The African Report on Child Wellbeing 2023

Justice Not Charity: African Governments Must End Child Poverty



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AFRICAN CHILD POLICY FORUM (ACPF)

ACPF is an independent, Pan-African organisation that promotes policy change to advance child wellbeing in Africa. We are guided by the African Charter on the Rights and Welfare of the Child and the UN Convention on the Rights of the Child. Our work is inspired by African values and perspectives and informed by African reality and global knowledge. We adopt a child rights approach to the promotion and realisation of child wellbeing.

ACPF undertakes law and policy research and advocacy on the African child. We document children's life experiences to build knowledge on the African child. By identifying policy solutions and creating space for dialogue and learning, we catalyse linkages between policy and practice. We foster a common voice through alliances and movements for children. Creating opportunities for children to advocate for themselves is important to us.

We work with partners across governments, inter-governmental institutions, multilateral organisations, international and national NGOs, civil society, academics and development partners across diverse sectors.

VISION AND MISSION

Vision: An Africa where every child enjoys all rights and attains their full human potential **Mission:** To be a leading advocate for policies that are inclusive of all children



P.O. Box 1179, Addis Ababa, Ethiopia Telephone: + 251 116 62 81 92/96/97/99 Fax: +251 116 62 82 00 E-mail: <u>info@africanchildforum.org</u> Website: <u>www.africanchildforum.org</u>

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- Dr Enrique Delamónica, Senior Adviser for Child Poverty and Gender Equality, UNICEF Statistics and Monitoring
- Prof Sultan Khan, University of KwaZulu-Natal
- Dr Richard Morgan, Director of Social Safety Net Programs, Nutrition International; Member, International Board of Trustees, ACPF
- Dr Ambar Narayan, Lead Economist, Poverty and Equity Global Practice, The World Bank

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Acronyms

ACERWC	African Committee of Experts on the Rights and Welfare of the Child
ACPF	African Child Policy Forum
ACRWC	African Charter on the Rights and Welfare of the Child
AfDB	African Development Bank
ANC	Antenatal Care
C102	Social Security (Minimum Standards) Convention No.102
CAR	Central African Republic
CEPAL	Naciones Unidas Comisión Económica para América Latina y el Caribe
CFI	Child-Friendliness Index
COVID-19	Coronavirus disease 2019
CRC	Convention on the Rights of the Child
DFID	Department for International Development
DHS	Demographic and Health Survey
DRC	Democratic Republic of the Congo
ECCE	Early Childhood Care and Education
EPI	Expanded Programme on Immunisation
EU	European Union
GDP	Gross Domestic Product
GER	Gross Enrolment Ratio
HDI	Human Development Index
IIAG	Mo-Ibrahim Index of Governance
ILO	International Labour Organisation
IMF	International Monetary Fund
INGO	International Non-Government Organisations
MCV1	Measles-containing-vaccine first-dose
MCV2	Measles-containing-vaccine second-dose
MICS	Multiple Indicator Cluster Survey
MODA	Multiple Overlapping Deprivation Analysis
MPI	Multidimensional Poverty Index
NBS	Nigerian Bureau of Statistics
NER	Net Enrolment Ratio
OCHA	United Nations Office for the Coordination of Humanitarian Affairs
ODI	Overseas Development Institute

OECD	Organisation for Economic Co-operation and Development
OHCHR	Office of the High Commissioner for Human Rights
OPHI	Oxford Poverty and Human Development Initiative
OVC	Orphan and Vulnerable Children
P029	Protocol to the Forced Labour Convention No. 029
PPP	Purchasing Power Parity
PTR	Pupil-Teacher Ratio
PSI	Policy Studies Institute
PSID	Panel Study of Income Dynamics
SDGs	Sustainable Development Goals
SERAC	Social and Economic Rights Action Centre
UBOS	Uganda Bureau of Statistics
UIS	UNESCO Institute for Statistics
UNAIDS	The Joint United Nations Programme on HIV/AIDS
UNCRC	United Nations Committee on the Rights of the Child
UNCTAD	United Nations Conference on Trade and Development
UNDESA	United Nations Department of Economic and Social Affairs
UNDP	United Nations Development Programme
UNECA	United Nations Economic Commission for Africa
UNESC	Economic and Social Council
UNESCO	United Nations Educational, Scientific and Cultural Organisation
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
USAID	The United States Agency for International Development
USD	United States Dollar
WASH	Water, Sanitation and Hygiene
WFP	World Food Programme
WHO	World Health Organisation

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Foreword

Children are the key to Africa's future, its sustainable and inclusive development. As the saying goes, we reap what we sow. The critical question for all of us is "what are we sowing today, to reap the dreams and aspirations we carry for Africa tomorrow?" This is a question relevant to African governments who are not only legally obliged to nurture their children but also need to invest in building Africa's human capital, the key to its transformation and standing in the world.

This year 2023 is midway of the SDGs lifespan. Hence, it offers a moment of reflection on how far African countries have travelled towards achieving the goals that we have collectively set. This includes ending poverty in all its forms everywhere. This report brings to light the cruel reality of children suffering poverty - the severe deprivation faced daily by 352 million children in Africa and that of another 110 million children at risk of falling into poverty. We are practically in an emergency situation. We must put an end to this, to children skipping meals and going hungry, missing out on essential childhood immunisations, not going to school, and barely learning when they do. No child should go through life this way. And yet, the fact that only 14 countries in Africa can be commended on their efforts in addressing child poverty tells a story of shameful neglect and indifference. That is unacceptable. We should be ashamed too that, across the globe, Africa is the region lagging behind all others who are making advances in reducing child poverty.

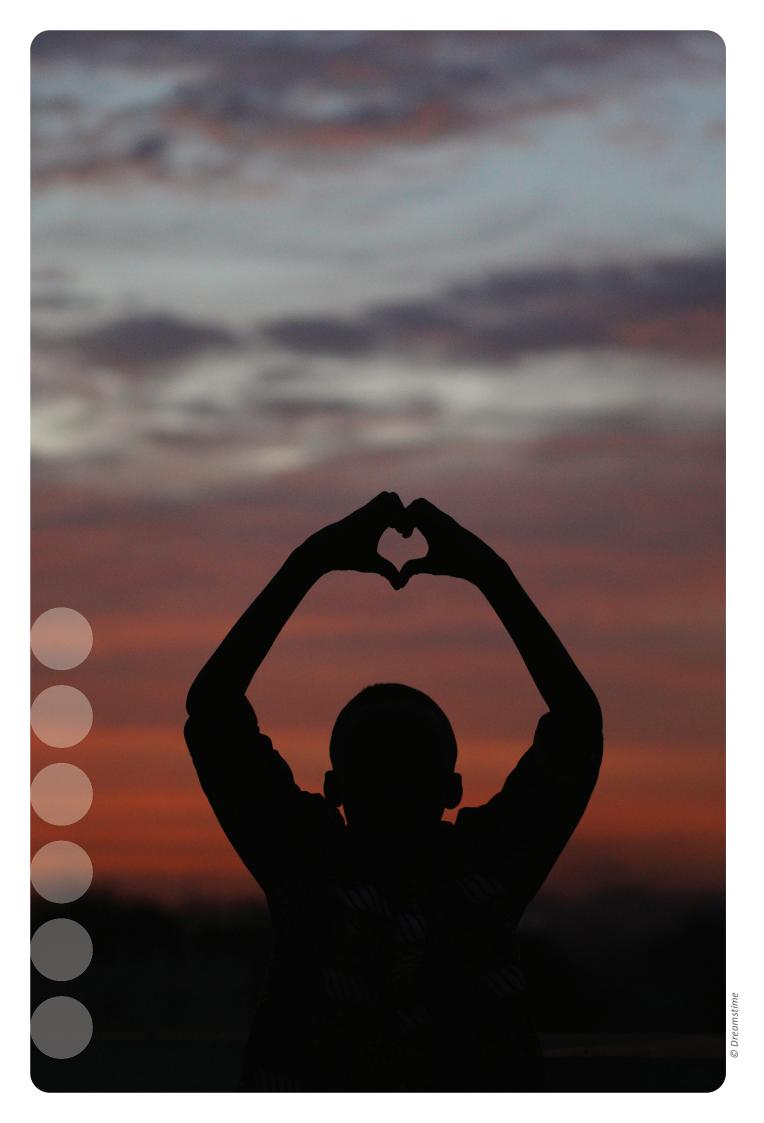
There are complex causes for the multiple problems that African children face. It is first and foremost the lack of political will and leadership commitment. The current situation exposes an undeniable caveat in our social, economic and political systems: Children don't matter in our politics and in our economics. Ours is the tale of children being ignored in the political discourse and in the allocation of public resources.

It is critically important that children, girls and boys alike, be given prominence in our society not simply because of their demographics but because they are entitled to it. As parents, society and Africans, we owe it to them. There are of course several reasons albeit important ones why we should care such as the future inter-generational benefit of investing in children now. But we should ask not just "what's in it for us" but in "what's in it for them".

The report has many important findings but one is especially striking: Child hunger and malnutrition across the continent is of crisis proportion. That singular finding alone should shock African governments. It must ring an alarm bell. It is a wakeup call to shift priorities. Feeding children is not an act of charity, it is not something for governments to do to feel good about. It is their duty.

True, Africa has been badly hit by the ongoing global economic and financial challenges, but the burden of poverty has been longstanding. In the remaining years to the end of the SDGs, a shift in gears must happen. Without acceleration, the window of opportunity to decisively address child poverty is fast narrowing. I hope this report will help trigger the accelerated action Africa so badly needs to nurture its children, to create an Africa where every child thrives and grows in total freedom, is as good as his peers in the rest of the world, and contributes to the making of a prosperous Africa that owns its destiny.

Assefa Bequele PhD Founder, African Child Policy Forum



Preface

The suffering of children deprived of food, water, decent living conditions, an education and health should enrage us. This seventh edition in the African Report on Child Wellbeing series is a revealing account of yet another threat to African children – child poverty. Child poverty is now of epidemic proportion in Africa, threatening the life and future of millions of African children. The assault that poverty is on children's dignity and rights is nothing but an injustice. For as long as we let it continue, we are complacent.

We did not need any persuasion to write and publish this report. Our decision was influenced by the turbulence across the continent that is pushing millions of children, their families and communities into desperate deprivation. It is easy to be pessimistic at a time when African headlines are of endless wars, famine, floods, displacement, harsh economic times.

Concern about child poverty in Africa has grown over the last few decades. It gained greater attention during the COVID-19 pandemic, but this has not triggered sufficient action by governments. Understandably, governments have numerous competing priorities, but what price do they place on the health of a malnourished child, one poorly educated from the early years, worse still, one who lost their life from preventable and easily treatable diarrhoeal disease? As concern grows about child poverty, so must the domestic budgets to fight it. Money must be channelled to children who need it most. It must go into programs that address the driving factors, but also those that end the deprivation. Providing school meals, ensuring universal primary health care, providing social protection and other services that children require, is where the money must go. But none of these is a panacea for poverty.

The evidence in this report tells a sad tale of the plight of millions of Africa's children. It exposes the inter-play between social, economic and political factors driving more children into poverty. It uses statistical analysis, the Child Friendliness Index, to present a chilling assessment of the performance of African governments in addressing child poverty. It provides a picture of how governments have performed in respecting, protecting and fulfilling specific child rights that directly impact on poverty. It brings out a significant correlation of good governance with reduction of child poverty and reinforces that the economic status of a country does not guarantee reduction of poverty; rather it is governance which does.

But just like the African headlines bear out some uplifting stories of our continent's beauty and our peoples' genius and innovations, so does this report. It is not all doom and gloom. There are successful programs from countries that have delivered remarkable results in lifting children, and their families, out of the scourge of poverty. But even these countries should not walk away with a sense of satisfaction. Their governments, like those whose efforts are still faltering, should consider the actions proposed in this report, actions that can turn life around for our African children. These actions must reach those children who are ensnared in a web of invisibility that puts them off the public radar and leaves them out in data collection, policy formulation and the development of interventions.

With the current scale and depth of child poverty, Africa teeters on the edge of disaster. But child poverty is not insurmountable. I believe that the rich evidence and analysis in this report will be useful to African governments willing to revisit their policies to undo the injustice done to children.

Dr Joan Nyanyuki Executive Director

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Assefa BEQUELE, PhD, Founder and former Executive Director, ACPF

Executive Summary

"Overcoming poverty is not a gesture of charity. It is an act of justice." - NELSON MANDELA

Poverty strikes children at their core, robbing them of their dignity, childhood and wellbeing. It is a violation of their rights, it damages their wellbeing, and it is the result of the failure of African governments to meet their obligations to children, as set out in their constitutions and in international law. In short, it is an injustice to children.

Child poverty as a violation of children's rights to life, development, protection and participation is reflected more in certain rights which are relevant to poverty – children's rights to food, water, health, education, clothing, shelter and social protection. It is a manifestation of failures on the part of governments to respect, promote and fulfil these fundamental rights. Child poverty has social, economic and political dimensions with far-reaching impacts on current and future generations, and on the peace, security and development of the continent.

This report provides extensive evidence on the state of child poverty in Africa and highlights the socio-economic and political factors driving it. In an effort to ensure accountability, it assesses the performance of African governments in combating child poverty, using the Provision Index, one of the three dimensions of the Child-Friendliness Index.¹ It makes a strong case that eradicating child poverty is first a legal obligation but is also a strategic social, political and development undertaking. The report identifies areas where progress has been made, showcases good practices that have proven effective in addressing child poverty, highlights gaps and sets out six priority areas for action. It underscores the urgency with which governments must end the injustice of child poverty and warns that failure to do so will have grave consequences for Africa and its children.

i. The state of child poverty in Africa

Child poverty is widespread and severe in Africa

Africa accounts for 59 per cent of the world's poor children. More than 53 per cent of Africa's total child population live in multidimensional poverty. Among these children, 60 per cent experience deprivation in most aspects of their lives, meaning that they live in severe poverty. While child poverty is relatively low in countries such as the Seychelles and Tunisia, the majority of children in most African countries experience multidimensional poverty. In South Sudan and Niger almost every child lives in severe poverty (see Chart 1).

⁴ The Child Friendliness Index (CFI) is a rights-based statistical framework developed by ACPF to measure the performance of African governments in fulfilling their obligations to protect, respect and fulfil the rights of children and to secure children's wellbeing. The Provision Index assesses governments' efforts to provide basic services to children which will meet their basic needs. The very strong negative statistical correlation between the Provision Index and the level of multidimensional child poverty in Africa (correlation coefficient of -0.81) is an indication of the strength of the Index in capturing government performance in addressing child poverty. For more details, see Annex 1 and the companion to this report – Child-friendliness of African Governments: The 2023 Scorecard.

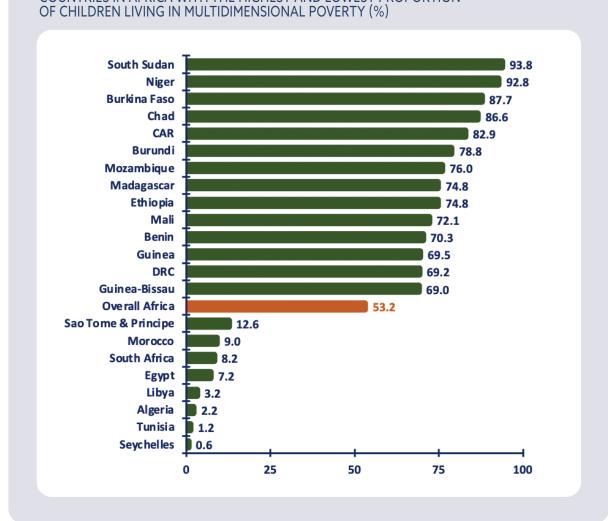


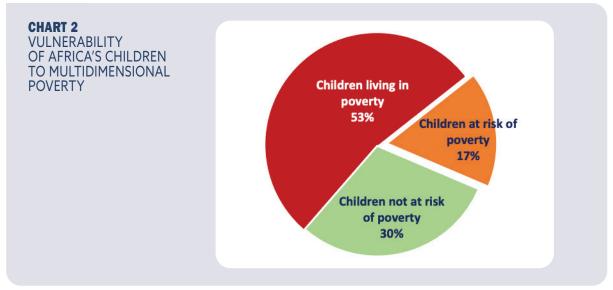
CHART 1 COUNTRIES IN AFRICA WITH THE HIGHEST AND LOWEST PROPORTION OF CHILDREN LIVING IN MULTIDIMENSIONAL POVERTY (%)

Source: Based on data from UNDP and OPHI 2022.

Even when poverty is analysed from a monetary perspective (i.e. by income), Africa has the highest number of children living in poverty. These statistics show that child poverty, whether analysed in terms of deprivation or in monetary terms, is an issue of great concern in Africa.

Millions more African children are likely to fall into multidimensional poverty in the future

It is concerning that 17 per cent of Africa's children are at great risk of sliding into multidimensional poverty in the immediate future (Chart 2). In actual numbers, this equates to an additional 110 million children living on the brink of poverty, who could be tipped into it by the illness of a parent or caregiver, or by a single drought, conflict, displacement or economic crisis.



Sources: Based on data from UNESCO Institute for Statistics 2022; ILO 2021; WHO 2022c.

Specific groups of children are at higher risk of poverty

Historically, child poverty in Africa has had the face of a rural child. But with increasing numbers of crises, children living in urban slums, internally displaced children, and those in refugee camps and other humanitarian settings are at higher risk of multiple deprivation. Moreover, girls, children with disabilities and those affected by HIV/AIDS are at even greater risk. Such risks among already vulnerable groups of children reflect a failure on the part of governments to initiate gender-sensitive and inclusive targeted initiatives to address their vulnerabilities.

Most children in Africa are hungry, undernourished and not attending school

Food- and nutrition-related deprivation is the most significant contributor to multidimensional child poverty in Africa. It accounts for 21 per cent of the deprivation contributing to multidimensional poverty on the continent. Millions of African children do not have enough to eat, making chronic child hunger and malnutrition widespread. ACPF's recent report on child hunger, titled *"No End in Sight: Child hunger in Africa"*, shows that approximately 278 million people, mostly children, suffer from chronic hunger, leading to severe food- and nutrition-related deprivation.

The other prevalent deprivation among children in Africa is access to education. About 98 million children in Africa are out of school and even those attending school are not learning, owing to the poor quality of education they are offered. The proportion of children across the continent who cannot read and understand a simple text by age 10 is 86 per cent. This learning crisis is a reflection of the failure of the education systems of most countries on the continent. Beyond the failure to fulfil children's right to education, deprivation on such a scale signals that countries will not be able to develop the human capital they need to transform their economies and achieve inclusive development.

Persistent and high income inequality perpetuates child poverty

In the absence of public policies targeting children and poor households, the high income inequality in Africa inevitably contributes to child poverty and its intergenerational transmission. Nevertheless, in the midst of this inequality there are countries that have employed effective redistributive policies, such as cash transfers and in-kind grants. These have proved effective in reducing child poverty. Their experience, captured in this report, offers insights for others to draw on.

ii. African governments' performance in combating child poverty

Government performance in addressing child poverty is poor in Africa

Child poverty is a glaring injustice to children. African governments' performance in addressing child poverty, as measured through ACPF's Provision Index, is poor. It shows a lack of commitment to providing services that are essential for the realisation of children's rights. Of the 52 countries included in the assessment, only 14 have above-average performance scores. All others are far from fulfilling their obligations as set out in the African Charter on the Rights and Welfare of the Child, the UN Convention on the Rights of the Child and their own constitutions and laws.

The Provision Index scores awarded to different countries vary considerably. Tunisia has gained the highest score. The other countries in the top ten are Algeria, Cabo Verde, the Seychelles, South Africa, Mauritius, Namibia, Botswana, Morocco and Egypt. As the better performers, these countries have low rates of child malnutrition, almost universal access to primary education, clean drinking water and basic sanitation facilities, and overall low levels of deprivation among children.

The worst-performing countries in combating child poverty were South Sudan, Eritrea, the Central African Republic, Cameroon, Chad, Uganda, Sudan, the Democratic Republic of Congo, Guinea and Guinea-Bissau. These ten countries have not been effective in preventing multiple child deprivations. They have failed to allocate sufficient resources to sectors and programmes benefiting children.

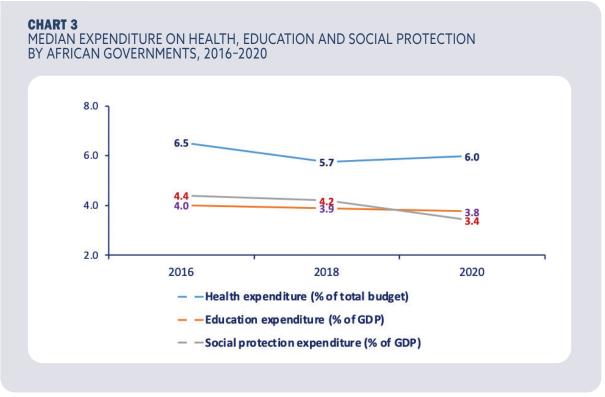
COUNTRY	PROVISION INDEX SCORE	RANK	COUNTRY	PROVISION INDEX SCORE	RANK
Tunisia	0.8731	1	Mauritania	0.3945	27
Algeria	0.8370	2	Mali	0.3866	28
Cabo Verde	0.7980	3	Congo	0.3853	29
Seychelles	0.7936	4	Zambia	0.3851	30
South Africa	0.7887	5	Equatorial Guinea	0.3709	31
Mauritius	0.7785	6	Madagascar	0.3705	32
Namibia	0.7412	7	Côte d'Ivoire	0.3673	33
Botswana	0.7377	8	Niger	0.3588	34
Morocco	0.7144	9	Gambia	0.3535	35
Egypt	0.6764	10	Benin	0.3392	36
Lesotho	0.6630	11	Тодо	0.3392	37
eSwatini	0.6041	12	Comoros	0.3354	38
Gabon	0.5638	13	Djibouti	0.3352	39
São Tomé and Principe	0.5370	14	Liberia	0.3323	40
Ghana	0.4924	15	Ethiopia	0.3191	41
Zimbabwe	0.4868	16	Nigeria	0.3144	42
Kenya	0.4722	17	Guinea-Bissau	0.3116	43
Angola	0.4431	18	Guinea	0.2967	44
Senegal	0.4406	19	Dem. Rep. of Congo	0.2854	45
Sierra Leone	0.4382	20	Sudan	0.2846	46
Rwanda	0.4363	21	Uganda	0.2831	47
Burkina Faso	0.4339	22	Chad	0.2789	48
Malawi	0.4316	23	Cameroon	0.2569	49
Burundi	0.4255	24	Central African Republic	0.2312	50
Tanzania	0.4193	25	Eritrea	0.1933	51
Mozambique	0.4003	26	South Sudan	0.1479	52

TABLE 1 PROVISION INDEX 2023: SCORES AND RANKINGS OF AFRICAN GOVERNMENTS

Source: ACPF 2023

Limited investment in fulfilling child rights

Child poverty is affected by the economic policies governments pursue and the extent to which public financial resources are dedicated to delivering high-quality services to children. Public budgets for key sectors benefiting children are inadequate and incommensurate with the needs of children. Investment in social protection, health and education, for example, are not only much lower than pledged targets but have also been declining in recent years, indicating the limited investment by governments in fulfilling their obligations to children (Chart 3).



Sources: Based on data from UNESCO Institute for Statistics 2022; ILO 2021; WHO 2022c.

iii. Conclusions

African governments have failed to meet their child rights obligations

The poor performance of most African governments in combating child poverty points to an overall lack of leadership and of political commitment to respecting, promoting and fulfilling children's rights. Government efforts are inadequate. Such poor performance is a result of the failure of governments to prioritise children's rights and wellbeing in their policies. It also reflects a failure to see the huge long-term impact of child poverty on nation-building. At this slow and unsatisfactory pace, most African countries will not meet Sustainable Development Goal 1, which envisages an end to extreme poverty for "all people everywhere".

Social protection is inadequate despite pervasive child poverty

The majority of children in Africa do not receive support from any kind of social protection scheme. Only 13 per cent of children benefit from such programmes. This reflects a lack of child-sensitive social protection in an already under-resourced sector.

Poor governance has hampered efforts to address child poverty

Poor governance exacerbates child poverty by creating an environment that is not conducive to accountability. Embedded in weak state institutions, it enables corruption, administrative inefficiency and waste of scarce public resources. Poor governance is further reflected in the formulation and implementation of macroeconomic and fiscal policies that have made it difficult for poor parents to provide for their children.

Emergencies and crises exacerbate child poverty

Child poverty is higher in countries where social systems and infrastructure are weak and resilience to shocks is low. Both these scenarios are also associated with governance. In such situations, conflicts, pandemics, droughts and floods come with the imminent threat of deprivation, displacement and even death for children.

Iv. Priority areas for action

The year 2023 marks the mid-point in the period leading up to the fulfilment of the Sustainable Development Goals. Notwithstanding current global economic and financial challenges, the coming years can still be a pivotal time in Africa's efforts to end poverty. We have identified six priority areas for action as key to ending child poverty in Africa. These are elaborated below.

Priority area 1: Recognise child hunger and undernutrition as a national emergency

Governments must adopt policies for universal access to food, to resolve the crisis of child hunger and undernutrition. These should translate into stronger financing and delivery of nutrition programmes, particularly those for very young children and pregnant women. The scaling up of school-feeding programmes and partnerships with the private sector, civil society and development agencies will complement government efforts and go a long way towards achieving this.

Priority area 2: Integrate child rights into national development planning

One indication of political commitment to meeting obligations to children is incorporating their rights into national development plans and monitoring and reporting frameworks. This will drive allocation of resources and improve coordination, monitoring and accountability. An emphasis on equity, gender-sensitivity and inclusion will improve child wellbeing, especially the wellbeing of high-risk groups.

Priority area 3: Invest in high-quality pre-primary and primary education

Investing in early childhood education is key to resolving the learning crisis faced by children and will also enable governments to address inequality of opportunity at an early stage in people's lives. Measures to progressively raise government spending on education to 10 per cent of GDP, in line with the Dakar Education for All Declaration, will improve budget allocation for pre-primary education. This will expand access for all children, including those in rural and humanitarian settings.

Priority area 4: Improve access to and the quality of maternal and child health services

Improving maternal health benefits both the mother and her child during the antenatal period, childbirth, breast-feeding and weaning. Governments should take steps to progressively increase health expenditure to 15 per cent of their budgets, in line with commitments made in the Abuja Declaration.

Priority area 5: Establish universal child-sensitive social protection programmes

Social protection is a proven intervention when it comes to lifting families out of poverty. Government must make greater efforts to initiate or scale up social protection programmes that target children. A key action is to allocate at least 5.6 per cent of GDP to social protection in order to provide benefits to households and groups with the highest need.

Priority area 6: Strengthen governance and accountability

Measures to improve governance must be coupled with strong monitoring and accountability systems. Strengthening the capacity of oversight institutions, such as the judiciary, national human rights institutions and the ombudsperson on child rights, will enhance accountability. Additional actions to aggressively combat the widespread corruption, pilfering and waste of public resources must be accompanied by stiff penalties for related offences. Public and child participation in identifying and developing solutions is critical in strengthening state accountability to citizens and holding all other implementing agencies to account.

Finally, child poverty is the thief of childhood dreams, robbing African children of the means to fulfil their aspirations while they are still in the cradle. Deprivation in the early years of a child's life casts a burden on children that they must carry throughout their life. Child poverty has spun out of control and taken on crisis proportions; tackling it must be treated as an urgent priority. Putting child rights on the Pan-African and national public agendas will salvage this generation of children and pave the way to the realisation of children's rights and dreams, and to the aspirations of the whole continent.







Child poverty: Why it matters

1.1 Introduction

Child poverty is a broad concept. Fundamentally, it is a violation of children's rights. It reflects failures on the part of governments to fulfil their obligations to children set forth in the African Charter on the Rights and Welfare of the Child (ACRWC) and the United Nations Convention on the Rights of the Child (CRC). Child poverty is underpinned by this failure to ensure that all children can have their basic needs met and access the services they require, without facing discrimination. The end result of this deprivation of rights is child poverty – a threat to the life, growth, development and survival of African children.

Child poverty is the experience of different forms of deprivation, all of which are detrimental to children's wellbeing. It is about children going to bed hungry and being unable to get the nutritious food they need. It is about children living and begging on the streets, or engaging in hazardous work to support their families and themselves instead of going to school. Child poverty is about children not being able to receive health care, drink clean water or use hygienic sanitation facilities. It means children living without dignity, feeling under-valued and not being heard.

In Africa, 352 million children are affected by multidimensional poverty (referred to as child poverty hereinafter). This accounts for 53.5 per cent of Africa's child population and makes up 59 per cent of the 593 million children living in poverty worldwide (UNDP and OPHI 2022). Our analysis shows that about 60 per cent of the children affected are deprived to such an extent that most of their basic needs are not met. In 2022 alone, an additional 15 million people, mostly children, were driven into severe poverty, exacerbating the already dire situation among children in Africa (AfDB 2023).

With more than half of its children living in poverty, Africa is lagging behind other developing regions of the world, which are making progress in fulfilling the rights of their children (see Chart 1.1).



Source: Based on data from UNDP and OPHI 2022.

The fight against child poverty has been on the public agenda for decades. It was given impetus by the adoption of the African Union's Agenda 2063 and the UN's Sustainable Development Goals (SDGs), both of which have reducing child poverty as one of their targets. The growing number of children sliding into poverty shows that child poverty has not been acted upon decisively.

This report makes the case that child poverty matters from a human and child rights perspective and in view of its devastating impact on child wellbeing. It provides analyses of governments' performance in addressing child poverty, by using the Provision Index, one of the three dimensions of the Child-Friendliness Index.² It offers rich evidence on the current state of child poverty in Africa: its nature, magnitude and gravity. It examines the progress made and challenges encountered in combating child poverty and showcases good practices that have proved effective in addressing it and promoting child wellbeing. Attention has been given to vulnerable groups of children who are at higher risk of poverty, and to the socio-economic and political environment causing the crisis of child poverty. In showing the short- and long-term consequences of child poverty, the report presents strong social, economic and political arguments that emphasise the need for urgent and coordinated action to end it.

This report is published with a companion, *African Governments' Child-Friendliness: The 2023 scoreboard*, which uses the Child-Friendliness Index to present a detailed analysis of African governments' overall performance in realising children's rights. The scope of the Index goes beyond provision of basic services to include child protection and participation. Together, the report and the *Scoreboard* provide rich analysis of the progress made since the last Index was published in the *African Report on Child Wellbeing 2018* (ACPF 2018b). They scrutinise the performance of African governments and assign them scores based on the extent to which they are living up to their obligations to children.



BOX 1.1: In their own words: Children describing poverty

When a group of children in Kombolcha, a town in Ethiopia, were asked to describe a child living in poverty, they gave a description of a girl they knew, saying she *"wears torn clothes and suffers from hunger. Her physical condition is poor, and her skin is itchy. She collects dumped food from the garbage, does not have a home and lives on the street. She does not attend school as no one can fulfil her needs for school."*

Children living in poverty made striking and revealing observations about other children who had been deprived of food and were experiencing hunger. Children in drought-affected communities in Somalia stated that *"hunger affected their appearance, and that their bodies became thin and pale. They lacked physical strength to play with their friends and to walk to and from school."* They also mentioned that they lacked focus while in school. Many children living in poverty across Africa experience this on a daily basis. The response of teachers in one of the surveys conducted in Ethiopia tallies with what children said: *"Children from poor families do not take breakfast, and they feel sleepy and dizzy during classes. This affects their ability to learn and overall school performance."*

² The Provision Index assesses governments' efforts to meet children's basic needs and provide them with essential services. Provision is one of the three dimensions of the Child-Friendliness Index, a rights-based statistical framework developed by ACPF to measure the performance of African governments in fulfilling their obligations to protect, respect and fulfil the rights of children and their secure their wellbeing. See Section 1.4 of this chapter and in Annex 1 for more about how the Index works.

BOX 1.1: In their own words: Children describing poverty (continued)

Poverty has a gender dimension. Girls in poor households are more vulnerable to multiple deprivations. A girl in Uganda expressed her frustration with being sent home repeatedly from school for not paying fees: "To me, the challenge I always experience is reporting to school with incomplete payment and being sent home most of the time for fee balances." Girls are also often forced to leave school in order work to support the family, as revealed by a girl in Burkina Faso: "I was sent to work in the capital so that I could earn money for the family. The money is paid directly to my parents."

Sources: Informed International and Save the Children International 2022; Save the Children International 2021; ACPF 2020b; UNICEF, ODI and PSI 2019.

