burkina Faso, Zambia, Ghana, Guinea-Bissau and Mali</td>
</tr>
<tr>
<td></td>
<td>Not achieved</td>
<td>Target 7C.2, Proportion of population using improved sanitation facility</td>
<td>No country</td>
</tr>
<tr>
<td>Goal 8: Develop a global partnership for development</td>
<td>Target 8F.16</td>
<td>In cooperation with the private sector, make sure the beneficial effects of new technologies, especially information and communications technologies, are granted to all: Number of Internet users per 100 inhabitants</td>
<td>No country</td>
</tr>
</tbody>
</table>

**Source:** ECA, AUC, ADB and UNDP, UNDESA 2015. 2015 MDG Report
MDG 1: Eradicate extreme poverty and hunger

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

According to the 2015 report by the Secretary General of the United Nations, the world poverty has considerably decreased over the past two decades. The MDGs target of reducing by half the proportion of people living in extreme poverty has been achieved five years before the 2015 deadline. The proportion of people living on less than 1.25 dollar/day decreased from 36% in 1990 to 12% in 2015, with China and India being the main contributors to this reduction. The reduction in poverty rates across the world is mainly due to strong economic growth, decent jobs, increased production capacity and the provision of social protection to the most vulnerable groups (UN, 2015). The reduction of extreme poverty remains a major challenge in Africa, despite the good macroeconomic performance recorded since 2001. While the decline in poverty has accelerated over the past decade, progress yet remains unsatisfactory in Africa (excluding North Africa), as more than 40% of the population still lives in extreme poverty in 2015 (UNECA et al, 2015).

In West Africa generally, efforts have been made with regard to progress in most countries in order to push back the boundaries of extreme poverty, even though most could not reach the target in 2015. According to the most recent data available from UNDESA, 60% of the countries in the sub-region still have over 40% of people living in extreme poverty and only 13% of these countries (2 out of 15) were able to reach the target of halving the proportion of people living in extreme poverty between 1990 and 2015. It should also be noted that, despite the overall underperformance recorded, 46% (7 out of 15) of the countries have experienced strong progress in reducing the extreme poverty rate, while 20% (4 out of 15) have recorded an increased number of people living in extreme poverty over that period. Indeed, Guinea and Senegal have already reached the target, reducing by more than half the proportion of people living in extreme poverty, while Ghana, Niger, Mali, Burkina Faso and the Cape Verde are close to the target, between 10% and 15% below the target. However extreme poverty has worsened in Cote d’Ivoire, Guinea Bissau, Benin and Nigeria.

Persistent poverty jeopardizes the achievement of the target aiming to ensure full and productive employment and decent work for all, including women and the youth. Indeed, poverty resulted in a deterioration of the labor market that remains largely dominated by informal employment in West Africa. According to figures from the International Labor Organization in 2014, changes in the number of workers in the formal employment sector in West Africa do not follow the rapid growth of the labor force. With a population growth rate estimated at 2.5% per year, unemployment affects young people of both sexes and is more pronounced in urban areas.
FIGURE 1: Progress in the proportion of population living on less than $1.25 a day, in terms of purchasing power parity (PPP) in West Africa (in%)

Source: ECA’s calculation based on data from the UNDESA database on MDGs monitoring, 2016

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

Poor nutrition in the first 1,000 days of a child’s life is also associated with reduced cognitive abilities and decreased performance in school and at work. According to the 2015 United Nations report on MDGs monitoring, over 90 million children under five, that is one out of seven children worldwide are underweight, and 90% of all children suffering from underweight live in two regions: one half in South Asia and one third in Africa (excluding North Africa). In Africa, the rate of underweight decreased by only one-third between 1990 and 2015. However, because of the population increase in the region, the number of children underweight actually increased.

The performance towards achieving the target of hunger reduction considerably varies from one country to another in West Africa. The target was almost reached by countries such as Ghana (−48.0%) and Mali (−49.8%), but the reduction levels were marginal in Togo (−1.2%), Niger (−7.5%) and about 11.7% in Guinea and Nigeria. Elsewhere in Côte d’Ivoire, Sierra Leone, Benin, Senegal, Burkina Faso and Guinea Bissau the performance are more or less satisfactory, reduction levels ranging between 28.7% and 17.3%.
FIGURE 2: Proportion of children under five who are moderately or severely underweight in West Africa, between 1990 and 2013 (in%)

Source: ECA’s calculation based on data from the UNDESA database on MDGs monitoring, 2016

MDG 2: Achieve universal primary education

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

While the number of out-of-school children worldwide has dropped since 1990, universal primary education coverage has not yet been achieved at the end of 2015. In 2015, an estimated 57 million of primary-school-age children do not attend school; these figures are however low as compared to 100 million in 2000. Out of them, 33 million children live in Africa, excluding North Africa, and over half (55%) of these children are girls (United Nations, 2015). Africa (excluding North Africa) faces huge challenges, namely the rapid growth of the primary-school-age population (which increased by 86% between 1990 and 2015), high levels of poverty, armed conflict and other emergencies. However, the continent made greatest progress in terms of school enrolment in primary education among all developing regions. Its enrollment rate rose from 52% in 1990 to 78% in 2012 (UNECA et al, 2015).

In West Africa, significant progress has been made in terms of net primary school enrolment. Between 1990 and 2013, the sub-region posted an increase of about 51% of its net enrollment rate, while the increase in this area was estimated at 26% in Africa (excluding North Africa). Everything leads us to believe that the countries of the sub-region are undeniably moving towards universal primary education, for in 2013, 9 countries out of the 14 for which data were available had achieved net primary school enrolment rate of about 70%, four of them (Cape Verde, Benin, Togo and Ghana) posted over 80% net enrollment. Concerning the pace of progress, four African countries (Burkina Faso, Guinea, Benin and Niger) posted an impressive increase in their net primary school enrolment rate, with over 40 percentage points increase. The significant progress made in the sub-region is partly attributable to the sustained commitment of governments to invest in school infrastructure and
increase the number of qualified teachers. Furthermore, this significant progress has been made possible through improving the formulation of educational policies promoting participatory approaches, improving service delivery and strengthening governance (ECA et al, 2015).

It should however be stressed that key challenges must be tackled about the quality of education in the sub-region. Indeed, primary school completion rates in the sub-region are among the lowest in the world (ECA, 2015). While Ghana and Cape Verde have reached their target since 2012 in terms of primary school completion rates with at least 70%, with a faster progression of Ghana (38.6 percentage points between 2000 and 2013), Niger recorded a rate under 50%, and others (Benin, Burkina Faso, Côte d’Ivoire, Mali and Niger) registered sharp declines. The main causes for this low performance may be conflicts, political instability or the impact of the increase in enrolment rate on the quality of short-term education (CEA et al, 2015).

FIGURE 3: Deviation from the target of 100% for the net primary school enrolment rate in 2013 in West Africa (in %)

Source: ECA’s calculation based on data from the UNDESA database on MDGs monitoring, 2016


MDG 3: Promote gender equality and empower women

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

Educating women and girls has a positive multiplier effect on progress in all areas of development. The impact of both national and international efforts combined with the MDGs campaign is: more girls attending school now than it was the case 15 years ago. The gender gap has closed considerably at all levels of education since 2000. In 2015, all developing regions have eliminated gender disparity at all levels of education, with a gender parity index of 0.98 in primary and secondary education and 1.01 in higher education (United Nations, 2015). Again according to the 2015 report of the UN Secretary-General, despite the progress made by women in the field of education, they face a more difficult
transition towards paid employment and receive lower wages than men. In addition, women are also more likely than men to be family workers.

Despite substantial progress made by the West African countries between 2000 and 2014 on gender parity in primary school, the poorest girls are the ones most likely to never attend primary school. As an illustration, in Guinea and Niger, over 70% of the poorest girls had never been enrolled in primary school in 2012, against less than 20% of the wealthiest boys (UNESCO, 2015).

According to UNESCO (2012), gender parity is achieved when the Gender Parity Index (GPI) stands between 0.97 and 1.03. Based on this standard and taking into account the progress trends since 2000, most countries in the sub-region should achieve gender parity in primary education by 2015. In 2013, five countries (Burkina Faso, Gambia, Ghana, Senegal and Sierra Leone) have achieved gender parity in primary school. In 1990, the percentage of parity in five countries (Guinea, Benin, Gambia, Guinea Bissau and Burkina Faso) was under 60%, but it steadily rose up to over 85%. But such is not the case in secondary education, where we unfortunately noted a drop in parity while the gap widens in higher education.

