The Millennium Development Goals: A New EU-Africa Strategic Partnership?

Olufemi Babarinde (Thunderbird School of Global Management)

Stephen Wright (Northern Arizona University)

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Introduction

After some fifty years of independence, the countries of Sub-Saharan Africa continue to lag in many aspects of development, despite the attentions and efforts of many of the world's largest organizations, including the European Union (EU). At the turn of the new millennium, the United Nations (UN) was spurred to provide focused and energetic attention to the plight of the developing world, particularly in the African continent, and the Millennium Development Goals (MDGs) were formulated in September 2000 with a target for achievement by 2015. United Nations (2010), European Commission (2009), and World Bank (2008) mid-term reviews offered a rather sombre appraisal, judging that most of the Goals would not be fully met. The global economic recession over the past two years, along with the failure to raise Official Development Assistance (ODA) aid levels, have accentuated the likelihood that MDG targets will not be met.

In response to the sense that another opportunity was slipping away, the EU established its own Action Plan (2008-2010) for the Implementation of the Africa-EU Strategic Partnership at the Lisbon Summit in December 2007. This Action Plan (European Union, 2007) addresses a range of issues in the EU-Africa partnership, and establishes a clear framework for EU action in assisting African countries to develop. The Plan includes a variety of efforts being made to promote the success of the MDGs, in particular the critical areas of food security, health, and education. It is on this changing context of EU-Africa relations and the implementation of the MDGs that this chapter focuses.

In order to provide a fuller examination of these Action Plan MDG efforts, we first briefly introduce the Millennium Development Goals themselves. Next, we set those Goals within the context of the changing character of EU-Africa relations since 2000. The most significant change has been the negotiation of economic partnership agreements (EPAs) brought about by the demise of the Lomé Convention in 2000, but other shifts in policy and strategy need to be addressed. Following that, we provide a detailed examination of the Action Plan and its impact on the three targeted MDGs. The final section of the chapter considers the developing nature of EU-Africa relations and the Millennium Development Goals going forward, and looks at some interesting issues that could shape those relations in the coming years.

I. The Millennium Development Goals

The MDGs are an attempt by the richer countries of the world to help promote core development goals and targets in the poorer states. They are borne out of recognition that the official aid (ODA) programmes of the previous several decades have still left hundreds of millions of people struggling to survive below acceptable living standards, but that, nevertheless, there is still a role to be played by official aid. Unlike most previous programmes, the MDGs have concrete criteria and goals by which to measure success or failure. Although such targets were set as a way to focus international and domestic efforts, they also make it easier to judge the rate of performance (although accurate data are often missing). It is against these benchmarks for success that we can currently see the MDGs coming up short.

There are eight specific goals in total, with eighteen listed targets within them. The eight goals set out to improve development in the following areas: (1) End Poverty and Hunger (2) Universal Education (3) Gender Equality (4) Child Health (5) Maternal Health (6) Combat HIV/AIDS (7) Environmental Sustainability (8) Global Partnerships. The Action Plan focuses on the core objectives of improving food security, health, and education, and these areas span several MDGs. Food falls under Goal 1, Target 1C to “halve, between 1990 and 2015, the proportion of people who suffer from hunger.” Of course, this overlaps into other targets within MDG 1, such as to improve incomes and provide greater employment prospects, but here we will keep the focus relatively tight.

Health covers three MDGs, namely Goals 4, 5, and 6. Goal 4 includes a target to reduce by two-thirds the under-five mortality rate; Goal 5 aims to reduce maternal mortality by three-quarters by 2015, and to provide universal access to reproductive health by then; and Goal 6 includes three targets to reduce AIDS/HIV incidence rates, and to improve treatment programmes for AIDS, malaria, and other major diseases. The main objective in education is covered in Goal 2, with the target to provide universal primary education to all boys and girls by 2015. In addition, Goal 3 calls for the eradication of gender disparities in education at all levels.