1.2 Why child poverty matters

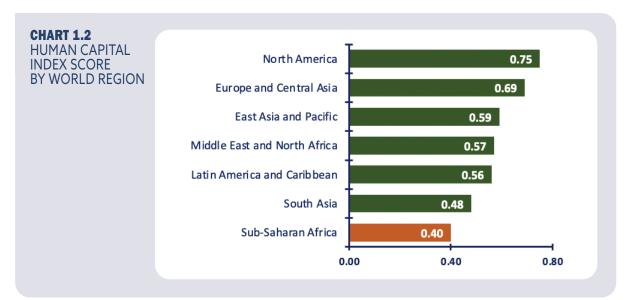
Childhood is the period for establishing the foundation of life. Deprivation at this critical time affects not only children's wellbeing but also their lifetime trajectories for health, learning, behaviour and productivity (National Scientific Council on the Developing Child 2020; ACPF 2011). Furthermore, from a social and economic perspective, childhood is an important stage for building human and social capital. This makes child poverty a threat not only to children's own wellbeing but also to that of society. This section highlights the reasons, beyond obligations in child rights laws, why governments should be concerned about child poverty and why urgent and decisive measures must be taken to address it.

Child poverty has long-term negative effects on a nation's economic growth and sustainable development. Children's endowments during infancy and later in childhood are affected by the health and nutritional status of their mothers as well as by whether their basic needs are met, and whether they can access basic services and facilities such as safe drinking water, basic sanitation and pre-primary, primary and secondary education. Deprivation of these critical inputs disrupts human capital formation, which is at the heart of economic growth and development processes (Hair et al. 2015; Cunha et al. 2005).

Currently, sub-Saharan Africa has the lowest score for human capital (0.4) of all the world's regions.³ This means that the future productivity of a child born there today will only reach 40 per cent of their potential (see Chart 1.2) (World Bank 2021). It shows the huge loss of potential – 60 per cent – which could be preserved if children were enabled to enjoy all their rights (World Bank 2021).

Studies have shown that poverty in early childhood is associated with structural differences in the brain that are related to behaviour, cognitive performance and academic attainment (Schmidt et al. 2021). Child poverty causes lasting loss of ability and productivity later in life and contributes to the intergenerational transmission of poverty. For example, chronic malnutrition in early childhood leads to long-term cognitive and physical damage to children and reduces their chances of escaping poverty as adults by 33 per cent (Hoddinott et al. 2011).

³ Human capital consists of the knowledge, skills and health that people accumulate throughout their lives, enabling them to realise their potential as productive members of society. The World Bank's Human Capital Index (HCI) measures the human capital that a child born today can expect to attain by his/her 18th birthday, given the risks of poor health and education prevailing in his or her country (World Bank 2021).



Source: Based on data from World Bank 2021.

Childhood poverty is also associated with fewer years of schooling, lower learning outcomes and diminished earning potential later in life (Abufhele et al. 2022). Test scores in mathematics and science across nine countries in the Middle East and North Africa region show that the difference in learning outcomes between children in poor households and their peers in affluent households ranged from 9 to 35 per cent (World Bank 2018). These studies and other longitudinal research show that the longer children live in poverty, the greater their academic deficits are and the more likely it is that the problem will persist all the way to adulthood. They further indicate that the gap for cognitive skills between children in poor and non-poor households was much larger, demonstrating the significant inequalities in skill formation created by deprivation in early childhood (Abufhele et al. 2022; National Scientific Council on the Developing Child 2020). On the present scale, child poverty has the potential to spin out of control, disrupting nations' growth trajectories and impeding their ability to make progress towards sustainable development.

Combating child poverty has economic significance. Inadequate access to high-quality health services results in higher mortality and imposes a macroeconomic burden on nations. Malnutrition imposes high social and economic costs on Africa, costing African economies between 2 and 16 per cent of GDP annually (African Union Commission et al. 2014). The economic cost of failing to get out-of-school children back into school is high. For instance, Nigeria, Burkina Faso, Côte d'Ivoire, Mali, the Gambia, Ethiopia and Senegal are estimated to have lost from 10 to 15.2 per cent of gross domestic product (GDP) through failing to get children back to school (ACPF 2021; Educate A Child 2014).

Poverty forces children to engage in hazardous labour. Poverty is the single most important factor driving child labour (ILO and UNICEF 2021). Income from children in poor households is seen as crucial for their own survival and for that of the household. Largely as a result of poverty, 92 million children in Africa who should have been in school, learning and playing, are working under hazardous conditions, at risk of extreme psychological and physical harm, and even death (ILO and UNICEF 2021; Gonsamo et al. 2021). Children engaged in hazardous work are also likely to develop depression in adolescence and later in life (Jayawardana et al. 2023). Child labour changes the course of children's lives. Its impact goes beyond childhood: it influences health status and productivity in adulthood and may even lead to lifelong destitution. For girls, child labour contributes to the 'triple burden' of school, work and household chores, which multiplies their risk of falling behind in school and makes them more vulnerable to poverty and deprivation.

Poverty predisposes girls to child marriage, sexual abuse and exploitation, and teenage pregnancy (ACERWC 2022). Close to 30 per cent of girls in Africa marry before the age of 18, the majority of them being from the poorest families (UNICEF 2021c; Das 2018). As witnessed during the COVID-19 pandemic, the incidence of child marriage increases during a crisis, as families faced with poverty and hardship resort to marrying off girls as a way of reducing the number of dependants in the household (ACPF and Plan International 2020).

Child marriage, female genital mutilation and teenage pregnancy are the leading causes of school drop-out among adolescent girls (ACERWC 2022). These often occur in an environment where sexual abuse and exploitation are rampant, yet are not seen as punishable crimes. Addressing child poverty among girls is also about addressing deep-rooted social and gender norms and gender discrimination. It means improving girls' school attendance and reducing their exposure to genderbased violence. These will in the long term translate into improved educational outcomes, enhancing the decision-making power of girls, as well as their opportunities to acquire economic resources and earn higher wages in adulthood, and thus addressing gender inequality.

Poverty is not inevitable. Multiple deprivations severely harm children, communities and nations (World Bank 2022a; OECD 2018). Poverty has produced cumulative disadvantages that have severely harmed children, communities and societies and that will severely harm future generations. Addressing child poverty will have an effect on improving, first and foremost, the wellbeing of children, but it will also improve society's wellbeing, its efficiency of resource use and its stock of human capital (Khan 2022).

1.3 Child poverty under a human rights lens

Poverty is fundamentally a violation of human rights and dignity, a denial of choices and opportunities and an obstruction to the basic ability to participate effectively in society (UN Economic and Social Council 1998). When it comes to children, poverty is directly linked to the denial of their rights. Addressing child poverty is about realising all children's rights with equal focus and priority given to each one of them. This is in line with the 'universal, indivisible, interdependent and interrelated' nature of human rights. Children, like all human beings, are entitled to enjoy all their rights, grounded, as these are, in the principles of non-discrimination and equality. This is further expounded through the principles on which child rights are based – the best interest of the child, non-discrimination, survival and development and child participation. Governments meeting their obligations is the key to the realisation of children's rights and to combating child poverty (Van Bueren 1999).

The United Nations Office of the High Commissioner for Human Rights (OHCHR) indicated that the non-fulfilment of certain kinds of human rights has constitutive relevance to poverty (OHCHR 2004). These are rights that require, directly and fundamentally, material resources (publicly or privately provided) for their continued realisation (OHCHR 2012). The right to food, water, health, clothing, shelter, social security and education fall within this category. Therefore, child poverty is a manifestation of the failure of governments to fulfil these rights.

At the heart of the rights-based definition of child poverty lies the fact that States are the primary duty-bearers as far as fulfilling rights is concerned, and, as such, they are accountable for the non-fulfilment of children's rights and for the child poverty this causes.⁴ State accountability to children should therefore be at the centre of discourse on ending child poverty. Child rights treaties require State Parties to undertake all appropriate legislative, administrative and other measures to give effect to children's rights. States also have the obligation to make sure that the activities of non-state actors within their jurisdiction do not cause or exacerbate child poverty. These arguments are in line with the concept of 'child-friendly government' that relates to the satisfaction of children's basic needs and the provision of specific services that promote child wellbeing (Bequele and Mekonen 2018).

The realisation of children's right to life, survival and development is not only about preventing the death of children but it is also about providing optimal conditions for them to lead a fulfilling life, preparing them for adulthood, and enabling them to achieve their full potential (UNICEF 2007). This requires State Parties to effectively implement children's rights to health, adequate nutrition and standard of living, safety, high-quality education, play and participation in matters relevant to them (UNCRC 2005).

Within human rights law, child rights, like all human rights, are primarily about state obligations. With this in mind, both the ACRWC and the CRC stipulate that parents, or persons acting in such capacity, have the primary responsibility for the upbringing and development of the child. This responsibility is based on the "conception of the ideal type of setting for the upbringing of the child: a family with the will and the capability to care for the child during its many years, starting with the pregnancy and from birth to full maturity at the age of eighteen" (Eide 2006). In reality, not all parents have such capacity, further emphasising the role of States in enabling parents to adequately provide for their children and ensuring that they do so.

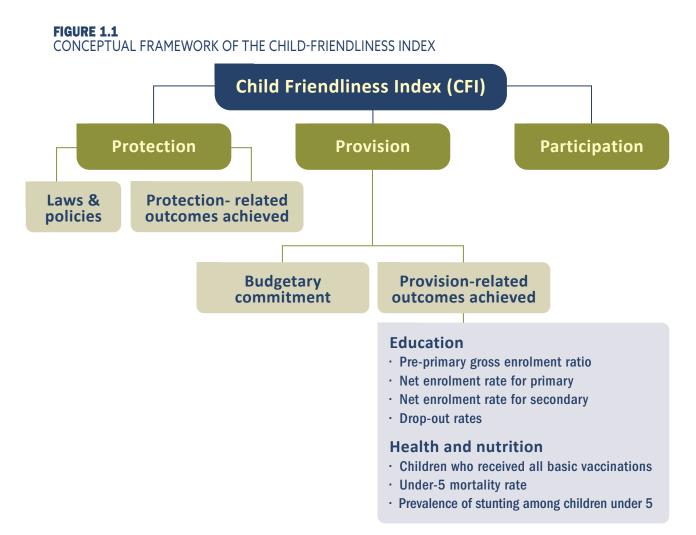
1.4 Measurement, analysis and sources of data

In this report, child poverty is measured and analysed primarily using multidimensional poverty tools that take into account the multifaceted realities that children living in poverty experience at different stages of their lives (Alkire and Santos 2010; Gordon et al. 2003). Disaggregated data from the United Nations Development Programme (UNDP) and the Oxford Poverty and Human Development Initiative (OPHI) show the proportion of the child population that is multidimensionally poor (Alkire et al. 2022). In addition to the prevalence of child poverty, measures that show the severity of the problem have also been used. The details are presented in the next chapter. The analysis on child poverty is complemented by measures of monetary child poverty. These show the number of children in income-poor households, whose caregivers are unable to pay for the basic goods and services their children need (Roelen 2017; de Neubourg et al. 2014).

Multidimensional and monetary child poverty measures, taken together, provide a clearer picture of the state of child poverty in Africa and shed light on the nature, magnitude and severity of the problem. When disaggregated further by age, gender, place of residence and other characteristics, these measures help identify the groups that are most affected and need priority interventions (Alkire et al. 2022).

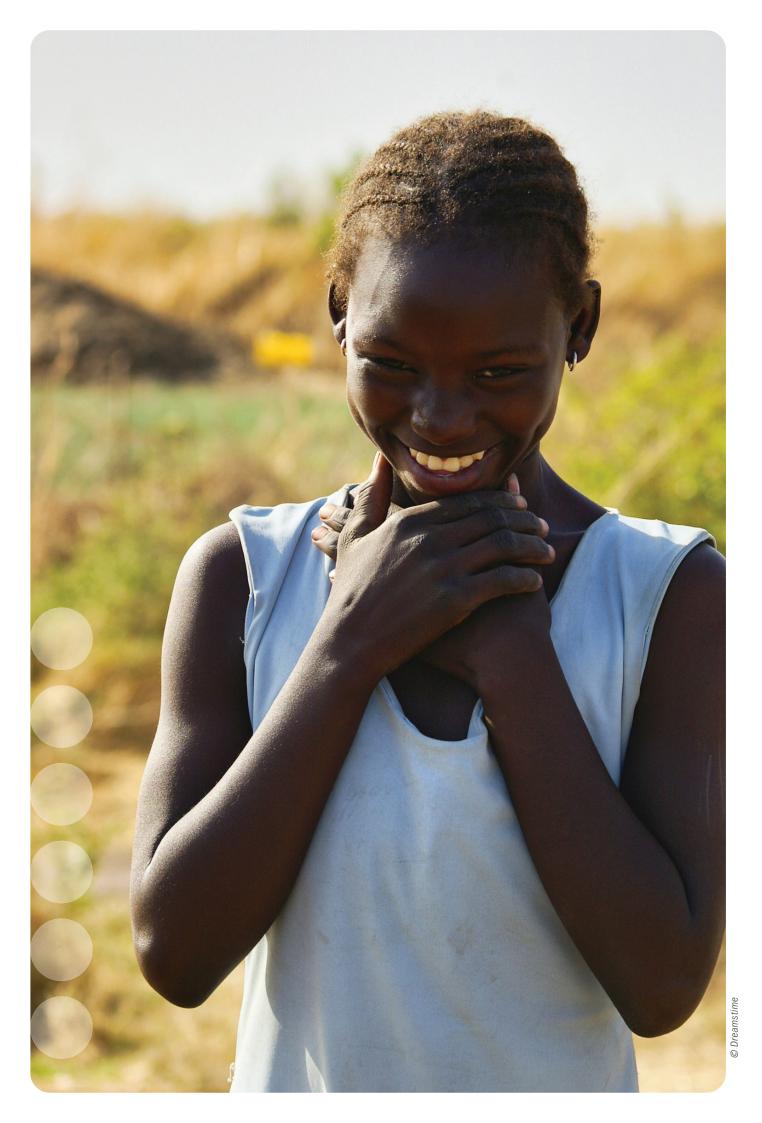
⁴ In the case Social and Economic Rights Action Centre (SERAC) and the Centre for Economic and Social Rights (CESR) v. Nigeria (2002), Para 44, the African Commission on Human and Peoples' Rights established that all human rights generate four levels of duty – the duty to respect, protect, promote and fulfil.

The rights-based approach of this report emphasises State accountability and performance in addressing child poverty. The Provision Index, one of the three components of ACPF's Child-Friendliness Index, is used to assess the performance of governments in fulfilling their obligation to provide for the basic needs of children and to deliver essential services for them. Figure 1.1 shows that various elements of multidimensional child poverty are also important components of the Provision Index. The Provision Index, in effect, assesses the relative performance of governments in addressing child poverty (ACPF 2018b; Mekonen 2009).



The analyses indicated above require reliable and current data on a range of child poverty indicators for Africa. The data sources used include globally recognised multi-county surveys such as the Multiple Indicator Cluster Surveys (MICS) and Demographic and Health Surveys, as well as poverty analyses conducted by national statistical agencies. Additional sources are the global databases on poverty, including child poverty, developed by the OPHI, and UNICEF's Multidimensional Overlapping Deprivation Analysis carried out in various countries across Africa. The databases of the World Bank, the UNESCO Institute for Statistics, the UN Statistics Division, the African Development Bank, the World Health Organization (WHO) and UNDP's Human Development Report Office are sources of comparable and reliable data that enriched the analysis.

Child poverty signals the cumulative failure to realise children's rights and ensure their wellbeing. Subsequent chapters provide rich data and analysis on various aspects of child poverty and how African governments have performed in addressing it. They make the case that it is critical to combat child poverty by investing in children from infancy until they reach adulthood, taking an inclusive non-discriminatory approach.





The state of child poverty in Africa

Using the two key measures of child poverty – multidimensional and monetary child poverty – this chapter offers an overview of the current state of child poverty in Africa.

2.1 The state of multidimensional child poverty in Africa

2.1.1 How prevalent and severe is child poverty?

Across the 48 African countries for which data are available, 53.5 per cent of children live in multidimensional poverty (UNDP and OPHI 2022). Although there are differences between countries, child poverty is alarming across the continent (see Chart 2.1, below, and Table A3.8 in Annex 3).

BOX 2.1: What is multidimensional child poverty?

This report draws on the Global Multidimensional Poverty Index developed by the Oxford Poverty and Human Development Initiative (OPHI) and the Human Development Report Office of the United Nations Development Programme (UNDP) to assess child poverty. In this Index, the measurement of multidimensional child poverty is based on three dimensions and ten indicators of deprivation reflecting various aspects of children's lives. These are: **health** (measured through child mortality and nutrition), **education** (measured using years of schooling and school attendance), and **living standards** (measured through access to safe drinking water and improved sanitation; household conditions such as electricity supply, type of cooking fuel and quality of housing; and household assets such as a phone or bicycle).

Multidimensional child poverty measurement assesses the incidence (prevalence) and the intensity (severity) of poverty, both of which are highly relevant to the analysis of child poverty. Below are important definitions.

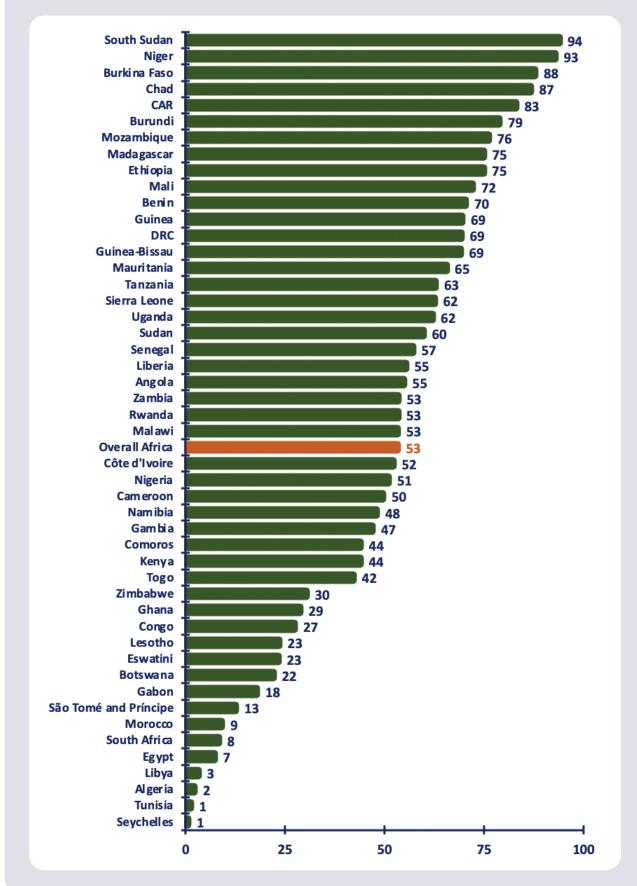
Incidence or prevalence of multidimensional child poverty refers to the proportion of children who are multidimensionally poor out of the total child population. A child is identified as a multidimensionally poor if they are deprived in one-third or more of the ten deprivation indicators across the three dimensions.

Severity of poverty refers to the intensity of poverty, or the degree to which children experience multiple deprivations in most aspects of their lives. Children in severe (extreme) poverty experience deprivation in more than half of the ten indicators (more than 50 per cent intensity of deprivation) across the three dimensions.

Vulnerability to poverty: Children vulnerable to poverty are those who have not been identified as multidimensionally poor but are experiencing deprivation in two to three of the ten deprivation indicators across the three dimensions.

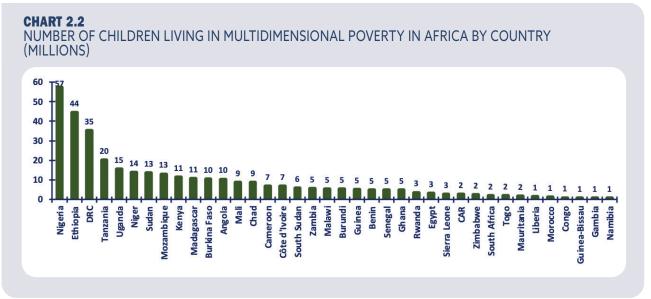
Sources: Adapted from Alkire et al. 2022; UNDP and OPHI 2022; UNDP 2013.

CHART 2.1 PROPORTION OF CHILDREN LIVING IN MULTIDIMENSIONAL POVERTY IN AFRICA BY COUNTRY (%)



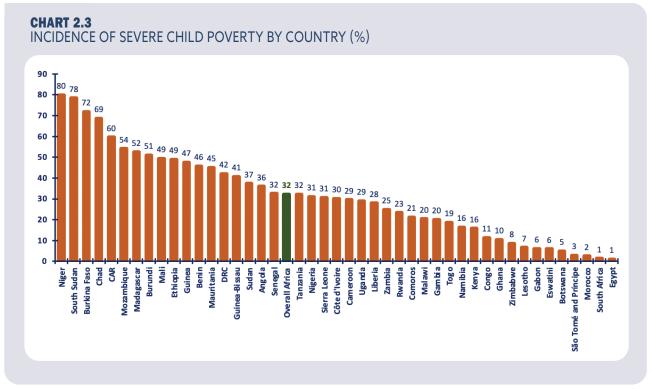
Source: Based on data from UNDP and OPHI 2022.

Often, average statistics conceal the magnitude of child poverty in Africa. To express this in absolute numbers, 352 million children in Africa live in poverty, with 213 million experiencing its severe forms. While the most populous countries bear the brunt of this – Nigeria, Ethiopia, Democratic Republic of Congo (DRC) and Tanzania – there are unacceptably high numbers right across the continent. It is largely these same countries with high prevalence that also have a high proportion of children experiencing the most severe forms of poverty (see Charts 2.2 and 2.3).



Source: Based on data from UNDP and OPHI 2022.

Chart 2.3 shows where severe child poverty is most widespread and children are deprived in multiple ways. Figures such as 80 per cent incidence in Niger, 78 per cent in South Sudan and more than 50 per cent in Burkina Faso, Chad, Central African Republic (CAR), Mozambique, Madagascar and Burundi indicate that a high proportion of children living in poverty are deprived in most aspects of their lives and thus experience severe forms of poverty.



Source: Based on data from UNDP and OPHI 2022.

Again, considering the actual number of children living in severe poverty brings home a sobering reality. Nigeria alone has 35 million children experiencing severe forms of poverty. Other countries with huge numbers of children living in severe poverty include Ethiopia (29 million), the DRC (21 million), Niger (12 million) and Tanzania (10 million) (see Chart 2.4).

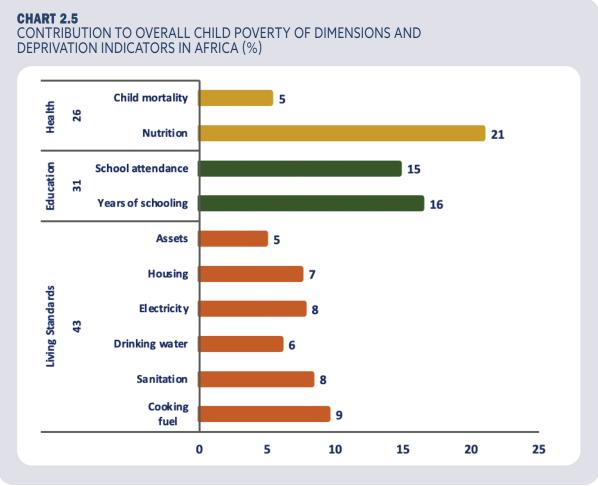


Source: Based on data from UNDP and OPHI 2022.

2.1.2 Composition of multidimensional child poverty by dimension and indicator

Across the ten deprivation indicators of poverty that children experience, nutrition deprivation is the single most significant one, accounting for 21 per cent of overall multidimensional child poverty (see Chart 2.5). Nutritional deprivation is the single most important contributor to poor health in children (ACPF 2023a). A lack of nutritious and adequate food, combined with other factors driving childhood stunting and underweight, such as inadequate feeding practices and an unhygienic environment, holds Africa's children back and makes childhood undernutrition the continent's most urgent problem (ACPF 2023a).

Access to education follows nutrition, as the next most significant dimension of child poverty, with the indicators for years of schooling and school attendance contributing to 16 per cent and 15 per cent of child poverty, respectively.



Source: Based on data from UNDP and OPHI 2022.

Thus, nutrition and education are the two areas that require urgent action by governments if Africa is to reap the demographic dividend due to it from its young population. This analysis of poverty, by dimension and deprivation indicator, provides policy-makers with insights which should help them identify which particular deprivations affect children most in a given country and to devise appropriate interventions (see for example, National Bureau of Statistics of the Federal Republic of Nigeria 2022; Uganda Bureau of Statistics 2022).

Chart 2.6 shows which areas of deprivation contribute most to child poverty within each of the countries included in the analysis. It provides insights into areas of intervention that need to be strengthened at a country level, confirming that access to adequate nutrition is a common challenge to all countries. The data on nutrition are consistent with the findings of ACPF's brief on child hunger, which showed that 278 million people in Africa, mostly children, suffer from chronic hunger (ACPF 2023a).

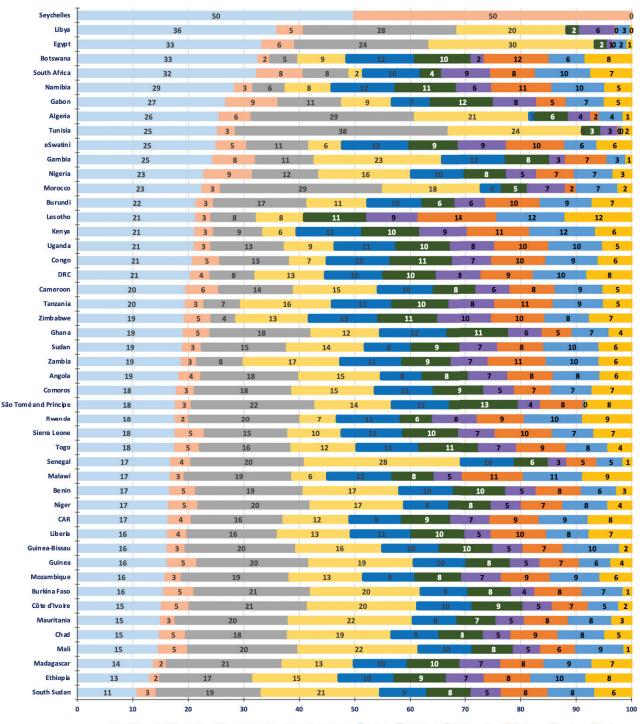


CHART 2.6 CONTRIBUTION TO OVERALL CHILD POVERTY BY DEPRIVATION INDICATOR IN AFRICA (%)

Nutrition Child mortality Years of schooling School attendance Cooking Sanitation Drinking water Electricity Housing Assets

Source: Based on data from UNDP and OPHI 2022.

The report finds that three-quarters of African countries have alarming levels of hunger, which have increased by 20 per cent since 2020. It also found that 90 per cent of children do not get their minimum daily nutritional requirements and 60 per cent do not have the basic three meals a day. This worsening trend, driven by droughts, floods, conflict and displacement, further complicates the already dire state of child hunger in Africa (ACPF 2023a).

Poor housing, sanitation facilities and access to safe drinking water are associated with poor child health, often leading to child death (Tusting et al. 2020). Poor housing conditions are particularly associated with malaria infection, diarrhoea, growth failure and anaemia (Tusting et al. 2020). The interplay between the different deprivations a child faces requires emphasis. Children are more likely to die from episodes of malaria or diarrhoea while malnourished or anaemic. Improving housing conditions has a significant impact on combating childhood infectious diseases and improving children's growth outcomes. Furthermore, improvements in sanitation are highly correlated with improvements in other health indicators, such as child nutrition and access to drinking water, because of the reduction in diarrhoeal disease, which significantly reduces child mortality (UNDP and OPHI 2022).

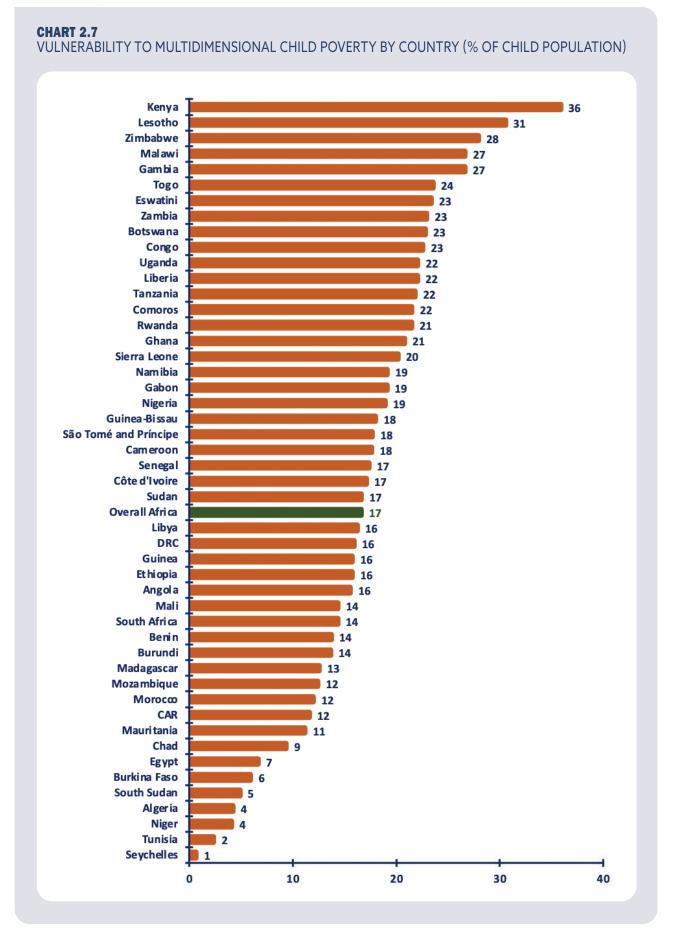
Data on education confirm the continent's appalling child deprivation. About 92 million children in Africa are not attending school, and even those in school are not learning, owing to the poor quality the education they are offered (UNESCO 2022a). The proportion of children who cannot read and understand a simple text by age 10 is 86 per cent in Africa (World Bank et al. 2022). This is a learning crisis, a reflection of the failure of the education systems of most African countries (World Bank et al. 2022; UNESCO 2022a). It is a warning that in the future, these children will not be able to advance in competitive labour markets, and countries will not also be able to develop the broad-based and agile human capital needed to transform their economies and achieve sustainable and inclusive development. The severe lack of educational achievement is a sign of the impending human capital disaster that will befall Africa in the ensuing decades if action is not taken.

2.1.3 The state of children's vulnerability to multidimensional poverty

Children regarded as 'vulnerable to poverty' are those who are not currently poor but experience deprivation of 20–33 per cent across the ten indicators used to measure multidimensional child poverty. Chart 2.7 shows that a worrying proportion of African children are vulnerable to poverty.

Overall, about 17 per cent of children in Africa are vulnerable to poverty. That means that 110 million children have an elevated risk of falling into poverty at any point (see Table A3.8 in Annex 3). Chart 2.7 shows that in the majority of countries between 12 and 36 per cent of children are vulnerable to poverty, with Kenya having the highest percentage.

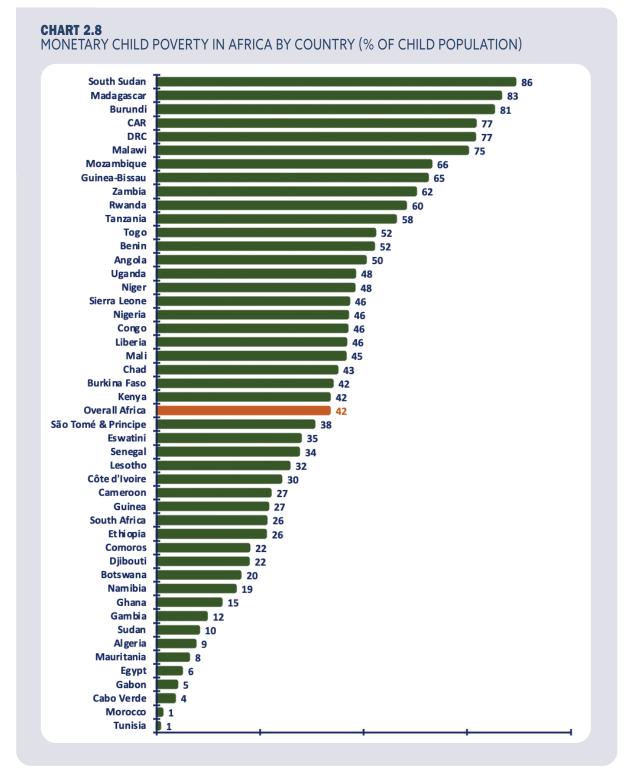
When seen in absolute numbers, again Nigeria, Ethiopia, the DRC and Tanzania have the highest number of children vulnerable to poverty (see Table A3.8 in Annex 3). Having high numbers of vulnerable children could mean that one stressor event or shock at the household, community or national level could potentially exacerbate an already bad situation, forcing more children into poverty.