In terms of gender equality and women's empowerment, women's representation in national parliaments in West Africa is a further challenge. They indeed accounted for about 16% in 2014 against only 9% in 1990, 27% in East Africa (and only 8% in 1990). The countries with the largest number of women elected to parliament in 2014 are Senegal (43.3%), Guinea (21.9%) and Cape Verde (20.8%). Benin and Gambia are among the countries with the lowest number of women elected to parliament, with respectively 8.4% and 9.4%.
FIGURE 4: Gender Parity Index in primary education in West Africa, 1990 and 2013

<table>
<thead>
<tr>
<th>Country</th>
<th>1990</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td>0.60</td>
<td>0.70</td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>0.65</td>
<td>0.75</td>
</tr>
<tr>
<td>Cabo Verde</td>
<td>0.65</td>
<td>0.75</td>
</tr>
<tr>
<td>Côte d’Ivoire</td>
<td>0.65</td>
<td>0.75</td>
</tr>
<tr>
<td>Gambia</td>
<td>0.60</td>
<td>0.70</td>
</tr>
<tr>
<td>Ghana</td>
<td>0.65</td>
<td>0.75</td>
</tr>
<tr>
<td>Guinée</td>
<td>0.65</td>
<td>0.75</td>
</tr>
<tr>
<td>Guinée-Bissau</td>
<td>0.65</td>
<td>0.75</td>
</tr>
<tr>
<td>Liberia</td>
<td>0.60</td>
<td>0.70</td>
</tr>
<tr>
<td>Mali</td>
<td>0.65</td>
<td>0.75</td>
</tr>
<tr>
<td>Niger</td>
<td>0.60</td>
<td>0.70</td>
</tr>
<tr>
<td>Nigeria+++</td>
<td>0.65</td>
<td>0.75</td>
</tr>
<tr>
<td>Senegal</td>
<td>0.65</td>
<td>0.75</td>
</tr>
<tr>
<td>Sierra Leone</td>
<td>0.65</td>
<td>0.75</td>
</tr>
<tr>
<td>Togo</td>
<td>0.65</td>
<td>0.75</td>
</tr>
</tbody>
</table>

**Source:** ECA’s calculation based on the data extracted from United Nation MDGs monitoring site, 2016

*Note the recent available data: +2014, ++2012 et +++2010*

**MDG 4: Reduce under-five mortality rate**

**Target 4A: Between 1990 and 2015, reduce under-five mortality rate by two thirds**

Substantial progress has been made in reducing child mortality over the past two decades, but more children who die of preventable diseases could be saved. According to the 2015 UN report on MDGs monitoring, the dramatic decline of preventable deaths of children is one of the greatest achievements in human history. Between 1990 and 2015, the mortality rate of children under five (U5MR) decreased by more than half as compared to 1990, falling from 90 to 43 deaths per 1,000 live births worldwide (United Nations, 2015).

Although Africa (excluding North Africa) has the highest child mortality rate in the world, the absolute decrease in child mortality has accelerated in the last two decades; the annual reduction rate has doubled from 1990 to 2000 and from 2000 to 2011. Indeed, the U5MR was reduced by 55.5%, from 146 to 65 deaths per 1,000 live births between 1990 and 2013 against the objective of two-thirds reduction. Surprisingly, most of these children died as a result of infectious diseases that could have been easily avoided. In addition to bearing half the burden of under-five deaths in the world, Africa (excluding North Africa) is the only region where the number of live births and under-five deaths are both expected to jump over the next decades (ECA et al, 2015).
In terms of progress achieved in West Africa over the 1990-2013 period for U5MR, Niger alone (68% reduction) has reached the target before 2015 and to a lesser extent, Senegal (reduction of 60.8%). However, Cape Verde remains the country that records the lowest U5MR in the sub-region, with only 26 deaths per 1,000 live births in 2013 against 63 deaths in 1990. Five countries out of the fifteen that make up the sub-region (Burkina Faso, Mali, Benin, Guinea and Cape Verde) have been, over the period, able to reduce under-five mortality rate between 50 and 59%. In terms of the rhythm of progression during the period under review, Niger, Guinea and Mali do stand out in the sub-region. However, countries like Côte d'Ivoire, Ghana, Nigeria, Guinea Bissau and Togo have registered little progress, as the under-five mortality rate stands at over 100 deaths per 1,000 births.

In order to accelerate child survival over the next 15 years, it is essential to reduce neonatal mortality. To this end, affordable and high-impact interventions have proven efficient, namely: birth attended by a health-care worker and emergency obstetric care; premature births management, including administration of antenatal corticosteroids to help lung maturation; basic neonatal care; neonatal resuscitation; early diagnosis and treatment of serious infections with antibiotics; clinical care for low birth weight or sick infants; and prevention of mother-to-child transmission (PMTCT) of HIV. These interventions should be highly prioritized and included in the terms of health care services delivery. In addition, children living in the poorest households should benefit from social protection schemes, including health insurance coverage in order to gain better access to high-impact interventions.
FIGURE 5: Under-5 mortality rate in West Africa between 1990 and 2013

Source: ECA’s calculation based on data from United Nation MDGs monitoring site, 2016

MDG 5: Improve maternal health

**Target 5A:** Between 1990 and 2015, reduce maternal mortality rate by three quarters

At the global level, the maternal mortality rate fell by 45% between 1990 and 2013, decreasing from 380 to 210 deaths per 100 000 live births. However, this is still far from the 2015 target aiming at reducing maternal mortality rates by three quarters. In 2015, 16 countries with the largest MMR (over 500) out of 18 in the world were African. Sierra Leone has the highest maternal mortality rate, with 1360 maternal deaths per 100 000 live births. Other countries in West Africa included: Côte d’Ivoire (654), Guinea (679), Liberia (640), Niger (553), Guinea-Bissau (549) Nigeria (820) and Mali (587).

West Africa has recorded an average MMR (Maternal Mortality Rate) reduction of 41.6% over the period from 1990 to 2015. Only Cape Verde (83.6%) has met and exceeded the target of reducing by two thirds the maternal mortality rate before 2015. Côte d’Ivoire (12.3%) and Benin (29.7%) recorded the lowest level of MMR reduction in the sub-region between 1990 and 2015. Besides Cape Verde, five other countries in the sub-region have been able to achieve over 40% MMR reduction level, namely Ghana (49.7%), Burkina Faso (49.0%), Sierra Leone (48.3%), Mali (41.9%) and Senegal (41.1%).

Skilled attendance at delivery is crucial for reducing maternal mortality. Despite improvements in access to maternal health care, great disparities remain between urban and rural areas. Great inequalities exist in the proportion of deliveries attended by skilled health personnel in urban and rural areas rural areas in West Africa; indeed, this proportion was 33% in rural areas against 75% in urban areas between 2010 and 2014. In 2014, six³ West African countries had a rate of births attended by skilled health personnel below 50 %: Niger (17.7%), Nigeria (38.9%), Guinea-Bissau (43%), Guinea (46.1%), Liberia (46.3%) and Mali (49%). Only Cape Verde (77.5%) and Benin (84.1%) have a rate above 75% in the sub-region.

³ UNSD, July 2013.
Moreover, the low contraceptive use in West Africa (9%) is one of the factors contributing to the high number of teenage pregnancies across the continent. Guinea is among the five African countries where the contraceptive prevalence rate is under 10%. The birth rate among teenagers is considered high when 100 women out of 1000 in the 15 to 19 year-old age group give birth to a child (ECA et al, 2015).

Furthermore, early marriage which is a common practice in Africa also much contributes to the high rate of teenage birth in the continent. Thus, among countries with the highest adolescent birth rates, there are three West- African countries: Niger with 206 births per 1,000 teenage girls, Mali with 172 births per 1,000 teenage girls and Guinea with 154 births per 1,000 teenage girls.

Analysis shows that the original target is not reached in terms of maternal mortality in the sub-regional countries. Though we recognize that significant progress has been made regarding the births attended by skilled health personnel in some countries, the mortality rate remains high. As for the contraceptive prevalence rate, it was only 9% for West Africa in 2012.

**FIGURE 6 : Reduction of maternal mortality rate in West Africa between 1990 and 2015**

Source: ECA’s calculation based on data from United Nation MDGs monitoring site, 2016

**MDG 6: Combat HIV/AIDS, malaria and other diseases**

*Target 6A: By 2015, have stopped the spread of HIV/AIDS and begun to reverse the tendency*

In 1990, Africa paid a heavy price with the highest incidence rate for HIV/AIDS and malaria. The continent recorded over half of the world rates for these diseases. The HIV prevalence rate in Africa, excluding North Africa, was consequently estimated at 2.7% in 1990, while in other regions it stayed under 0.3% (UNSD, 2005). Despite the drop in the number of new HIV infections and the increase in the number of patients receiving antiretroviral therapy, 35 million people were still living with HIV in
2013. Africa, excluding North Africa, concentrates 70% of all new HIV infections, and therefore remains the center of the epidemic.

Despite initial difficult conditions, West Africa has managed to reverse the spread of HIV/AIDS as well as the incidence of malaria and tuberculosis, particularly since 2000. In terms of progress, most West African countries have made significant progress in the fight against HIV by decreasing the incidence of HIV/AIDS by over 50% (that is, the number of new HIV infections per year per 100 people) among adults (15-49 years). With a 58% drop in the number of AIDS-related deaths, Burkina Faso is the country with the largest decline (UNAIDS, 2014) in West Africa. However, the situation has considerably deteriorated in Guinea Bissau where the rate of people living with HIV rose from 0.2% in 1990 to 3.9% in 2012. Furthermore, still according to UNAIDS, a drop in the use of condom has been noted in Côte d’Ivoire, Niger and Senegal. However, it should be underlined that improvements remain fragile and need to be strengthened, since HIV is mostly a matter of behavior.

**FIGURE 7: Percentage of people living with HIV in 1990-2012**

![Percentage of people living with HIV in 1990-2012](image)

**Source:** ECA’s calculation based on data from United Nation MDGs monitoring site, 2016

Concerning the fight against malaria, a substantial increase of actions between 2000 and 2012 helped decrease the mortality rate due to malaria by 42% in the world. Over this period, nearly 3.3 million deaths, a more important figure than expected, have been prevented. Around 90% (3 million) of these prevented deaths involved children under five in Africa excluding North Africa, which significantly contributed to the reduction of child mortality.