A fifteen-year timetable for implementation of the MDGs appeared reasonable in 2000, but with five years to go it seems inevitable that a number of goals will not be met by many African countries. As the European Commission (2009:4) concluded, “Most developing countries are projected not to meet most MDGs and Sub-Saharan Africa lags very much behind.” The UN Secretary-General reported (United Nations, 2010:2) in February 2010 that “the prospect of falling short of achieving the Goals because of a lack of commitment is very real.” Although this chapter focuses upon efforts to bolster the chances of success by 2015, we must also address a more basic question—why are the MDGs not more easily achievable in Africa? Is this because of the nature of aid itself, the attitude of lenders such as the EU, the unhelpful structure of the global economy, or the parlous state of management in many of the recipient countries—or some combination of all four? The answer perhaps depends upon whom you ask. For our purposes, we need to ask whether this pursuit of the MDGs will change in any meaningful manner the essence and context of the relationship between the EU and Africa. At first glance, this appears unlikely.

One early attempt at reviewing progress on the MDGs came from the Commission for Africa (2005), a panel of notables brought together under the leadership of former British premier, Tony Blair (which morphed in 2007 into the Africa Progress Panel, under the leadership of Kofi Annan). Although this lengthy diplomatic report called for changes at all levels, it concluded (Commission for Africa, 2005: 1) that "what is clear is that if Africa does not create the right conditions for development, then any amount of outside support will fail." The "right conditions" included such things as good governance, peace and security, improvements in health, poverty reduction and investment, and trade. There is nothing startling in this assessment, as it is shared by most western agencies, forms the basis of EU policies, and lies at the heart of the neo-liberal challenge to the African continent. The debate within much of the continent, however, is whether aid itself is to blame, along with the donors, and whether greater reliance upon investment and trade could bring better results. We will return to this issue later in the chapter.

II. The MDGs within the Changing Context of EU-Africa Relations in the 2000s

For three decades, the Lomé conventions, along with their predecessor Yaoundé convention, provided a degree of stability and structure within a favoured relationship between the EU member states and the 79 countries of the African, Caribbean and Pacific (ACP) group of states, of which Sub-Saharan Africa (SSA) forms the majority (roughly 60%) of members. The EU maintained relationships with former colonies and their export products, and kept most ACP states from straying too much from the western camp in the Cold War. For African states, the agreements provided non-reciprocal preferential access to European markets, and various other favourable inducements. In the 1990s, several factors led to changes in this relationship, mostly pushed by the EU. The end of the Cold War lessened the need to maintain allies in a bi-polar world, even though African states were little more than token allies. As Cosgrove-Sacks (2001:274) highlights, “Since the end of the Cold War, many political and ideological motivations for cooperation between Europe and Africa have evaporated.”

For the EU, the political and financial challenge of integrating the countries of Central and Eastern Europe caused the ACP to be slipped to a lower level of importance, with policy towards them somewhat hardening. Political conditionalities in relations became more important than before, when previously the vagaries of African leaders were politely overlooked. The new context of EU-Africa relations was couched in terms of partnerships and respect, but the reality stayed much the same—African states were in an inferior position, and often ended up taking what they were offered by the EU. Despite this undercurrent, the relationship between the EU and Africa over this past decade has gone through several changes, and these in turn have influenced the work carried out on the MDGs. These are broad categories of relations, and they are not meant to hide the obvious fact that the EU27 is not a cohesive unit in its foreign economic policy, especially as the newer members have no historical relationship with Africa, and have huge economic and social challenges of their own. Likewise, the 48 ACP states of Sub-Saharan Africa are very different in their political economies, which influence their relations and their ability to process MDG aid.

Lomé gave way in June 2000 to the Economic Partnership Agreements (EPAs) signed in Cotonou, Benin, and discussed in depth elsewhere in this volume. The EU’s continuing support for the ACP’s economic plight was reconfirmed in the Everything But Arms (EBA) policy in

March 2001, the Monterrey Consensus in March 2002, and implicitly at the G-8 Gleneagles Summit in July 2005. EBA is an initiative of the EU that grants duty-free access to the exports of products of the least-developed countries (LDCs), except arms and ammunitions, without quantitative restrictions, in the hopes of encouraging tangible physical investment in the LDCs, many of which are located in SSA. Monterrey was essentially a bargain that the developed world would increase the volume and quality of aid, and in return the developing world would improve governance and its management of aid. The Gleneagles summit pledged to write off outstanding debts of the poorest countries in the world—many of them were SSA countries—and to double aid to Africa to at least $25 billion annually by 2010.