Source: Based on data from UNDP and OPHI 2022.

2.2 The state of monetary child poverty in Africa

Children do not command economic resources of their own but depend on parents and caregivers for their basic needs. This means household income is a crucial factor in child poverty analysis. Monetary poverty in relation to children refers to those living in households where members live below a poverty line of USD 1.90 a day based on 2011 purchasing power parity (PPP) (see Silwal et al. 2020). On average, some 42 per cent of African children live in monetarily poor households, indicating the scale of monetary child poverty (see Chart 2.8).



Source: Based on data from Silwal et al. 2020.

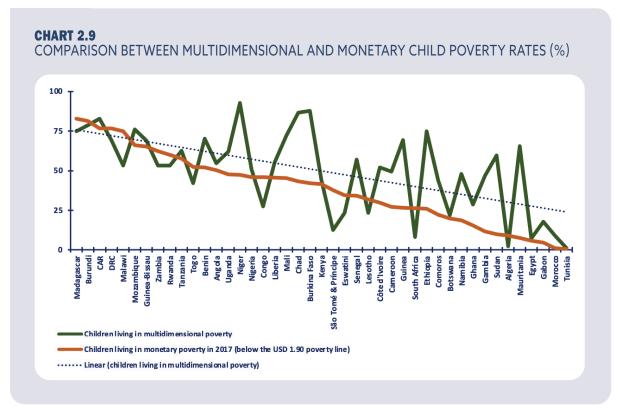
It is again Nigeria, the DRC, Tanzania and Ethiopia that have the highest absolute numbers of children in monetary poverty (see Table A3.8 in Annex 3). In comparison to other regions, Africa has, in monetary terms, the largest proportion of extremely poor children in the world (66 per cent) (Silwal et al. 2020). This means that 2 out of every 3 extremely poor children in monetary terms live in Africa.

Projections suggest that 305 million children in Africa – 2 in every 5 – may be living in extreme monetary poverty by 2030, making up more than half of all poor children worldwide (Watkins and Quattri 2019). This rings alarm bells about the world's ability to meet Goal 1 of the SDGs, which seeks to end extreme poverty for "all people everywhere".

2.3 Comparison of multidimensional and monetary child poverty

Children who live in monetarily poor households may not necessarily be multidimensionally poor, and vice versa (UNICEF Zimbabwe 2021; de Milliano and Plavgo 2018). Owing to differences in intrahousehold resource distribution as well as the fact that children require goods and services that are more likely to be unavailable locally, multidimensional and monetary poverty are expected to differ (Roelen 2017; de Neubourg et al. 2014). The two measures of poverty complement one another since they each highlight a different aspect of child poverty. In combination, they help identify poor children and can prompt different kinds of policy responses (Bessell 2022; Salecker et al. 2020).

Comparing these two metrics of child poverty reveals that the proportion of children who are multidimensionally poor is, on average, 12 percentage points higher than that of children who are living in monetary poverty (see Chart 2.9).



Source: Based on data from Silwal et al. 2020.

There are, however, a few countries where monetary child poverty levels are considerably higher (10 per cent or more) than multidimensional poverty rates. This implies that, while these two measures of poverty are complementary, they cannot be substituted for one another. In order to better identify disadvantaged children, comprehend their situation and develop effective policy responses, both measures should be employed (Bessell, 2022; Roelen, 2017).

2.4 Good policy practices to address child poverty: Some highlights

When addressing child poverty, policy-makers should focus on putting a basic package of policies and programmes in place. There are common threads that countries can develop and adapt to their contexts (see Figure 2.1). Bringing together communities, practitioners and researchers to design new approaches could help develop innovative and transformative solutions to this complex problem.

FIGURE 2.1 POLICIES AND PROGRAMMES TO ADDRESS CHILD POVERTY

Some proven solutions to child poverty

- Child-sensitive social protection and social welfare services
- Explicit inclusion of child poverty in national policies
- Pro-poor economic growth
- Community participation in budget processes
- Addressing social stigma and discrimination

Multidimensional child poverty

Providing high-quality services and ensuring that the most deprived children (particularly those facing multiple deprivations) have access to them and use them. Depending on national approaches to multidimensional child poverty, the elements of focus could include the following:

- Nutrition
- Sanitation **Drinking water**
- Child mortality Electricity
- Years of schooling

Cooking fuel

- School attendance
 - Assets

Housing

However, the policy areas will vary by the particular multidimensional measure (see Charts 2.5 and 2.6). While all stages of a child's life are important, early childhood and adolescence are emerging as crucial moments in children's development which are not always fully considered.

Monetary poverty is a crucial driver of multidimensional child poverty

Children who grow up in multidimensional poverty are more likely to live in monetarily poor households as adults.

Monetary child poverty

Supporting families and households to have a minimum income and ensuring that financial barriers don't prevent children from reaching their potential.

Supporting livelihoods and employment: employment and livelihood support; assistance during adolescent transitions; laws and regulations to promote decent work (such as minimum wage and parental leave); high-quality, affordable child care; preventing child labour as a response to poverty.

Direct financial support to families with children, such as child grants or family benefits. Benefits that are not directly targeted at children can also support children in poverty.

Reducing the cost of basic goods and services, including user-fee abolition for essential services, and addressing the prices of basic goods such as food, housing and energy.

Successful interventions demonstrate the effectiveness of a multi-sector approach in increasing impact. A number of successful programmes in different African countries, highlighted in Box 2.2, provide insights into how to formulate integrated multi-sectoral policies and programmatic interventions.

BOX 2.2: Policy highlights: Examples of some programmes in Africa that have successfully addressed child poverty

SOUTH AFRICA'S CHILD SUPPORT GRANT AND CHILD WELLBEING

South Africa's Child Support Grant is a child-focused programme that has expanded gradually, driven by policy changes and improved outreach, to provide income security to the households of poor and vulnerable children. It increased the maximum age of target beneficiaries from 7 to 18 years, reaching nearly two-thirds of children under the age of 18. A monthly benefit of 300 South African rand (ZAR) per child (USD 28) is provided to caregivers with annual earnings of below ZAR 34,800 for a single adult and ZAR 69,600 for a couple.

In addition to alleviating poverty, the grant has had a positive effect on early childhood development, school attendance, educational attainment, overall health status, and has reduced risky behaviour by adolescents. Early enrolment in the programme was found to produce stronger impacts. The grant also facilitates access to the labour market for unemployed caregivers, especially women.

Sources: ACPF 2023b; SASSA 2022; Heinrich et al. 2017; Samson et al. 2016.

THE CHILD DEVELOPMENT GRANT PROGRAMME IN NIGERIA

The Child Development Grant Programme is a social protection programme addressing the poor health, hunger and malnutrition of children under 5 living in extreme poverty in Northern Nigeria. It targets pregnant women and their children. The programme provided an initial unconditional cash supplement of 3,500 Nigerian naira (NGN) (USD 20) per month, which was increased to NGN 4,000, to over 90,000 pregnant women to support household expenditure on food. Alongside the cash transfer, communities in the programme received education and counselling on nutrition and child health care practices through the social behaviour change communication programme, resulting in improved health for women and children.

The programme was effective in preventing malnutrition and improving other health-related and economic outcomes (livelihoods and income). Below are some of the results related to child health and nutrition:

- 1) Pregnant women were able to meet the dietary needs of their children, thus improving household food security.
- 2) There was an 8 per cent reduction in the proportion of children who were stunted.
- 3) There was an increase of 60 per cent in the number of children under 6 months being exclusively breastfed.
- 4) An increase in child vaccination led to a 19 per cent increase in measles vaccinations and a 16 per cent reduction in the frequency of illness among children.

Sources: Action Against Hunger et al. 2020; Akeju 2020; e-Pact consortium 2019; Zasha and Magaji 2014.

BOX 2.2: Policy highlights: Examples of some programmes in Africa that have successfully addressed child poverty (continued)

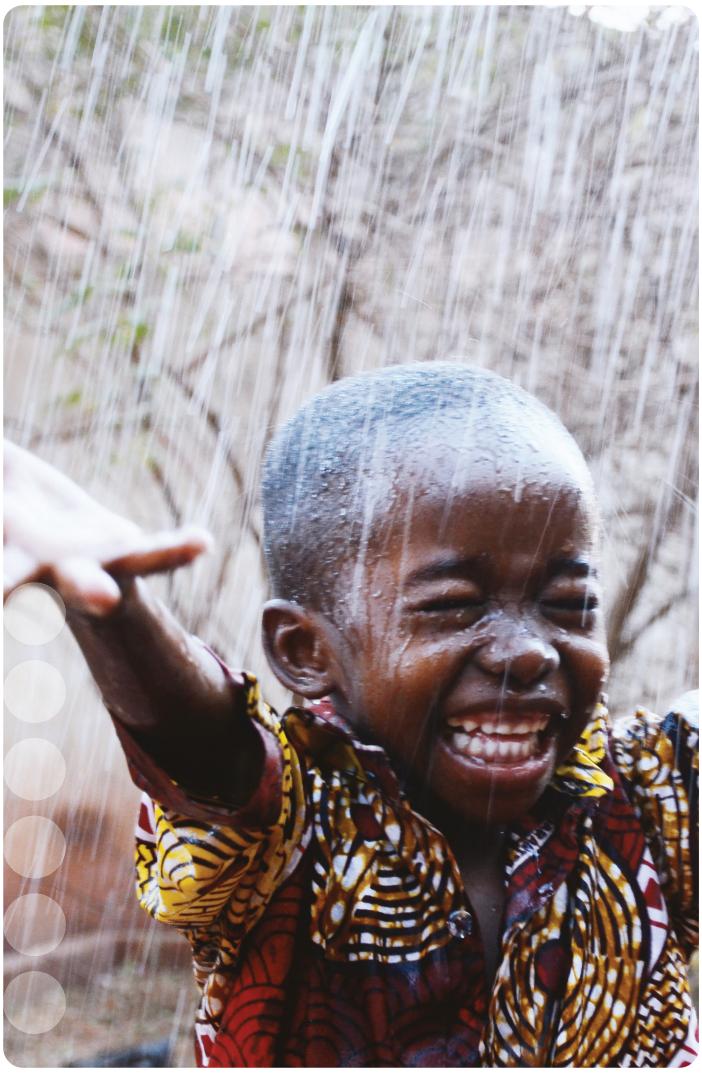
HOME-GROWN SCHOOL-FEEDING PROGRAMME OF ETHIOPIA

The Home-Grown School-Feeding (HGSF) pilot programme was implemented in 2012 in two regions, covering 238 schools with 172,919 students. Pre-primary and primary school children received a hot nutritious meal at school. The HGSF improved access to education, increased school attendance to 95 per cent, improved children's performance, reduced short-term hunger and created market opportunities for local smallholder farmers. The HGSF created job opportunities for women, 2000 in food processing and 570 as cooks.

The second programme was the emergency HGSF programme, set up as a response to the drought in 2015/16. The government adopted the model of the pilot programme to provide emergency meals for 2.8 million children in 6,742 pre- primary and primary schools. During the drought in 2018, 315,000 students, accounting for a quarter of the students affected, received nutritious meals. This emergency programme also covered malnourished pregnant and breast-feeding women and acutely malnourished children aged 6–59 months. In 2018, 147,000 malnourished pregnant women and children benefited from the emergency HGSF.

Sources: African Union 2021; Swensson 2021; WFP 2019; WFP and FDR of Ethiopia 2018.

While it is important to recognise the efforts made to address poverty in general and child poverty in particular, Africa has not made significant headway in ending child poverty. It has instead lagged behind other developing regions. The above analysis shows that African governments have not prioritised child poverty, despite its far-reaching impact on children.



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Child poverty: Groups at particular risk

This chapter provides an analysis of the state of poverty among more vulnerable groups of children, using the most recent available data. It highlights some of the interventions that have been effective in addressing their special needs.

3.1 Children who are at particular risk of poverty

The profile of children living in poverty varies across countries, but some clear patterns emerge showing that certain children are at greater risk of living in poverty than others. These include children in rural areas and urban slums; children living in conflict zones, fragile states and areas affected by humanitarian crises; girls; children with disabilities; and children in large families and households headed by people with low levels of education levels (Boyden et al. 2019; Dabalen et al. 2015;). For a more detailed description of vulnerable groups of children, see Box 3.1.

These groups of children are less likely to be well nourished, receive good education, live in wellconstructed housing, or access basic health care, clean drinking water or improved sanitation. Because they are deprived in such critical aspects of their lives, the wellbeing of these children is severely affected and they are much more likely to die before their 5th birthday. Should they survive, their prospects for learning, employment and a better future are diminished.

Highly vulnerable groups of children are frequently absent from monetary and multidimensional poverty estimates, and their situation is often not sufficiently captured in child poverty analysis (Global Coalition to End Child Poverty 2019). Without adequate, reliable and timely evidence, these children are likely to continue to be overlooked by policies and programmes, further worsening the already dire situation they are in.

BOX 3.1: Children at higher risk of poverty

Children in conflict and fragile contexts: Child poverty is more prevalent in conflict-affected areas and fragile states. It is estimated that 42 per cent of children in conflict situations live in extreme poverty compared to 15 per cent of those in peaceful contexts.

Displaced and migrant children: Millions of children are on the move as a result of armed conflict, extreme weather events and displacement, which lock them in a downward spiral of deprivation. As a result, poverty among internally displaced, migrant and refugee children is staggering.

Children in rural areas and urban slums: Children in rural communities generally lag behind their urban peers in access to basic services. Data show that poverty rates in Africa are higher in rural than urban areas. However, children living in slum areas are at much higher risk of extreme poverty than those in rural areas. They have poorer living conditions and are more likely to experience common childhood illnesses such as fever and diarrhoea.

BOX 3.1: Children at higher risk of poverty (continued)

Children with disabilities: Children with disabilities experience more forms of deprivation than those without disabilities. When they live in monetarily poor households, they often experience worse health outcomes than their counterparts in richer households, owing to the cost of accessing the extra care they need.

Children affected by HIV/AIDS: These children are at risk of neglect, abuse and exploitation. Evidence shows that children who are orphaned by HIV/AIDS or who live with HIV experience multiple and overlapping risks that often lead to further deprivation. Girls are disproportionately affected in such cases.

Household variables: The characteristics of the household in which children live, including its size, play a role in determining their vulnerability to poverty. Children living in households headed by a woman or someone living with HIV/AIDS or a person with low levels of education have a higher risk of experiencing multiple deprivations.

Girls: Gender is a key factor in poverty dynamics. In almost all situations, women and girls bear a disproportionate burden of poverty. They are more likely to live in poor households than men and boys. World Bank and UNICEF estimates show that 26 per cent of children in female-headed households live in extreme poverty, compared to 18 per cent in male-headed households.

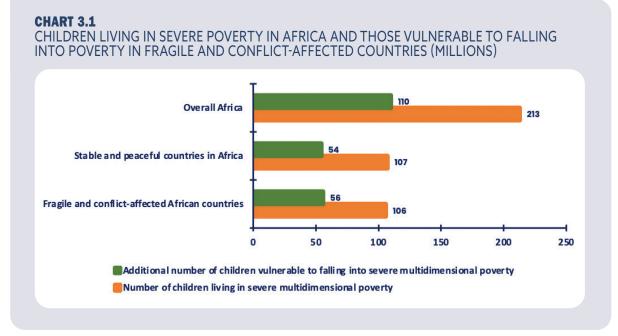
Sources: UNAIDS 2023; Global Coalition to End Child Poverty 2022; UNICEF 2022b; USAID 2022; World Bank 2022a; Shireen et al. 2022; Salecker et al. 2020; Silwal et al. 2020.

3.1.1. Children in conflict-affected and fragile contexts

Children are more likely to be separated from their families, not attend school, experience sexual violence, or be abducted, trafficked, assaulted, maimed, recruited into armed groups or killed during armed conflict (Save the Children 2022). Child poverty is more prevalent in fragile and conflict-affected countries. Of the 352 million children living in multidimensional poverty in Africa, 65 per cent live in fragile and conflict-affected countries (see Table A3.8 in Annex 3). And among the 180 million children living in fragile or conflict-affected countries, child poverty levels are much higher than they are in stable and peaceful countries (Save the Children 2022).

Further analysis shows unacceptably high levels of multidimensional poverty in fragile and conflictaffected countries. For example, in Mozambique, one of the countries considered fragile and affected by conflict, nearly 1 in 2 children (46 per cent) were living in poverty in 2019 (World Bank 2023a; UNICEF 2020). Similarly, in Somalia, 1 in 3 children and young people live in extreme poverty (UNICEF 2020).

It is therefore very concerning that half of the children in Africa who are at high risk of falling into poverty live in these fragile and conflict-ridden countries (see Chart 3.1), and it is worth remembering that the actual number of poor children living in conflict situations is likely to be higher, given the lack of data available in these locations.



Sources: Based on data from UNDP and OPHI 2022 and World Bank 2023a.

3.1.2. Displaced and migrant children

Forcibly displaced⁵ and migrant children often face abuse, exploitation and neglect. They are also frequently deprived of protection from violence and may be unable to access education, health care, adequate nutrition and decent housing.

The large amount of conflict and violence in Africa has given rise to large numbers of internally displaced people, creating a major challenge for the continent. According to the 2022 Global Report on Internal Displacement, of the 27.2 million people who were internally displaced in Africa, children constituted half (13.6 million) (IDMC 2022). Africa also has the largest share of children among its migrant population. Over 1 in 4 immigrants in Africa is a child, and poverty is one of the major drivers of migration (UNICEF 2019a; 2019c).

Displacement significantly increases the likelihood of household poverty (Klugman 2022). Research shows more poverty among displaced and migrant children than non-displaced children, according to both multidimensional and monetary-poverty measurements. Another study, which examined the intersection of forced displacement, poverty and gender, found that displaced communities were significantly poorer than host communities. This was observed in five African countries: Ethiopia, Nigeria, Somalia, South Sudan and Sudan (Admasu et al. 2022). Gender differences were observed in the level and severity of poverty, which was generally higher among female-headed households in camps than among male-headed households. These differences spilled over to affect the children.

3.1.3. Children living in rural areas and urban slums

Globally, 83 per cent of poor people (964 million people) live in rural areas (UNDP and OPHI 2022). In Africa poverty is much more pervasive and widespread in rural areas than urban areas (Global

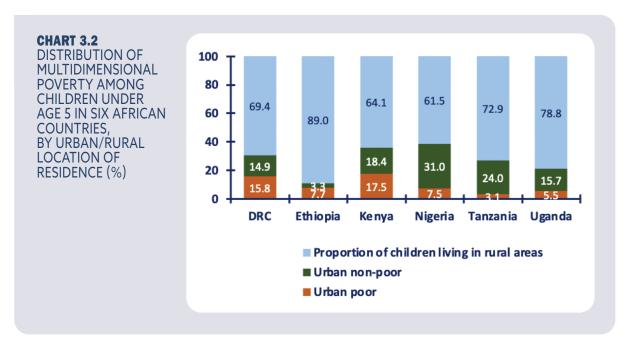
⁵ According to UNHCR's definition, forcibly displaced populations include refugees, asylum seekers and internally displaced people.

Coalition to End Child Poverty 2022; Salecker et al. 2020). Out of the 776 million multidimensionally poor people on the continent, nearly 2 out of every 3 live in rural areas (see Alkire et al. 2022; UNDP and OPHI 2022). Another study that analyses multidimensional child poverty across 30 countries in Africa indicated that the poverty rates among rural children were considerably higher than the rates for children in urban areas, mainly owing to higher deprivation in nutrition (de Milliano and Plavgo 2014). Children in rural households are at greater risk of poverty driven by extreme weather events, such as drought, which result in food and livelihood insecurity (Boyden et al. 2019; Shireen et al. 2022).

Country-level data also corroborate these patterns. In Namibia the proportion of children in rural areas who are multidimensionally poor is 64.4 per cent (Namibia Statistics Agency 2021). In Ethiopia, it is 94 per cent, which is more than double that of the rate among children residing in urban areas (42 per cent) (UNICEF Ethiopia and Central Statistical Agency 2019). Similarly, in Nigeria, 90 per cent of rural children are poor (National Bureau of Statistics of the Federal Republic of Nigeria 2022).

Although children in rural areas are disproportionately affected by poverty, increasing urbanisation and population growth in cities have also exacerbated poverty in urban settings (Shireen et al. 2022). A stark difference is observed in levels of poverty in urban areas between those living in slum areas and those in relatively well-off residential areas. Children living in slum areas have poorer health than those living in well-off places. They are less likely to be fully vaccinated, and more likely to experience common childhood illnesses and to have difficulty accessing safe drinking water and basic sanitation facilities (Shireen et al. 2022).

An in-depth analysis of data from the Demographic and Health Surveys in six African countries⁶ shows that Kenya and the DRC have the highest levels of urban poverty (18 per cent and 16 per cent respectively) among children under the age of 5 (see Chart 3.2). Approximately half the urban children under 5 years of age in these two countries live in poverty. In Ethiopia, although under-5s living in urban areas account for 11 per cent of the total population, about 70 per cent of these urban children live in poverty.



Source: Based on data from Shireen et al. 2022.

⁶ These are the DRC, Ethiopia, Kenya, Nigeria, Tanzania and Uganda.

3.1.4. Children with disabilities

The United Nations Convention on the Rights of Persons with Disabilities (CRPD) calls on States Parties to "recognize the right of persons with disabilities to an adequate standard of living for themselves and their families, including adequate food, clothing, and housing, and to the continuous improvement of living conditions" (UN 2006). Article 28 of the CRPD also calls on States Parties to "ensure access by persons with disabilities, in particular women and girls with disabilities and older persons with disabilities, to social protection programmes and poverty reduction programmes". The CRC, under Article 23, and the ACRWC, under Article 13, also recognise the need for people with disabilities to have effective access to education, training, health care services, rehabilitation services, preparation for employment, and recreation opportunities (African Union 1990; UN 1989).

Despite such provisions, children with disabilities still face legal, physical, economic and social barriers to realising their rights, making them one of the most marginalised groups of children and putting them at increased risk of poverty. The lack of disability-inclusive policies and programmes in education, health, housing, livelihoods, water, sanitation and participation means children with disabilities are more likely to face poverty than those without disabilities. A study in Darfur found that children with disabilities, particularly girls, experience the highest level, and the greatest breadth and intensity of poverty (Trani and Cannings 2013). Families with children with disabilities are also at a much higher risk of poverty compared to other families, given the extra costs of care and the difficulty of going out to work because of care responsibilities at home.

Poverty can be both a cause and a consequence of disability (DFID 2000). On the one hand, poverty can result in disability through an inability to access childhood immunisations for measles or polio, poor access to treatment for childhood infections such as measles or meningitis, and poor nutrition. On the other hand, disability results in additional expenses related to assistive devices and extra transportation, which can exclude poor households from opportunities and services. Poverty and disability reinforce each other, contributing to increased vulnerability, deprivation and exclusion from services among children with disabilities, whose basic needs are not met.

Evidence shows a high proportion of people with disabilities living below the national or international poverty line. In some countries, the rates are double those of people without disabilities (UNDESA 2018). Analyses in 22 African countries showed that there was a poverty gap between people with and without disabilities in all of them. The gap is found to be the largest in Uganda, with a poverty prevalence rate of 90 per cent for people with disabilities and 57 per cent for people without disabilities (UNDESA 2018). Further, people with disabilities are more likely to live in food-insecure households and to experience multiple deprivations (Mitra 2018, 2006; Trani et al. 2015; Mitra et al. 2013).

The Nigeria Multidimensional Poverty Index (2022) indicates that 1 in 12 children under 5 in the country – some 2.05 million children – share a household with someone living with a disability, and children with disabilities are poorer than other children in these households (National Bureau of Statistics of the Federal Republic of Nigeria 2022). Such data reflects the failure to assure the rights of children with disabilities, a disturbing finding across the continent.

3.1.5 Children affected by HIV/AIDS

Significant numbers of children in Africa face risks related to HIV/AIDS and its socio-economic effects. These children remain neglected despite a greater risk of death, poverty, abuse and exploitation. Girls in particular are disproportionately affected both directly and indirectly by HIV/AIDS (USAID 2022).

Globally, children accounted for 15 per cent of all AIDS-related deaths, despite the fact that they account for only 4 per cent of the total number of people living with HIV. This high morbidity is mainly due to the difference in access to life-saving treatment between adults and children. According to UNAIDS, only 52 per cent of children living with HIV are on life-saving treatment, compared to 76 per cent of adults (UNAIDS 2023).

Available data show that, as of 2021, more than 14.9 million children worldwide are estimated to have had lost one or both parents to for reasons related to HIV/AIDS. More than three-quarters of these children (11.2 million) live in sub-Saharan Africa (UNAIDS 2022). Such children experience multiple and overlapping social, emotional and health vulnerabilities. For instance, a study in Tanzania covering 47,617 caregivers of children who had been orphaned or made vulnerable by HIV/AIDS showed that food insecurity was much higher in households where the caregiver was living with HIV/AIDS. Among such households, 34.2 per cent were suffering from severe hunger, compared to only 4.6 per cent of other households (Exavery et al. 2020). These findings show the much higher vulnerability of children living in HIV/AIDS-affected households to hunger and malnutrition. Some of the contributory factors relate to large portions of household income and time spent on health care, which reduce the resources spent on children and the time spent on income-generating activities (Exavery et al. 2020).

Targeted interventions linking HIV treatment and prevention services for children to other complementary HIV-sensitive social protection or livelihood assistance programmes, such as food and nutrition interventions, have been effective in reducing the vulnerability of children and households affected by HIV/AIDS (USAID 2022). Such programmes need to be scaled up to reach out and address the plight of these highly vulnerable groups of children.

3.1.6. Household variables

Children in households headed by a person with a good level of education are less likely to live in poverty. The prevalence of child poverty is less than 25 per cent in rural households headed by someone with a secondary education (Silwal et al. 2020). Higher levels of education of household heads are also associated with lower fertility, and better-educated people tend to have fewer children. Larger households tend to have a higher prevalence of child poverty than smaller ones. For example, more than 20 per cent of children in large households (six or more members) live in extreme poverty compared to only 6 per cent in households with three members or fewer.

Data shows that children in female-headed household are at a higher risk of poverty. For example, 26 per cent of children in female-headed households live in extreme poverty, compared to 18 per cent in male-headed households (Silwal et al. 2020). A variety of household characteristics, including the gender of the head of the household, have an impact on child poverty and should be taken into account when targeted social protection programmes are being designed.

3.2. Gender disparity in child poverty

Girls in Africa are 25 per cent more likely than boys to live in poverty and they are also more likely to drop out of primary school (ACPF 2020a). Despite greater deprivation among girls, the performance of African governments in fulfilling their rights and promoting their wellbeing is unsatisfactory and is largely driven by low investment in gender- and age-sensitive service delivery and weak social protection (ACPF 2020a).

Africa scored 48.6 per cent overall on the Africa Gender Index, revealing a wide gender gap in key areas of development (African Development Bank Group and UNECA 2019). Recent genderdisaggregated estimates of global poverty by UN Women, UNDP and the Pardee Center for International Futures show that, globally, 388 million women and girls live in extreme poverty, compared to 372 million men and boys. It is estimated that 63 per cent of the world's extremely poor women and girls live in sub-Saharan Africa (UN Women 2022).

Poverty affects girls and boys differently because of social norms that define their roles within the family and social environment differently and lead to different life experiences (ACPF 2020a; Chant 2003). Patriarchal norms and structures have resulted in age- and gender-based hierarchies in decision-making and access to resources and capital in a way that entrenches discrimination and keeps women and girls poorer. Beyond these unbalanced power relations, disadvantages such as minority ethnic origin and disability can multiply the existing vulnerabilities of girls. These interact to determine access to material and social resources and thus have a significant impact on poverty.

Attitudes towards gender norms mean that adolescent girls bear a disproportionate burden of domestic work, face more sexual and gender-based violence and are subject to more harmful practices, which intersect to heighten their risk of being poor. Gender is therefore one of the most important factors contributing to poverty, making girls more vulnerable (UN 2019b; Chant 2003). For these reasons, gender is an important consideration in policy and programme design, and taking it into account will help to address the causes, drivers and consequences of child poverty.

3.3. Reducing poverty among the most at-risk children

3.3.1. School-feeding programmes

The immediate and long-term benefits of school meals in improving learning, health and nutrition outcomes for the most vulnerable children have been widely documented (Adelman et al. 2019; Black et al. 2017). Better education, health and nutrition mean enhanced cognitive development and higher productivity in the future. School-feeding programmes are considered most beneficial for the poorest and most marginalised children, especially those living in conflict and emergency situations where lack of food prevents children from attending school (Hatløy and Sommerfelt 2017). Besides being an incentive for parents to send their children to school, school-feeding programmes also protect children from being conscripted into armed groups, forcibly married, abducted or engaged in hazardous work.

Although 53 million children have benefited from free school meals, this figure is still below the number of those in need, given the high levels of deprivation in access to food and education. These programmes remain inaccessible for millions of the children who need them most (Hatløy and Sommerfelt 2017). On the positive side, there is noticeable momentum to expand the coverage of school feeding-programmes. Over the years, there has been an increase in domestic funding of the programmes by governments that recognise the impact of these programmes on children. A number of countries have adopted school-feeding policies and others have allocated public budgets to the programmes so that they can be run in a sustainable way, including by using locally grown food. The World Food Programme's State of School Feeding Worldwide report indicates that 4 in 5 countries globally have institutionalised such programmes now comes from domestic funds (WFP 2020a). While these are all encouraging developments, the big gap between supply and demand calls for further expansion at scale.

3.3.2. Cash transfers

Countries in Africa are increasingly adopting cash transfer programmes to tackle poverty. Cash transfers that are complemented by other social protection programmes, such as health insurance or nutrition services targeting those most at risk, are effective in reducing multiple deprivations among vulnerable children (UNICEF 2017).

Cash transfers have had a significant impact on the wellbeing of the most vulnerable children (Kelly 2019; Farrington and Slater 2006). In many instances, the investments of recipient families in children's food, education and health have increased following cash assistance (Ndoka 2022). The Child Support Grant for rural communities in South Africa has demonstrated that the benefit of direct cash transfers for rural households goes beyond addressing immediate consumption needs and results in positive long-term livelihood effects. Unconditional cash transfers are effective in enabling households to respond to shocks, which could otherwise force them to resort to negative coping strategies like withdrawing children from school so that they can generate income. Box 3.2 presents the key elements of various cash transfer programmes for protecting the most vulnerable children and families.

BOX 3.2: Cash transfer programmes that have been successful in mitigating multiple deprivations for vulnerable children in some African countries

PROVIDING BENEFITS FOR ORPHANS AND VULNERABLE CHILDREN: THE LIVELIHOOD EMPOWERMENT AGAINST POVERTY PROGRAMME IN GHANA

The Livelihood Empowerment Against Poverty (LEAP) programme is a conditional cash transfer programme currently implemented in about half of Ghana's districts. Established in 2008 it now reaches more than 344,023 households, which account for more than 1.5 million recipients. The programme aims to alleviate short-term poverty by delivering direct cash payments, and to foster long-term human capital development by providing health insurance and encouraging school enrolment.

It is targeted at extremely poor households containing orphans or vulnerable children, children under 1 year of age, pregnant women, elderly people and people with disabilities who are unable to work. The payment is bi-monthly and ranges from Ghanaian Cedi (GH¢) 64 to GH¢ 106 (approximately USD 9–16), depending on the number of eligible recipients in the household.

The programme has benefited the poorest groups in the population through the reduction and prevention of extreme poverty. Results include increased school attendance among children under the age of 15, as well as increased vaccinations and health check-ups for children under the age of 5.

Sources: Amenuveve 2022; de Groot et al. 2015.

KENYA'S CASH TRANSFER FOR ORPHANS AND VULNERABLE CHILDREN

Kenya's Cash Transfer for Orphans and Vulnerable Children is a national child protection programme that was rolled out in 2004 to provide a monthly payment to poor families with orphans and vulnerable children up to the age of 17. In 2019 more than 340,000 households, accounting for approximately 17 per cent of all orphans and vulnerable children in Kenya, were covered. The programme was successful in increasing school enrolment and completion of basic education, with

BOX 3.2: Cash transfer programmes that have been successful in mitigating multiple deprivations for vulnerable children in some African countries (continued)

93 per cent of beneficiaries reporting positive impacts on school attendance and performance. Further, the programme had a broad range of positive impacts on beneficiary households, including poverty reduction, increases in food consumption and dietary diversity, improvements in health-care service use, and strengthening of the local economy. Thus, the programme has made progress in improving the lives of children in areas where it was implemented in Kenya.