In Africa, malaria control interventions have become increasingly important in recent years thanks to a more supportive leadership, a greater political will and an increased funding for malaria control. Consequently, the estimated numbers of cases and death rates associated with malaria have decreased. The control and elimination of malaria requires a multilevel approach involving the use of preventive therapies, vector control interventions and testing. Pregnant women and children remain the most vulnerable to the disease. It should be noted that only Burkina Faso has adopted the preventive therapy recommended by WHO for infants.
In the fight against tuberculosis, since 2000, the prevalence, incidence and mortality rates due to the disease tend to decline in West Africa. Niger, Ghana and Guinea are among the countries that have achieved the best results, with reductions exceeding 50% for each of the three indicators of tuberculosis. In contrast, Liberia and Sierra Leone have more than doubled their 1990 levels for at least two indicators of tuberculosis mentioned above. The high prevalence rates of HIV/AIDS reported in West Africa would significantly contribute to the high incidence of tuberculosis in the sub-region (ECA et al, 2015).

Enormous challenges in the fight against tuberculosis persist in the sub-region. Apart from the challenge of HIV/AIDS prevalence, the lack of very frequent access to adequate and quality TB care remains a serious problem.

**MDG 7: Ensure environmental sustainability**

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

Data collected over more than two decades show that the growth in global emissions has accelerated, increasing by 10% from 1990 to 2000 and by 38% from 2000 to 2012; this is mainly due to the industrial growth in developing regions. The average transmission rates considerably vary among developed and developing regions. In 2012, the average emissions in developed regions were about 10 metric tons of carbon-dioxide per person per year, against 3 metric tons in developing regions (UN, 2015). Between 1990 and 2010, only 16 African countries had reduced their CO2 emissions, while 38 had in fact increased them. Most regions have seen their CO2 emissions increase between 1990 and 2010, except in Africa excluding North Africa and Oceania (ECA et al, 2015).

Like other African countries, the West African sub-regional countries are making progress toward achieving targets related to MDG7 consisting in ensuring environmental sustainability. In this regard countries such as Guinea, Mali, Niger, Guinea Bissau, Liberia and Côte d’Ivoire have reduced their carbon-dioxide (CO2) emissions between 1990 and 2010. Except for Burkina Faso, Sierra Leone, Togo, Gambia, Ghana, Nigeria, Senegal, Benin and Cape Verde, where carbon-dioxide emission has increased between 1990 and 2010. Between 1990 and 2012, global carbon-dioxide emissions have increased over 50%.

Concerning the reduction in the consumption of ozone depleting substances (ODS), the global level has reduced by over 98% between 1986 and 2013 (UN, 2014). Thus, between 1986 and 2012, ODS consumption has been reduced respectively by 94% in Africa, 86% in developing regions and 100% in developed regions. Most of the African continent currently adhering to the Montreal Protocol has recorded good progress in reducing its ODS consumption.

Like the other African countries, the West African sub-region has also made significant progress in reducing the use of ODS. Indeed, West Africa reduced an average of 57.6% of its ODS use in 1990 and 2013. Six among the fifteen countries that make up the sub-region (Côte d’Ivoire, Guinea Bissau, Sierra Leone, Guinea, Senegal and Cape Verde) have very good performances in the field, with a reduction level between 80% and 100% over the period. By contrast, Mali experienced a sharp increase in ODS consumption levels.
**FIGURE 8:** Consumption of ozone depleting substances, in metric tons of ozone depleting potential

Source: ECA’s calculation based on data from the UNDESA database on MDGs monitoring, 2016

**Target 7C: By 2015, halve the proportion of the population without sustainable access to safe drinking water and basic sanitation**

Between 1990 and 2015, the proportion of the world population using an improved drinking water increased from 76% to 91%, exceeding the MDG target which was reached by 2010. Of the 2.6 billion people who have acceded since 1990, 1.9 billion have running water. More than half of the global population (58%) now benefits from this quality service. During the same period, the number of people using surface water has decreased by more than half, from 346 million to 159 million (UN, 2015). In Africa, access to safe water is improving, but progress mainly benefits urban areas. Indeed, great disparities exist in the continent in terms of access to safe drinking water between rural and urban areas, which tends to draw national figures down as a result.

In the specific case of West Africa, the proportion of population using an improved drinking water source increased by more than 64% over the 1990-2015 period. Four countries stand out in terms of use of improved drinking water sources rates in 2015: Cape Verde (92.0%), Ghana (89.0%), Burkina Faso (82.0%) and Côte d’Ivoire (82.0%), while Niger (58.0%) recorded the lowest rate in the sub-region in 2015. In terms of rate increase in 1990-2015, three countries (Mali, Guinea Bissau, Burkina Faso) had an increase rate of 80% to 120%, and three other countries (Niger, Nigeria and Sierra Leone) had a progress rate of about 72%. It should be furthermore emphasized that this seemingly satisfactory progress hides wide disparities between urban and rural areas. It is urgent that States do pay particular attention to rural areas as part of the SDGs implementation.
In the area of sanitation, the proportion of the population with access to improved sanitation is low in all developing regions. In Africa excluding North Africa, improved health infrastructure use is still equated with luxury service. Indeed, in Africa excluding North Africa, this indicator increased by only 6 percentage points between 1990 and 2012, from 24.0% to 30.0%. This is in sharp contrast with the situation in North Africa where the rate rose from 72.0% to 91.0% and that of other developing regions that have seen this proportion increase from 36.0 to 57.0 % over the same period. Moreover, Africa is still far from 66%, the coverage rate set for 2015. It should be noted in passing that only 4 countries (Algeria, Cape Verde, Egypt and Tunisia) out of the 77 that reached this target in 2012 were African (WHO and UNICEF, 2014). Nevertheless, it is worth mentioning that in 2015, six countries in West Africa have managed to more than double their 1990 level (Guinea Bissau, Burkina Faso, Benin, Ghana, Guinea and Niger), although they went from a very low baseline (below 30%) compared to other countries that have reached the target. Improving the level of the population's access to improved sanitation facilities should be one of the major challenges of the sub-regional States during the implementation of the SDGs, because a significant number of people still defecates in the open, especially in rural areas.
FIGURE 10: Proportion of population using improved sanitation facilities

Source: ECA, based on the United Nations’ data from the MDGs monitoring site, 2015

MDG 8: Develop a global partnership for development

Target 8A: Further develop an open, rule-based, predictable, non-discriminatory multilateral trading and financing system

During the ninth Ministerial Conference of the World Trade Organization (WTO) held in Bali (Indonesia) in December 2013, the Ministers have given new impetus to the Doha Development Agenda by adopting the "Bali Package", a three-phased agreement on trade facilitation, agriculture and cotton and development issues, particularly for the least developed countries (WTO, 2013). However, with regard to Africa, there is a considerable gap between targets related to MDG8 and their implementation. New forms of protectionism set up by the proliferation of non-tariff barriers, including subsidies, are harmful to trade in Africa. This is already reflected in the share of exports of the continent under global merchandise exports, which slightly decreased from 3.5% in 2012 to 3.3% in 2013, in contrast with the 4.9% rate observed in the 1970s (ECA, 2015).

When it comes to financing of development, the Official Development Assistance (ODA) has remained virtually unchanged in nominal terms, US $ 135.1 billion in 2014 against US $ 135.2 billion in 2013. According to preliminary data, bilateral aid to least developed countries in 2014 decreased by 16% in real terms compared to the previous year. The decline in aid flows during the last years of the twentieth century was reversed at the beginning of the new millennium. The net Official development assistance (ODA) from the Development Assistance Committee (DAC) member countries of the Organization for Economic Co-operation and Development (OECD) has increased by 66% between 2000 and 2014. ODA in the form of net aid for fundamental bilateral projects and programs which represent nearly 60% of the total has remained almost unchanged between 2013 and 2014.

In contrast, grants under the debt relief decreased by 87% in real terms, from 3.6 billion to 476 million. Humanitarian aid increased by 22% in real terms, from 11 billion dollars to 13 billion dollars. In 2014, the total ODA from DAC members represented 0.29% of the gross national income (GNI) against a target of 0.7%. The top five donors in volume were the United States, the United Kingdom, Germany, France and Japan. Denmark, Luxembourg, Norway, the United Kingdom and Sweden continued to exceed the United Nations ODA target of 0.7% of GNI. It should be noted that the United Arab Emirates, a non-DAC country, stood at the top of the donors’ list by posting an ODA/GNI ratio of 1.17%
in 2014 (OECD, 2015a). In 2014, the Group of 7 industrialized countries provided 71% of the total net ODA from DAC members, against 55% for the European Union countries.

**FIGURE 11: Evolution of the DAC’s Official Development Assistance and other countries in% of their GNI**

![Graph showing the evolution of DAC's Official Development Assistance and other countries in% of their GNI from 2000 to 2013.](image)

**Source:** OECD, January, 2015.

In terms of net Public Aid for Development (ODA) received by the sub-region, six countries are characterized by the high volume received in 2013, with Nigeria alone representing 20.8% of the total volume of ODA received by the region. These are Nigeria (USD 2,529,500,000), Mali (USD 1,391,300,000), Ghana (USD 1,330,500,000), Côte d’Ivoire (USD 1262.0 million), Burkina Faso (1040.1 million USD) and Senegal (982.8 million). Although it has increased, the aid received in 2013 by Small Island developing States in the sub-region (Cape Verde and Guinea Bissau) only accounted for 2.8% of the total amount received by the sub-region. Making a comparison between the progress made by this group of countries in the MDGs implementation and the volume of ODA they received, one wonders about the effectiveness of official development assistance in our States’ development process in general, and in the fight against poverty in particular. The mobilization of domestic resources should therefore represent a major challenge for the sub-regional States for financing development, particularly within the framework of the SDGs implementation.
Since 2010, the total external debt of Africa accounts for over 30% of GDP and is expected to reach 37.1% in 2015. The net external debt (that is, the total debt less reserves) as a percentage of GDP was expected to be only 1.0% of GDP in 2015, following a negative trend since 2006, due to high international reserves in oil exporting economies. Oil importing or mineral resource-rich countries have a positive net external debt, and have, in some extreme cases, very high ratios of debt to GDP, which raises the questions of debt sustainability in those countries (ECA et al, 2015).