The EPAs, however, offer differentiated relationships with the EU, rather than the previous one-size-fits-all Lomé agreements. Differentiation is given a positive spin by allowing the EU to interact with ACP members at levels suiting their own development, but some construe this as more of a divide and rule policy: that is, the EU goal is to try to break up the rather tenuous cohesion of the ACP to deal with countries individually or in regional blocks (Babarinde and Faber, 2009; Greenidge, 1999; Santos, 2001). Indeed, some observers have argued that as conceived, EPAs would weaken regional integration efforts particularly among the SSA ACP countries (Stevens, 2006), or even encourage "regional disintegration" by pitting countries against one another within their regional integration agreement frameworks (Beattie and Bounds, 2007).

Negotiations surrounding the African development agenda and the Millennium Development Goals were given their own framework outside of the EPA framework. These discussions started in Cairo in March 2000 with the Europe-Africa Summit, bringing together all the countries of

Africa with the EU. A core feature of these agreements was the inclusion of political conditionalities into the development agenda, and a Cairo Plan of Action. North Africa, except for its role in the African Union, is usually considered separate to Sub-Saharan Africa, as it is in this chapter. This is for historical and cultural reasons, and because North African states have different development profiles to those of Sub-Saharan Africa. From an EU perspective, they are treated separately also, inside of the Mediterranean agreements.

A fully-fledged EU-Africa Strategy came out of discussions during 2005, and was confirmed by the European Council in December 2005. The emphasis of this new EU-Africa partnership was made clear: “In this EU Strategy for Africa, the principal objective is, therefore, to **promote the achievement of the UN Millennium Development Goals (MDGs) in Africa**.” (European Commission, 2005:3; original text in bold) This set out a common stance on a “strategic partnership” between the two continents (European Commission, 2007). The Lisbon meeting in December 2007 focused upon assessing the success of this partnership and the degree to which the MDGs were being met, and put forward a call for greater urgency in tackling the African continent’s problems (A New Strategic Partnership, 2008). As a result of this meeting, the Action Plan was agreed upon.

In a somewhat parallel action, the EU-Africa Infrastructure Trust Fund (ITF) was launched in October 2007 with the “purpose of promoting and investing in infrastructure in Africa as a means to advance regional cooperation and integration (Infrastructure Trust Fund, 2009). The promotion of infrastructure and regional economic organizations was considered critical to overall economic development and trade, and so complementary to the MDGs initiative. The initial EU funding for the ITF was €5.6 billion for the five-year period 2008-2013.

While lofty in its deliberations and talk of a partnership of equals, the Lisbon Declaration (Council of the European Union, 2007:2) left no doubt that many changes needed to occur in Africa for countries to achieve the MDGs and development goals in general. Such goals included "the establishment of a robust peace and security architecture in Africa; the strengthening of investment, growth and prosperity through regional integration and closer economic ties; the promotion of good governance and human rights; and the creation of opportunities for shaping global governance in an open and multilateral framework."

Although perhaps only a perception, there were many who considered the early 2000s to be a lost period in EU-Africa relations, partly because of various distractions. These included the launch of the euro in 1999-2001, the terrorist events of September 2001 in the US and the subsequent wars in Afghanistan and Iraq, the enlargement of the EU into Central Europe in 2004, and the rise and challenge of China in global commerce—these factors helped to explain the slow progress on implementing the Cotonou Agreement, and the difficulties in tackling the MDGs with full vigour. Such perceived "inaction" along with clear indications that the MDG targets were not being met led to a diplomatic push on the MDG front. This was not just in EU-sponsored activities, but also with the Commission for Africa, mentioned earlier, and various G8 initiatives. The EU's Action Plan was aptly named to denote concern, and to some extent this was genuine. However, the global economic crisis in 2008-2010 has again undermined that sense of urgency about the African continent, as the EU struggles to prop up some of its own economies and deal with a crisis within the euro zone.