Sources: FAO 2013; The Kenya CT-OVC Evaluation Team 2012.

THE LESOTHO CHILD GRANT PROGRAMME FOR POOR AND VULNERABLE HOUSEHOLDS WITH ORPHANS AND VULNERABLE CHILDREN

The Lesotho Child Grants Programme provides unconditional cash transfers with the primary objective of improving the living standards of orphans and vulnerable children through better nutrition and health status and increased school enrolment. The programme is targeted at poor households with children and at child-headed households. Households are paid quarterly, with benefit sizes varying according to the number of children in the household. In mid-2015 the quarterly benefit was approximately USD 36 for one or two children, USD 60 for three or four children and USD 75 for five children or more. Eligibility is based on a proxy means score using the National Information System for Social Assistance plus a community validation.

To strengthen the impact of the programme, it was linked with the Sustainable Poverty Reduction through Income, Nutrition and Access to Government Services (SPRINGS) project in 2015. The SPRINGS project is a livelihood programme that provides support for financial inclusion, homestead gardening, nutrition training and market access. Support for homestead gardening can increase the diversity of food produced and consumed in the household, thus having a positive effect on infant-and child-feeding practices. Such coordinated livelihood and social protection interventions, known as 'cash-plus' programmes, complement each other. Their multi-sectoral approach makes them highly effective in improving children's nutrition, increasing school enrolment and decreasing child labour.

The proportion of children completing secondary school increased by 1.3 percentage points among children enrolled in the Child Grant Programme. Child labour decreased by around 2.5 hours per week. A reduction was also noted in the proportion of children working with dangerous tools and those exposed to extreme heat, cold or humidity among the beneficiary children. Cases of wasted and underweight children also fell in households that were beneficiaries of both programmes.

Thus, the integrated approach of the two programmes provided a double benefit, which improved livelihoods, increased dietary diversity, food availability and household incomes. This effectively translated into improved wellbeing of children.

Sources: Pace et al. 2021; Carraro and Ferrone 2020; Gavrilovic et al. 2016.

Properly designed and delivered cash transfer programmes have the potential to break the intergenerational cycle of poverty and inequity (Araujo et al. 2016). However, notwithstanding the extensive benefits of cash transfers to poor families and children, many researchers have warned that cash transfers should not be regarded as a "silver bullet" (Handa et al. 2014; Daidone et al. 2015). Evidence on the long-term impact of cash transfers is mixed. It is important to consider applying direct cash transfers in synergy with other poverty alleviation measures.

In conclusion, specific groups of children are at considerably higher risk of poverty. They require targeted attention because of their conditions or the circumstances in which they live, especially where they live outside standard households. Their invisibility to child poverty assessments, means that their poverty goes undetected and they remain beyond the reach of poverty alleviation initiatives. There is, therefore, a clear need for inclusive policies and programmes that leave no child behind. Successful and promising programmes for vulnerable children must be implemented at scale. This requires more resources, and efficient use and coordinated involvement of all actors, including parents, community leaders, civil society organisations and children themselves.







Causes and enablers of child poverty in Africa

Child poverty has numerous causes and triggers. It is accentuated by factors that range from social and economic inequalities, poor macroeconomic and financial policies and bad governance, to natural disasters and emergencies, such as conflict, the climate crisis and the COVID-19 pandemic. But fundamentally it is the end result of multiple prolonged failures of States to live up to their obligations to children. It is the visible result of the invisibility of children in national agendas, budgeting processes and accountability mechanisms.

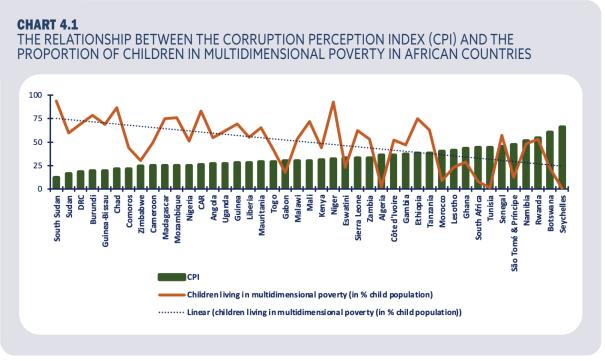
This chapter discusses how these and other related factors associated with Africa's political, social, economic and governance landscapes give rise to or sustain child poverty in the African context.

4.1 Good governance: A critical factor in tackling child poverty

Governance plays a critical role in children's lives in at least two ways. The first is through the development and implementation of laws and policies that bring to life State obligations to respect, protect and fulfil the rights of children. The second relates to ensuring equitable growth through equitable and inclusive allocation of resources. Both of these are premised on States being the principal bearers of responsibility for children's rights and wellbeing and on their willingness and capacity to deliver on their responsibilities. Where governance is poor, it more likely that equitable distribution of resources will not take place.

Previous reports in this series have shown the strong correlation between good governance and the realisation of children's rights. They have also clearly shown that countries need not necessarily be wealthy to deliver on their commitment to children (ACPF 2018b). The African Report on Child Wellbeing 2020, which focused specifically on girls, also showed that countries did not need to be rich to be friendly towards girls. It further emphasised that good governance is as important as economic resources for governments to meet their obligations to uphold girls' rights (ACPF 2020a). The millions of poor children living in richly endowed African countries further confirms this finding. For example, Equatorial Guinea, with a GDP per capita of USD 34,865, is among the less child-friendly countries in the 2018 Child-Friendliness Index (ACPF 2018a), yet it is among the countries with the highest infant mortality rates in Africa (57 deaths per 1,000 live births) (see Table A3.4 in Annex 3). By contrast, Rwanda, with a much lower GDP per capita of just USD 822, has an infant mortality rate of 30 per 1,000 live births, almost twice as low. Such disparities in wellbeing indicators are due to a lack of equity in the distribution of resources and a failure to orient public expenditure in a pro-poor fashion, both of which are related to governance (World Bank 2023d).

One manifestation of weak governance in a country is the prevalence of widespread corruption. It drains States of economic resources that should be invested in their citizens, thus reducing the amount of public resources available to be spent on protecting and fulfilling children's rights. Corruption is strongly associated with multidimensional child poverty. Countries that are perceived to be more corrupt, i.e. have a low score on the Corruption Perception Index compiled by Transparency International, have, on average, a higher level of multidimensional child poverty (see Chart 4.1).



Sources: Based on data from Transparency International 2022 and UNDP and OPHI 2022.

South Sudan, with the highest perceived level of corruption in Africa, is also the country with the highest proportion of children (94 per cent) living in multidimensional poverty. Burundi and Chad, with nearly 80 per cent and 87 per cent, respectively, of their child populations living in multidimensional poverty, are also among the countries with a high perceived level of corruption, as measured by the CPI score.

Children are some of the greatest victims of corruption, yet they lack the power to challenge it or to influence the design and delivery of the public social services that should benefit them (African Union 2019). Corruption has been consistently correlated with higher school drop-out rates and high levels of infant mortality (Nadpara 2015). Globally, more than 140,000 child deaths each year could be indirectly attributed to corruption (Hanf et al. 2011). Another study also revealed that a 1-point increase in the Corruption Perception Index, and hence less corruption, is associated on average with a decrease in infant mortality of 1.2 per 1,000 live births (Nadpara 2015).

4.2 Economic growth and inequality

Before the COVID-19 pandemic, the outlook for economic growth in Africa was favourable. As the pandemic's grip loosened, Africa's economic growth, as measured by GDP, rebounded, rising by 4.7 per cent in 2021. This contrasted sharply with the contraction of 2.9 percentage points in 2020 caused by the pandemic (see Chart 4.2).



Sources: UNCTAD 2023; IMF 2022e; UNECA 2022.

Currently, consecutive and overlapping shocks, such as the pandemic, conflicts and climate change, have placed additional strain on economic growth, which, as Chart 4.2 also indicates, is projected to fall to 3.8 per cent in 2023 and 2024, and have caused global supply chain bottlenecks and commodity price hikes (IMF 2022e). The compounding impact of these shocks has affected the resources that governments and households can mobilise to invest in children. As growth slows down, household income is directly affected. This then affects households' consumption patterns and ability to pay for services for their children. At the State level, spending on sectors benefiting children is reduced, further limiting already poor access to essential services (ACPF 2021).

The impact of a slowdown in economic growth on child wellbeing is more pronounced in poor countries and has been linked to rises in maternal and infant mortality (Maruthappu et al. 2017). Judging by past trends, such economic slowdowns also lead to an increase in child labour. This was the case in Tanzania, where income shocks in poorer households increased the incidence of child labour and reduced school enrolment (Beegle et al. 2006).

Although Africa has recorded laudable improvements in social and economic development in the last three decades, inclusive growth has remained elusive. High levels of income inequality have left a significant number of women, children and young people on the periphery of society in conditions of severe poverty (Khan 2022). High- and persistent-income inequality contributes not just to child poverty today but also to its intergenerational transmission. The crucial link comes through inequality of opportunity, which is exacerbated by the absence of pro-poor public policies. This, in turn, leads to the perpetuation of poverty and the deepening of inequality (Narayan et al. 2018; Ortiz et al. 2012).

Africa contains some of the most unequal countries in the world. For instance, South Africa was rated in 2017 as the most unequal country in the world, followed by Namibia, Zimbabwe and Botswana (UN University 2022). There are countries that have employed effective redistributive policies, such as cash and in-kind grants and transfers, which have also proven to be effective measures to tackle poverty (Khan 2022). However, only 16 per cent of African children live in households receiving cash transfers, and the total amount spent by States on social protection is too small to reduce overall poverty in any significant way.

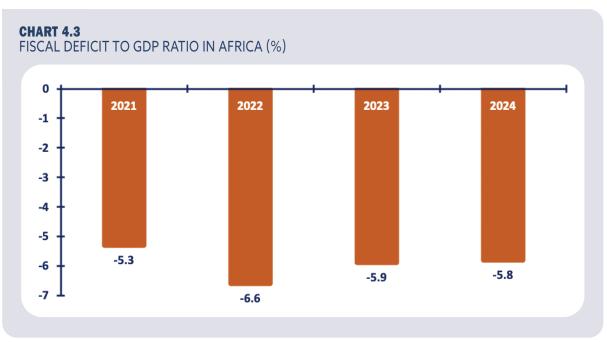
4.3 Taxation, subsidies and public financing decisions

Child poverty is also affected by the type of economic policies governments pursue. These define the extent to which public financial resources are allocated to the delivery of social services. These policies articulate a government's financial priorities, whether they are pro-rich subsidies, pro-poor expenditure targeting sectors benefiting children, or spending focused on defence. Current estimates for sub-Saharan Africa show that governments have spent 3.7 per cent of GDP, on average, on military and fuel subsidies. That amount is more than enough to cover 12 months of cash transfers in many of these countries. On average, investments in energy subsidies and the military were about eight times higher than investments in safety nets in 2021 (UNICEF 2021b). Spending is often skewed in favour of sectors and facilities serving higher-income groups. For instance, in the CAR, spending on energy subsidies is three times higher than spending on social safety nets (Beegle et al. 2018). Urban teaching hospitals that very poor people rarely use often absorb 40 per cent or more of health budgets (Xu et al. 2018).

Limited public financing of basic services means that poor people are forced to pay more for them. This not only prevents poor children from accessing services but also enlarges human capital deficits (Watkins and Quattri 2019). The percentage of total health expenditure contributed by ordinary citizens out of their own pockets is as high as 75.5 per cent in Equatorial Guinea, 72.5 per cent in Cameroon and 70.5 per cent in Nigeria. On a more encouraging note, such expenditure is very low in some countries: just 5.7 per cent in South Africa, 8.2 per cent in Namibia and 10.2 per cent in Zambia (WHO 2019).

The way fiscal systems across Africa operate has also contributed to the increase in inequality and, to a certain extent, poverty. Excessive reliance on indirect taxes and under-reliance on property taxes have worsened prevailing inequalities (Watkins and Quattri 2019). Whenever a tax and transfer system makes the poor pay more in taxes than they receive in transfers, it pushes poor households into severe poverty (Higgins and Lustig 2016).

Furthermore, the presence (or absence) of a fiscal deficit (budget deficit) is an important determinant of financing decisions that affect the wellbeing of children. Before the COVID-19 pandemic, Africa's fiscal deficit had declined slightly from 5.3 per cent of GDP in 2017 to 5 per cent of GDP in 2018 (UNECA, 2019). However, owing to the need for emergency responses to COVID-19 and to engage in heavy stimulus spending to alleviate the economic impact of the pandemic, Africa's average fiscal deficit more than doubled, rising from 4.9 per cent in 2019 to an estimated 10.7 per cent in 2020 (UNDESA 2021). It declined to 5.3 per cent in 2021, but was projected to increase to 6.6 per cent in 2022 because governments had increased their expenditure in order to absorb economic shocks thought to have been partly due to the war in Ukraine (see Chart 4.3).





With such budget deficits, governments that reduce expenditure must do so in such a way that essential child services are not hit by such measures. It is critical not to set back child poverty reduction strategies.

BOX 4.1: Taxes for pro-poor investment: Some good practices

There are some encouraging examples of countries that have used tax systems and subsidy reforms to secure and subsequently release resources for investment in sectors benefiting children. For instance, Ethiopia spends close to USD 2 billion annually in fuel subsidies. The country is slowly lifting the subsidies, although it is not yet clear if the money saved will be reprioritised for investments benefiting the poor. In Egypt, until 2014, energy subsidies accounted for 6.5 per cent of GDP annually. Total spending on social safety net programmes in the country currently stands at 5 per cent. It is estimated that if fuel subsidies were reduced by 50 per cent and the resulting savings invested in a cash transfer programme, the poverty head count ratio in the country would drop by 6.1 percentage points.

In another example, the Algerian government secured funding for social protection programmes through taxes on tobacco and alcohol imports. Taxation on cigarettes was 50 per cent of the price in 2014. In the following years, the country's Ministry of Finance introduced a new law levying additional taxes on alcohol and all tobacco products, as a way to raise funds for social spending as well as fight unhealthy practices such as drinking and smoking.

Sources: IMF 2021, 2017; Abdalla and Al-Shawarby 2017; Ortiz et al. 2017.

4.4 Inflation and food prices

Africa witnessed an overall reduction in inflation between 2017 and 2018, when it fell from 14.4 per cent to 11.1 per cent (UNCTAD 2021). However, with the COVID-19 pandemic, inflation picked up in 2020, increasing to 17.4 per cent, and further increased to a staggering 23 per cent in 2021 as a result of higher oil prices, currency devaluation, subsidy elimination and poor harvests (UNCTAD 2021; UNDESA 2021; UNECA 2019) (see Chart 4.4).



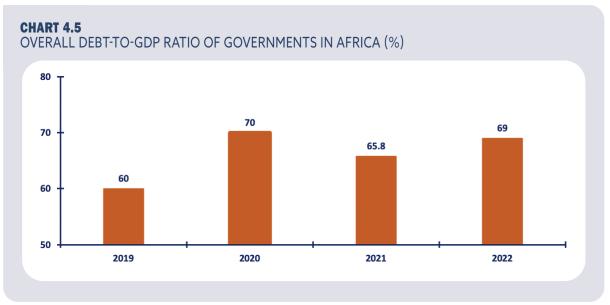
Source: Based on data from UNCTAD 2023.

Studies have established a clear link between inflation and negative child wellbeing outcomes such as hunger and malnutrition (Ibikunle et al. 2022). Inflation makes the costs of food, schooling, and health care and other services unaffordable for poor households and limits what and how much a family can provide for its children. A study in Ethiopia found that exposure to inflation of 10 per cent in the price of *teff*, an Ethiopian staple food, in the fifth to sixth month of a child's life led to a loss of 0.08 cm in height and 5 grams in weight. Children in poor households were the ones found to be most affected (Woldemichael et al. 2017).

The Ukraine–Russia war has exacerbated global food shortages and contributed to the already high price of food. Africa imports around 85 per cent of its cereals, one-third of which come from Russia and Ukraine (IMF 2022b, 2022d). Other disruptions, like flooding, failed rains and conflict, have also increased already elevated food prices and pushed up inflation in countries such as Angola, Egypt, Ethiopia, Guinea and Sierra Leone (Compassion International 2022).

4.5 Government debt

Debt has been one of the factors that has affected countries' capacity to address child poverty. In 2022, governments' overall debt-to-GDP ratio (external plus domestic debt) in Africa was expected to reach 69 per cent (see Chart 4.5). Projections indicate that the debt-to-GDP ratio will continue to deteriorate, owing to global financial conditions (IMF 2022c). Most of the current public debt was created in 2020 and 2021, when countries resorted to borrowing to mitigate the effects of the COVID-19 pandemic (IMF 2022d; UNECA 2022, 2019; UNDESA 2021).





On 31 December 2020, six of the seven countries globally identified by the IMF as being in debt distress were from Africa: Mozambique, Congo (Brazzaville), São Tomé and Príncipe, Somalia, Sudan and Zimbabwe. About 20 per cent or more of foreign-exchange income is dedicated to servicing external debt in some African countries. High debt-servicing payments severely shrink governments' resources, thereby negatively affecting their capacity to invest in services benefiting children (ACPF 2021).

For instance, in 2021, South Sudan, the country with the largest percentage of children living in multidimensional poverty, planned to spend 2.18 per cent of its GDP on debt servicing but just 0.07 per cent on social protection, 0.25 per cent on health care and 1.53 per cent on education. Similarly, Niger, the country with the second-highest percentage of children living in multidimensional poverty, had planned to spend 7.6 per cent of its GDP on debt servicing in 2021, while planning to spend 0.21 per cent on social protection, 1.3 per cent on health care and 3.81 per cent on education. Chad, with the third-highest percentage of children living in multidimensional poverty had planned, in 2021, to spend a staggering 11.12 per cent of its GDP on debt servicing but just 1.38 per cent on health care and 2.75 per cent on education (Government Spending Watch 2021).

4.6 Child poverty and emerging crises

Armed conflict

There are currently 14 active conflicts in Africa.⁷ This covers a quarter of the countries on the continent. Conflicts are a recipe for chronic poverty. The population displacement, destruction of infrastructure, disruption of services, breakdown in the rule of law, and increased capital flight all combine to deepen poverty (Bicaba et al. 2016). Children and women, as the biggest proportion of internally displaced people, are therefore the groups most likely to be deprived of their basic needs and unable to access essential services. In most cases, armed conflicts result in military expenditure consuming the biggest share of the limited state revenue (Le Billon 2000).

⁷ In Burkina Faso, Burundi, Cameroon, CAR, Chad, DRC, Ethiopia, Mali, Mozambique, Niger, Nigeria, Somalia, South Sudan and Sudan.

Impact of COVID-19 on child poverty

With the COVID-19 pandemic, the number of people living below the extreme poverty line in Africa rose by over 70 million in 2020 alone. This has been the largest one-year increase in the number of people living in extreme poverty since global poverty monitoring began in 1990 (World Bank 2022a). In Uganda, there was an estimated increase in poverty of close to 8 per cent (Younger et al. 2020). In Morocco, poverty rose by 5.3 and 7.1 per cent for urban and rural households respectively, and in Ghana, it rose by at least 9 per cent (Savard and Tiberti 2022).

This was the direct result of widespread losses in employment and income as the lockdowns forced people to stop going out to work. In many households, children, and especially girls, suffered from food shortages, violence and abuse and sexual exploitation, were pressured into child marriage and teenage pregnancy, and had their health-care needs neglected (Davidson et al. 2022). In South Africa, close to 150,000 children were orphaned by COVID-19 (UNICEF South Africa 2022). The pandemic worsened inequality across education, employment and health. Income inequality grew by 1.7 per cent in Mozambique and 0.8 per cent in Ghana and Zambia (Lastunen et al. 2021). The disruption to crucial health programmes, such as deworming schemes, affected as many as 456 million children in low- and middle-income countries (WFP 2020b).

School closures led to a halt in school-feeding programmes, disadvantaging millions of children from poor households, for whom the school meal was the largest contribution to their daily nutrient requirements (WFP 2020b). In Nigeria, abrupt nationwide school closures left more than 9 million children without regular school meals (Abay et al. 2021). A pre-COVID-19 survey conducted in public primary schools in Addis Ababa found that 27 per cent of students ate only once a day, while 16 per cent did not eat at home all day (Bureau of Education and Bureau of Women and Children Affairs of Addis Ababa City Administration 2015). Children in government schools in many instances relied on the school-feeding programme for food (Destaw et. al. 2022; OCHA 2019).

Climate change and child poverty

The climate crisis has complicated an already precarious living situation for millions of children, becoming a major driver of child morbidity, hunger and poverty. The majority of Africa's poor population live in rural areas and depend on agricultural activities and fishing for their livelihoods. Adverse weather affects their agricultural production and daily consumption and exacerbates food insecurity (IMF 2022a). In Malawi, Mali, Niger and Tanzania, food insecurity increases by between 5 and 20 percentage points with each drought or flood (World Meteorological Organization 2021). In Ethiopia and Kenya, two of the world's most drought-prone countries, children aged 5 or younger born during a drought are 36 to 50 per cent more likely to be malnourished than children not born during a drought (Smith et al. 2014). In Niger, children aged 2 or younger born in a drought year were 72 per cent more likely to be stunted (UNDP 2007).

In addition to the direct loss of life caused by natural disasters and the disruption of health care services such as immunisation, climate change has provided fertile ground for vector-borne diseases such as malaria, dengue and schistosomiasis; water-borne diseases such as diarrhoea and cholera; and air-borne diseases such as tuberculosis, which together contribute to the heavy burden of disease borne by African children. According to the World Malaria Report 2022, four African countries accounted for just over half of all malaria deaths globally: Nigeria (31.3 per cent), the DRC (12.6 per cent), Tanzania (4.1 per cent) and Niger (3.9 per cent). These countries are also among those most affected by climate change (WHO 2022a).

The other pathway through which climate change is having an impact on child health is extreme heat. Children under 5 years old are especially vulnerable to the effects of heat exposure, given their limited ability to thermoregulate (Sheffield et al. 2018). Very hot and humid days, for instance, result in high child mortality, with neonatal mortality of 0.7 deaths per 1,000 births occurring during the first month of life for that reason (Geruso and Spears 2018). By the 2030s, heat-related child mortality in Africa is projected to increase by approximately 48 per cent under a low-fossil-fuel emission scenario and 55 per cent under a high-fossil-fuel emission scenario (Chapman et al. 2022).

On the education front, climate change and environmental threats force 37.5 million children to have their schooling interrupted every year, hindering them from becoming educated (Sims 2021). The number of children at risk of dropping out of school in 2021 in Ethiopia, Kenya and Somalia because of the effect of the drought had tripled in the space of three months – from 1.1 million to an estimated 3.3 million children (UNICEF 2022g).

In summary, child poverty in Africa is fundamentally the end result of multiple and prolonged failures of States to address the causes and enablers of poverty. It is the result of government omissions in providing targeted and inclusive services that not only meet children's needs but that also mitigate the risks and crises that threaten their wellbeing. Child-sensitive economic and social policies, supported by strong governance and accountability mechanisms could have lessened the direct impacts on children of some of the crises that have befallen Africa.

Child poverty is not a calamity that befell Africa. It is Africa's politics, and its social and economic landscape that have given rise to and sustained child poverty across the continent. Child poverty in Africa is a function of multiple and layered contextual factors that have impacted children on the continent more than in any other region of the world. It is the result of weak governance, poor accountability, non-inclusive budgeting processes, and financial and economic policies that are neither pro-poor nor sensitive to children.

Africa's economic growth has not translated into widespread positive child wellbeing outcomes, for the various reasons discussed in this chapter. The lack of pro-poor economic and fiscal policies and the misplaced investment priorities have starved Africa's children not only of food, but also of enjoyment of many of their rights. Some of Africa's fastest-growing economies and wealthier nations have millions of children living in poverty, mainly as a result of poor economic policy choices. Countries must question whether the types of economic and financial policies they pursue are benefiting children or deepening child poverty.

Weak governance is about politics. Yet it remains the overriding, albeit ignored, factor in the child poverty discourse in Africa. From the lack of policies to ensure equitable distribution of resources to the misappropriation of scarce public resources, bad governance has severely compromised efforts to tackle child poverty. Any serious effort to tackle child poverty has to wrestle with the governance question in addition to the other social and economic factors.





African governments' performance in combating child poverty

This chapter examines States' efforts to address child poverty, using the Provision Index, a key component of ACPF's Child-Friendliness Index. The Child-Friendliness Index is a rights-based quantitative framework developed by ACPF for measuring governments' overall performance in fulfilling their obligations to children. It has three dimensions: provision of basic services to children to fulfil their basic needs; protection against harm and exploitation; and child participation in decisions affecting children. See Annex 1 for a brief description of the overall approach and methodology.

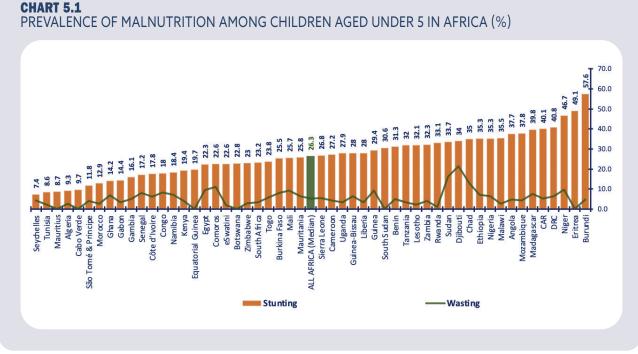
The Provision Index uses two sets of indicators directly related to multidimensional child poverty. These include children's access to health care, nutrition and education, and budgetary commitment on the part of government to sectors benefiting children. The sections below provide analysis of and insights into the areas where governments have performed relatively well or fallen short in addressing the various dimensions of child poverty. The aggregate Provision Index scores and rankings of African governments are also presented, showing their performance in addressing child poverty.

The companion to this report, *Child-Friendliness of African Governments: The 2023 scoreboard*, presents the 2023 Child-Friendliness Index scores and rankings of African governments. It provides an overview of the overall commitment of African governments to advance all children's rights. Brief highlights of the findings in the Scoreboard are shown towards the end of this chapter in Box 5.4.

5.1 Performance in combating child hunger and malnutrition

Children have a right to food. They need adequate nutritious food to grow physically and mentally. However, millions of children in Africa remain deprived of their right to food and suffer from chronic hunger and malnutrition (see Box 5.1 below).

Stunting refers to low height-for-age and is a sign of longstanding or recurrent undernutrition. It is a key indicator in the measurement of child poverty, and its prevalence indicates child malnutrition. On average, 26.5 per cent of children under 5 in Africa are stunted (see Chart 5.1). The highest prevalence of stunting is recorded in Burundi, where close to 3 in 5 children under 5 (57.6 per cent) are stunted, followed by Eritrea (49.1 per cent) and Niger (46.7 per cent). The number of stunted children is increasing steadily in Africa, while it is decreasing substantially in other regions of the world (UNICEF et al. 2021). Wasting in children is low weight-for-height and indicates recent and severe weight loss, often as a result of poor nutrient intake, disease or illness. Out of all children under 5 affected by wasting globally, more than one quarter (about 12.1 million) live in Africa (UNICEF 2023).



Source: Based on data from UNICEF 2023.

BOX 5.1: Child hunger: States' failure to uphold children's right to food

Child hunger is a glaring manifestation of States' failure to uphold children's right to food. Children are immensely vulnerable to hunger because they are dependent on their families or caregivers for food. The lack of capacity of families and caregivers to provide food because of poverty results in children going hungry. States should therefore step in to support parents and caregivers to be able to feed their children and should fulfil their obligations to ensure children's right to food.

Recent studies by ACPF show that the number of children suffering from hunger in Africa is alarmingly high. Out of 45 African countries where data is available, 35 (77 per cent) are classified as having serious and shocking levels of hunger. At the individual child level, over 58 million children of the world's stunted children under 5 live in Africa. Furthermore, 90 per cent of children aged 6–23 months in Africa do not have a minimum acceptable diet, and 60 per cent do not meet the minimum meal frequency. Evidence in low- and middle-income countries, most of which are in Africa, further shows that child hunger contributes to about 45 per cent of child mortality.

African governments have ratified most of the international and regional human rights and child rights treaties and are obliged to respect, protect and fulfil children's right to food. These obligations, as articulated by the UN Special Rapporteur on the Right to Food, are as follows:

- To respect existing access to adequate food requires States Parties not to take any measures that result in preventing such access;
- To protect requires measures by the State to ensure that enterprises or individuals do not deprive individuals of their access to adequate food;

BOX 5.1: Child hunger: States' failure to uphold children's right to food (continued)

- To fulfil (facilitate) or pro-actively engage in activities intended to strengthen people's access to and utilisation of resources, and means to ensure their livelihood, including food security; and
- To fulfil (provide) the right directly when an individual or group is unable, for reasons beyond their control, to enjoy the right to adequate food by the means at their disposal. This also applies to victims of natural or other disasters.

As set out in the African Regional Nutrition Strategy (2015–2025), African governments have pledged to reduce the number of children who are stunted by 40 per cent, the number with a low birthweight by 30 per cent and the number suffering from childhood wasting to less than 5 per cent by 2025. The recent Continental Nutrition Accountability Scorecard, which tracks countries' progress in achieving nutrition security targets, indicates that half of African countries have a very high prevalence of stunting (above 30 per cent), and only 15 African countries have managed to contain childhood wasting within the acceptable range of less than 5 per cent. This cannot be tolerated. The widespread and persistent child hunger in most African countries shows that government efforts to fulfil children's right to food are inadequate. Greater commitment and action by governments are sorely needed. Given the interdependence between poverty and hunger, addressing the root causes of child poverty could go a long way towards tackling child hunger in Africa.

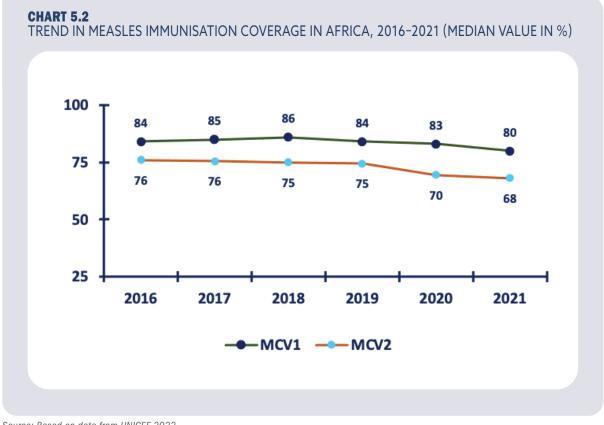
Sources: ACPF 2023a, 2019; African Union Commission 2015; African Union and African Development Bank Group 2019; von Grebmer et al. 2022.

The figures on stunting and wasting as well as on the level of child hunger in Africa show that most African governments are not performing well in combating child hunger and malnutrition. They demonstrate a lack of determination to address these widespread and persistent problems. This underscores the need for them to revamp their approaches and re-examine their strategies.

5.2 States' performance in ensuring children's access to health and related services

Access to immunisation

An important element in children's access to health care is immunisation. Conversely, then, children who are not immunised against potentially fatal childhood illnesses such as measles are deprived of health care. WHO has set the measles vaccination coverage target at 95 per cent with two doses (MCV2) as the means to eliminate measles (WHO 2022b). However, in 2021 the median coverage rate in Africa stood at 68 per cent. Even more worrying is the fact that measles immunisation coverage has declined in the past five years (see Chart 5.2).



Source: Based on data from UNICEF 2022.

Access to water and sanitation facilities

Access to clean drinking water and basic sanitation facilities are prerequisites for a healthy childhood and the overall wellbeing of children. In addition, households should be enabled to adopt good hygiene practices, such as handwashing with soap, safe disposal of child faeces, safe handling and storage of drinking water, and good menstrual hygiene. However, 418 million people in Africa, including children, do not have access to clean drinking water; 779 million lack basic sanitation facilities (including 208 million who still practise open defecation); and 839 million people are not able to practise basic hygiene (UNICEF and WHO 2022).

Access to safe drinking water and improved sanitation facilities varies greatly across Africa. While Mauritius and Egypt have ensured universal access, more than half of the population in Ethiopia, Chad, the CAR, Niger, the DRC and South Sudan do not have access to clean drinking water. Access to improved sanitation facilities also remains limited across the continent. Only two countries, Mauritius and the Seychelles, had achieved universal basic sanitation coverage in 2020 (see Chart 5.3). These gaps have significant implications for children's survival, health, nutrition and general wellbeing.