The Heavily Indebted Poor Countries (HIPC) Initiative helps reduce the debt burden of countries that meet the conditions of eligibility. The total effort made towards relieving the debt of all eligible African HIPCs totaled 105 billion US dollars in nominal terms at the end of 2012 (ECA and OECD, 2014). In addition, following the recommendation of the Group of Eight (G8) in 2005, the International Monetary Fund (IMF) decided to cancel 100 percent of the debts owed by low income African countries, a total of 3.4 billion dollars in nominal terms, as part of the multilateral debt relief Initiative (MDRI) (IMF, 2015).

**Target 8.F:** In cooperation with the private sector, make sure the beneficial effects of new technologies, especially information and communications technologies, are granted to all.

In terms of mobile cellular telephony, in 1990, only four African countries (South Africa, Egypt, Mauritius and Tunisia) had subscriptions to mobile cellular services, with an average subscription rate of only 0,005 subscribers per 100 inhabitants. Ten years later, 48 of the 53 countries for which data are available had an average subscription rate of 2.57, ranging from 32.54 (Seychelles) to 0.1 (Mali). In 2013, the 53 countries with data had all subscriptions to mobile services, the average stood at 80.2 subscriptions per 100 inhabitants, with differences ranging from 214.75 (Gabon) to 5.6 (Eritrea). The subscription rate is above 100 due to the fact that in Africa, mobile phone users often have multiple subscriptions for the same device. It is difficult to accurately determine the number of individuals with a mobile cell phone or using the same phone device (ECA et al, 2015). In West Africa, all countries have made remarkable progress between 1990 and 2014 from an average of 0.0 subscriptions per 100 inhabitants to 69.7 subscriptions per 100 inhabitants, with countries even exceeding the proportion of 100 (Côte d’Ivoire, Ghana, Benin, Cape Verde, and Gambia).
In terms of internet use, the number of Internet users per 100 inhabitants grew much faster in Africa than in the rest of the world between 2004 and 2013, with globally an average annual growth of 21.7% against 10.2%. Currently, this indicator is 14.7% for the African continent against 43.7 percent. Unlike the use of mobile cellular, West Africa is very much behind in terms of internet use. It recorded an average proportion of 12.7 users per 100 inhabitants in 2014, with Nigeria (42.7) and Cape Verde (40.2) recording the highest rates of penetration in the sub-region. In addition to the quantitative delay that is crucial, the disparities in access between urban and rural areas and the quality of service remain a major challenge for the sub-region. The quantitative and qualitative lack of infrastructure is the main factor of this underperformance.

FIGURE 13: Proportion of population using a mobile cell phone and Internet per 100 inhabitants in 2014 in West Africa

Overall, Africa has made remarkable progress on technology indicators. However, aspects related to the quality of the use of this technology is still very limited due to the costs, the disruptions inherent to the service of energy supply and the close monitoring of information flows by the authorities in order to hinder political activism (Donovan and Martin, 2014).

2.2. Lessons and good practices learnt from the MDGs implementation

The 15 years of MDGs implementation have generated valuable lessons that can better inform stakeholders in their development efforts over the next 15 years, particularly in terms of policy development, implementation strategies and monitoring and evaluation programs. These lessons are noticeable at the level of (i) the definition and implementation of the MDGs; (ii) the monitoring and evaluation; (iii) the leadership of the States; (iv) the financing, etc.

2.2.1. Lessons and insights

All development actors have recognized the merits of the MDGs, particularly in terms of the rigor shown in the results-based planning and of monitoring and evaluation. Although all countries have
not reached all the targets, they have nevertheless made progress in at least one of the MDGs target

- **At the level of MDGs' definition and implementation**

MDGs definition process has been called "TOP-DOWN" by the actors in general and by African countries in particular. Indeed, the poor and vulnerable countries that, in the light of the objectives pursued by the MDGs, are the most directly concerned were not involved in the definition process as they should have been. This non-participatory and non-inclusive approach has seemingly led to a non-recognition and a disinterestedness of the African States vis-à-vis the MDGs. This position has consequently not been in favor of the appropriation, and by extension, the implementation of the MDGs in Africa. The participatory and inclusive approach that guided the SDGs definition would be a strong response to the acknowledged weaknesses in the MDGs design.

The MDGs implementation has shown that improving access to basic services has not often been synonymous with improvement in the quality of the services offered. Given the substantial resources required to support change and the urgent need to improve access to services, the quality of service delivery was not given proper attention. Instead, all the countries have focused their efforts on the quantitative evolution of the indicators as they are assessed on that progress. Also, special attention was paid to capital investment for the construction of schools and health centers at the expense of investment in recurring costs to ensure the proper functioning of these structures. This situation requires a review of the intervention strategies and cooperation between recipient countries and donors (ECA et al, 2015). Whenever the infrastructure construction costs are funded by technical and financial partners (TFPs), it would be appropriate to focus the interventions on the sustainability and quality of service delivery in the long term. In this case, donors must always bear in mind the internalization of the principles of the Paris Declaration by not only being more flexible on the definition and application of the parameters of the support they provide, but also by aligning their offer to national priorities and strategic frameworks.

- **At the level of monitoring - evaluation**

The MDGs monitoring and evaluation has clearly shown that effective use of data can help galvanize development efforts, successfully implement targeted actions, monitor results and improve accountability. To this end, sustainable development requires a data revolution to improve the availability, quality, relevance and disaggregation of data. Furthermore, sustainable investments in statistical capacity are needed at all levels, particularly at the national level to support the implementation of national and international programs, such as SDGs (United Nations, 2015).

The various stakeholders have strongly noted, during the MDGs monitoring and evaluation process that the initial conditions were paramount to achieving the MDGs and accelerating progress in countries. It would therefore be appropriate to apply differentiated approaches to support future progress and evaluate them. For countries that have almost reached specific targets, the quality factor may be more important than the rate of progress. However, for those countries that are farthest from the targets, the pace of progress against the initial baselines appears to be a more appropriate measure of performance for the next 15 years.

- **At the level of endogenous leadership**

The endogenous leadership gap that prevailed at the beginning and throughout the MDGs implementation was unfavorable to the achievement of objectives. Indeed, actors in general and
countries in particular did not believe in the MDGs and only came in very late and with a low level of commitment, hence the issue of ownership of MDGs that has fueled the debates throughout their implementation. This deficit was all the more relevant since the procedural strategy of defining SDGs tried, under the United Nations leadership, to address this weakness by being more participatory, inclusive and shared, with key actors having a more engaging communication strategy. In addition, the national, sub-regional, regional and thematic consultations that were conducted as part of the SDGs definition were welcomed and appreciated by the various actors.

The outpouring of goodwill and commitment generated by the States over the last five years of MDGs implementation must be nurtured and strengthened for better results in 2030.

- **At the funding level**

The issue of funding was one of the missing or weak links in the MDGs implementation process in Africa. It has largely come from an external source, justifying in part the weak implementation of development projects and programs elaborated by the states to help accelerate the achievement of targets in 2015. The non-compliance with the commitments made by developed countries at Monterrey in 2002 as part of the MDGs financing initiatives has been identified as one of the main factors for the states poor performance in the implementation of the MDGs. As immediate lesson, the SDGs financing strategy of the African states should focus on mobilizing domestic resources, with external resources serving as a complement. Innovative funding development strategies in the continent will be another opportunity for financing development during the next 15 years.

### 2.2.2. Good practices

Communication and effective monitoring are essential factors for development. Although commitments made by the signatories of the Charter of the MDGs were not binding, the fact remains that the MDGs agenda has been successful, considering that the recorded cases of progress were partly due to efficient continuous communication and monitoring processes, thus helping to put pressure on governments to bring them to meet their obligations in terms of social contract. The effectiveness of communication on performances, relayed among other things by country reports and regional monitoring and evaluation, helped mobilize civil society and de facto instill an atmosphere of positive competition between countries with good results and less successful ones. However, the active involvement of key stakeholders such as the civil society and the private sector in the implementation and above all the financing of related development projects and programs, a dimension that showed weaknesses in the implementation of the MDGs, should be addressed in the framework of the SDGs.

It should also be stressed that sustainability in investments has been decisive for the sustainability and economic profitability expected from infrastructure carried out within the framework of the implementation of development programs and projects related to the MDGs. Consequently, policymakers should support the construction of schools and hospitals with additional investments to cover basic expenses (teaching materials, appropriate equipment, and training of qualified health professionals).