International organizations are not immune from the impulse to undertake a makeover in order to reshape perceptions and attitudes. So it was in 2002, when the rather tired and stale Organization of African Unity (OAU) gave way to the reformulated African Union (AU)—though still in its same headquarters and with the same staff. Its new charter, however, opened the possibility of greater ownership over African security issues, with peacekeeping to be led by Africans, and more flexibility on territorial sovereignty. The most visible sign of this new approach—the maturing of the organization—was in the creation of the New Partnership for Africa's Development (NEPAD) in 2002, and its Peer Review Mechanism by which African leaders would monitor the democratic performance, governance, and human rights policies of their colleagues. The word "partnership" was again used to denote the striving for a more equal and open relationship between donor and recipient, between the EU on the one hand, and the AU and NEPAD on the other. To some, NEPAD was considered cosmetic, but this attempt to gain a stronger ownership of the development puzzle, along with the other developments discussed in the 2000s, was important in recalibrating the relationship over the MDGs and the EU-Africa Action Plan.

III. The First Action Plan (2008-2010)

The "First Action Plan (2008-2010) for the Implementation of the Africa-EU Strategic Partnership" (2007:1) focuses on eight selected areas "all of which have a positive impact on the daily lives of the citizens of Africa and Europe." These include such priorities as peace and security, governance, trade, energy, climate change, and science. The focus of this chapter, however, is on Section Four of the Action Plan, namely the Africa-EU Partnership on the Millennium Development Goals. The priority action items include ensuring the finance and policy base for achieving the MDGs in general, and specific priority action on food, health, and education. As mentioned earlier, the Action Plan was deemed necessary in order to speed up and guarantee efforts to promote the core MDGs in Africa. In order to assess the current progress of the Action Plan, we can consider each of the four priority actions in turn.

Priority Action 1: Ensure the Finance and Policy Base for Achieving the MDGs

The fact that the key objective here is “to overcome policy and financing gaps for achieving the MDGs” is indicative of the problem facing implementation—the money promised from the EU and its member states is not forthcoming in adequate amounts, so jeopardizing success across all the MDGs. The EU’s commitment to provide collective overseas development assistance (ODA) at 0.56 percent of gross national income (GNI) has only been met by a handful of countries. As Bourguignon et al. (2008:19) point out, many EU members remain far below this target and would need increases of 179 percent (Italy), and 108 percent (Spain) among many others to reach these targets. For the EU overall, the percentage of ODA to GNI has actually been declining and in 2007 stood at 0.38 percent, compared to 0.41 percent in 2006 (European Commission, 2008) As the recession bites, there is little immediate expectation that the EU by 2015 will meet the United Nations target, set in the 1960s, of 0.7 percent. Nevertheless, the EU’s commitment to Sub-Saharan Africa from the 10th European Development Fund (EDF) is estimated to be between €11 billion and €12 billion over the period 2008-2013 (A New Strategic Partnership, 2008).

If the level of aid has not been increasing to fund the MDGs, then a bigger problem is that actual funds have been released slowly by the EU to African countries. This led the EU in April 2009 to commit to releasing funds as promised, though not with any increase (VOA News, 2009). At this stage, given the economic turmoil across the world, it seems unlikely that any additional funds will be available, and more likely that pressure will increase within Europe to pull EU and national funds away from funding MDGs to Africa. A deeper recession will only further restrict funds to the MDGs.