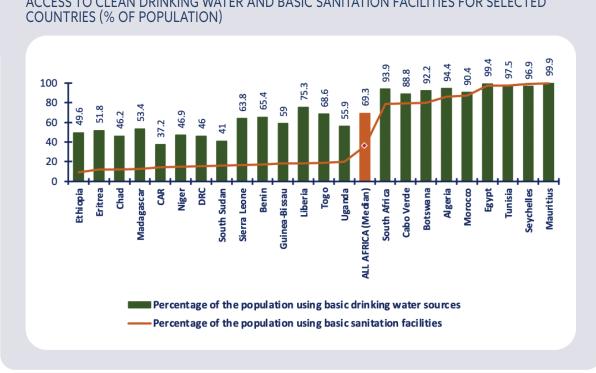
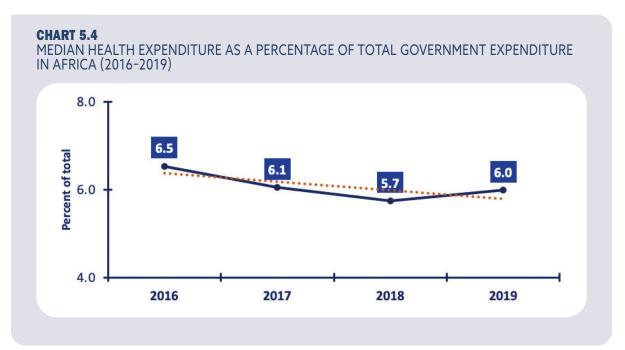


CHART 5.3 ACCESS TO CLEAN DRINKING WATER AND BASIC SANITATION FACILITIES FOR SELECTED

Source: Based on data from UNICEF and WHO 2022.

Spending on health care

More than 20 years after the Abuja Declaration, where countries pledged to allocate 15 per cent of their national budgets to health care, only South Africa has achieved this target (WHO 2022c, 2010b). Health spending in general is declining in Africa, and has been doing so especially in the four years between 2016 and 2019. The median government spending on health dropped from 6.5 per cent of total government expenditure in 2016 to 6 per cent in 2019 (Chart 5.4).

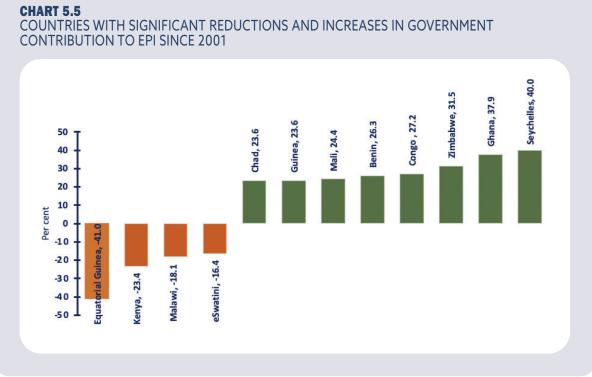


Source: Based on data from WHO 2022c.

Sudan, Madagascar, the Gambia, Sierra Leone, Uganda and Burkina Faso experienced the largest decline in health spending from 2016. Other countries, like Niger, Botswana, São Tomé and Príncipe, Guinea and eSwatini, increased their health spending over the same period of time (see Annex 3 for the current spending levels of all countries).

Declining health expenditure affects maternal and child health services. In Africa, 82 per cent of health facilities offer antenatal care services, but those are still under-resourced (WHO Africa Region 2022). Sufficient budget is needed to strengthen maternal and child health services to provide integrated care that includes family planning, antenatal care and delivery care, and meets the nutritional, health and information needs of mothers and children.

Governments' financial contributions to national immunisation programmes is another indicator used to evaluate their performance in supporting children's right to health. Budget contributions to the Expanded Programme for Immunisation (EPI) show that currently only ten countries – namely, Algeria, Botswana, Egypt, Gabon, Mauritius, Morocco, Namibia, the Seychelles, South Africa and Tunisia – finance the programmes fully. The majority of countries contributed below 50 per cent of their funding (see Table A3.3 in Annex 3 for details by country). The trend over the last 20 years since 2001 shows that governments' financial contributions to these programmes have increased in several countries but have declined worryingly in others (see Chart 5.5 and Table A3.3 in Annex 3).

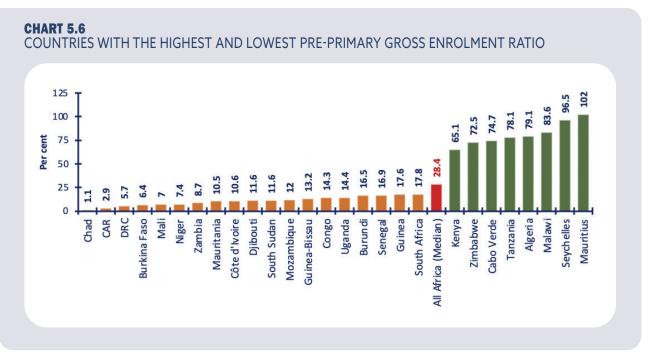


Source: Based on data from WHO 2022c.

5.3 Performance in expanding children's access to education

Access to pre-primary education

Recent data show that access to pre-primary education is generally very low in Africa, and very little progress has been made in this area. The median gross enrolment ratio for pre-primary education is only 28.4 per cent across Africa. In more than a third of the countries, the situation is far worse (see Chart 5.6). By contrast, in Malawi, the Seychelles, Mauritius, Ghana and Liberia, 8 or more of every 10 children go through pre-primary education (see Annex 3 for statistics on all countries).

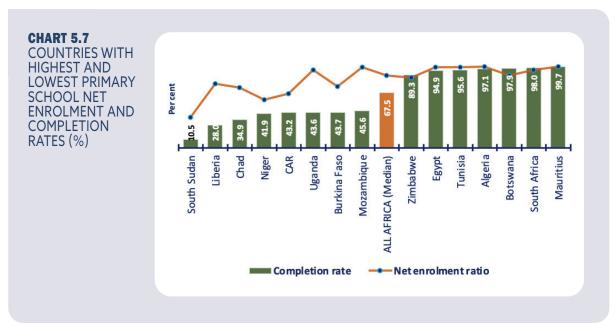


Source: Based on data from UNESCO Institute for Statistics 2022.

UNICEF (2019b, 2019c) found that poverty was one of the most significant factors excluding children from pre-primary education. The difference in attendance at pre-primary educational institutions is stark between children living in poor and non-poor households across nearly all countries. In low-income countries, on average, the poorest children are eight times less likely than children from the wealthiest families to participate in early childhood education programmes.

Access to primary education

In the last two decades, primary school enrolment in Africa have risen sharply (UNESCO Institute for Statistics 2022). The median primary net enrolment rate across Africa has risen from 83 per cent to 89 per cent in the last five years. This aggregate statistic, however, masks the reality in those countries that are struggling to achieve universal primary education. The primary net enrolment rate is only 38 per cent in South Sudan, 45 per cent in Equatorial Guinea and 59 per cent in Niger and Mali.

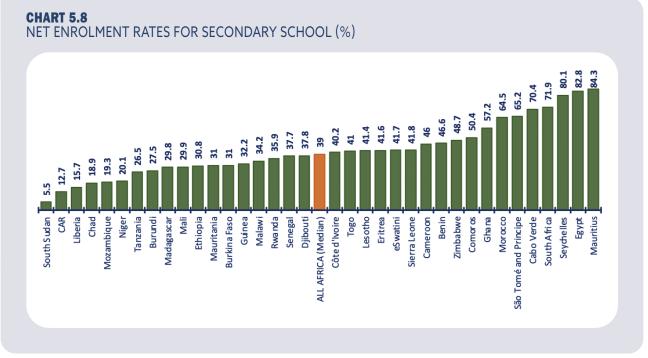


Source: Based on data from UNESCO Institute for Statistics 2022.

Ensuring that children complete primary school remains a challenge in many African countries (African Union Commission and UNICEF 2021). The median completion rate for Africa is 68 per cent. South Sudan has the lowest primary school completion rate, at 11 per cent, followed by Liberia at 28 per cent and Chad at 35 per cent (see Chart 5.7). On the other hand, primary school completion is almost universal in Mauritius, South Africa, Botswana, Algeria, Tunisia and Egypt.

Access to secondary education

Notwithstanding the modest progress made over the years, access to secondary education remains stubbornly low in Africa, particularly for girls (ACPF 2020a). The current median secondary school net enrolment rate stands at only 39 per cent. In about half the countries in Africa, the rate is less than 50 per cent (see Chart 5.8). Most African governments have not made significant headway in expanding secondary education, particularly for girls and rural children.



Source: Based on data from UNESCO Institute for Statistics 2022.

Deprivation of education: The out-of-school-children quagmire

Most of the world's 244 million out-of-school children live in Africa. The out-of-school population in Africa has increased by 20 million over the last ten years, reaching 98 million currently. Of these, 36 million are of primary school age, 28 million are adolescents of lower secondary school age, and 34 million are young people of upper secondary school age (UNESCO 2022a). The figures presented in Chart 5.9 show the extent of the deprivation of education among children in Africa and signal the urgency with which it needs to be dealt.

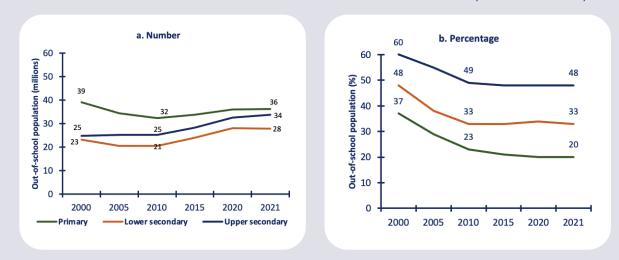
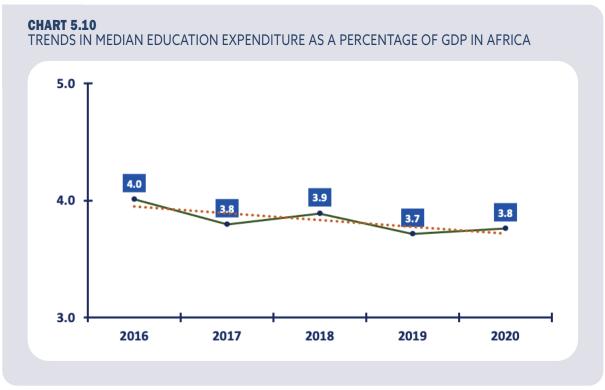


CHART 5.9 OUT-OF-SCHOOL CHILDREN IN AFRICA BY LEVEL OF EDUCATION 2000-2021 (NUMBERS AND %)

Source: UNESCO 2022a.

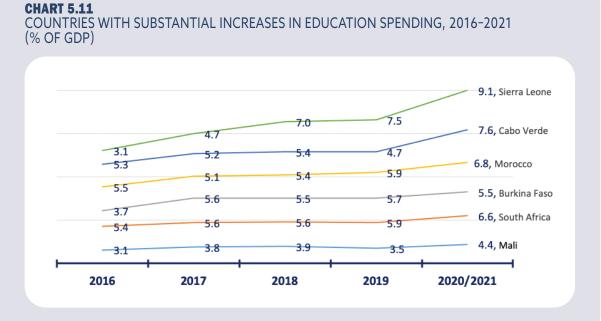
Spending on education

Investing in education is a State obligation. It is also the smartest investment governments can make in human capital development. As shown in Chart 5.10, education spending seems to have stagnated over the past five years in Africa, at around 4 per cent of GDP. Considerable declines were observed in Malawi (from 4.8 to 2.9 per cent), Zimbabwe (5.5 to 3.9 per cent) and Egypt (4.1 to 2.5 per cent) between 2016 and 2020. Given that millions of children are already deprived of education, such stagnation or decline in education budgets risks pushing even more children into such deprivation.



Source: Based on data from UNECSO 2022.

Contrary to the general declining trend, some countries, as shown in Chart 5.11, have increased their spending on education over the last five years. Although the increments still fall short of the Dakar commitment of 10 per cent of GDP (UNESCO 2000), these are positive developments that others could emulate.

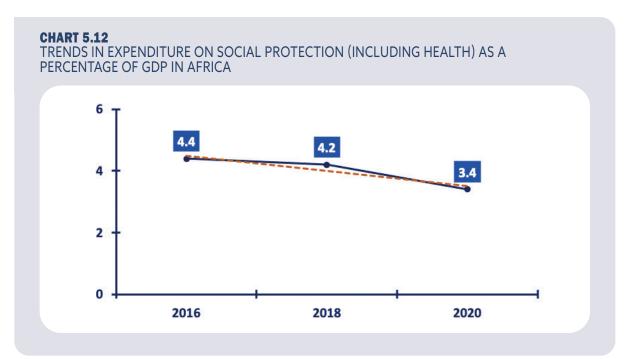


Source: Based on data from UNECSO 2022.

Spending on social protection

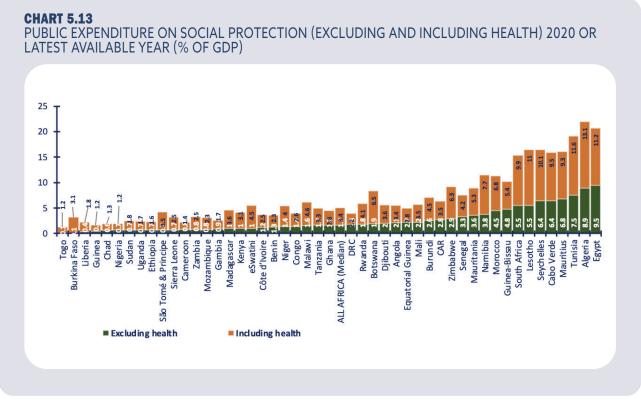
Despite the heavy burden of child poverty in Africa, overall investment in social protection is extremely low and is showing a declining trend. Between 2015 and 2020, the median expenditure on social protection decreased from 4.4 per cent to 3.4 per cent (see Chart 5.12).

According to a recent report from the International Labour Organization (ILO), only 12.6 per cent of the continent's children receive some kind of social protection benefit (ILO 2021). This is grossly insufficient and completely incommensurate with the magnitude of child poverty in Africa.



Source: Based on data from ILO 2021.

Current spending on social protection varies across countries. Some countries, such as Egypt, Algeria, Tunisia, Mauritius, Cabo Verde and the Seychelles, spend more than 6 per cent of GDP on it. Others spent less than 1 per cent of their GDP, in spite of widespread child poverty in most of them (Chart 5.13).



Source: Based on data from ILO 2021.

Making children visible in the budget through comprehensive costing of essential child services, ensuring children's participation in the budgeting process and enhancing state accountability and transparency are critical to addressing child poverty. Box 5.2 highlights some practices used by child-led organisations that are involved in budget tracking and advocacy. These initiatives have contributed to enhanced accountability and better performance of local governments in advancing children's rights.

BOX 5.2: Listening to children: The best approach to child-sensitive budgeting

Through the Child-Friendly Budget Initiative in Zimbabwe, child-led groups in eight of Zimbabwe's ten provinces engaged in pre-budget consultations. Members of the child-led groups were trained in children's rights, the legislative framework, the budget process, advocacy skills and project management. Children then shared their analysis of the budget and influenced national and local governments on their budget priorities, calling on them to allocate budget to support child participation at local level.

Likewise, in Mozambique, the Citizens' Engagement Project promotes public participation in monitoring health and education service delivery in four provinces. Children are actively involved in the project, especially in monitoring the delivery of education services. Using the scorecard methodology⁸, citizens, including children, monitor quality of health and education services and hold public officials and service providers to account. Action plans to address gaps are monitored by school coun cils and health facility co-management committees. Citizen participation in monitoring public services is supported by a specific law in Mozambique. Evidence points to increased collaboration between citizens and public officials as well as improved transparency, accountability and results in service delivery.

Sources: Save the Children 2014, 2015.

5.4 Overall performance in combating child poverty

The Provision Index, as elaborated in previous sections, assesses the performance of African governments in addressing child poverty. Table 5.1 presents the 2023 Provision Index, with country scores and rankings. The table also shows whether a country's rank has changed between 2018, when the last index was compiled, and 2023.

Tunisia scored the highest on the Provision Index, indicating its good performance in combating child poverty in its various forms. Other countries in the top league, in order of their ranking, are Algeria, Cabo Verde, the Seychelles, South Africa, Mauritius, Namibia, Botswana, Morocco and Egypt. As the top-performing country, Tunisia, with a stunting rate of 8.6 per cent, has the lowest rate of child malnutrition in Africa. It has achieved universal access to primary education and nearly universal access to basic sanitation facilities and clean drinking water. Similarly, the Seychelles have made encouraging strides, particularly in reducing stunting to 7.4 per cent. They have achieved universal access to both basic sanitation facilities and clean drinking water.

⁸ It is a management system aimed at translating strategic goals into a set of performance objectives that, in turn, are measured, monitored and revised to ensure that the strategic goals are met.

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TABLE 5.1 PROVISION INDEX FOR AFRICAN GOVERNMENTS, 2023

COUNTRY	PROVISION INDEX SCORE	RANK	RANK Change	SUB-DIMENSION INDICES [®]
Tunisia	0.8731	1	0	0.8597 0.8868
Algeria	0.8370	2	2	0.8509 0.8233
Cabo Verde	0.7980	3	2	0.7772 0.8194
Seychelles	0.7936	4	7	0.7286 0.8644
South Africa	0.7887	5	-2	0.8515 0.7306
Mauritius	0.7785	6	-4	0.7054 0.8593
Namibia	0.7412	7	-1	0.8111 0.6772
Botswana	0.7377	8	-1	0.8245 0.6600
Morocco	0.7144	9	1	0.6533 0.7812
Egypt	0.6764	10	-2	0.5835 0.7841
Lesotho	0.6630	11	1	0.7226 0.6083
eSwatini	0.6041	12	-3	0.5660 0.6447
Gabon	0.5638	13	0	0.4959 0.6410
São Tomé and Principe	0.5370	14	3	0.4020 0.7174
Ghana	0.4924	15	1	0.3556 0.6819
Zimbabwe	0.4868	16	2	0.4204 0.5637
Kenya	0.4722	17	-2	0.3789 0.5885
Angola	0.4431	18	-4	0.4187 0.4688
Senegal	0.4406	19	1	0.3547 0.5473
Sierra Leone	0.4382	20	19	0.3732 0.5146
Rwanda	0.4363	20	6	0.3464 0.5495
Burkina Faso	0.4339	22	6	0.4138 0.4550
Malawi	0.4316	23	-4	0.3244 0.5743
Burundi	0.4255	24	-3	0.3679 0.4920
Tanzania	0.4193	24	0	0.3523 0.4991
Mozambique	0.4195	26	5	0.3479 0.4607
Vauritania	0.3945	20	8	0.3045 0.5111
Vali	0.3945	28	15	0.3380 0.4423
	0.3853	28	5	0.2884 0.5148
Congo Zambia				
Zambia	0.3851	30	6	0.2990 0.4960
Equatorial Guinea	0.3709	31	-8	0.2888 0.4764
Madagascar	0.3705	32	1	0.3152 0.4355
Côte d'Ivoire	0.3673	33	-1	0.2680 0.5034
Niger	0.3588	34	7	0.3534 0.3644
Gambia	0.3535	35	-13	0.2023 0.6176
Benin	0.3392	36	1	0.2590 0.4443
Togo	0.3392	37	-7	0.2309 0.4984
Comoros	0.3354	38	2	0.2002 0.5618
Djibouti	0.3352	39	-10	0.2067 0.5434
Liberia	0.3323	40	5	0.1913 0.5772
Ethiopia	0.3191	41	1	0.2355 0.4323
Vigeria	0.3144	42	-16	0.2241 0.4410
Guinea-Bissau	0.3116	43	-5	0.2175 0.4465
Guinea	0.2967	44	6	D.2070 0.4254 ■ Budgetary commitment
DRC	0.2854	45	2	D.1898 0.4292 Provision out comes
Sudan	0.2846	46	-22	.1594 0.5082
Uganda	0.2831	47	-3	.1591 0.5037
Chad	0.2789	48	1	0.2723 0.2855
Cameroon	0.2569	49	-3	.1286 0.5133
CAR	0.2312	50	1	0.2086 - 0.2563
Eritrea	0.1933	51	-3	.0924 - 0.4041
South Sudan	0.1479	52	0	.0849 0.2576

^a These sub-dimension indices show the contribution of the two sets of indicators (i.e. child wellbeing outcomes and budgetary commitment to sectors benefiting children) to the Provision Index.

On the other hand, there are many countries where government performance in addressing child poverty is poor. The ten worst-performing countries are South Sudan, Eritrea, the CAR, Cameroon, Chad, Uganda, Sudan, the DRC, Guinea and Guinea-Bissau. These countries have failed to allocate sufficient resources to sectors and programmes benefiting children. Consequently, they have not been effective in meeting their obligations to children, leaving their children severely deprived of their rights. South Sudan and the CAR, for example, are countries with very high rates of child malnutrition and the lowest access to pre-primary and other levels of education. They also have the lowest secondary school participation rates on the continent (6 and 13 per cent, respectively).

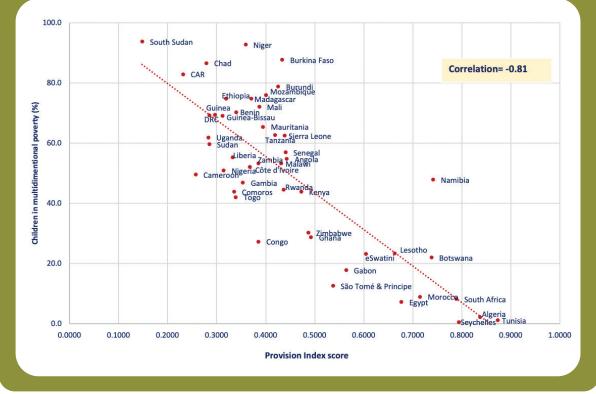
BOX 5.3: Provision Index score as a strong measure of performance in combating child poverty

The very strong negative correlation between the Provision Index score and the proportion of children living in multidimensional poverty (correlation coefficient of -0.81) indicates that the Provision Index captures government performance in addressing child poverty well. The strong association between the two is illustrated in Chart 5.14. Countries with the highest level of child poverty generally have lower scores in the provision of basic services for children. Conversely, countries with high scores on the Provision Index are countries with a low incidence of poverty among children.

The Provision Index mirrors performance in combating child poverty. The higher the Provision Index score, the lower the rate of child poverty, confirming that child poverty is the result of States' failure to respect, promote and fulfil children's rights.

CHART 5.14

RELATIONSHIP BETWEEN PROVISION INDEX SCORE AND PROPORTION OF CHILDREN IN MULTIDIMENSIONAL POVERTY

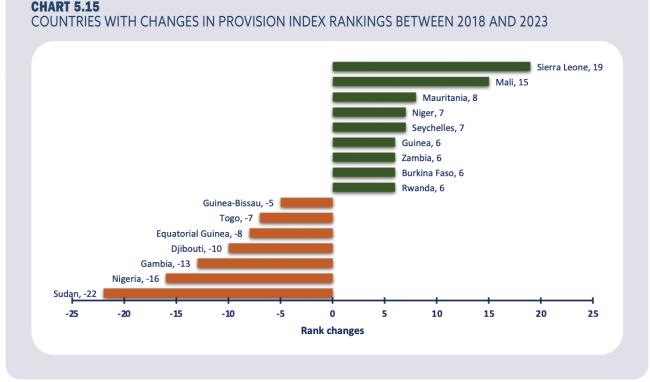


Source: ACPFs computation based on data from UNDP and OPHI 2022.

Progress over the five-year period (2018–2023)

Government performance in addressing child poverty is generally poor. Over the last five years the average Provision Index score increased modestly, by 9.1 percentage points (from 0.418 in 2018 to 0.456 in 2023). Twenty-six countries improved their rankings, while the situation deteriorated in 21 countries. No progress was observed in the four remaining countries (see Table 5.1).

Sierra Leone has made remarkable progress, moving up 19 places to rank 20th in the 2023 Provision Index. Mali and Mauritania have similarly made commendable improvements. By contrast, Sudan, Nigeria and the Gambia have dropped significantly in the rankings (see Chart 5.15).



Source: Compiled by ACPF.

The decline in performance is a reflection of a lack of government commitment and action in the face of millions more children sliding into poverty. Such dereliction of duty is not only a missed opportunity for Africa to reap a huge demographic dividend but also an injustice to children, perpetrated by their own governments.

The performance of African governments in addressing the child poverty in their countries is unsatisfactory. A lack of resources cannot be used as an excuse for poor performance. Rather, the real issue is weak political commitment and leadership. Africa needs strong, committed political leadership to reverse this poor performance, to improve governance, increase financial resource allocations to child rights and strengthen accountability.

BOX 5.4: Beyond child poverty: How well have African governments performed in realising all children's rights?

How have African governments performed when it comes to realising all children's rights? We have assessed their efforts to do this, by using our Child-Friendliness Index, an aggregate performance index that measures the extent to which governments have fulfilled their obligations to children. It is calculated by putting together two dimension indices, the Provision and Protection Indices. The detailed analysis and findings are presented in the companion to this report, titled *Child-friendliness of African Governments: The 2023 scoreboard* (referred to below as the *2023 Scoreboard*).

The 2023 Child-Friendliness Index scores 52 countries and ranks them into five categories based on their scores (most child-friendly, child-friendly, fairly child-friendly, less child-friendly and least child-friendly). Mauritius was ranked at the top, followed by Tunisia, South Africa, Cabo Verde, the Seychelles, Namibia, Algeria, Morocco, Lesotho, Egypt and Botswana. These eleven top-performing countries, the most child-friendly, have performed remarkably well in their efforts of fulfil children's rights. Common findings among them are:

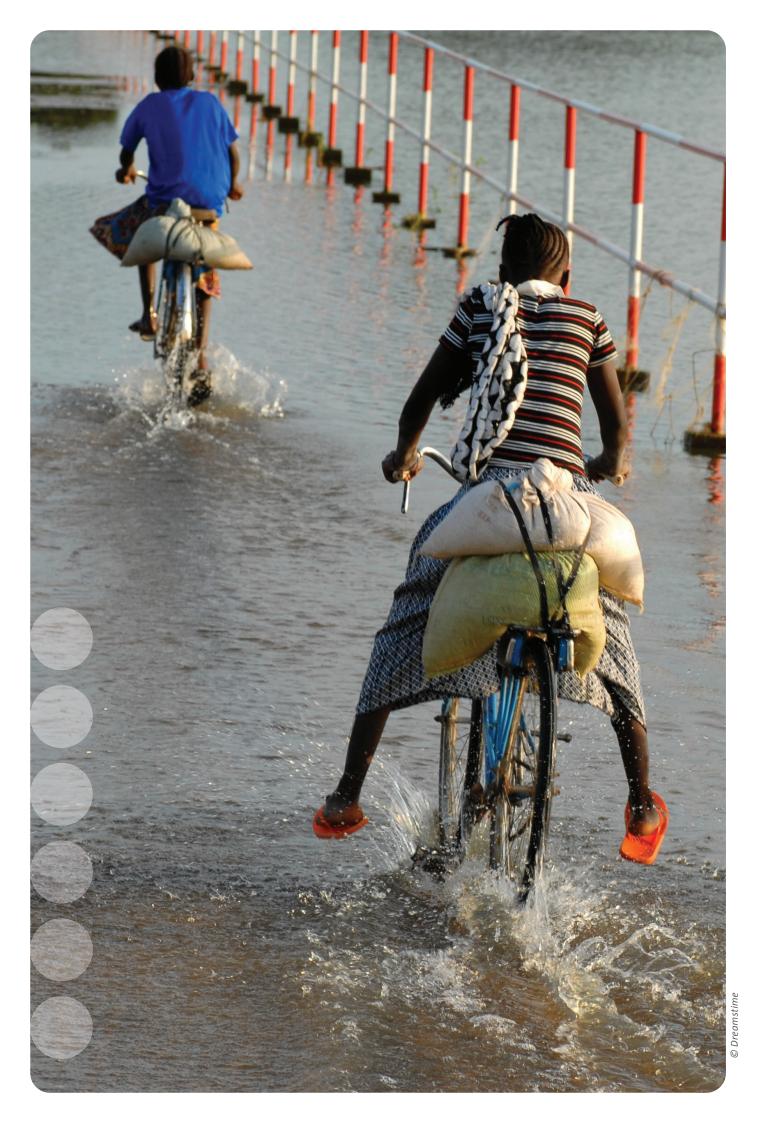
- Low levels of child poverty
- Almost all births attended by skilled birth attendants
- Nearly universal access to both clean drinking water and basic sanitation
- Lower stunting rates
- Higher pre-primary enrolment and completion rates
- Higher budget expenditure on sectors benefiting children
- Robust laws and policies with implementation mechanisms that protect children from violence, abuse and exploitation.

By contrast, there are a number of countries that have performed poorly and are categorised in the least child-friendly group. These are South Sudan, Eritrea, Cameroon, Sudan, CAR, Chad, DRC, Ethiopia and Uganda. In these countries, significant proportions of children suffer from undernutrition, face high mortality and have poor access to pre-primary and secondary education, improved sanitation facilities and clean drinking water. This widespread deprivation is the result of governments' overall failure to invest adequately in the sectors benefiting children.

As elaborated in the previous sections and chapters, good governance is a critical factor in States' commitments to realising children's rights. There is a high and positive correlation between the Child-Friendliness Index and other Indices that measure governance, such as the Ibrahim Index of African Governance (there is a correlation coefficient of 0.81 between the two). Most countries that scored well on the CFI have also performed well in the Ibrahim Index. (See the *2023 Scoreboard* for further details.) Further, our analysis shows that it is not only money that is needed to improve the wellbeing of children, but also the political commitment to use available resources efficiently and effectively, and the leadership to make this happen. These last two factors are just as important as money when it comes to improving the overall wellbeing of children.

Sources: ACPF 2023b; Mo Ibrahim Foundation 2023.

Realising all children's rights and, in particular, addressing the current state of child poverty calls for political will. It is bold political leadership that will drive commitment and catalyse action to ensure the wellbeing of all children. It is such action that is needed to ensure that States live up to their obligations to children. These actions are elaborated in detail in the next and final chapter.



Key findings and priority areas for action

The clear message that comes out of the analysis carried out for this report is that many African States have failed to meet their obligations to protect children from multiple deprivations. Even taking into account the limitations on their resources, States have neglected their duty to respect, promote and fulfil the rights of children, leaving most of their children hungry, malnourished, ill and uneducated. The result of such failure is the 352 million children in Africa who are languishing in poverty with their basic unmet. Another 110 million are at risk of a similar fate.

Child poverty is stealing children's lives and their childhood, denying them their right to a future in which they can fulfil their potential. At such scale and severity, poverty is an existential threat to Africa's children. It is driven by the failure of governments to invest in children's nutrition, health and education, and further enabled by a lack of accountability. The decades-long lack of proper commitment to and investment in the rights and wellbeing of children has left millions of children living in poverty, with far-reaching consequences for individual children, families, nations and the continent.

The sections below highlight key areas of concern and set out the bold actions that governments must take to break the cycles of poverty that plague African children. This report earnestly urges governments to invest in children, because the cost of inaction and failure to do so – the loss of an entire generation – is unacceptably high. We simply cannot afford it.

6.1 Key findings

- Government performance in addressing child poverty is poor and unacceptable. Of the 52 countries assessed using the Provision Index, only 14 have above average scores for addressing child deprivation and poverty. Most countries have failed to provide for the basic needs of children and to deliver basic services to them.
- African children are the poorest in the world. Fifty-three per cent of Africa's children, a total of 352 million, live in multidimensional poverty. An additional 17 per cent (110 million children) are at high risk of falling into poverty.
- Child hunger and malnutrition are the greatest threats to Africa's children. Malnutrition accounts for 21 per cent of multidimensional child poverty. Lack of education at all levels is the other common area of deprivation and constitutes a significant threat to children's development.
- More than half the children living in extreme poverty live in six countries: Nigeria, Ethiopia, the DRC, Tanzania, Uganda and Niger. In South Sudan and Niger, almost every child faces multiple and severe forms of deprivation in most aspects of their lives.
- Girls, children living in urban slums or remote rural areas, children living in conflict-affected and fragile states, children with disabilities and children affected by HIV/AIDS are among the most deprived groups and face a greater risk of living in severe poverty.