MDGs implementation, monitoring and evaluation highlighted the benefits and greater efficiencies that can be gained by building upon inter-sectoral synergies, as well as the role of planning in this achievement. In addition, African countries have integrated the MDGs into their development planning frameworks as an initial step towards the implementation. However, although the exploitation of synergies was a success, it has not been widespread; perhaps as a consequence of
the lack of technical capacities required to evaluate and objectively estimate the interdependencies between different goals and identify the entry points that generate the greatest impact. As an illustration of inter-sectoral synergies, improving child and maternal health is far from being a simple health problem, because it requires upstream interventions which are non-health related, such as reducing the number of births among adolescent mothers, increasing the use of contraceptives and improving access to sanitation facilities and improved sources of water as well as fighting against cultural practices that promote early marriage and hinder girls' education (ECA et al, 2015).

Although achieving the MDG target aiming at halving extreme poverty between 1990 and 2015-deemed as the outcome of other indicators- was not reached by most countries of the sub-region, it is important to stress that the inclusive and sustainable growth positively promoted poverty reduction, especially for those who have made beneficial progress. By way of illustration:

- Burkina Faso has reduced poverty by 37.3 percent between 1994 and 2009, thanks to livestock breeding. This approach has also contributed to improving food security and human development in rural areas. In 2007-2008, income from farming has covered 56 percent of household food needs, 42 percent of health spending and 16 percent of children's school fees;

- Tunisia has managed to reduce extreme poverty by 76.3 percent between 1990 and 2005, largely thanks to a rapid growth underpinned by a real GDP of about 5 percent over the past two decades, combined with the country’s longstanding commitment in favor of physical and social development of its people. Infrastructure investments in both urban and rural areas have contributed to a more equitable spatial distribution of growth benefits;

- Ethiopia has also made remarkable progress in achieving the MDGs through investments in rural development, agricultural productivity and social protection, despite its limited natural resources. The proportion of Ethiopians living below the poverty line fell from 45.5% in 1995-1996 to 29.6% in 2010-2011, a decrease of about one third;

- Rwanda succeeded in linking economic growth with an improved income distribution, thus inducing a decline in inequality since 2007. Reforms and specific policies that have contributed to this trend included, inter alia, investments in access to energy, improved agricultural productivity, greater market access, easier access for small and medium enterprises to credit, as well as investments in social protection.

According to the ECA 2015 Report on MDG monitoring, programs and social protection projects implemented by the countries, in some cases, did help reduce poverty and inequality, especially when they are focused on capacity building actions. Indeed, social protection programs have played an effective complementary role in poverty reduction and the poor and vulnerable groups' capacity building. These programs have had a beneficial impact where they were not considered as "almsgiving", but rather as a long-term investment in human resources, supported by regular budget allocations. By way of illustration:

- The multiple safety net mechanism in Rwanda called the "Vision 2020 Umurenge" Program that encompasses universal health insurance (covering 91% of the population), free education and social transfers, for example in the form of pension plan- contributed to the overall decline of extreme poverty from 39% in 2006 to 34.5% in 2009;
The Universal pension plan set up in Mauritius had a significant impact on the poverty reduction rate in the country;

The retirement savings plan in South Africa, decreased by 2.5% the poverty gap, and the disability grant have reduced the total poverty gap by 5.1%, as well as family allowances granted for children up to the age of 18 contributed to the poverty gap reduction by 21.4%;

Ethiopia's program establishing a safety net for a minimum production (Productive Safety Net Programme (PSNP), which benefited 8 million people (some 1.5 million households), providing a monetary and food aid in the context of public and industrial works in areas affected by drought, helped lift the target audience out of poverty.

Ghana, Nigeria, Senegal, Kenya, Mozambique and the United Republic of Tanzania have established various types of safety nets, such as emergency food distribution to support vulnerable groups (orphans, widows elderly, people, etc.) which have had a favorable impact on poverty reduction;

Benin, Burkina Faso, Mali and Niger have also pushed the limits of poverty by setting up an emergency food distribution mechanism through cereal banks and special shops selling foodstuffs at subsidized prices to the vulnerable and poor.

However, it should be noted that public works programs such as social protection, usually called High Intensity Labor Force (HILF) allow to significantly improving the livelihoods of vulnerable target groups through improved target household income, but their impact on poverty incidence is generally negligible, because their effectiveness depends on their ability to target vulnerable groups. The results of these programs are more disappointing when they are financed by donors, for they make beneficiaries vulnerable to the volatility of resource flows disbursed by the donor (McCord et al, 2009).

Sustainable development also implies addressing the root causes of underdevelopment rather than its symptoms. Putting emphasis on the outcomes of the MDGs such as poverty reduction, without special attention to the method or the catalysts needed to achieve these objectives could be eventually unsuccessful. The priority issues should include: support Africa’s agenda for structural transformation; build capacity related to the mobilization of domestic resources; enhance cooperation to stem illicit capital flight; support technology, innovation and science; promote fair trade; enhance trade facilitation and promote good governance (ECA et al, 2015).

3. FROM MDGs TO SDGS: OVERALL APPROACH OF A DEFINITION, COMPLEMENTARITY AND SCOPE OF ADDITIONNAL EFFORTS

MDGs have expired at the Summit on Sustainable Development held on September 25, 2015 in New York. UN member states adopted a new sustainable development program which includes a set of 17 global goals for ending poverty, fighting inequality and injustice and combating climate change by 2030.
Box 1: List of 17 Sustainable Development Goals

| Goal 1: | End poverty in all its forms everywhere; |
| Goal 2: | End hunger, achieve food security and improved nutrition, promote sustainable agriculture; |
| Goal 3: | Ensure a healthy life and promote well-being for all at all ages; |
| Goal 4: | Ensure inclusive and equitable quality education and promote life-long learning opportunities for all; |
| Goal 5: | Achieve gender equality and empower all women and girls; |
| Goal 6: | Ensure access to water and sanitation for all; |
| Goal 7: | Ensure access to affordable, reliable, sustainable and modern energy for all; |
| Goal 8: | Promote inclusive and sustainable economic growth, employment and decent work for all; |
| Goal 9: | Build resilient infrastructure, promote inclusive and sustainable industrialization and foster innovation; |
| Goal 10: | Reduce inequality within and among countries; |
| Goal 11: | Make cities and human settlements inclusive, safe, resilient and sustainable; |
| Goal 12: | Ensure sustainable consumption and production patterns; |
| Goal 13: | Take urgent action to combat climate change and its impacts; |
| Goal 14: | Conserve and use the oceans, seas and marine resources sustainably; |
| Goal 15: | Sustainably manage forests, combat desertification, halt and reverse land degradation and halt biodiversity loss; |
| Goal 16: | Promote just, peaceful and inclusive societies; |
| Goal 17: | Strengthen the means of implementation and revitalize the global partnership for sustainable development. |

3.1. Africa in the SDGs definition process: from global priorities to West Africa’s

Although progress has been made globally, Africa lags behind in achieving most of the MDGs as defined in 2000. Most of these ambitions remain topical beyond 2015. Among major criticisms made to MDGs, are the low degree of importance given to different levels of countries’ development in an effort to define identical targets for all, and the low degree of importance given to the specific features of countries and regions. Africa wanted to address this by mobilizing to define a common position specific to the continent, and by ensuring that its voice is unique, clear and audible throughout the SDGs development process and the post-2015 development Agenda in general.

The African continent has thus actively participated in the post-2015 process as a true global dialogue (Volta Basin Authority, 2015), which involves both developing and developed countries, civil society, youth, private sector, local authorities, parliamentarians, the poor and marginalized groups.

The Rio + 20 final document entitled "The Future We Want", called for the launching of a focused and coherent action in support of sustainable development that takes into account and fairly integrates the three dimensions of sustainable development and the relationship between them. Sustainable development objectives were meant to be consistent and integrated to the post-2015 development Agenda; they were supported by a transparent and participatory intergovernmental process open to all stakeholders for formulation (ECA et al, 2015).

At the African regional level, the Assembly of Heads of State and Government of the African Union established the High Level Committee on the post-2015 development Agenda in May 2013. This
committee was mandated to oversee the African process and to finalize the African common position while ensuring that those priorities are integrated into the post-2015 development Agenda.

The Africa Regional Consultative Meeting on the Sustainable Development Goals held from October 31 to 5 November 2013 and bringing together ministers and other high level representatives of African countries, regional and sub-regional organizations, a wide range of major groups and development partners, proposed and endorsed 12 sustainable development goals.

The African Common Position on African post-2015 development Agenda is contained in the Declaration of the African Union Heads of State and Government meeting at the twenty-second ordinary session of the Assembly of the Union on January 31, 2014. Africa's development priorities are organized around six pillars: (i) structural economic transformation and inclusive growth; (ii) science, technology and innovation; (iii) human-centered development; (iv) environmental sustainability, natural resources management and risk management of natural disasters; (V) peace and security; and (vi) finance and partnership (Volta Basin Authority, 2015).

| **Goal 1**: | End Poverty in All its Forms Everywhere |
| **Goal 2**: | End hunger, achieve food security and year-round access to adequate, safe, diverse and nutrient-rich foods for all |
| **Goal 3**: | Ensure quality, adequate, affordable, accessible and comprehensive health services for all |
| **Goal 4**: | Ensure access to inclusive and quality education for all at all levels |
| **Goal 5**: | Achieve gender equality, protect and empower women, youth and people in vulnerable situations |
| **Goal 6**: | Ensure social inclusion and social protection, including a minimum income, social security, and decent work for all, especially for young people |
| **Goal 7**: | Achieve a structurally transformation of economies and attain an inclusive and sustained economic growth, accelerate infrastructural development, inclusive and sustainable industrialization and improve access to affordable energy; build resilient cities and sustainable human settlements |
| **Goal 8**: | Goal 8: Improve the quality, resilience and the environmental protection; promote the exploitation, use and sustainable management of natural resources |
| **Goal 9**: | Fight against desertification and land degradation, mitigate the effects of drought and promote sustainable management of land and oceans. |
| **Goal 10**: | Promote culture, research, science, innovation and technology development |
| **Goal 11**: | Intensify global and regional partnerships for development |
| **Goal 12**: | Promote good governance at national and international levels |

A regional Implementation Meeting for Africa was organized by the Economic Commission for Africa (ECA) in collaboration with the African Union Commission (AUC), the African Development Bank (ADB) and the Department of economic and social Affairs of the United Nations. This meeting discussed the main findings of Rio + 20 and deliberated on their implications for the continent. The Meeting recommended the implementation in Africa of an effective, open and participatory consultation mechanism in order to develop the goals, indicators and targets that must underpin sustainable development goals.