One other core finding of current assessments of the MDGs is that many countries in Sub-Saharan Africa are considered "fragile" in terms of their institutional robustness and stability in conflict or post-conflict status (fragility is often assessed using the World Bank's Country Policy and Institutional Assessment ratings). This clearly inhibits their ability to properly absorb MDG funding, and jeopardizes the longer-term effectiveness of this aid. It is no wonder, therefore, that a recent World Bank (WB)-International Monetary Fund (IMF) report (Global Monitoring Report, 2007) noted that fragile states exhibited twice the poverty level of non-fragile countries, and were way off track with regard to meeting the 2015 poverty goal. Specifically, the report noted that SSA was home to roughly 30 percent of the world's acutely poor (compared to an estimated 19 percent in 1990), that is, the situation worsened. Indeed, and as reflected in Table 1, only South Asia joins SSA in exhibiting "very high" poverty level in the 2009 annual United Nations progress report on the MDGs. As the European Commission (2009:28) summed up, these countries "still need to meet the very basic conditions of stability and establish a minimum institutional framework to begin reducing poverty and make headway on the MDGs." As part of this equation, the Action Plan called for "enhanced networking among African and European civil society organizations and other non-state actors," something slowly taking shape.

Priority Action 2: Accelerate the Achievement of the Food Security Targets of the MDGs

Chronic hunger and associated diseases continue to plague the continent, and so form a core element of the MDGs. Under this priority, the objective is to make "substantial progress" in the goal "of halving the proportion of people who suffer from hunger and malnutrition by the year

2015 in all African countries." The current prognosis is not good in this area, particularly as food prices have increased dramatically across the world. To date, only eight countries have reached the Maputo Target of spending 10 percent of their public expenditure on agriculture and rural areas (Africa Progress Panel, 2009:16). It is, therefore, not surprising, per Table 1, that it was only in SSA that the United Nations reported "very high" hunger level in 2009. Continuing insecurity and civil wars in some countries also undermine agricultural production. According to a 2009 communiqué by the G8 ministers of agriculture at a meeting in northern Italy, the world was "very far" from the MDG of halving the number of malnourished people around the world, currently at over one billion, by 2015 after the UN's Food and Administration Organization (FAO) told the ministers that the number of chronically hungry people would rise by up to 100 million in 2009. It is expected that African countries will be among the most affected due to perennially low food production per capita.

In response, the African Development Bank established in July 2008 the African Food Crisis Response, adding $1 billion to its food portfolio. The end of preferential entry to European markets under Lomé is a problem, but more significant perhaps is the inability of the EU to limit subsidies paid to European farmers under the Common Agricultural Policy (CAP). The US government's continuing subsidization of American farmers, along with subsidies paid for bio-fuel expansion, also contribute to a negative environment for African agriculture, both in terms of domestic subsistence farming as well as commodity exports. The US's African Growth and Opportunity Act (AGOA) does very little to help African agriculture, as most trade in this scheme takes place in the energy sector. The EU's general opposition to genetically modified organism (GMO) food also stunts most of Africa's desire (excluding South Africa) to experiment in these areas (Collier, 2008).

Priority Action 3: Accelerate the Achievement of the Health Targets of the MDGs

The incidence of HIV/AIDS, malaria, tuberculosis, and other chronic diseases in the continent cry out for greater attention, but in many countries barely attract improvement. Per Table 1, when compared to other regions of the world, the incidences of child mortality (under five years old), maternal mortality, HIV/AIDS, and mortality from Tuberculosis range from “high” to “very high.” These portend that access to health care is still suspect or “low” in SSA. Hence, there is a desire to focus upon this aspect of the MDGs. The major objective is to build upon the framework laid down in the Maputo Action Plan on Sexual and Reproductive Health and Rights, and the more general Abuja commitments, requiring all African states to allocate 15 percent of their budgets to health. Unfortunately, budget constraints are limiting the implementation of these policies, as only a handful of countries have reached the target, and more than half of the continent’s countries still allocate less than 10 percent (Africa Progress Panel, 2009:16). In addition, the continuing brain drain of medical specialists and nurses to destinations outside of Africa makes these goals difficult to achieve, even if significant funding were available. Part of the Action Plan is designed to provide EU assistance to tackle the shortage of health workers in many African states, along with the improvement of preventive health care systems.