- Of all the world's regions, Africa has the lowest score for human capital (0.4) on the World Bank's Human Capital Index. This indicates that the future productivity of a child born today will, if nothing changes, be only 40 per cent of what it might otherwise be. This loss of potential can be prevented if children enjoy good nutrition, good health and a good-quality education.
- Child poverty has serious long-term social, economic and political consequences. It threatens peace, security and the development of more inclusive societies.

6.2 Conclusions

African governments have failed to meet their obligations to fulfil child rights

The prevalence and severity of child poverty and the below average performance of most African governments in combating it points to an overall lack of leadership and political commitment to fulfilling children's rights. Government efforts are simply inadequate. Such a performance is the result of governments' failure to prioritise children's rights and wellbeing in their policies. States have also failed to see the huge long-term negative impact of child poverty on nation-building. At this slow and unsatisfactory pace, most African countries will not meet Sustainable Development Goal 1, which envisages an end to extreme poverty for "all people everywhere".

Most of Africa's children are hungry, malnourished and not attending school

Chronic child hunger is widespread in Africa, and millions of African children do not have enough to eat. They do not get their basic nutritional requirements and are malnourished. Millions more are not enrolled in or attending school. Even those who do go to school are not learning because the quality of their education is so poor. Most of Africa's children experience multiple and severe forms of deprivation. The number of children living on the edge of poverty, who could be tipped into poverty by a single drought, conflict or displacement is deeply troubling.

Social protection is inadequate and incommensurate with the pervasive child poverty in Africa

Only 12.6 per cent of the children in Africa benefit from social protection programmes. This reflects a lack of child-sensitive social protection as well as the very low level of investment in this important sector. Government expenditure on social protection has significantly decreased over the years. Existing programmes do not match the needs of poor children and households.

Investment in programmes and sectors benefiting children is inadequate

Public budgets for key sectors and programmes benefiting children are totally inadequate and generally incommensurate with the level of need that children have. Investments in children's health and education, for example, are not only much lower than agreed targets but have also been declining over the past five years.

Poor governance has made States unaccountable for the way they address child poverty

Poor governance exacerbates child poverty by creating an environment that is not conducive to accountability. Embedded in weak state institutions, it enables corruption, administrative

inefficiency and waste of scant public resources. Weak governance is reflected in the formulation and implementation of macroeconomic and fiscal policies that take no account of poor people and that have made it difficult for parents to provide for their children.

Multiple crises exacerbate child poverty

Child poverty is higher in countries where social protection systems and infrastructures are weak and resilience to shocks is low. Both of these are associated with poor governance. In such situations, conflicts, pandemics, droughts and floods come with the imminent threat of deprivation, displacement and even the death of children.

Specific groups of children are at higher risk of poverty than others

Historically, child poverty in Africa had the face of a rural child. But with increasing numbers of crises, children living in urban slums, internally displaced children, and those in refugee camps and other humanitarian settings are highly vulnerable and therefore more likely to experience multiple deprivations. Children with disabilities, those affected by HIV/AIDS and girls are at particular risk because they face abuse, neglect and exploitation more commonly, and these can be exacerbated if they live in precarious conditions. Extreme forms of child poverty are prevalent among children with multiple disadvantages. The greater risks among these highly vulnerable groups of children reflect the overall neglect and failure on the part of governments to initiate targeted interventions that are gender-sensitive and inclusive to address their vulnerabilities.

Child poverty determines future socio-economic conditions

The consequences of child poverty are far-reaching. It results in irreparable loss of ability and productivity in later life. This diminishes children's prospects of escaping poverty when they become adults and affects the children they might themselves have, propelling the inter-generational transmission of poverty. At a national level it disrupts the formation of human capital, which is at the heart of development. Child poverty is slowly and steadily destroying Africa's potential for inclusive development.

6.3 Priority areas for action

Six priority areas for action to eradicate child poverty in Africa

- 1. Recognise child hunger and undernutrition as a national emergency
- 2. Integrate child rights into national development planning
- 3. Invest in high-quality pre-primary and primary education
- 4. Improve access to and the quality of maternal and child health services
- 5. Establish universal child-sensitive social protection programmes
- 6. Strengthen governance and accountability

Priority area 1: Recognise child hunger and undernutrition as a national emergency

Child hunger is not showing any sign of declining and is instead increasing in Africa. Undernutrition among under-5s is at an alarming level across the continent. African governments must take the lead to ensure that no child goes hungry or malnourished. For this, governments must do the following:

- Entrench children's right to food, like all human rights, in their constitution and laws.
- Recognise child hunger and undernutrition as a national emergency and adopt a policy for universal access to food for all children, in the same way that the principles of universal access to education and health have been widely adopted.
- Strengthen the financing and delivery of nutrition programmes, particularly those for very young children and women in pregnancy. This requires a strong focus on promoting healthy and more diverse diets, along with recommended care and feeding practices for infants. It also calls for improving multi-sectoral coordination, and monitoring and linking nutrition programmes with holistic interventions that seek to improve access to health services, clean drinking water and improved sanitation facilities, and to support people to practise good hygiene. These programmes must promote behavioural changes through participatory communication strategies that convey essential nutrition information to parents and caregivers.
- Scale up or initiate school-feeding programmes with good-quality, nutritious meals to reach all primary school children and children at risk. These programmes not only improve children's nutritional status, but also improve school attendance and learning.
- Involve the private sector, civil society and development agencies to complement government efforts.

Priority area 2: Integrate child rights into national development planning

One indication of political commitment to meeting obligations to children is the incorporation of children's rights into national development plans and monitoring frameworks. This is a sure way of elevating government obligation to children to the national agenda. It will drive the allocation of greater resources to children's services, and improve coordination, monitoring and accountability. Practical actions for governments to take are as follows:

- Incorporate child rights explicitly into national planning, with a policy emphasis on gender sensitivity and inclusion.
- Establish mechanisms to monitor and report on the state of child rights, including progress in reducing child poverty in all its dimensions. Such mechanisms should be linked with national statistical processes for efficiency in data generation, analysis and use.
- Use data to identify high-risk groups, design tailored programmes and revise policies.

Priority area 3: Invest in high-quality pre-primary and primary education

Investing in early childhood education and primary education is an important way of resolving the crisis in children's learning in Africa and addressing inequality of opportunity at an early stage. Recommended actions are as follows:

- Expand pre-primary education to ensure universal access for all children, both boys and girls, and in all settings, including rural and humanitarian settings.
- Increase public expenditure on education, and ensure adequate budget allocation for preprimary education.
- Progressively raise government spending on education to 10 per cent of GDP, in line with the Dakar Education for All declaration.

Priority area 4:

Improve access to and the quality of maternal and child health services

Improving maternal health gives children a strong start in life. It benefits both the mother and the child during childbirth, breast-feeding and weaning. Specific actions are as follows:

- Provide free access to antenatal care and ensure births are attended by skilled health personnel.
- Promote childhood immunisations and growth monitoring for children under 5.
- Increase the health budget by progressively raising health spending to 15 per cent of government budget, in line with commitments made in the Abuja Declaration.

Priority area 5:

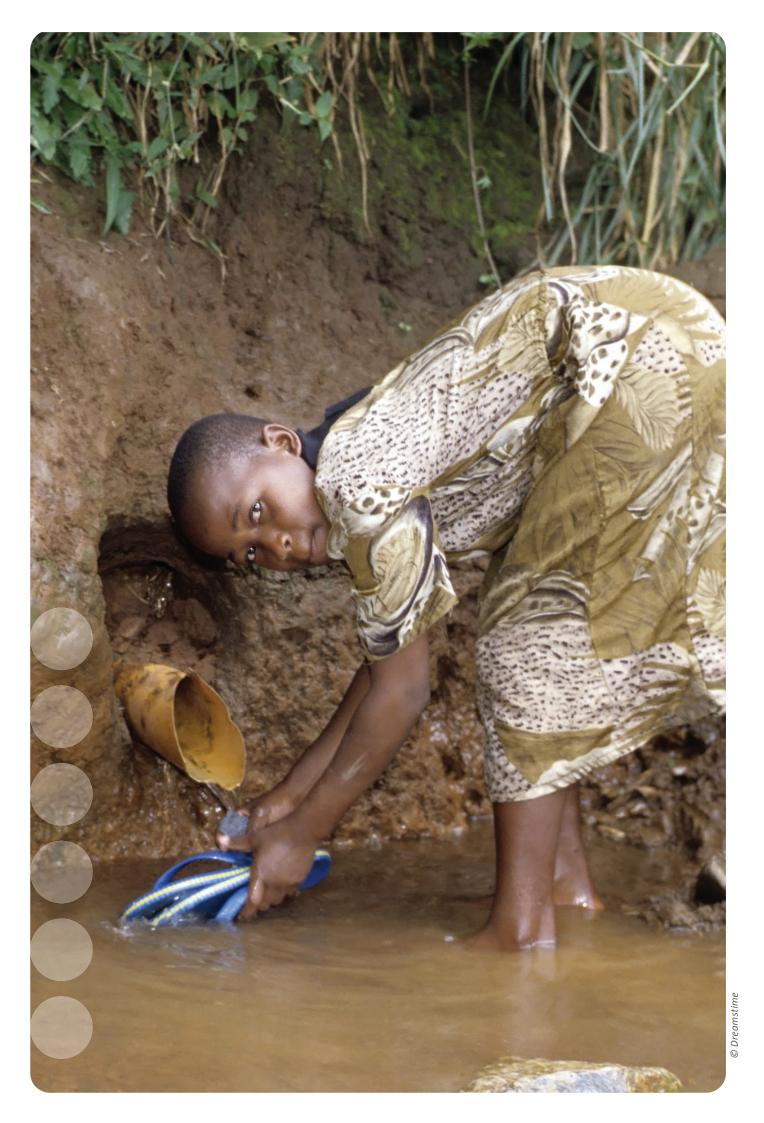
Establish universal child-sensitive social protection programmes

- Initiate or scale up social protection programmes to ensure protection for children living in poverty or at risk of it. These may include programmes providing basic income, cash and in-kind transfers.
- Allocate at least 5.6 per cent of GDP to social protection, to provide four social protection benefits (maternity, child, disability and old age), in line with ILO recommendations.

Priority area 6: Strengthen governance and accountability

Actions to improve governance must be coupled with strong monitoring and accountability systems:

- Enhance the effectiveness of socio-economic policies by developing human capacity to use resources efficiently, improve the efficacy of programmes and carry out monitoring.
- Strengthen accountability mechanisms by building the capacity of oversight institutions, including the judiciary, national human rights institutions and the ombudsperson on child rights.
- Enhance the transparency of the budgeting and programme formulation and implementation processes, and increase public participation, including that of children, in it.
- Aggressively combat the widespread corruption, pilfering and waste of public resources, including by enacting stiff penalties for related offences.
- Enhance citizen and child participation in programme development, sharing information at community level, and holding implementing agencies to account.



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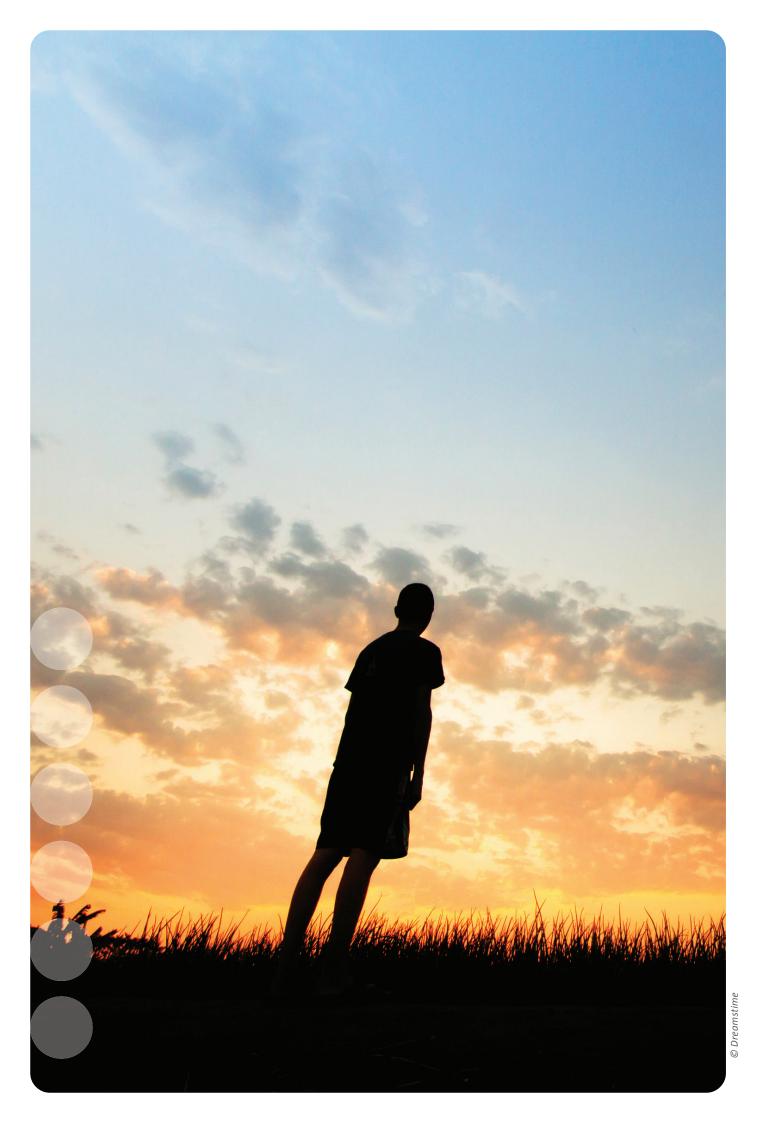


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Annex 1: Child-Friendliness Index: Methodology

Annex 2: The Child-Friendliness Index, 2023

Annex 3: Statistical tables



Annex 1: Child-Friendliness Index: Methodology

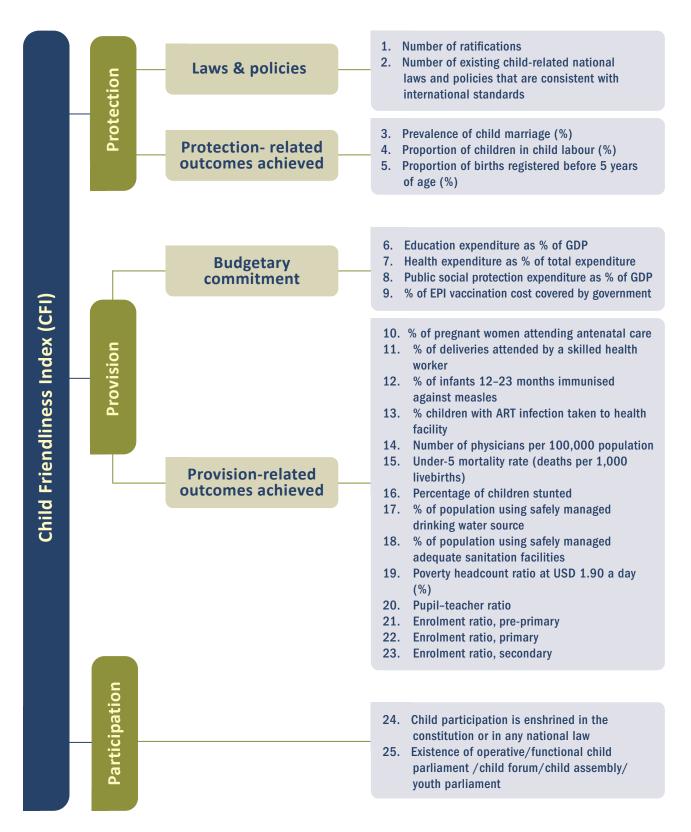
Introduction

The Child-Friendliness Index (CFI), a statistical tool developed by ACPF to measure the relative performance of African governments in relation to their obligations to respect, protect and fulfil the rights of children and to meet children's basic needs. The concept of the index originates from the CRC and ACRWC and considers almost all obligations outlined in these international and regional child rights instruments. These obligations are grouped into three broad dimensions: those related to the provision of basic services to children in order to meet their basic needs, those related to protection of children against violence and exploitation, and those related to ensuring that children participate in decisions about matters that affect them. See Figure A1.1 below for a depiction of the components of the Index.

The Provision dimension is made up of two sub-dimensions (budgetary commitment and provisionrelated outcomes) consisting of 18 indicators. These two sub-dimensions, in combination, form the Provision Index. Most of the indicators used in the Provision Index are related to multidimensional child poverty. In effect, the Provision Index assesses the performance of governments in addressing multidimensional child poverty and serves as the main analytical framework in this seventh edition of the African Report on Child Wellbeing, which focuses on child poverty.

The Protection dimension also has two sub-dimensions (laws and child-protection-related outcomes achieved), which, together, consist of five indicators. Child participation is intended to be measured through two indicators, but it was not included in the 2023 CFI as data on the identified indicators were not available.





Sources of data

Accurate, up-to-date and complete data on the indicators selected above are indispensable for the construction of the CFI. The reliable data sources that have been used for the calculation of the Index include the following: the most recent DHS and MICS surveys, the databases of several specialised UN agencies (e.g. UNICEF), UNESCO's Institute for Statistics, the UN Statistics Division, WHO, ILO, UNDP and the UN Population Division) and the databases of other international institutions, such as the IMF and the World Bank. The data on the legal and policy framework are generated from databases of international and regional treaty bodies. They were compiled based on a review of country reports submitted by States to the UN Committee on the Rights of the Child (UNCRC) and the ACRWC, as well as the Concluding Observations of these treaty bodies.

Data checks and thresholds

As a rule of thumb, each country should have data on at least two-thirds of the indicators to be included in the index construction. Also, for an indicator to be considered in the CFI, it should be available for at least two-thirds of the countries. A dimension or sub-dimension should also have data for at least two thirds of its components or indicators.

Checking and treating outliers

Outliers distort the results by obscuring the behavioural pattern of the rest of the dataset, and may affect the normality of the distributions. Boxplots, the most common method for the univariate identification of outliers, are used to check for extreme outliers. Then, any extreme outliers identified are treated using the "winsorisation" technique.

Correlation analysis

Correlation analysis is carried out to check whether a high degree of relationship (multicollinearity)⁹ exists between indicators as well as for negative correlations, especially within the same subdimension. This will help us to avoid redundancy and undesirable properties in the construction of the index.

Missing data and imputation

Imputation – the replacement of missing data with substituted values – plays an important role in the completeness of a dataset and the robustness of the analysis. But care should be taken as too much use of imputation techniques can undermine the overall quality and relevance of the composite indicator.

⁹ In statistics, multicollinearity is a state of very high intercorrelation or inter-association among the independent variables, meaning that one can be linearly predicted from the others with a substantial degree of accuracy.

A single imputation procedure called *hot deck imputation* (Euclidean distance)¹⁰ is used to fill in any missing data by substituting missing values with observed units in the sample based on mathematical similarities.¹¹ The Euclidian distance (d_{ii}) is given by:

Euclidean distance =
$$d_{ij} = \sqrt{\sum_{k} (k^{X_i - k^{X_j}})^2}$$

Where Index goes through all the indicators jointly observed on cases *i* and *j* and x_j and x_j are normalised and corrected values.

Then, the missing value for country *j* is replaced by the observed value for the same indicator on the most similar country (smallest Euclidean distance).

Normalisation

Normalisation serves the purpose of converting the indicators into the same unit. Among several methods, the rescaling or min-max method is applied in the development of the CFI. This approach widens the range of indicators (particularly indicators with a small range of values) and allows us to differentiate countries with similar levels of performance. It is also very much easier to communicate to a wider public. However, the approach is not appropriate in the presence of extreme values or outliers, which can distort the normalised indicator.

Observed minimum and maximum values were set to be used for the majority of the indicators. However, possible or natural minimum and maximum values (0 and 100, respectively) are used instead to normalise indicators given in the form of percentages.

When an increase in the value of an indicator corresponds to an increase in the performance, the normalised value I_{ic} for that particular indicator x_i of a country c is given by:

$$I_{ic} = \frac{x_{ic} - Min[x_i]}{Range[x_i]}$$

When an increase in the value of an indicator corresponds to a decrease in the performance, the normalised value I_{ic} for that particular indicator x_i of a country c is given by:

$$I_{ic} = \frac{Max[x_i] - x_{ic}}{Range[x_i]}$$

¹⁰ Several reasons can be mentioned for the choice of the popular hot deck method. Firstly, for a few missing cases in a dataset, we may not require sophisticated imputation methods. Secondly, the method does not rely on model fitting for the variable to be imputed, and thus is potentially less sensitive to model misspecification than an imputation method based on a parametric model, such as regression imputation. Another reason is for its attractive feature that only plausible values can be imputed, since values come from observed responses or records (Andridge and Little 2010).

¹¹ Note: Karpievitch et al. (2012) suggest that missing value imputations should be done following normalisation as normalisation performed after the imputation does not seem to be able to remove bias well enough.

Weighting

Regardless of which method is used, weights are essentially value judgments (OECD 2008). For the development of the CFI, an equal weighting¹² scheme was adopted. The reason for this is that the index is conceptualised through the use of a rights-based approach and indicators related to the realisation of children's rights. And these child-right-related indicators are assumed to be of equal importance as all rights are equal, indivisible, interrelated and interdependent (UNICEF 2014).¹³ Similarly, we followed this principle across sub-dimensions and dimensions: equal weight is assigned to each of the sub-dimensions and the dimensions are also equally weighted.¹⁴

Aggregation

Arithmetic mean at sub-dimension levels and geometric mean at dimension and index levels are applied in the CFI to aggregate results. Aggregation follows three steps.

Sub-dimension indices: j^{th} Sub-dimension score SD_{jc} in the n^{th} dimension for a given country c is a simple linear weighted function of a total of m normalized indicators I_{ikc} with weights w_{ik} ,

$$SD_{jnc} = \sum_{i=1}^{m} I_{ijnc} W_{ijn}$$

Dimension indices: n^{th} dimension score D_{nc} for a given country c is a geometric mean of a total of k sub-dimensions scores SD_{inc} with weights w_{in} ,

$$D_{nc} = \prod_{j=1}^{k} SD_{jnc}^{w_{jn}}$$

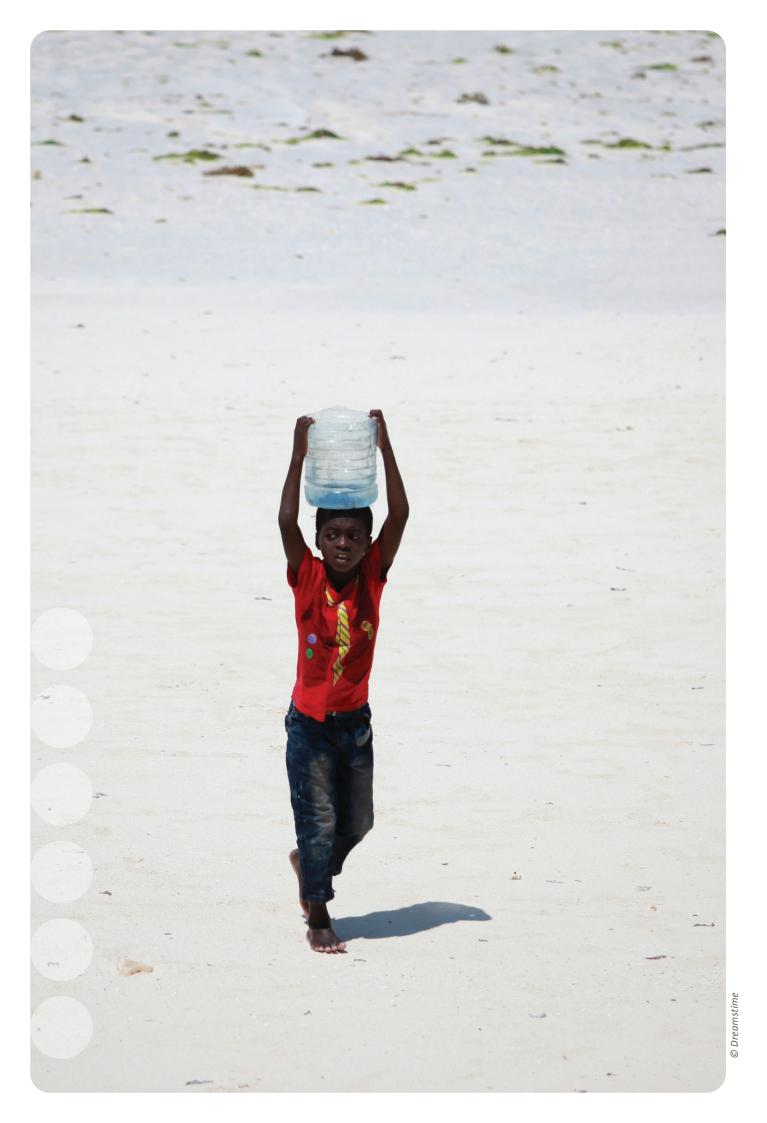
Finally, aggregating the *p* dimensional indices using geometric mean to obtain CFI for a country *c*:

$$CFI_{c} = \prod_{n=1}^{p} D_{nc}^{w_{n}}$$

¹² Equal weighting can be applied after a proper scaling of the sub-indicators. Equal weighting works well if all sub-indicators are uncorrelated, or they are all highly correlated (Saisana et al. 2003).

¹³ Human rights are typically understood to be of equal value, each right is conceived of as equally important as every other. On this view, there can exist no potential for conflict between fundamental human rights. One is simply meant to attach equal moral weight to each and every human right. This prohibits arranging human rights in order of importance http://www.iep.utm.edu/ hum-rts/; https://www.unicef.org/crc/index_30196.html

¹⁴ It is worth mentioning here that if variables are grouped into sub-dimensions and those are further aggregated into dimension index and then into composite index, the sub-dimensions grouping the larger number of variables will have higher weight and could result in an unbalanced structure in the index.



Annex 2: The Child-Friendliness Index 2023

TABLE A2.1 CHILD-FRIENDLINESS INDEX 2023, INCLUDING DIMENSIONS, SCORES AND COUNTRY RANKINGS

COUNTRY	PROTECTION LAWS	PROTECTION OUTCOMES	PROVISION BUDGET	PROVISION OUTCOMES	PROTECTION INDEX	PROVISION INDEX	CFI	RANK
Mauritius	0.9095	0.9407	0.7054	0.8593	0.9250	0.7785	0.8486	1
Tunisia	0.6190	0.9870	0.8597	0.8868	0.7817	0.8731	0.8261	2
South Africa	0.7881	0.9380	0.8515	0.7306	0.8598	0.7887	0.8235	3
Cabo Verde	0.7881	0.9037	0.7772	0.8194	0.8439	0.7980	0.8207	4
Seychelles	0.7857	0.9080	0.7286	0.8644	0.8446	0.7936	0.8187	5
Namibia	0.7667	0.8307	0.8111	0.6772	0.7980	0.7412	0.7691	6
Algeria	0.4810	0.9777	0.8509	0.8233	0.6857	0.8370	0.7576	7
Morocco	0.5643	0.9363	0.6533	0.7812	0.7269	0.7144	0.7206	8
Lesotho	0.8143	0.7140	0.7226	0.6083	0.7625	0.6630	0.7110	9
Egypt	0.5643	0.9240	0.5835	0.7841	0.7221	0.6764	0.6989	10
Botswana	0.4524	0.8883	0.8245	0.6600	0.6339	0.7377	0.6838	11
Eswatini	0.5476	0.8013	0.5660	0.6447	0.6624	0.6041	0.6326	12
Gabon	0.4952	0.8270	0.4959	0.6410	0.6400	0.5638	0.6007	13
São Tomé and Principe	0.4976	0.8670	0.4020	0.7174	0.6568	0.5370	0.5939	14
Rwanda	0.7476	0.8703	0.3464	0.5495	0.8066	0.4363	0.5932	15
Ghana	0.6429	0.7707	0.3556	0.6819	0.7039	0.4924	0.5887	16
Kenya	0.7071	0.7570	0.3789	0.5885	0.7316	0.4722	0.5878	17
Sierra Leone	0.7333	0.7853	0.3732	0.5146	0.7589	0.4382	0.5767	18
Zimbabwe	0.7167	0.6237	0.4204	0.5637	0.6686	0.4868	0.5705	19
Malawi	0.7619	0.7177	0.3244	0.5743	0.7395	0.4316	0.5649	20
Benin	0.9571	0.7673	0.2590	0.4443	0.8570	0.3392	0.5392	21
Angola	0.7214	0.5867	0.4187	0.4688	0.6506	0.4431	0.5369	22
Senegal	0.5667	0.7513	0.3547	0.5473	0.6525	0.4406	0.5362	23
Burkina Faso	0.6595	0.6110	0.4138	0.4550	0.6348	0.4339	0.5248	24
Mozambique	0.7333	0.6003	0.3479	0.4607	0.6635	0.4003	0.5154	25
Congo	0.5333	0.8483	0.2884	0.5148	0.6726	0.3853	0.5091	26
Togo	0.7881	0.7320	0.2309	0.4984	0.7595	0.3392	0.5076	27
Côte d'Ivoire	0.6452	0.7420	0.2680	0.5034	0.6919	0.3673	0.5041	28
Mali	0.5810	0.7327	0.3380	0.4423	0.6524	0.3866	0.5022	29
Burundi	0.3929	0.7787	0.3679	0.4920	0.5531	0.4255	0.4851	30
Mauritania	0.5405	0.6473	0.3045	0.5111	0.5915	0.3945	0.4831	31
Djibouti	0.5619	0.8597	0.2067	0.5434	0.6950	0.3352	0.4826	32
Madagascar	0.5619	0.6610	0.3152	0.4355	0.6094	0.3705	0.4752	33
Guinea	0.7881	0.6377	0.2070	0.4254	0.7089	0.2967	0.4587	34
Nigeria	0.6357	0.6527	0.2241	0.4410	0.6441	0.3144	0.4500	35
Zambia	0.5000	0.5403	0.2990	0.4960	0.5198	0.3851	0.4474	36
Comoros	0.4643	0.7573	0.2002	0.5618	0.5930	0.3354	0.4459	37
Liberia	0.5000	0.6990	0.1913	0.5772	0.5912	0.3323	0.4432	38
Guinea-Bissau	0.5786	0.6770	0.2175	0.4465	0.6259	0.3116	0.4416	39
Niger	0.5429	0.5107	0.3534	0.3644	0.5265	0.3588	0.4347	40
Equatorial Guinea	0.3833	0.6700	0.2888	0.4764	0.5068	0.3709	0.4335	41
Gambia	0.3786	0.7300	0.2023	0.6176	0.5257	0.3535	0.4311	42
Tanzania	0.3000	0.5703	0.3523	0.4991	0.4136	0.4193	0.4165	43
Uganda	0.5786	0.6003	0.1591	0.5037	0.5894	0.2831	0.4084	44
Ethiopia	0.6786	0.3913	0.2355	0.4323	0.5153	0.3191	0.4055	45
Democratic Republic of Congo	0.4786	0.6543	0.1898	0.4292	0.5596	0.2854	0.3997	46
Chad	0.6762	0.4203	0.2723	0.2855	0.5331	0.2789	0.3856	47
Central African	0.6381	0.5230	0.2086	0.2563	0.5777	0.2312	0.3655	48
Republic								
Sudan	0.2500	0.7167	0.1594	0.5082	0.4233	0.2846	0.3471	49
Cameroon	0.2476	0.6440	0.1286	0.5133	0.3993	0.2569	0.3203	50
Eritrea	0.3833	0.5723	0.0924	0.4041	0.4684	0.1933	0.3009	51
South Sudan	0.1143	0.4830	0.0849	0.2576	0.2349	0.1479	0.1864	52

Source: Compiled and computed by ACPF.