The post-2015 development Agenda was also the subject of national, sub-regional and regional consultations to guide the definition of priority areas likely to gain widespread assent among multiple stakeholders in the region to insure a guaranteed "bottom up" ownership.

3.2. Complementarity between MDGs and SDGs

The adoption of the 2030 Agenda guided by 17 goals and 169 associated targets for monitoring progress ensures the MDGs continuity (8 goals and 60 indicators for monitoring progress). The conceptual foundations (structure, size, scope, and deadline) aim at addressing the weaknesses and completing the unfinished points on MDGs at the levels of definition, implementation, monitoring and evaluation. SDGs originate from the outcomes of the Rio + 20 Conference marking the 20th anniversary of Agenda 21 for sustainable development.

One of the major novelties of SDGs is their universal dimension, particularly in terms of the areas covered and of the target audience. Indeed, while the MDGs are essentially addressing the social gaps of developing countries (especially the poor and vulnerable), 2030 Agenda learns from the implementation of the MDGs by addressing the gaps of all three fundamental pillars of development (social, economic and environmental) involving all the countries in the world. In addition, the quest for a world of prosperity, equity, freedom, dignity and peace always constitutes the common base for the Millennium Declaration and for 2030 Agenda.

The analysis from Appendix 1 shows that overall, SDGs were defined in order to correct and catch up with the unfinished points registered in the context of MDGs, by not only providing fifteen additional years to the countries, but also by specifying the goals, indicators and targets while remaining inclusive, universal and focused on the areas of well-being issues that have not been specified in the definition of the MDGs.

As for the integrated nature of the development goals of both initiatives, the figure below shows the more integrated nature of SDGs as compared to MDGs. Indeed, of the eight MDG goals, five were exclusively devoted to development challenges in the social area, one exclusively devoted to the economic area (MDG 8) and the other two partially integrated, that is to say one integrates both the social and economic concerns (MDG 1) and the other the social and environmental concerns (MDG 7). No MDG goal integrates all three pillars of development at the same time.

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4 SDGs have been supported by a bottom-up definition approach ("bottom-up approach") in order to circumvent the criticism about the scant participation of stakeholders in the definition of the MDGs that are chastised by many players for their lack of a decentralized dimension and of promotion through a top-down approach ("top-down approach").
**Figure 1: Inclusion of the three fundamental pillars of development**

Source: ECA, 2016

In terms of SDGs, on the seventeen goals, six (SDG1, SDG2, SDG8, SDG11, SDG12 and SDG15) are fully integrated (i.e., relate simultaneously to the development challenges in the economic, social and environmental sectors), one (SDG17) could be considered as exclusively economic and three exclusively social. The other seven SDGs could be qualified as partially integrated.

This analysis actually shows that, in addition to the complementary nature of the MDGs compared to the SDGs’, SDGs are entitled to have a universal, transversal and integrated nature on the three pillars of development (economic, social and environmental).
3.3. Scope of additional efforts to be made by West Africa in implementation of SDGs

Significant progress was made between 2000 and 2015, including halving hunger and reducing poverty by nearly 50%. The number of children attending school has increased and infant mortality has declined. In view of these unfinished points recorded during the MDG implementation, a new deadline of fifteen years was agreed upon, to allow the countries to catch up. This section thus aims to assess the scope of the efforts required from the counties in terms of the progress they have to achieve over the next 15 years compared with the progress made over the past 15 years. This assessment aims to inform each country on how much progress it has made in order to anticipate the intervention strategies and the resources needed to deal with it. This exercise focuses on three main MDG/SDG indicators, particularly in terms of reducing extreme poverty, reducing under-five mortality and reducing maternal mortality.

- **In terms of extreme poverty reduction**

While countries undertook to halve extreme poverty over the past 15 years, they will, within the framework of implementation of the new program, be brought to eradicate extreme poverty by 2030. Achieving such a target implies more effort from almost all countries (except Cape Verde), to the extent that the sub-region must achieve an average reduction of 43.5% of its extreme poverty rate between 2016 and 2030, against an average reduction of less than 30% between 1990 and 2015.

After fifteen years of fierce fighting on the field of poverty, the reduction of extreme poverty remains a major challenge in West Africa despite a relatively strong economic growth (6.7%), well above the global average of 3.0% (ADB, 2014). Thus, considering growth as a prerequisite for poverty reduction should be addressed with hindsight at the beginning of the SDGs implementation by paying particular attention to the quality of this economic growth.

In terms of additional effort required to reach the target of poverty eradication in the context of SDGs, countries where the poverty rate has increased or slightly decreased should put more effort in the next 15 years. This includes seven countries (Guinea Bissau, Nigeria, Sierra Leone, Togo, Burkina Faso, Mali and Benin) that will have to record a 50% reduction. Cape Verde is the only country that will make less effort towards achieving the eradication of extreme poverty by 2030, with only 13.7% reduction. To the contrary, Nigeria will have to make greater effort to reach a level of over 60% reduction.
FIGURE 1: Effort towards reducing extreme poverty over the period of 2016-2030 as compared to 1990-2015 (%)

In terms of child mortality reduction

Overall, West African countries have recorded substantial progress in achieving MDG4 over the past 15 years compared with the target of reducing by two thirds the under-five mortality rate. West Africa recorded an average level of reduction of about 50% against a target of 66.6%. With the new target of less than 25 deaths per 1,000 live births, West Africa must achieve an average reduction level of 68.5% by 2030. Cape Verde has less effort to make with a reduction gap of 3.8% against at least 70% for ten countries (Guinea-Bissau, Nigeria, Sierra Leone, Côte d’Ivoire, Togo, Burkina Faso, Mali, Niger, Benin and Guinea). Ghana and Senegal are in an intermediate situation. Almost all countries in West Africa should make much more effort towards achieving SDGs than they did during the implementation of MDGs.

Source: ECA calculation based on the United Nations’ data from the MDGs monitoring site, 2015
FIGURE 2: Effort towards reducing child mortality over the period of 2016-2030 as compared to the 1990-2015 (%)

Source: ECA calculation based on the United Nations’ data from the MDGs monitoring site, 2015

In terms of maternal mortality reduction

Huge efforts have to be made by West African States in order to reduce maternal mortality rate below 70 deaths per 100,000 live births between 2016 and 2030; especially by establishing a comprehensive civil status register system for recording the causes of death as appropriate. The availability of such registers is essential for accurate measurement of maternal mortality.

West Africa recorded an average level of maternal mortality reduction rate of about 41.6% against a target of 75% reduction. With the new target of less than 70 deaths per 100,000 live births, West Africa must achieve an average reduction level of about 79% over the 2016-2030 period. Cape Verde has already reached the SDGs target in the context of MDGs implementation, a mortality level of 42 deaths per 100,000 live births. Conversely, the remaining 14 countries are expected to achieve at least a reduction level of 86%. Almost all the countries in West Africa should make more effort achieving SDGs than they did during the implementation of MDGs. Improving health sector financing, strengthening health systems and health information systems are among others, the areas that require more attention during the SDGs implementation.
FIGURE 3: Effort towards reducing child mortality over the period of 2016-2030 as compared to 1990-2015 (%)

Source: ECA calculation based on the United Nations’ data from the MDGs monitoring site, 2015

4. INITIATIVES, COMMITMENTS AND FUNDING OPPORTUNITIES FOR SDGs

4.1. Initiatives and commitments of countries and other stakeholders in the SDGs implementation

The African Regional Implementation Meeting suggested that the SDGs be based, among others, on the Rio principles, that the objectives, targets and indicators integrate the three dimensions of sustainable development, that the objectives be action-oriented to allow monitor and evaluate their achievement, universal and adaptable, backed by appropriate implementation means, and conducive to an equitable and inclusive human-centered development (ECA, 2015).

Sustainable development priorities were identified by the five African sub-regions, namely North Africa, West Africa, Central Africa, East Africa and Southern Africa. The five sub-regional reports were based on an extensive literature review, field surveys and consultations with sub-regional stakeholders. The reports were discussed in draft form during the Africa Regional Consultative Meeting on the sustainable development goals jointly organized by ECA, AUC and ADB from 31 October to 5 November 2013.

In addition to the common cross-cutting themes such as governance and institutions, peace and security, financing, capacity building and technology transfer, the priority issues selected at the West African level include the fight against poverty; gender equality; improving the quality of education; expanding access to high quality and affordable health care; sustainable development of water, energy and transport infrastructures; inclusive growth; agriculture and food security; proper management of environmental and natural resources; social protection of poor and vulnerable populations; urban management and sanitation; strengthening partnerships for development (ECA, 2015).
The third Conference on Financing for Development held in Addis Ababa (Ethiopia) in July 2015 was a crucial step in mobilizing efforts towards achieving inclusive and sustainable development as defined in the SDG.