There is, however, a glimmer of hope in this sector, even though the MDG may not be achieved by 2015 across Africa. According to Table 2a, of the 29 low income countries for which World Bank data were available, the mortality rate for the age group of under five years fell in 21 countries (even though it remains unacceptably “very high” by global standard, per Table 1), while it increased in five of the countries, and remained unchanged for three countries between 1990 and 2006. Among the lower middle income African countries for the same age group and the same period, the mortality rate declined in five countries, while it increased in four countries. For the four upper middle income African countries in the table, the mortality rate rose for half of them while it fell for the other half. The World Bank reported in 2008 that child mortality per 1,000 in SSA, on average, fell from 184 to 157 between 1990 and 2006.

In a similar vein, according to Table 2b, the percentage of births attended by skilled medical personnel increased for nine of the 14 low income African countries (although it declined for five of the countries), and for all six and both of the lower middle income and upper middle income African countries, respectively, between 1990 and over the 2000-2006 period. If we consider only the 2000-2006 data, it is encouraging to note that even among the low income countries, at least 50 percent of births were attended by trained medical personnel in seven of them, while the share of births attended by trained medical staff in the African lower middle income and upper middle income countries ranged from 63 percent in Cameroon and Morocco to 99 percent in Mauritius. Unfortunately, access to health care remains comparatively "low" in SSA (Table 1), and according to the Africa Progress Panel (2009:14), at the current rate of progress, child mortality goals within the MDGs will not be reached for the continent until 2045, and maternal mortality goals may never be achieved.

Priority Action 4: Accelerate the Achievement of the Education Targets of the MDGs

This item is central in the eyes of many because without education the challenges for the future will be immense. While the other seven MDGs are critical to development, the MDG on education is arguably the most critical, because it is fundamental to effectively tackling the other goals. As Sperling and Balu (2005) aptly put it, for instance, "While CNN cameras will never capture a child dying from lack of education, every day children die from AIDS, malnutrition, and other conditions that might have been prevented had their mothers had a chance to complete quality basic education." Furthermore, empirical studies have demonstrated, inter-alia, that education contributes to economic development in underdeveloped societies due to efficient allocation of scarce resources, capacity building, improved productivity of labor, that the return on investment (ROI) on education in underdeveloped societies is comparable, if not higher, than for conventional investment, and that the ROI for female students is higher than for male students in underdeveloped countries (Meier and Rauch, 2000). By 2008, only fifteen countries had reached gender equality in primary education (Africa Progress Panel, 2009:14), which was consistent with the 2009 United Nations MDG Report that SSA was "close" to achieving equal girls' enrolment in primary school (Table 1).

The targets here include universal primary education, greater access to free education, the targeting of orphans and vulnerable children (OVCs) for assistance, and greater progress for girls in attending schools. Results, unfortunately, have not been particularly positive, as the United Nations, for example, reported that enrolment level in primary education in SSA was still "low" in 2009 (Table 1). According to recent World Bank data, whereas SSA has made some progress toward the MDG on education, the pace for the region as a whole has been somewhat sluggish. Although the proportion of students who completed primary school education in SSA improved impressively from 51 percent in 1991 to 60 percent in 2006, the completion rate barely moved from 59 percent in 2004, a far cry from the 100 percent target that is expected by 2015. According to Table 3, although 18 of the 24 low income African countries improved their completion rate between 1991 and over the 2000-2006 period, four of them experienced declines, while the situation remained unchanged for two of them. Conversely, seven of the eight lower middle income African countries and three of the four upper middle income countries reported improved primary school completion rates. However, for the 2000-2006 period, it is troubling that only the Republic of South Africa (RSA) and Tunisia had virtually met the MDG target on education in 2006, and Mauritius was not too far off. It is therefore not surprising that an International Monetary Fund-World Bank study recently concluded that at current trends, SSA will not achieve the MDG of universal primary education (UPE) until at least 2061 (IMF-World Bank Global Monitoring Report, 2005).