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Annex 3: Statistical tables

- Table A3.1 Child population
- Table A3.2National economy
- Table A3.3Government expenditure
- Table A3.4Maternal and child health
- Table A3.5 Nutrition
- Table A3.6
 Access to basic services Water and sanitation
- Table A3.7Education
- Table A3.8
 Child-poverty-related data and analysis

TABLE A3.1 CHILD POPULATION (AGE 0-17)

	Total child population -	Age group				Child population by gender (000) 2021		Total population	
Country	(000) 2021	0-4	5–9	10-14	15–17	Male	Female	(000) 202	
	1	2	3	4	5	6	7	8	
SUB-SAHARAN AFRICA	575,566	185,105	164,902	147,185	78,379	290,764	284,800	1,182,309	
Angola	17,833	5,983	5,201	4,404	2,244	8,956	8,877	34,504	
Benin	6,376	2,137	1,830	1,567	842	3,232	3,144	12,997	
Botswana	1,000	297	286	270	148	506	494	2,588	
Burkina Faso	11,244	3,568	3,283	2,893	1,500	5,709	5,535	22,101	
Burundi	6,655	2,054	2,009	1,748	845	3,343	3,312	12,551	
Cabo Verde	188	50	52	54	32	95	93	588	
Cameroon	13,339	4,346	3,816	3,379	1,798	6,712	6,627	27,199	
Central African R.	3,045	985	860	785	416	1,537	1,509	5,457	
Chad	9,343	3,218	2,711	2,259	1,155	4,738	4,605	17,180	
Comoros	363	114	107	94	49	184	180	822	
Congo	2,786	847	827	743	370	1,405	1,382	5,836	
Côte d'Ivoire	13,379	4,202	3,802	3,482	1,894	6,741	6,638	27,478	
DRC	50,791	17,698	14,759	12,158	6,177	25,434	25,358	95,894	
Djibouti	409	116	112	112	69	207	202	1,106	
Equatorial Guinea	722	230	210	194	88	364	357	1,634	
Eritrea	1,712	486	480	475	272	864	848	3,620	
eSwatini	493	140	141	136	76	248	245	1,192	
Ethiopia	56,315	17,798	15,619	14,649	8,249	28,689	27,626	120,283	
Gabon	985	307	293	253	132	495	490	2,341	
Gambia	1,331	412	389	347	182	672	658	2,640	
Ghana	14,291	4,306	4,192	3,734	2,059	7,230	7,060	32,833	
Guinea	6,562	2,097	1,884	1,680	902	3,333	3,229	13,532	
Guinea-Bissau	975	295	284	257	140	493	482	2,061	
Kenya	24,050	6,913	6,694	6,744	3,698	12,055	11,994	53,006	
Lesotho	916	275	262	241	138	457	458	2,281	
Liberia	2,492	745	714	670	362	1,261	1,231	5,193	
Madagascar	13,292	4,151	3,745	3,496	1,900	6,725	6,567	28,916	
Malawi	10,052	3,034	2,850	2,700	1,468	5,017	5,035	19,890	
Mali	11,904	4,004	3,436	2,941	1,523	6,021	5,884	21,905	
Mauritania	2,252	695	641	603	314	1,137	1,115	4,615	
Mauritius	272	66	69	80	56	137	135	1,299	
Mozambique	16,168	5,260	4,666	4,086	2,155	8,107	8,060	32,077	
Namibia	1,060	333	312	271	144	527	533	2,530	
Niger	14,056	4,972	4,030	3,347	1,706	7,143	6,913	25,253	
Nigeria	106,611	34,831	30,568	26,974	14,238	54,106	52,505	213,401	
Rwanda	6,162	1,889	1,721	1,625	926	3,105	3,056	13,462	
São Tomé & Principe	105	30	31	28	16	53	52	223	
Senegal	8,168	2,571	2,368	2,109	1,120	4,132	4,035	16,877	
Seychelles	29	9	8	8	4	15	14	106	
Sierra Leone	3,880	1,188	1,101	1,028	564	1,961	1,919	8,421	
Somalia	9,212	3,200	2,662	2,202	1,148	4,672	4,540	17,066	
South Africa	19,961	5,813	5,706	5,511	2,932	10,158	9,804	59,392	
South Sudan	5,621	1,486	1,770	1,550	815	2,847	2,773	10,748	
Sudan	21,570	7,084	6,204	5,471	2,812	10,927	10,644	45,657	
Togo	4,035	1,270	1,157	1,052	556	2,037	1,998	8,645	
Uganda	24,092	7,690	6,851	6,181	3,370	12,116	11,977	45,854	
Tanzania	32,079	10,537	9,140	8,052	4,350	16,189	15,890	63,588	
Zambia	9,768	3,073	2,810	2,541	1,343	4,879	4,888	19,473	
Zimbabwe	7,622	2,300	2,239	2,001	1,082	3,793	3,829	15,994	
NORTH AFRICA	22,173	22,728	19,734	10,562	38,477	36,719	209,515	22,173	
Algeria	15,526	4,871	4,718	3,980	1,958	7,932	7,594	44,178	
Egypt	41,988	12,368	12,859	10,885	5,875	21,487	20,500	109,262	
Libya	2,332	614	651	678	388	1,198	1,134	6,735	
Morocco	11,779	3,285	3,420	3,250	1,823	6,023	5,755	37,077	
Tunisia	3,574	1,035	1,080	941	518	1,837	1,736	12,263	
ALL AFRICA	650,765	207,278	187,630	166,919	88,941	329,241	321,519	1,391,82	
								, , , , , , , , , , , , , , , , , , , ,	

Population Prospects

TABLE A3.2 NATIONAL ECONOMY

	Country		GDP per capita (Current USD)
	Country	2000	2021
		1	2
SUB-SAHARAN A	FRICA (median)	408	1,174
Angola		557	2,138
Benin		513	1,428
Botswana		3,522	7,348
Burkina Faso		256	918
Burundi		136	237
Cabo Verde		1,259	3,446
Cameroon		681	1,662
Central African R	Republic	252	511
Chad		166	696
Comoros		647	1,495
Congo (Brazzavil	le)	1,032	2,214
Côte d'Ivoire		1,007	2,579
ORC		405	584
Djibouti		768	3,364
Equatorial Guine	a	1,726	8,462
Eritrea		308	
eSwatini		1,729	4,215
Ethiopia		124	944
Gabon		4,136	8,017
Gambia		594	836
Ghana		258	2,445
Guinea		363	1,174
Guinea-Bissau		309	813
Kenya		397	2,007
esotho		436	1,166
iberia		307	673
Madagascar		294	515
Malawi		156	643
Mali		271	918
Mauritania		677	1,723
Mauritius		3,929	8,812
Mozambique		319	500
Namibia		2,186	4,729
Niger		198	595
Nigeria		568	2,085
Rwanda		261	834
São Tomé and Pi	rincipe		2,449
Senegal		614	1,606
Seychelles		7,579	13,307
Sierra Leone		139	516
Somalia			446
South Africa		3,375	6,994
South Sudan			
Sudan		366	764
Togo		303	992
Uganda		262	858
Tanzania		411	1,136
Zambia		346	1,121
Zimbabwe		563	1,737
NORTH AFRICA (I	median)	1,765	3,876
Algeria		1,765	3,765
Egypt		1,450	3,876
Libya		7,143	6,018
Norocco		1,335	3,497
Tunisia		2,212	3,924
ALL AFRICA (med	dian)	513	1,551
	,		1,001
ource			a= Data from national sources
0	rld Bank	https://data.worldbank.org/indicator/	Data not available
-2 Wo			* Data refer to the most recent year available during

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TABLE A3.3 GOVERNMENT EXPENDITURE

		th expenditure al government		I protection as % of GDP Including			
Country	education as % of GDP			nditure	health	health	
	2000	2016-2021*	2000	2019		-2020*	
	1	2	3	4	5	6	
SUB-SAHARAN AFRICA (median)	4	4	8.2	6	2	3	
Angola	3	2.4	3.2	5.4	2.1	3.4	
Benin	3	3.0	11	3.7	1.3	2.3	
Botswana	8	8.7	7.7	14.3	1.9	6.5	
Burkina Faso		5.5	9	9.6	0.1	3.1	
Burundi	4	5.0	2.1	8.5	2.6	4.5	
Cabo Verde		7.6	9.6	10.4	6.4	9.5	
Cameroon	3	3.2	9.5	0.6	0.8	1.4	
Central African Republic		2.2	10	4.8	2.8	3.5	
Chad	2	2.9	13.1	5.2	0.6	1.3	
Comoros		2.6	9.5	4.1			
Congo (Brazzaville)	6	4.5	4.8	3.5	1.4	2.6	
Côte d'Ivoire	5	3.4	5.2	5.5	1.2	2.5	
DRC		2.7	0.9	4.4	1.8	2.2	
Djibouti		3.6	14.5	4.3	2.0	3.6	
Equatorial Guinea	2	2.2	7.7	3.8	2.2	2.8	
Eritrea			4.8	2.4		1.6	
eSwatini		5.0	11.6	10.0	1.0	4.5	
Ethiopia	5	4.5	8.9	4.8	0.7	1.6	
Gabon	5	3.2	13.9	9.6		1.8	
Gambia	3	2.8	7.9	4.4	0.9	1.7	
Ghana	4	3.9	9.4	6.5	1.7	2.8	
Guinea	2	2.2	4	6.1	0.5	1.2	
Guinea-Bissau		2.7	2.3	2.8	4.8	5.4	
Kenya	6	4.8	11.4	8.3	1.0	3.1	
Lesotho	8	8.7	9.7	8.8	5.5	11.0	
Liberia		2.7	5.7	4.1	0.4	1.8	
Madagascar	3	3.1	7.2	8.0	1.0	3.6	
Malawi	4	2.9	7.3	8.7	1.6	4.6	
Mali	3	4.4	9.5	5.7	2.2	3.5	
Mauritania	4	1.9	6.4	7.0	3.6	5.3	
Mauritius	4	4.9	6.8	10.2	6.8	9.3	
Mozambique	3	6.3	12.9	5.6	0.8	2.3	
Namibia		9.6	12.9	10.7	3.8	7.7	
Niger	3	3.8	10.9	9.4	1.4	4.0	
Nigeria		0.5	4.2	3.8	0.7	1.2	
Rwanda	3	3.8	8.2	8.9	1.8	4.1	
São Tomé and Principe		5.0	7.6	10.8	0.7	3.5	
Senegal	3	5.5	8.6	4.3	3.3	4.2	
Seychelles	8	5.2	6.8	10.2	6.4	10.1	
Sierra Leone		9.1	7.6	5.8	0.7	2.5	
Somalia							
South Africa	6	6.6	10.9	15.3	5.5	9.9	
South Sudan		1.5		2.1		0.8	
Sudan	0	1.3	7.2	5.6	0.7	1.8	
Годо	5	4.0	6.9	5.4	0.1	1.2	
Uganda	2	2.7	9.2	3.1	0.7	1.7	
lanzania		3.3	11.2	9.6	1.7	3.3	
Zambia		3.7	9.4	7.0	0.8	2.5	
Zimbabwe	11	3.9	7.4	8.7	2.9	6.3	
NORTH AFRICA (median)	6.5	6.9	6.9	8.9	8.2	11.4	
Algeria		7.0	9	10.7	8.9	13.1	
Egypt		2.5	7.5	4.7	9.5	11.2	
Libya			6.9			4.4	
Morocco	6	6.8	4.3	7.1	4.5	6.8	
Tunisia	7	7.3	6.8	12.6	7.5	11.6	
ALL AFRICA (median)	4	4	7.8	6	2	3	

Source			Notes
1&3	ACPF, African reports on child wellbeing 2018	Annex tables	= Data not
2	UNESCO Institute of Statistics	http://sdg4-data.uis.unesco.org/	available GDP = Gross
4	WHO, Global health expenditure database	https://apps.who.int/nha/database/ViewData/Indicators/en 01 June 2022	domestic product * Data refer to
5	ILO World Social Protection Report 2020/22	https://www.social-protection.org/gimi/ShowWiki.action?id=629#stat,	2020 or most

TABLE A3.3 GOVERNMENT EXPENDITURE (CONTINUED)

Country	2001	2017-2020
	6	7
JB-SAHARAN AFRICA (median)	33	28
ngola	13	92.9
enin	55	43.3
Dtswana	100	100
urkina Faso	0	31.0
urundi	6	14.1
abo Verde	100	96.2
ameroon	35	17.6
entral African Republic	0	14.8
nad	100	47.6
omoros		22.3
ongo (Brazzaville)	0	38.2
ôte d'Ivoire	65	28.0
RC	0	14.8
ibouti	85	1.0
uatorial Guinea	0	59.0
itrea	0	7.6
Swatini	100	83.6
hiopia	18	16.0
abon	100	10.0
	57	23.3
ambia		
nana 	100	48.9
uinea	20	23.6
iinea-Bissau	0	11.2
nya	3	33.6
sotho	39	61.0
peria	0	21.4
adagascar	16	25.2
ılawi	2	17.9
ili	100	36.4
uritania	100	27.1
uritius	100	100
zambique	10	30.5
amibia	100	100
ger	33	19.3
	100	64.6
geria wanda	0	19.3
io Tomé and Principe		20.5
enegal	100	34.9
ychelles	100	100
erra Leone	0	6.1
malia		
uth Africa	100	100
uth Sudan		12.8
dan	25	13.6
30	0	18.7
anda	75	15.7
izania	10	29.3
nbia	0	27.2
Ibabwe	100	31.5
	100	100876
ORTH AFRICA (median)		
geria	100	100
<u>gypt</u>	100	100
руа	2	
orocco	100	100
nisia	100	100

Source			Notes
6	African report on child wellbeing 2018	Annex tables (https://www.africanchild.report/)	= Data not available
7	Immunisation expenditure indicators from the WHO-UNICEF Joint Reporting Form	https://www.who.int/teams/immunization-vaccines-and-biologicals/vaccine- access/planning-and-financing/immunization-financing-indicators	avallable

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TABLE A3.4 MATERNAL AND CHILD HEALTH

Country	Measles (MCV1) immunisation coverage (%)		mortality rate (per 1,000 live births)	Infant mortality rate (per 1,000 births)		Under 5 mortality (per 1,000 live births)	
	2000	2021	2020	2000	2020	2000	2020
	1	2	3	4	5	6	7
SUB-SAHARAN AFRICA (median)	69	78	26	95	44	141	59
Angola	41	36	27	154	48	240	71
Benin	72	68	30	95	57	144	86
Botswana	90	97	22	74	36	96	45
Burkina Faso	59	88	26	100	53	180	85
Burundi	75	90	21	114	39	190	54
Cabo Verde	80	95	9	31	12	42	14
Cameroon	49	62	26	88	48	150	72
Central African Republic	36	41	39	115	77	193	103
Chad	28	55	33	122	67	213	110
Comoros	70	82	29	62	47	85	61
Congo (Brazzaville)	34	68	19	81	33	120	45
Côte d'Ivoire	73	68	33	115	58	137	78
DRC	46	55	27	129	64	207	81
Djibouti	50	50	30	97	47	146	56
Equatorial Guinea	51	53	29	120	58	185	78
ritrea	86	93	18	61	30	96	39
eSwatini	58	80	20	98	37	122	47
Ethiopia	52	54	27	116	35	160	49
Gabon	55	64	20	60	31	90	42
Gambia	85	79	26	99	35	136	49
Ghana	84	94	23	68	33	111	45
Guinea	42	47	30	112	62	186	96
Guinea-Bissau	71	63	35	132	51	218	77
Кепуа	75	89	20	77	31	114	42
_esotho	74	90	44	86	70	113	90
liberia	52	58	31	157	58	174	78
Madagascar	56	64.1	26	84	47	125	75
Malawi	73	87.9	19	95	29	160	39
Mali	49	70	32	124	59	219	91
Mauritania	62	63	31	79	49	121	71
Mauritius	84	77	11	18	15	20	17
Mozambique	71	84	28	122	53	188	71
Namibia	69	90	20	50	30	76	40
Viger	34	80	24	159	46	232	78
Vigeria	35	60	34	107	63	210	102
Rwanda	74	87	18	118	30	181	40
São Tomé and Principe	69	77	8	75	13	106	16
Senegal	48	87	21	80	29	134	38
Seychelles	97	94	8	13	12		14
Sierra Leone	37	87	31	167	80	213	108
Somalia					73		
South Africa	38	87	11	50	26	84	32
South Sudan		49	40		63		98
Sudan	77	81	27	65	40	127	57
ōgo	72	70	24	80	40	127	64
Jganda	59	90	19	85	32	145	43
anzania	78	90 76	20	88	35	143	43
Zambia	85	90	24	102	42	138	49 61
imbabwe	75	90 85	24	73	38	182	54
INDADwe IORTH AFRICA (Median	93	96	12	37	16	46	54 19
	93 80	96 80	12	37	16	46 46	23
Ilgeria	98	80 96	10	37 40	19	46 51	23 19
gypt	98			20		24	
.ibya Maraasa		 99	 12	20 45	10 16	24 52	
Morocco	93 95	99 95					19
unisia LL AFRICA (Median)	70.5	95 80	12 25	25 87	14 40	27 136	17 55

Source		Notes	
1-7	ACPF, The African Report on Child Wellbeing 2018 UNICEF: The State of the World's Children report 2021	Annex tables (https://www.africanchild. report/) https://www.unicef.org/reports/state-worlds- children-2021	 = Data not available; ANC = Antenatal care; * Data refer to the most recent year available during the period specified in the column heading

TABLE A3.5 NUTRITION

	Prevalence of stunting in children under 5 (%)	Prevalence of wasting in children under 5 (%)	Prevalence of overweigh in children under 5 (%)	
Country	2020	2020	2020	
	1	2	3	
SUB-SAHARAN AFRICA (median)	28	5	4	
Angola	37.7	4.9	3.0	
Benin	31.3	5.0	2.2	
Botswana	22.8	7.0	11.0	
Burkina Faso	25.5	10.0	2.6	
Burundi	57.6	6.0	3.1	
Cabo Verde	9.7			
Cameroon	27.2	4.3	9.6	
Central African Republic	40.1	5.3	2.6	
Chad	35.0	10.0	3.4	
Comoros	22.6	11.2	9.6	
Congo (Brazzaville)	18.0	8.2	5.1	
Côte d'Ivoire	17.8	6.1	2.8	
DRC	40.8	6.4	4.2	
Djibouti	34.0	10.0	7.2	
Equatorial Guinea	19.7	3.0	9.3	
Fritrea	49.1	15.0	2.1	
eSwatini	22.6	2.0	9.7	
Ethiopia	35.3	7.2	2.6	
Gabon	14.4	3.4	7.4	
Gambia	16.1	5.1	2.3	
Ghana	14.2	6.8	2.9	
Guinea	29.4	9.2	5.7	
Guinea-Bissau	28.0	8.0	3.4	
Kenya	19.4	7.0	4.5	
esotho	32.1	2.1	7.2	
iberia	28.0	3.4	4.7	
/adagascar	39.8	7.7	1.5	
Malawi	37.0	2.6	5.0	
Mali	25.7	9.3	2.1	
Mauritania	24.0	10.0	3.0	
Nauritius	8.7		7.6	
Mozambique	37.8	4.4	6.0	
Vamibia	18.4	7.1	5.0	
liger	46.7	11.0	1.9	
Vigeria	35.3	6.5	2.7	
Rwanda	33.1	1.1	5.6	
São Tomé and Principe	11.8	4.1	4.0	
Senegal	17.2	8.1	2.1	
Sevchelles	7.4	4.3	9.8	
Sierra Leone	26.8	6.0	4.7	
Somalia		0.0		
South Africa	23.2	3.4	12.9	
South Sudan	30.6	23.0	5.7	
Sudan	33.7	16.3	2.7	
ogo	23.8	5.7	2.4	
Jganda	23.8	3.5	4.0	
Jnited Republic of Tanzania	32.0	2.0	5.5	
ambia	32.3	4.2	5.7	
limbabwe	23.0	2.9	3.6	
IORTH AFRICA (median)	11	3	15	
Igeria	9.3	2.7	12.9	
-	22.3	9.5	17.8	
gypt		9.0		
ibya Aorosoo	 12.9	2.6		
Aorocco			11.3	
unisia	8.6	2.1	16.5	
ALL AFRICA (median)	26	5	5	
Durce			Notes	
-3 UNICEF, The State of the World's Child report 2023, UNICEF, WHO and World Bank (2021)	https://www.unicef.org/repor	ts/state-worlds-children-2023 ions/i/item/9789240025257	= Data not available	

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TABLE A3.6 ACCESS TO BASIC SERVICES - WATER AND SANITATION

	Percentage of using basic san	itation facilities	Percentage of using safe drink	Number of physician per 100,000		
Country	2000 2020		2000 2020		2014-2020*	
	1	2	3	4	5	
SUB-SAHARAN AFRICA (median)	36	35	61	66	16	
Angola	30	51.7	46	57.2	21.4	
Benin	26	17.0	65	65.4	6.5	
Botswana	41	80.0	95	92.2	37.8	
Burkina Faso	11	21.7	54	47.2	9.4	
Burundi	38	45.7	77	62.2	7.2	
Cabo Verde	41	79.1	80	88.8	83.1	
Cameroon	50	44.6	61	65.7	12.9	
Central African Republic	26	14.1	70	37.2	7.2	
Chad	8	12.1	35	46.2	6.1	
Comoros	34	35.9	88	80.2	26.4	
Congo (Brazzaville)	27	20.5	57	73.8	10.4	
Côte d'Ivoire	33	34.6	83	70.9	16.2	
DRC	25	15.4	45	46.0	37.5	
Djibouti	81	66.7	73	76.0	22.4	
quatorial Guinea	52	66.3	43	64.7	40.2	
ritrea	8	11.9	54	51.8	8.2	
Swatini	48	64.3	62	70.8	14.2	
thiopia	8	8.9	22	49.6	10.6	
Gabon	36	49.8	86	85.3	64.6	
Gambia	53	46.9	82	80.9	8.2	
Ghana	18	23.7	70	85.8	17	
Guinea	17	29.8	49	64.0	22.5	
Guinea-Bissau	34	18.2	58	59.0	19.6	
Kenya	43	32.7	57	61.6	15.7	
esotho	37	50.3	79	72.2	47.3	
iberia	28	18.2	61	75.3	5.1	
Madagascar	27	12.3	45	53.4	19.9	
/alawi	58	26.6	64	70.0	5	
/ali	43	45.4	45	82.5	12.9	
/auritania	33	49.8	47	71.7	18.7	
/auritius	94	99.8	100	99.9	130.3	
<i>Aozambique</i>	27	37.2	42	63.4	8.5	
Jamibia	25	35.3	80	84.3	59	
liger	11	14.8	44	46.9	3.5	
ligeria	42	38.0	49	72.0	38.1	
Rwanda	40	64.2	70	60.4	11.8	
ão Tomé and Principe	24	47.6	79	78.2	48.8	
Senegal	50	56.8	73	84.9	8.8	
Seychelles	100	>99	87	96.9	130.3	
Sierra Leone	38	16.5	57	63.8	7.4	
Somalia						
South Africa	66	78.5	87	93.9	79.2	
South Sudan		15.8		41.0	3.7	
Sudan	34	36.9	69	60.4	26.2	
ogo	34	18.6	51	68.6	8.3	
Iganda	43	19.8	55	55.9	15.4	
anzania	43	31.8	58	60.7	5.1	
ambia	51	31.9	55	65.4	11.7	
limbabwe	52	35.2	80	62.7	19.9	
IORTH AFRICA (median)	83	92	89	96	19.9	
ligeria	91	86.0	89	96	130.3	
gypt	65	97.3	97	99.4	74.6	
ibya	97		71			
Логоссо	69	 87.3	71	 90.4	 73.1	
unisia	83	97.4	90	90.4 97.5	130.3	
ulls AFRICA (median)	38	36	65	69	130.3	

Source			Notes
14 & 16	ACPF, The African Report on Child Wellbeing 2018	Annex tables (https://www.africanchild.report/)	= Data not available
15 &17	Estimates on the use of water, sanitation and hygiene by country (2000–2020)	www.washdata.org ; https://washdata.org/data/ household#!/	* Data refer to the most recent year available during the period specified in the
18	Based on data from WHO, World Health Statistics 2022: Monitoring health for the SDGs	https://www.who.int/data/gho/data/indicators/ indicator-details/GHO/medical-doctors-(per-10-000-	column heading

TABLE A3.7 EDUCATION

	NET ENROLMENT RATE							Punil-	teacher	
			Primary				Secondary	'	ratio (p	
Country	Вс	oys	Gi	rls	Total	Boys	Girls	Total		
,	1999– 2000*	2012– 2021*	1999– 2000*	2012– 2021*	2012– 2021*	2012– 2021*	2012– 2021*	2012– 2021*	1999– 2000*	2015 2021
	1	2	3	4	5	6	7	8	9	10
SUB-SAHARAN AFRICA (median)	68	85	62	86	87	36	36	38	44	42
Angola	39		35						35	50
Benin	83	96.1	57	90.4	93.3	53.2	39.8	46.6	54	50
Botswana	82	88.4	86	89.5	89.0				27	24
Burkina Faso	42	75.5	29	75.4	75.5	30.3	31.7	31.0	47	41
Burundi	59	88.2	49	91.6	89.9	24.0	31.0	27.5	50	43
Cabo Verde		92.8		91.8	92.3	66.4	74.5	70.4	28	20
Cameroon		96.0		87.3	91.7	48.9	43.0	46.0	63	45
Central African Republic	64	73.9	45	59.2	66.6	15.7	9.7	12.7	74	83
Chad	70	82.7	47	65.0	73.8	25.4	12.3	18.9	71	57
Comoros	60	81.9	52	81.8	81.8	49.1	51.7	50.4	36	28
Congo (Brazzaville)		85.1		83.7	84.4				51	44
Côte d'Ivoire	73	99.7	55	93.0	96.4	45.3	35.1	40.2	48	41
Democratic Republic of Congo										33
Djibouti	37	68.4	28	63.9	66.5	38.3	37.3	37.8	36	29
Equatorial Guinea	76	44.2	68	45.2	44.7				42	23
Eritrea	44	55.0	38	50.2	52.7	42.8	40.3	41.6	45	39
Swatini	92	85.4	94	84.1	84.8	36.4	47.1	41.7	33	27
Ethiopia	53	91.2	41	83.2	87.2	31.3	30.3	30.8	55	55
Gabon	89		87						49	52
Gambia	71	81.8	66	92.6	87.2				37	42
Ghana	60	93.1	57	94.9	94.0	57.8	57.9	57.2	33	37
Guinea	52	92.3	41	78.7	85.5	38.7	25.6	32.2	44	63
Guinea-Bissau	63		45						44	52
Kenya	68	79.5	69	83.0	81.2				33	31
esotho	75	97.2	82	98.0	97.6	32.7	50.0	41.4	48	33
iberia	96	78.4	71	78.9	78.6	16.7	14.6	15.7	36	22
Madagascar	67		68		97.7	28.7	31.0	29.8	50	40
Malawi	97		104		98.1	33.7	34.8	34.2	56	59
Mali		62.1		55.8	59.0	33.0	26.8	29.9	63	38
Mauritania	66	75.0	62	78.8	76.9	30.2	31.7	31.0	42	42
Mauritius	95	96.7	95	99.1	99.7	81.7	87.1	84.3	26	14
Mozambique	59	98.9	50	96.3	99.1	19.2	19.3	19.3	64	59
Vamibia	79	95.1	84	97.6	98.5				32	30
liger	36	62.7	24	55.1	59.0	23.0	17.1	20.1	42	36
Vigeria										38
Rwanda	97	93.5	97	93.8	93.7	32.9	38.8	35.9	51	60
São Tomé and Principe		94.0		94.0	94.0	61.7	68.8	65.2	34	31
Senegal	66	70.3	60	80.5	75.4	35.9	39.4	37.7	51	45
Seychelles					98.6	77.6	82.6	80.1	15	19
Sierra Leone	68	98.3	63	98.5	98.4	42.5	41.0	41.8	44	60
Somalia					0011			1210		
South Africa	90	88.3	88	90.2	95.6	65.4	78.5	71.9	33	30
South Sudan		42.4		32.7	37.6	6.5	4.5	5.5		47
Sudan	50	69.5	42	64.7	67.1				27	62
ogo	101	97.7	83	96.0	98.8	48.5	33.5	41.0	34	52
Iganda	85	94.2	84	97.1	95.6				59	43
anzania	57	82.4	58	85.5	83.9	25.8	27.3	26.5	40	51
ambia	66	83.2	65	87.0	85.1				45	42
ïmbabwe	80	85.5	80	87.2	86.4	49.0	48.5	48.7	37	39
NORTH AFRICA (Median)	98	98	94	98	99	73	74	74	26	26
Igeria	100		97		99.8				28	24
gypt	95	98.9	90	99.3	99.3	82.4	83.1	82.8	28	30
_gypt _ibya					00.0					
Логоссо	82	97.7	74	97.4	99.6	64.5	64.5	64.5	28	27
lunisia	100		99		99.2				23	17
ALL AFRICA (Median)	70	 87	99 65	87	99.2 89	37	38	39	42	41

Source			Notes
1-10	ACPF, The African Report on Child Wellbeing 2018	Annex tables (https://www.africanchild.report/)	* Data refers to the most recent
	UNESCO Institute of Statistics	UNESCO Institute of Statistics database: http://uis. unesco.org/ https://data.worldbank.org/	data from the range in the column heading, unless specified. = Data not available ^ Not included in calculation of
	World Bank	https://data.worldbank.org/	the Index

TABLE A3.7 EDUCATION (CONTINUED)

		Pre-primary	
Country	Boys	Girls	Total
country	2012-2021*	2012–2021*	2012-2021*
UB-SAHARAN AFRICA (median)	11 24	12 23	13 23
	41.9	37.3	
Ingola			39.6
Benin	22.0	22.4	22.2
Botswana	21.1	21.8	21.4
Burkina Faso	6.4	6.4	6.4
Burundi	16.2	16.7	16.5
Cabo Verde	73.8	75.6	74.7
Cameroon	35.2	36.0	35.6
Central African Republic	2.9	3.0	2.9
Chad	1.1	1.1	1.1
Comoros	21.5	22.2	21.8
Congo (Brazzaville)	13.7	14.9	14.3
Côte d'Ivoire	10.3	11.0	10.6
Democratic Republic of Congo	5.5	5.8	5.7
)jibouti	12.7	10.6	11.6
quatorial Guinea	42.9	43.8	43.4
iritrea	23.4	23.2	23.3
Swatini			30.0
thiopia	34.2	32.3	33.3
Gabon	42.3	43.7	43.0
Gambia	39.9	43.2	41.5
Ghana	115.1	117.2	116.1
Guinea	17.9	17.4	17.6
Guinea-Bissau			13.2
Kenya	65.8	64.4	65.1
esotho	34.5	35.4	35.0
iberia	124.6	125.7	125.2
/adagascar	38.2	42.2	40.1
Aalawi	83.1	84.0	83.6
		7.1	7.0
/lali	6.8		
Mauritania	9.3	11.7	10.5
A auritius	104.3	99.6	102.0
lozambique			12.0
lamibia	35.4	36.1	35.8
liger	7.2	7.6	7.4
ligeria	24.4	22.5	23.5
Rwanda	27.1	28.2	27.6
São Tomé and Principe	48.1	52.6	50.3
Senegal	15.9	17.9	16.9
Seychelles	94.9	98.1	96.5
Sierra Leone	19.8	21.9	20.8
iomalia			
South Africa	17.8	 17.9	 17.8
South Sudan		17.9	11.6
	12.3		
Sudan	47.4	47.4	47.4
ogo	29.2	30.3	29.8
ganda	14.1	14.7	14.4
anzania	78.3	78.0	78.1
ambia	8.3	9.1	8.7
limbabwe	72.4	72.6	72.5
IORTH AFRICA (median)	44	45	53
llgeria			79.1
Egypt	29.3	29.3	29.3
ibya			
Aorocco	63.1	57.6	60.4
unisia	44.2	45.0	44.6
ALL AFRICA (median)	28	29	28
	20	29	20

Source			Notes
11-13	UNESCO Institute of Statistics	UNESCO Institute of Statistics database: http://uis.unesco.org/	* Data refers to the most recent data from the range in the column heading, unless specified. = Data not available