At the 21st Conference of Parties (COP21) held in December 2015, Africa confirmed, with a common and clear agenda, its genuine desire to speak in a clear and audible voice in the development and implementation process of the New Agenda for International Development.

4.2. Funding opportunities for SDGs

4.2.1. Needs for innovative funding mechanisms

After the MDGs, renewed commitments and funding are needed to enable Africa’s development. While the MDGs focused on a "social" approach, a global partnership emphasizing on Official Development Assistance (ODA) and external resources to finance the development of the African continent, SDGs mark a visible paradigm shift affording more importance to mobilizing domestic resources for sustainable and inclusive development supported by a structural transformation of African economies.

The ongoing growth in Africa and the need for investment supported by the MDGs will necessarily increase the demand for infrastructure, the shortage of which is already one of the biggest obstacles to sustainable development in West Africa and in the continent in general. Studies of The Programme for Infrastructure Development in Africa (PIDA) and those of The Africa Infrastructure Country Diagnostic (AICD) showed that some countries in the sub-region are lagging behind in terms of infrastructure coverage because of, among other reasons, difficulties in mobilizing the necessary funding. The infrastructure deficit in Africa is undermining growth to around 2% per year (COMAI VII, 2014).

In the context of the Common African Position on the Post-2015 Development Agenda, African Union leaders stated that policies that increase and improve the quality of finance from domestic sources should remain a priority for governments (African Union, 2014).

It therefore becomes imperative to restore and strengthen the link between income-savings-investment, through a better domestic taxation and innovative instruments for collection of regional savings in favor of the implementation of economic transformation policies.

It is empirically established that the domestic resource mobilization capacity continues to exceed the resources allocated by the Official Development Assistance in West Africa. This capability remains nevertheless exposed to a wide extent of losses and flights of capital materialized by massive illegal transfers and tax incentive policies characterized by expensive exemptions granted by the States (ENDA CACID -OSIWA, 2014).

The implementation of the SDGs in Africa will only be promoted by an intelligent finance that goes beyond the coverage of deficits to mobilize, secure and catalyze private financing flows and domestic resources. Although the Official Development Assistance remains an important part of the external financing for development, it will be used, from now on, through a better targeting and an increasingly result-centered management, as a lever to mobilize other funding sources, taking into account the countries specific needs. The multilateral financial institutions should play a new role as strategic tools in the consolidation, mobilization and channeling of funding sources, both public and private (IMF, 2015).
Other developing regions have, so far, made more progress than Africa in terms of involving the private sector in their infrastructure development, although the 2005-2006 period has witnessed a sharp increase in commitments in this regard, the region urgently needs to improve its economic governance in order to address the factors affecting the public private partnership (PPP) projects in the offer side, including all that hinders the mobilization of the private sector’s resources.

In an environment where investment demand estimates show that public resources and even the resources from donors are far below the needs involved, access to private capital becomes a major lever to accelerate the implementation of public infrastructure, vector of the structural transformation of West Africa (World Bank, 2009).

Africa and West Africa in particular, should strengthen their capacity to mobilize domestic resources, building, if necessary, on the experiences of other parts of the world that have developed a strong indigenous capability to finance their economies. Proper domestic policies to a successful mobilization of private funds towards SDGs will allow protection from adverse effects due to the decrease in real terms and the unpredictability of Official Development Assistance.

ODA has reached levels estimated at 135 billion dollars in 2013, but the trend remained unpredictable and therefore unsustainable. ODA flows to Africa declined in real terms in recent years (IMF, 2015).

The new development financing trends in West Africa range from the incentive to direct investment by the private sector, both foreign and local, to the promotion of various forms of Public Private Partnerships (PPP), as well as the development of innovative forms of resource mobilization, including bond issues on the domestic financial market, regional and international mobilization of investment funds and the use of development banks. Local capital markets play an increasingly important role through loans from commercial banks, certain issuances of corporate bonds and shares, as well as the involvement of institutional investors including pension funds and insurance companies.

WAEMU Member States have identified the need for defining new financial resource mobilization strategies for their development. They recommended the development of the financial sector as a driver of economic growth and advocated strengthening governance in public and private affairs, increasing the mobilization of domestic savings, strengthening of financial service delivery, improving environment of financing economies and increasing the mobilization of external resources (Banque de France, 2012).

4.2.2. Challenges associated with innovative funding mechanisms in West Africa

Many challenges are associated with innovative financing mechanisms. Significant transaction costs related to certain mechanisms, information and scheme management tools, human and computer resources are all essential resources for ensuring their management. These methods are costly and result in prohibitive scheme entry costs, especially for some developing countries.

The implementation of innovative financing mechanisms is facing many administrative obstacles that must be evaluated prior to establishing the terms of an instrument relating thereto for more efficiency, reliability and economies of scale. The economic efficiency of an innovative funding mechanism often depends on its relationship with other mechanisms and the possible synergy between different instruments (Banque de France, 2012).

Market innovative financing mechanisms need to be regulated by public authorities to ensure they do not generate adverse effects. Their creation can lead to speculative phenomena, leakages or possible fraud and involves active engagement of bodies likely to prevent risks, implement vigilance systems and ensure the swift detection and rectification of deficiencies.
A successful implementation of innovative financing mechanisms for SDGs depends on the quality of financial intermediation at the sub-regional level and will require setting up adequate institutional and regulatory frameworks.

In many West African countries, the institutional, legal and regulatory framework remains incomplete and inaccurate, including on leadership, monitoring procedures, review and supervision of the various forms of Public Private Partnerships (PPP). Only Niger and Senegal have developed specific regulations for PPPs, but the application of these texts faces a problem of interfacing with public procurement codes and public service contracts in force, and the interrelated nature of the texts is often confusing (BOAD, 2014).

In order to mobilize innovative financing for development, West Africa should strengthen its local financial markets that remain underdeveloped, shallow and small-sized, and where long-term financing with maturities appropriate for infrastructure projects is limited. Such a development should be accompanied by the implementation of proper financial engineering and regulatory framework, an active policy on the part of public authorities and especially the necessary human, technical and institutional means.

Other alternatives include a better channeling of migrants’ remittances, a proper taxation of sectors exploiting natural resources, mobilizing the private sector in the development of sectors with long-lasting impact on SDGs, mobilizing sovereign wealth funds and reserves with central banks for development purposes, improving tax base and enhancing the quality of public expenditure and mobilizing national and sub-regional savings through greater involvement of the sub-regional financial markets, in addition to a better promotion of public-private partnerships for infrastructure and other social sectors development.

At global level, there are many financial resources including large private amounts that could be mobilized in developed and emerging economies, including domestic resources, even in low-income countries, that may be more and better mobilized for SDGs financing. Channeling all these resources for this purpose remains however a major challenge for West African states.

5. CONCLUSION AND RECOMMENDATION FOR A SUCCESSFUL IMPLEMENTATION OF THE SDGs

In terms of the Millennium Development Goals, West Africa Monitoring Progress Report is one of the ECA sub-regional office for West Africa annual flagship publication. The 2016 edition is dedicated to the overall assessment of progress in the sub-region over the 1990-2015 period in relation with the MDGs and provides information on the position of the sub-region in this period marking the beginning of the implementation of the new global development agenda. This report also helps lay the foundation for an appropriation of the SDGs and a relentless reinforcement of momentum and strength of the implementation initiated in recent years of implementation of the MDGs. Furthermore, numerous reports on monitoring the progress of the MDGs published at national level (by countries), at the sub-regional level (ECA/SRO-WA), at regional level (ECA / AUC / UNDP / ADB) and worldwide (by UNDESA) constitute an extensive body of knowledge that will help prepare for the inclusive process of structural transformation, for the achievement of prosperity throughout West Africa and for a successful implementation of the SDGs.

Though it clearly appears that additional efforts must be made by the States in consolidating the achievements of the MDGs in favor of the SDGs, a detailed examination of the eight goals, however,
shows that West Africa has made great progress in all areas, but particularly in primary education (MDG 2), child health (MDG4), the fight against HIV / AIDS (MDG6) and access to safe drinking water (MDG 7).

Based on the lessons and good practices learnt from the implementation of the MDGs over the past 15 years, a number of recommendations are to be implemented by national and international development actors to ensure the achievement of a qualitative leap in the implementation of the SDGs:

**Strengthen communication and advocacy strategy among the civil society and the private sector in the sub-region for their total involvement in the implementation of development projects and programs associated with SDG.** The involvement of the civil society and the private sector in the MDGs implementation has occurred very late when the last periods of the MDGs implementation have demonstrated their dynamism on the field. A participatory and inclusive approach by the states and the international institutions stakeholders in the sub-regions in the SDG the implementation process would be an asset.

**Build on cross-sectoral synergies for greater impact.** To bolster benefits and improve efficiency, West African countries must strive to build on cross-sectoral synergies during the implementation of SDGs. This requirement is de facto a reality in the context of the implementation of SDG insofar as consideration of the economic, social and environmental sustainability aspects is a reality in the definition and formulation of SDGs. To achieve this, it is essential to strengthen technical, planning and results -oriented management capacities s in the context of development.