IV. Troubled Waters? The Broader Context of the MDGs and EU-Africa Relations

Achieving the MDGs is a difficult enough task in a perfect environment, but many factors are complicating the task. The most obvious one is the global economic recession, already discussed, which has pressured budgets and presented other major competitors for funding besides the MDGs. Even in a positive scenario, it could take at least two to three years for the global and EU economies to get back on track, by which time it would appear impossible to finance and reach the MDGs by the deadline of 2015. An ongoing economic crisis would obviously greatly jeopardize many trade and development projects within Africa, and put the MDGs way out of reach.

But even in an ideal economic environment, there are several other EU-SSA factors which hinder more complete progress in attaining the MDGs. We will touch on these briefly here.

Development and Democracy

Although it remains disputed, there is considerable evidence that good governance and transparency provide a more facilitative structure for aid and investment—and therefore improved economic performance—than non-democratic and corrupt governments. In a continent so large and diverse as Africa's, one must be careful not to generalize, but while some countries are moving more positively into democratic forms of government, such as Benin, Ghana and Rwanda, others appear to be drifting in the opposite direction, such as Guinea, Kenya Madagascar, and Niger. And there are still the obvious dark spots in terms of governance, such as Somalia, Sudan, and Zimbabwe.

The ability to transform the economies of these African ACP states and truly tackle poverty reduction and other socio-economic challenges through the MDGs require continuing good governance, transparency and stability across the continent. While we all hope that this is to be the case, it may well be that countries could succumb to all sorts of pressures prior to the full impact of the MDGs being felt. The EU continues to pursue policies to promote better governance and, therefore, a more open context for EU-Africa relations, but there are limits to what can be done, as the continuing malaise in Zimbabwe, for example, highlights. Poor government performance makes the achievement of the MDGs far less likely, irrespective of any EU actions.

Europe, China and Africa

Much has been written about China's burgeoning relationship with many African states, including in other chapters of this volume, and we do not have space to take on that issue here. But China's influence in Africa has grown remarkably quickly to challenge that of the EU in the continent, even though the EU continues to provide about 60 percent of total ODA to Africa. Indeed, one of the reasons why the EU wanted the Lisbon Summit to take place in 2007, notwithstanding disagreements with African governments over the participation of Zimbabwe's President Mugabe, was the recent Sino-Africa summit in China ("A Watershed in Relations between Two Continents," 2007), coupled with Chinese leaders' frequent visits to Africa. Beijing is not only interested in African resources, as many observers are quick to point out, but the country is providing much needed infrastructural spending across many parts of Sub-Saharan Africa (Wang and Bio-Tchane, 2008).

The interesting question going forward is who will increasingly have the ear of African governments, and whether the EU and China can find a way to cooperate more fully within Africa ("Sowing Seeds for Africa," 2008)? If China continues to edge out European countries, then there will be less pressure to promote governance (Taylor, 2006: 939) as mentioned in the previous section, and perhaps less need by African leaders to look to Brussels for assistance. Although the Millennium Development Goal aspirations may proceed even after 2015, the relationship between the EU and African states may continue to loosen, so changing the dynamics of EU aid programmes to the continent, as well as the overall EU-Africa relationship. While it seems obvious that China has an Africa strategy (Taylor, 2006), one wonders if Africa has a China strategy that could, inter-alia, facilitate its achievement of the MDGs by 2015 or beyond.

The WTO and Doha

The Cotonou Agreement, the MDGs, and various other free trade arrangements all take place within the broader context of the World Trade Organization and its Doha Development Round. That Doha is stalled is beyond debate, but whether this is fatal is unknown. The current economic crisis has frayed nerves and opened an avenue for trade protectionism, despite pleas and financial gestures from the G20. If the wheels do eventually come off the world trade bandwagon, and protectionism resurfaces—especially in agriculture—then the consequences for Sub-Saharan Africa would be serious. The broad EU-SSA relationship could be jeopardized, or the semblance of cooperation replaced by a toughening stance by the EU.

EU Looking East, not South

The East has captured the attention of the EU for the best part of twenty years, and this looks to continue. The absorption of the former communist states of Central and Eastern Europe is incomplete, and the economic problems of many of these states in 2010 have put additional financial strains on the EU. Further east remain challenging strains for EU policy, such as with Ukraine, Georgia, and Russia itself. In another eastern direction is the biggest EU membership challenge in Turkey, with all the additional and attached questions of Middle Eastern policy, Iran, and then the Caspian and its oil reserves. And, of course, going even further east we have all the questions surrounding Europe's relations with China.