TABLE A3.7 EDUCATION

GROSS ENROLMENT RATIO

			Primary					Secondary		
Country	Во	oys	Gi	irls	Total	Bo	oys	Gi	rls	Tota
,	1999– 2000*	2012– 2021*	1999– 2000*	2012– 2021*	2012- 2021*	1999– 2000*	2012– 2021*	1999– 2000*	2012– 2021*	2012 2021
	14	15	16	17	18	19	20	21	22	23
UB-SAHARAN AFRICA (median)	96	101	80	100	101	30	45	21	44	47
ingola	78	121.1	69	105.9	113.5	18	61.8	13	39.7	50.7
Benin	113	118.5	78	109.7	114.2	30	52.4	14	42.4	47.5
otswana	108	99.9	108	98.1	99.0	90		96		73.6
Burkina Faso	52	92.2	37	93.1	92.6	12	39.4	8	41.8	40.6
Burundi	73	114.4	58	115.9	115.1	12	43.0	9	52.2	47.6
Cabo Verde	140	103.9	137	97.9	100.9		85.3		92.7	89.0
Cameroon	115	111.2	100	100.2	105.7		64.6		55.4	60.1
entral African Republic	89	114.6	61	89.4	102.0		20.5		13.8	17.1
had	90	100.3	57	78.0	89.2	18	26.8	5	14.3	20.6
comoros	92	99.6	80	99.4	99.5	23	57.6	18	61.4	59.5
Congo (Brazzaville)	101	95.0	93	92.4	93.7	46		38		52.6
côte d'Ivoire	92	103.4	70	97.5	100.5	30	62.9	17	52.0	57.4
Democratic Republic of Congo	49	122.2	44	114.7	118.5		56.3		36.0	46.2
Dibouti	46	76.3	35	70.0	73.2	13	54.9	17	55.5	55.2
guatorial Guinea	126	62.0	115	61.6	61.8	43		19		26.1
ritrea	65	73.6	54	63.1	68.4	34	49.9	23	45.4	47.7
Swatini	128	119.0	121	109.8	114.5	60	82.6	60	82.2	82.4
thiopia	76	125.2	52	113.5	119.4	22	35.6	14	34.2	34.9
abon	144		143			61		58		
ambia	86	97.8	78	109.4	 103.5	43		30		50.2
Shana	84	102.6	76	103.4	103.4	40	 77.5	32	 77.8	77.1
Guinea	78	102.0	56	92.4	100.4					39.3
Guinea-Bissau	99	109.0	66	114.5	118.7	 26		 14		34.2
	95	103.0	93	103.4		32		29		56.8
ienya esotho					103.2					
	112	124.1	118	117.8	120.9	30	52.8	36	71.3	62.0
iberia Andreas	140	85.5	96	84.7	85.1	45	42.8	32	32.9	37.9
Aadagascar	105	132.9	101	135.2	134.1		34.0		35.2	34.0
Aalawi	139	142.7	135	147.0	144.8	40	40.5	31	33.6	37.1
Aali	71	79.5	51	71.6	75.6		45.0		37.0	41.0
Aauritania	86	97.4	80	103.5	100.4	22	38.4	20	40.4	39.4
lauritius	109	97.3	108	99.6	98.4	79	91.5	75	96.0	93.
lozambique	104	121.9	79	114.9	118.4	14	37.4	9	33.4	35.4
lamibia	112	126.4	113	122.1	124.2	58		65		65.8
liger	42	70.7	29	62.0	66.4	8	27.7	5	20.7	24.3
ligeria		88.4		86.5	87.5		44.6		42.4	43.5
Rwanda	119	132.7	118	130.0	131.3	12	41.6	12	47.0	44.3
ão Tomé and Principe		108.5		105.0	106.8		82.9		95.9	89.3
Senegal	79	77.3	70	88.9	83.0	21	43.1	14	50.1	46.6
eychelles		98.7		103.0	100.8		75.2		81.6	78.3
Sierra Leone	106	139.0	80	143.7	141.3	29	42.5	24	41.1	41.8
omalia										
South Africa	115	100.1	108	96.6	98.4	83	99.5	91	105.7	102.
South Sudan		85.3		60.4	73.0		14.3		7.7	11.0
Sudan	59	81.7	51	76.1	79.0	22	45.4	36	46.3	45.9
ogo	138	128.1	110	124.4	126.3	54	71.6	24	52.1	61.8
Iganda	143	101.3	129	104.1	102.7	21		16		24.0
anzania	78	95.5	76	98.4	96.9	6	30.0	5	32.9	31.4
ambia	80	97.5	76	99.9	98.7	26		21		
imbabwe	96	97.1	93	97.6	97.3	47		42		52.4
IORTH AFRICA (median)	115	114	107	111	112	76	87	80	89	91
Igeria	116	113.0	107	109.5	111.3	68		73		99.0
gypt	103	106.0	96	106.9	106.4	88	89.9	83	89.0	89.
ibya	115		117			88		91		
lorocco	101	116.8	88	113.4	115.2	44	84.5	35	80.3	82.
unisia	120	114.3	115	112.5	113.4	76	86.9	80	99.3	92.9
	101	103	80	103	102	31	50	24	46	48

000000				
1-10	ACPF, The African Report on Child Wellbeing 2018 UNESCO Institute of Statistics	https://www.africanchild.report/ UNESCO Institute of Statistics database:	 Data refers to the most recent data from the range in the column 	
	World Bank	http://uis.unesco.org/ World Bank database https://data.worldbank.org/	heading, unless specified. = Data not available	

TABLE A3.7 EDUCATION (CONTINUED)

	Ма	e Female				Total			
Country									
	2000	2015–2021* 25	2000	2015–2021* 27	2000	2015-2021 29			
SUB-SAHARAN AFRICA (Median)	45	63	33	66	38	65			
Angola		59.0		58.3		58.8			
Benin	45.33	50.9	 24.21	44.1	 34.93	47.6			
Botswana	45.55	96.9	92.26	98.4	89.87	97.9			
Burkina Faso	29.38	41.3	92.26 20.54	45.2	25.03	43.7			
Burundi	29.38	41.3	20.54	57.4	25.03	43.7			
Cabo Verde	100.2		103.45		101.83				
Cameroon	53.36	 74.7	46.46	 78.3	49.93	 77.3			
Central African Republic		46.6		36.4		43.2			
Chad	31.88	37.6	12.71	33.3	22.32	34.9			
Comoros		72.2		82.6		78.5			
Congo (Brazzaville)		75.0		75.8		76.8			
Côte d'Ivoire	48.03	63.5	30.21	56.9	39.12	61.6			
Democratic Republic of Congo		67.1		66.3		66.7			
Djibouti	33.17	87.8	22.78	85.5	28.01	87.2			
Equatorial Guinea		67.6		82.1		73.6			
Eritrea	40.22		32.6		36.4				
eSwatini	62.7	60.3	65.94	76.1	64.32	68.0			
Ethiopia	27.92	49.4	15.21	62.9	21.58	56.7			
Gabon									
Gambia		60.6		66.6		63.8			
Ghana		70.9		78.1		74.9			
Guinea	44.59	66.4	20.53	52.4	32.78	58.3			
	34.59	23.0	19.34	25.9	26.93	24.6			
Guinea-Bissau Kanua									
Kenya		67.4		82.0		75.8			
Lesotho	50.57	63.4	69.73	86.8	60.11	77.1			
Liberia		28.6		32.2		28.0			
Madagascar	35.36	46.0	35.7	57.7	35.53	51.8			
Malawi	69.49	42.2	62	55.5	65.75	47.9			
Mali	40.64	59.6	24.92	56.6	32.78	58.6			
Mauritania		52.4		52.1	52.57	53.9			
Mauritius	105.46	99.6	103.81	99.8	104.65	99.7			
Mozambique	19.73	43.5	12.52	47.3	16.12	45.6			
Namibia	76.46	76.2	86.83	89.4	81.64	82.1			
Niger	21.72	45.5	14.81	36.2	18.38	41.9			
Nigeria		78.2		77.1		77.0			
Rwanda	22.42	47.6	18.98	61.1	20.69	54.3			
São Tomé and Principe		77.8		91.4		86.4			
Senegal	43.57	54.6	 31.8	60.6	37.72	59.7			
Seychelles	113.96		111.86		112.91				
Sierra Leone		64.3		68.5		66.9			
Somalia									
South Africa	88.95	97.4	91.2	98.5	90.07	98.0			
South Sudan		13.2		9.5		10.5			
Sudan	39.42	76.9	35.51	78.8	37.5	77.1			
Годо	76.98	74.4	45.14	71.4	61.03	74.1			
Jganda		42.0		45.3		43.6			
F anzania		74.3		86.5		78.7			
Zambia	65.23	72.7	54.88	78.1	60.08	74.2			
Zimbabwe		86.0		91.7		89.3			
NORTH AFRICA (Median)	85	94	84	97	85	95			
Algeria	82.82	96.1	82.43	97.9	82.63	97.1			
Egypt	101.77	93.7	94.35	95.9	98.14	94.9			
Libya									
Morocco	63 13					 81 5			
	63.13	85.7	50.14	79.2	56.74	81.5			
	87.05	94.2	86.36	97.2	86.71	95.6			
ALL AFRICA (Median)	48	65	36	70	45	67			
ource 4–29 ACPF, The African Report on UNESCO Institute of Statisti The World Bank		UNESCO Institut http://uis.unes	0,	atabase: ata.worldbank.org/	recent dat in the colu unless sp	fers to the most ta from the range umn heading, ecified. not available			

TABLE A3.8 CHILD-POVERTY-RELATED DATA AND ANALYSIS

Country	National poverty rate: headcount ratio at USD 1.90 a day (2011 PPP) (% of population)	Children in monetary poverty at the USD 1.90 line in 2011 PPP (%)	Headcount ratio: % of children in multidimensional poverty	Intensity of deprivation among the poor (% of average deprivation)
	2011-2021*	2017	2020	2020
	1	2	3	4
SUB-SAHARAN AFRICA (mediar	·	43	55	51
Angola	49.9	50.2	54.78	56.55
Benin	19.2	52.1	70.29	56.32
Botswana	14.5	19.9	22.00	42.49
Burkina Faso	33.7	42.1	87.74	64.00
Burundi	72.8	81.2	78.75	55.67
Cabo Verde	3.4	4.1		54.54
Cameroon	26	27.2	49.53	54.54
Central African Republic		76.7	82.89	58.65
Chad	33.2	43.3	86.57	62.71
Comoros	19.1	22.1	43.86	50.27
Congo (Brazzaville)	39.6	45.8	27.32	46.85
Côte d'Ivoire	9.2	29.8	52.10	52.52
DRC	77.2	76.6	69.18	52.83
Djibouti	17	21.9		
Equatorial Guinea				
Eritrea				
eSwatini	29.2	34.5	23.24	42.89
Ethiopia	30.8	26.1	74.75	55.20
Gabon	3.4	4.6	17.84	45.14
Gambia	10.3	11.8	46.88	47.80
Ghana	12.7	15.4	28.69	45.61
Guinea	23.2	26.6	69.46	57.34
Guinea-Bissau	24.7	65.1	69.01	53.84
Kenya	37.1	41.5	43.83	46.53
Lesotho	27.2	31.8	23.44	43.78
Liberia	44.4	45.5	55.24	50.45
Madagascar	78.8	82.9	74.76	57.49
Malawi	73.5	74.9	53.24	47.13
Mali	16.3	45.3	72.10	56.01
Mauritania	6	7.5	65.42	57.32
Mauritius	0.2	1a		
Mozambique	63.7	66.0	76.00	58.54
Namibia		18.7	47.93	45.95
Niger	41.4	47.5	92.78	67.37
Nigeria	39.1	45.9	50.94	55.89
Rwanda	56.5	59.9	53.27	48.34
São Tomé and Principe	25.6	37.8	12.60	41.76
Senegal	7.6	34.1	57.01	52.41
Seychelles	0.5		0.62	33.33
Sierra Leone	43	46.1	62.48	50.00
Somalia				
South Africa	18.7	26.2	8.24	40.02
South Sudan	76.5	86.3	93.76	64.71
Sudan	12.2	9.9	59.64	54.98
Togo	24.1	52.4	42.10	48.81
Uganda	41	47.6	61.91	49.88
United Republic of Tanzania	49.4	57.5	62.72	50.81
Zambia	58.7	62.3	53.33	49.15
Zimbabwe	39.5		30.25	43.17
NORTH AFRICA (median)	0.7	1	3	38
Algeria	0.4	9a	2.22	39.56
Egypt	3.8	5.8	7.23	37.62
Libya			3.15	37.26
Morocco	0.9	1.0	9.02	43.32
Tunisia	0.2	0.5	1.23	37.01
ALL AFRICA (median)	26	42	53	50
Source			Notos	
Source			Notes	most recent data from the
1 World Bank	https://data.worldbank.org/indicate	or/SI.POV.DDAY?locations=BJ		
2 World Bank	Global-Estimate-of-Children-in-Mone	etary-Poverty-An-Update	-	heading, unless specified.
3–4 Alkire et al. 2022	The global Multidimensional Povert		= Data not availab	iic
	results and methodological note	, muun 2022 uisaggi egali011		

Countries	Number of children in multidimensional poverty (millions)	Children in monetary poverty at the USD 1.90 line in PPP (in 2020, millions)
Country	2020*	2020**
	5	6
SUB-SAHARAN AFRICA	348	266
Angola	10	9
Benin	5	4
Botswana	0.2	0.2
Burkina Faso	10	5
Burundi	5	5
Cabo Verde		
Cameroon	7	4
Central African Republic	2	2
Chad	9	4
Comoros	0.2	0.08
Congo (Brazzaville)	1	1
Côte d'Ivoire	7	4
Democratic Republic of Congo	35	39
Djibouti		
Equatorial Guinea		
Eritrea		
eSwatini	0.1	0.2
Ethiopia	44	15
Gabon	0.2	0.05
Gambia	1	0.2
Ghana	5	3
Guinea	5	2
Guinea-Bissau	1	1
Kenya	11	11
Lesotho	0.2	0.3
Liberia	1	1
Madagascar	11	12
Malawi	5	8
Mali	9	5
Mauritania	2	0.2
Mauritius		
Mozambique	13	11
Namibia	1	0.2
Niger	14	7
Nigeria	57	52
Rwanda	3	4
São Tomé and Principe	0.01	0.04
Senegal	5	3
Seychelles	0.0002	
Sierra Leone	3	2
Somalia		
South Africa	2	6
South Sudan	6	5
Sudan	13	2
Тодо	2	2
Uganda	15	12
Tanzania	20	18
Zambia	5	6
Zimbabwe	2	
NORTH AFRICA	4	3
Algeria	0.3	1
Egypt	3	2
Libya	0.1	۲
Morocco	1	0.12
Tunisia	0.04	0.12
iumoiu	352	271

Source:

*Alkire et al. 2022.

** To estimate the absolute number of monetarily poor children in the 46 countries in 2020, the aggregate poverty rates of the total population in 2017 as given in Silwal et al. (2020) are multiplied by the size of the child population per country in 2020, as given by Alkire et al. (2022).

Cuntryingingingindindindindindind20 <td< th=""><th></th><th colspan="5">Contribution to overall multidimensional poverty by deprivation indicator (%)</th><th></th></td<>		Contribution to overall multidimensional poverty by deprivation indicator (%)									
burnerburnershapshapbas </th <th></th> <th>He</th> <th>alth</th> <th>Educ</th> <th>ation</th> <th></th> <th></th> <th>Living st</th> <th>andards</th> <th></th> <th></th>		He	alth	Educ	ation			Living st	andards		
202		Nutrition		school-	atten-					Housing	Assets
SHU SAMA AFRICA (median) 16 4 16 17 10 6 6 7 8 8 6 Angola 19 14 18 15 8 8 7 8 8 6 8 Berna 33 2 5 9 12 10 10 6 6 10 9 7 11 Burnan 30 2 5 9 17 10 6 6 10 9 7 11 Burnan 20 6 14 15 10 8 6 8 7 9 9 7 9 9 7	Country	2020	2020	2020	2020	2020	2020	2020	2020	2020	2020
Anggia1944181588887888863Borkma3322559712210521216863Borkma332251971101506588638Borkma13015021100866487777878Cabe Verde3332311111066611088809778Cancroan2064161209088509850985098509850985098509850707076		7	8	9	10	11	12	13	14	15	16
Bern 17 5 19 17 10 10 5 8 6 3 Bortsware 33 2 5 9 12 10 2 12 6 8 Burktra Faso 16 5 21 20 9 8 4 8 7 11 Borndi 22 3 17 11 10 6 6 10 9 7 11 Borndi 15 5 18 31 11 10 8 6 8 9 8 Control 15 5 18 31 11 9 8 5 7 9 9 8 5 Control 21 5 11 6 11 9 8 10 8 9 10 8 9 10 8 9 10 8 10 10 10 10 10 10 <th< td=""><td>SUB-SAHARAN AFRICA (median)</td><td>18</td><td>4</td><td>16</td><td>13</td><td>10</td><td>9</td><td>6</td><td>8</td><td>8</td><td>6</td></th<>	SUB-SAHARAN AFRICA (median)	18	4	16	13	10	9	6	8	8	6
Botswana 33 2 5 9 12 10 2 12 10 2 12 10 10 21 10 10 21 10 10 8 6 6 10 9 7 Cabo Verde	Angola	19	4	18	15	8	8		8		6
Burkan Burkan Burkan Cameroon1652120984488797Cameroon2061415108661097Cameroon20614151086898Chaf Cameroon15518109857998Chaf Cameroon15513712117109857777Congo(Brazzville)21513772121171098577 <td>Benin</td> <td>17</td> <td>5</td> <td>19</td> <td>17</td> <td>10</td> <td>10</td> <td>5</td> <td>8</td> <td>6</td> <td>3</td>	Benin	17	5	19	17	10	10	5	8	6	3
Burnomi 22 3 17 11 10 6 6 10 9 7 Cable Varide	Botswana										
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Cameron20601415108608895Central African Republic174129985598855Comoros1831810119855988777077777777777770		22	3	17	11	10	6	6	10	9	7
Central African Republic 17 4 16 12 9 9 7 9 9 8 Chad 15 5 18 19 9 8 5 9 8 5 Comports 118 3 18 15 11 9 5 7 7 7 Congo (Brazzwille) 21 5 21 70 12 11 7 10 9 6 Cothe divoire 15 5 21 20 10 9 7 7 7 2 Equatorial Guinea											
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Congo (Brazaville) 21 5 13 7 12 11 7 10 9 6 Cóte d'lotrie 15 5 21 20 10 9 5 7 56 2 Dijbotti											
Côte divoire 15 5 21 20 10 9 5 7 5 2 Democratic Republic of Congo 21 4 8 13 10 10 8 9 10 8 Equatiola Guinea											
Democratic Republic of Congo 21 4 8 13 10 10 8 9 10 8 Djhouti	e ()			-							
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Equatorial Guinea <th< td=""><td>1 0</td><td></td><td></td><td></td><td></td><td>-</td><td></td><td></td><td></td><td></td><td></td></th<>	1 0					-					
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Source: Alkire et al. 2022.

Country	Proportion of children in severe multidimensional poverty (as % of the child population)	Number of children in severe multidimensional poverty (millions)	Proportion of children vulnerable to multidimensional poverty (as % of the child population)	Number of childrer vulnerable to multidimensional poverty (millions)
	2020	2020	2020	2020
	17	18	19	20
SUB-SAHARAN AFRICA		-		
Angola	36	7	16	3
Benin	46	3	14	1
Botswana	5	0.05	23	0.2
Burkina Faso	72	8	6	1
Burundi	51	3	14	1
Cabo Verde		0		-
Cameroon	29	4	18	2
Central African Republic	60	2	12	0.3
Chad	69	7	9	1
Comoros	21	0.1	22	0.1
Congo (Brazzaville)	11	0.3	23	1
Côte d'Ivoire	30	4	17	2
DRC				2 8
Dibouti	42	21	16	
Equatorial Guinea				
Eritrea				
eSwatini	6	0.03	23	0.1
Ethiopia	49	29	16	9
Gabon	6	0.1	19	0.2
Gambia	20	0.3	27	0.4
Ghana	10	2	21	3
Guinea	47	3	16	1
Guinea-Bissau	41	0.4	18	0.2
Kenya	16	4	36	9
Lesotho	7	0.1	31	0.3
Liberia	28	1	22	0.6
Madagascar	52	7	13	2
Malawi	20	2	27	3
Mali	49	6	14	2
Mauritania	45	1	11	0.3
Mauritius				
Mozambique	54	9	12	2
Namibia	16	0.2	19	0.2
Niger	80	12	4	1
Nigeria	31	35	19	21
Rwanda	23	1	21	1
São Tomé and Principe	3	0.003	18	0.02
Senegal	32	3	17	1
Seychelles	0	0	1	0.0002
Sierra Leone	31	1	20	1
Somalia		- 		
South Africa	1	0.3		 3
South Sudan	78	5	5	0.3
Sudan	37	8	17	4
Togo	19	8	24	1
Uganda	29	7	22	5
Tanzania	32	10	22	5
	25	2	22	2
Zambia				
Zimbabwe	8	1	28	2
NORTH AFRICA		0.4		
Algeria	0.4	0.1	4	1
Egypt	1	0.4	7	3
Libya	0.2	0.004	16	0.4
Morocco	2	0.3	12	1
Tunisia	0.1	0.004 213	2 17	0.1

Source: Based on Alkire et al. 2022.

Country	Children in monetary poverty at the USD 1.90 line in 2011 PPP (%)	Headcount ratio: % of children in multidimensional poverty	Difference (in %)	
	A	В		
	21	22	23	
SUB-SAHARAN AFRICA (median)	43	55	12	
Angola	50	55	5	
Benin	52	70	18	
Botswana	20	22	2	
Burkina Faso	42	88	46	
Burundi	81	79	-2	
Cabo Verde	4		-	
Cameroon	27	50	22	
Central African Republic	77	83	6	
Chad	43	87	43	
Comoros	22	44	22	
Congo (Brazzaville)	46	27	-18	
Côte d'Ivoire	30	52	22	
Democratic Republic of Congo	77	69	-7	
Djibouti	22			
Equatorial Guinea				
Eritrea				
eSwatini	35	23	-11	
Ethiopia	26	75	49	
Gabon	5	18	13	
Gambia	12	47	35	
Ghana	12	29	13	
Guinea	27	69	43	
Guinea-Bissau	65	69	43	
Kenya	42	44	2	
Lesotho	32	23	-8	
Liberia	46	55	10	
Madagascar	83	75	-8	
Malawi	75	53	-22	
Mali	45	72	-22	
Mauritania	8	65	58	
Mauritius	1		50	
Mozambique	66	 76	10	
Namibia	19	48	29	
Niger	48	93	45	
Nigeria	48	51	45 5	
Rwanda	60	53	-7	
São Tomé and Principe	38	13	-25	
Sao forme and Frincipe Senegal	34	57	23	
Seychelles		1	23	
Sierra Leone	46	62	16	
Somalia			10	
South Africa	 26		-18	
South Sudan	86	94	-18	
Sudan	10	60	50	
Togo	52	42	-10	
Uganda	48	62	-10	
United Republic of Tanzania			5	
	58 62	63 53	-9	
Zambia Zimbabwe		30	-9	
		30	2	
NORTH AFRICA (median)	9	2	-7	
Algeria		7		
Egypt	6		1	
Libya		3	0	
Morocco	1	9	8	
Tunisia ALL AFRICA (median)	1 42	53	1	

Source: Monetary child poverty is from Silwal et al. 2020; Multidimensional child poverty is from Alkire et al. 2022.

	Multidimensional poverty in fragile and conflict-affected African countries							
Country		Children in multi- dimensional poverty	Vulnerable to poverty	In severe poverty	Child population size in 2020	Number of multi- dimensionally poor children		
	Fragile/conflict- affected	% population	% population	% population	millions	millions		
	24	25	26	27	28	29		
Burkina Faso	Conflict-affected	88	6	72	12	10		
Burundi	Fragile	79	14	51	7	5		
Cameroon	Conflict-affected	50	18	29	14	7		
Central African Republic	Conflict-affected	83	12	60	3	2		
Chad	Fragile	87	9	69	10	9		
Comoros	Fragile	44	22	21	0	0		
Congo	Fragile	27	23	11	3	1		
Congo, Democratic Republic	Conflict-affected	69	16	42	51	35		
Ethiopia	Conflict-affected	75	16	49	59	44		
Guinea-Bissau	Fragile	69	18	41	1	1		
Libya	Fragile	3	16	0	2	0		
Mali	Conflict-affected	72	14	49	12	9		
Mozambique	Conflict-affected	76	12	54	17	13		
Niger	Conflict-affected	93	4	80	15	14		
Nigeria	Conflict-affected	51	19	31	112	57		
South Sudan	Conflict-affected	94	5	78	6	6		
Sudan	Fragile	60	17	37	22	13		
Zimbabwe	Fragile	30	28	8	8	2		
Total number of children in multic	limensional poverty: Fra	gile and conflict-af	fected countries		354	228		
Total number of children in multidimensional poverty: Others*					308	123		
Total number of children in multic	limensional poverty: Ov	erall Africa			662	352		
Share of poor children in FCA in t	he overall multidimensi	onally poor childrei	n in Africa		65			
Share of Others in the overall mu	Itidimensionally poor ch	ildren in Africa			35			

nd conflict-affected Afri

Note: * Others indicate other African countries not classified as fragile or conflict-affected. Source: Based on Alkire et al. 2022.

Country	MPI of the country Range 0 to 1		Percentage of children					
		MPI of the age	He	alth	Education			
		group (0–17 years)	Nutrition	Child mortality	Years of schooling	School attendance		
		Range 0 to 1	% population	% population	% population	% population		
	30	31	32	33	34	35		
SUB-SAHARAN AFRICA (median)	0.259	0.285	33.04	5.94	27.19	27.46		
Angola	0.282	0.310	34.42	7.38	32.74	27.36		
Benin	0.368	0.396	39.96	11.03	46.16	40.96		
Botswana	0.073	0.093	18.37	1.21	2.79	4.86		
Burkina Faso	0.523	0.562	53.04	18.48	70.70	66.49		
Burundi	0.409	0.438	56.70	8.33	44.44	28.29		
Cabo Verde Cameroon	0.232	0.270	 31.94	9.67	 21.89	 24.39		
Central African Republic	0.232	0.486	48.36	12.19	48.08	34.78		
Chad	0.517	0.543	48.87	15.17	59.75	60.88		
Comoros	0.181	0.220	23.82	4.35	23.23	19.63		
Congo	0.112	0.128	16.11	3.72	9.72	5.05		
Côte d'Ivoire	0.236	0.274	25.27	8.10	35.01	32.30		
DRC	0.331	0.365	45.21	7.72	17.70	27.55		
Djibouti								
Equatorial Guinea								
Eritrea								
eSwatini	0.081	0.100	15.10	3.25	6.69	3.53		
Ethiopia	0.367	0.413	32.86	4.40	41.61	38.01		
Gabon	0.070	0.081	13.01	4.57	5.50	4.33		
Gambia	0.198	0.224	33.04	10.36	14.16	30.93		
Ghana	0.111	0.131	15.17	3.77	14.24	9.75		
Guinea	0.373	0.398	39.15	12.88	48.08	44.88		
Guinea-Bissau Kanya	0.341	0.372	36.57 26.12	7.15	44.44 10.85	34.57 7.34		
Kenya Lesotho	0.084	0.103	13.23	1.71	5.06	5.22		
Liberia	0.259	0.279	27.47	5.86	27.19	22.08		
Madagascar	0.384	0.430	36.07	5.89	53.80	33.01		
Malawi	0.231	0.251	25.46	3.80	29.24	9.45		
Mali	0.376	0.404	35.94	12.80	48.05	52.33		
Mauritania	0.327	0.375	34.18	5.94	45.75	50.34		
Mauritius								
Mozambique	0.417	0.445	42.61	7.96	51.81	35.37		
Namibia	0.185	0.220	37.72	4.33	7.70	10.88		
Niger	0.601	0.625	62.42	19.88	75.76	63.08		
Nigeria	0.254	0.285	39.27	14.96	20.45	28.18		
Rwanda	0.231	0.258	27.54	3.76	31.04	10.09		
Sao Tome and Principe	0.048	0.053	5.64	0.90	7.02	4.35		
Senegal	0.263	0.299	30.56	6.40	36.71	50.35		
Seychelles Sierra Leone	0.003	0.002	0.62	0.62	0.00 28.19	17.88		
Somalia	0.293			9.99				
South Africa	0.025	0.033	6.43	1.67	 1.64	0.48		
South Sudan	0.580	0.607	39.82	12.73	68.76	77.50		
Sudan	0.279	0.328	37.63	6.62	30.24	27.64		
Тодо	0.180	0.206	21.84	5.55	20.30	14.42		
Uganda	0.281	0.309	39.38	5.53	24.58	16.64		
Tanzania	0.284	0.319	37.63	6.31	12.69	31.28		
Zambia	0.232	0.262	29.75	4.32	13.22	27.35		
Zimbabwe	0.110	0.131	15.27	3.73	3.52	10.22		
NORTH AFRICA (Median)	0.007	0.012	2.54	0.34	1.95	1.39		
Algeria	0.005	0.009	1.36	0.31	1.55	1.09		
Egypt	0.020	0.027	5.46	0.97	3.95	4.88		
Libya	0.007	0.012	2.54	0.34	1.95	1.39		
	0.027	0.039	5.32	0.78	6.85	4.16		
Tunisia	0.003	0.272	0.69 31.25	0.09 5.71	1.04 22.56	24.39		

Source: Alkire et al. 2022.

		Living st	andards			MPI da	ta source
Cooking fuel	Sanitation	Sanitation Drinking water		Electricity Housing		WIFT UALA SOUTCE	
% population	% population	% population	% population	% population	% population	Survey	Year
36	37	38	39	40	41	ourrey	
53.15	45.34	31.86	45.79	43.76	23.07		
41.93	47.30	39.35	45.79	46.91	30.68	DHS	2015-20
69.89	67.87	39.16	57.86	45.16	18.23	DHS	2017-20
20.80	17.43	3.98	19.70	10.85	13.81	BMTHS	2015-20
87.44	79.87	43.41	85.43	75.05	13.43	DHS	2010
78.58	46.93	44.46	77.14	73.90	54.97	DHS	2016-20
49.00	38.00	30.06	39.41	42.04	24.12	DHS	2018
82.54	77.60	62.97	77.52 83.10	77.68 82.72	66.51	MICS	2018-20
84.58 42.37	79.64 36.43	48.01	26.82	28.85	45.18 27.58	DHS	2019
26.59	25.90	16.49	20.82	28.85	13.40	MICS	2012
49.69	45.34	25.91	32.43	26.61	10.53	MICS	2014-20
68.51	63.89	53.84	61.63	63.61	51.83	MICS	2010
					01.00		2011/20
21.79	15.98	15.85	18.76	10.50	10.84	MICS	2014
74.43	70.50	51.31	62.76	73.38	59.84	DHS	2019
10.17	16.72	11.27	7.72	9.99	6.85	DHS	2012
46.62	32.35	11.68	29.94	13.66	3.62	DHS	2019-20
28.55	26.42	14.25	12.61	15.83	9.08	MICS	2017-20
68.93	57.65	38.64	50.83	40.61	25.24	DHS	2018
68.92	65.80	36.15	48.43	68.06	13.21	MICS	2018-20
43.29	38.47 17.63	31.86 14.10	41.19 22.05	43.76 18.97	23.07 18.14	DHS MICS	2014
54.74	49.40	23.67	50.16	38.42	37.45	DHS	2018
74.61	73.86	57.85	60.35	67.01	53.71	MICS	2019-20
53.06	34.31	23.68	49.83	47.90	39.12	MICS	2019-20
71.55	54.68	35.65	45.52	63.56	8.62	DHS	2018
54.46	47.96	34.59	53.60	52.82	22.92	DHS	2019-20
75.67	67.09	58.01	70.43	72.06	44.25	DHS	2011
45.84	43.78	25.73	43.00	37.94	18.29	DHS	2013
92.46	86.15	61.70	84.29	90.63	46.33	DHS	2012
50.14	39.27	27.65	34.73	35.76	16.32	DHS	2018
53.22	26.87	38.05	39.52	48.36	40.20	DHS	2019-20
9.96	11.86	3.81	7.28	0.40	7.66	MICS	2019
53.15	32.92	17.90	29.19	25.57	7.01	DHS	2019
62.42	0.00	0.00	0.00	0.00	0.00	QLFS	2019
62.42	56.94	37.44	58.03	42.14	37.23	DHS	2019
 6.17	2.30	 5.29	4.81	 5.90	4.27	DHS	2016
93.33	88.34	59.62	91.59	92.68	70.11	MICS	2010
49.79	52.23	40.66	48.48	59.08	33.53	MICS	2014
41.96	40.13	25.41	33.15	27.80	15.10	MICS	2017
61.72	54.42	45.11	54.28	53.74	28.13	DHS	2016
62.59	58.99	47.75	60.72	52.09	27.84	DHS	2015-20
53.00	41.73	31.85	49.69	44.97	26.57	DHS	2018
29.56	25.23	23.25	22.52	18.91	17.39	MICS	2019
0.10	0.94	0.63	0.07	0.68	0.22		
0.17	0.96	0.63	0.24	0.68	0.22	MICS	2018-20
	0.94	0.39	0.07	1.00	0.26	DHS	2014
0.03	0.49	1.34	0.06	0.54	0.01	PAPFAM	2014
2.67	3.33	4.79	1.41	5.23	1.64	PAPFAM	2017-20
0.00 53	0.28 40.93	0.24 28.86	0.03 42.10	0.04 41.33	0.13 18.26	MICS	2018

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P.O. Box 1179, Addis Ababa, Ethiopia Telephone: + 251 116 62 81 92/96/97/99 Fax: +251 116 62 82 00 E-mail: <u>info@africanchildforum.org</u> Website: <u>www.africanchildforum.org</u> <u>www.africanchild.info</u>