**Examine the statistical production among the high-priority areas and allocate the necessary financial and human resources to it.** During the implementation of the MDGs, monitoring and evaluation activities in the sub-region have turned out to be crucial, thus giving rise to an underestimation of the development efforts achieved by the States. To take full advantage of the monitoring and evaluation function, it is important that Member States and donors invest in data collection and processing, including seeking to obtain reliable data issued in a timely manner. Achieving this goal necessarily implies strengthening financial and human capacities of National Statistical Institutes (NSI) of the sub-region.

**Reduce poverty, inequality and unemployment by strengthening the quality of inclusive and sustainable economic growth in the sub-region.** To achieve inclusive and sustainable growth, the economies of the sub-region must be transformed structurally, including through economic diversification and industrialization based on commodities. This calls for strengthening investment in human resources, promoting rural development, increasing agricultural productivity, improving access to energy, markets and credit, supporting small and medium enterprises, creating sustainable and decent jobs for young people and giving priority to social protection.

**Strengthen social development measures.** It is necessary to intensify efforts to promote social development in the regions in order to increase its production capacity and generate the amount of resources required to bringing prosperity to all. In the educational field, Member States should focus on the quality of primary education and strive to improve accessibility, keeping in mind the promotion of higher and vocational education that meets the economic development needs of the country in general and the labor market in particular. With regard to health, the spread of high-impact cost-effective interventions and best practices in service delivery mechanisms is crucial to
reduce child and maternal mortality and support progress on the forefront of child health, HIV/AIDS, malaria, tuberculosis and all other diseases. Thus the experience of Ebola epidemic management in the sub-region calls for a major commitment by the entire sub-region and development partners to establish strong health systems, with good infrastructure and well-trained health personnel.

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**Strengthen domestic resource mobilization capacity and innovative financing in order to meet the major challenges of SDGs funding.** Drawing lessons from the underperformance carried out by the sub-region within the implementation of the MDGs and the gradual decline in ODA, states should move towards self-financing an important part of their development programs within the SDGs. Therefore, the sub-regional countries should negotiate a stronger catalytic role of ODA, which will allow to better mobilizing and exploiting national resources and other innovative financing channels. Strengthening tax administration and improving the countries’ capacity to curb illicit financial flows are also essential to increasing domestic resources.
BIBLIOGRAPHY


Banque de France, [2012]; "Rapport annuel de la Zone franc, L’évolution économique et financière dans les pays africains de la zone franc : Le financement des économies de l’UEMOA", 2012


### Annex 1: Comparative analysis of the framework design for MDGs and SDG

<table>
<thead>
<tr>
<th>MDG</th>
<th>EQUIVALENT SDG</th>
<th>COMMON POINTS</th>
<th>POINTS OF DIFFERENCE/INNOVATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MDG 1</strong>: Eradicate extreme poverty and hunger</td>
<td><strong>SDG 1</strong>: End poverty in all its forms and everywhere; <strong>SDG 2</strong>: End hunger, achieve food security, improve nutrition and sustainable agriculture <strong>SDG 8</strong>: Promote sustainable and inclusive growth, employment and decent work for all</td>
<td>Fight against extreme poverty and hunger Growth and decent employment as the main factor in reducing poverty</td>
<td>MDG 1 divided in 3 SDGs (1, 2, 3) Further precision on targets (&quot;leave no one behind&quot;) Eradication of extreme poverty against a reduction goal in the first agenda (MDG) Taking into account all the aspects of poverty in monitoring, including national definitions A focus on the agricultural production system (agriculture, livestock and fisheries) including its research funding</td>
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<tr>
<td>MDG</td>
<td>EQUIVALENT SDG</td>
<td>COMMON POINTS</td>
<td>POINTS OF DIFFERENCE/INNOVATIONS</td>
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<td>MDG2: Achieve universal primary education for all</td>
<td>SDG 4: Ensure inclusive and quality education and promote life-long learning opportunities for all</td>
<td>Education for all</td>
<td>A focus on the quality of education and on other aspects of education, namely adult and youth literacy, as well as vocational training.</td>
</tr>
<tr>
<td>MDG 3: Promote gender equality and empower women</td>
<td>SDG 5: Achieve Gender Equality, enhance capacity-building and empower women and girls</td>
<td>Gender equality and women's empowerment</td>
<td>A focus on the key factors underlying gender inequality (discrimination, violence, employment/remuneration, leadership, justice/legislation, economic, financial, technology)</td>
</tr>
<tr>
<td>MDG 4: Reduce under-five mortality rate</td>
<td>SDG 3: Ensure healthy lives and promote well-being for all at all ages</td>
<td>Improving the health status of people</td>
<td>Merging of the 3 MDGs (4, 5 &amp; 6) into one SDG and targeting everyone (&quot;leave no one behind&quot;). The MDGs focused on specific ailments and a specific target (children and women)</td>
</tr>
<tr>
<td>MDG 5: Improve maternal health</td>
<td>SDG 3: Ensure healthy lives and promote well-being for all at all ages</td>
<td>Improving the health status of people</td>
<td>Idem</td>
</tr>
<tr>
<td>MDG 6: Combat HIV/AIDS, malaria and other diseases</td>
<td>SDG 3: Ensure healthy lives and promote well-being for all at all ages</td>
<td>Improving the health status of people</td>
<td>Idem</td>
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<tr>
<td>MDG</td>
<td>EQUIVALENT SDG</td>
<td>COMMON POINTS</td>
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<tr>
<td><strong>MDG7: Ensure environmental sustainability</strong></td>
<td><strong>SDG6: Ensure access to water and sanitation for all</strong></td>
<td>Well-being of citizens in terms of habitat and living environment</td>
<td>A focus on improving the living environment of urban residents</td>
</tr>
<tr>
<td>SDG 11: Make cities inclusive, safe, resilient and sustainable</td>
<td><strong>SDG 11: Make cities inclusive, safe, resilient and sustainable</strong></td>
<td>Improving conditions and quality of life of urban populations</td>
<td></td>
</tr>
<tr>
<td><strong>SDG12: Ensure sustainable consumption and production patterns</strong></td>
<td><strong>SDG12: Ensure sustainable consumption and production patterns</strong></td>
<td>Sustainable management of the environment</td>
<td>A focus on environmentally friendly production and consumption technics/patterns.</td>
</tr>
<tr>
<td><strong>SDG13: Take urgent action to combat climate change and its impacts</strong></td>
<td><strong>SDG13: Take urgent action to combat climate change and its impacts</strong></td>
<td>Sustainable management and protection of the environment</td>
<td>A focus on the fight against climate change</td>
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<tr>
<td><strong>SDG14: Conserve and sustainably use the oceans, seas and marine resources</strong></td>
<td><strong>SDG14: Conserve and sustainably use the oceans, seas and marine resources</strong></td>
<td>Protection and sustainable management of environmental resources and biodiversity</td>
<td>A focus on the management and protection of marine areas and resources</td>
</tr>
<tr>
<td><strong>SDG 15: Sustainably manage forests, combat desertification, halt and reverse land degradation, halt biodiversity loss.</strong></td>
<td><strong>SDG 15: Sustainably manage forests, combat desertification, halt and reverse land degradation, halt biodiversity loss.</strong></td>
<td>Protection and sustainable management of the environment</td>
<td>A focus on forests, land, mountain ecosystem, sustainable biodiversity (fauna and flora)</td>
</tr>
<tr>
<td>MDG</td>
<td>EQUIVALENT SDG</td>
<td>COMMON POINTS</td>
<td>POINTS OF DIFFERENCE/INNOVATIONS</td>
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<tr>
<td>NONE</td>
<td>SDG 7: Ensure access to affordable, reliable, sustainable and modern energy for all</td>
<td>Sustainable management of the environment (clean and modern renewable energy,)</td>
<td>A specific goal dedicated to the access to sustainable energy</td>
</tr>
<tr>
<td>NONE.... But strictly in relation to MDG 1 (creation of growth and jobs through sustainable industrialization and environmentally)</td>
<td>SDG 9: Build resilient infrastructure, promote inclusive and sustainable industrialization and foster innovation</td>
<td>Industrialization as a key factor for decent job creation, and inclusive growth for poverty reduction</td>
<td>A large dose of innovation and technology in the industrialization process</td>
</tr>
<tr>
<td>NONE .... But strictly MDG 3</td>
<td>SDG10: Reduce Inequality within and among Countries</td>
<td>Reducing gender inequalities</td>
<td>Cross-sectional and universal equity (economic, financial, social, legal, political, trade, demographics, etc.)</td>
</tr>
<tr>
<td>NONE</td>
<td>SDG 16: Promote just, peaceful and inclusive societies</td>
<td></td>
<td>A focus on violence, human exploitation, fair justice, governance and accountability</td>
</tr>
</tbody>
</table>
| MDG 8: Develop a global partnership for development | SDG17: Enhance the Global Partnership for Sustainable Development | global partnership for development | A FOCUS ON:  
**Finances** [mobilization of domestic resources; compliance with commitments (0.7% ODA/GNI and 0.20% ODA/GNI to LDC)]  
**Technology** [North-South South-South and triangular cooperation] |
<table>
<thead>
<tr>
<th>MDG</th>
<th>EQUIVALENT SDG</th>
<th>COMMON POINTS</th>
<th>POINTS OF DIFFERENCE/INNOVATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td><em>Capacity building</em> through international support [cooperation]</td>
</tr>
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<td><em>Trade</em> [equitable multilateral trading system under the WTO’s leadership]</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><em>Systemic issues</em> [macroeconomic stability, statistics, monitoring and accountability/responsibility]</td>
</tr>
</tbody>
</table>

*Sources: ECA, 2016*