In comparison, with perhaps the exception of South Africa, there seems to be little in Sub-Saharan Africa to stick on the EU's radar screen, save Europe's energy needs, which Africa could help meet. Trade is relatively small, and political capital to be gained minimal. One argument may be that Europe continues to try to shape Africa through its soft diplomacy. As Petiteville (2003) argues, "Soft diplomacy may then be defined as a diplomacy resorting to economic, financial, legal and institutional means to export values, norms and rules and achieve long-term cultural influence." Maybe select African states could prove to be strengthening economic partners in the future, but the longer-term future does not carry much significance in a tight economic environment. In this sense, the Millennium Development Goals add strength to the argument that African states are there to be bailed out, rather than to grow the European project in any way. It is perhaps then no surprise that EU-SSA and the MDGs continue to slip down the EU agenda, urgent Action Plans notwithstanding.

Trade not Aid; or Aid with Trade?

Sub-Saharan Africa has received around $1 trillion in ODA over the past fifty years. Many now question the utility of this aid, and whether in fact aid is any solution to Africa's predicament. Critics call for greater foreign investment into the continent as the way to propel its fortunes forward, such as to be found in the US's AGOA programme. The scheme is designed to encourage foreign direct investment in qualified (on the bases of good governance, reforms, etc.) African countries and increase African exports to the US. This is again a bigger debate than we have time for, but several points can be made. First, Sub-Saharan Africa accounts for less than 1 percent of world trade, and about 2 percent of global foreign investment (much of this in mining and oil), so without major increases in such flows, some aid appears to be needed. Second, although there is a fast growing middle class across the continent able to push economic development and growth, there are several hundred million people who live beyond the baseline of poverty earning less than $1 a day. Indeed, the UN Secretary-General reported that "the number of '$1-a-day poor' went up by 92 million in sub-Saharan Africa…during the period 1990 to 2005" (United Nations, 2010:4). For them, aid (such as through the Millennium Development Goals) still appears to be critically important. Third, should it matter where money comes from, whether it is aid or investment, so long as it is used wisely? Fourth, there is a correlation between economic growth and achievement of some MDGs. Many Sub-Saharan African countries are posting growth rates of 3-5 percent even in the current recession, but there is a debate whether the rapid population growth in most countries will undercut any benefits growth in GDP has to offer. Indeed, it is widely assumed that to reach the MDG goal of halving poverty in the continent, annual growth rates need to be closer to 8 percent a year, a target not being met.

This is not a debate to be settled here, but it appears as though there is a case for continuing official aid in programmes such as the MDGs, but that funds need to be used much better than in previous years.

V. Re-considering how EU funds are used for MDGs in SSA

In this section, we would like to briefly explore how the EU might reconsider how its funds are being utilized for the purposes of increasing the chances of achieving at least some of the MDGs.

Target groups in SSA instead of individuals

Western economic and socio-political cultures encourage individual initiatives, which are inherent in the conditionalities that underpin Western/EU, development assistance programmes in places like SSA (e.g., the Washington Consensus). However, given that the main vehicle for social, economic, and political activity and interaction in Africa is the group, instead of the individual, perhaps EU funds should be directed at such socio-economic constellations in SSA. That is, the incentives for taking advantage of EU funds ought to encourage and favor group initiatives. After all, civil society organizations (CSOs), particularly at the grassroots level, have demonstrated the efficacy of targeting groups or group-based infrastructures as vehicles for reaching and helping the poor and other vulnerable segments of the SSA society. Through institutions such as micro-credit lending facilities and cooperatives, CSOs have demonstrated that they could be more effective than state institutions in delivering much needed social services to those on the outskirt of society. Such re-think could advance the achievement of some of the MDGs in SSA.

Align EU funds and Social benefits of economic policies in SSA

With the help of the EU, countries of SSA should be encouraged to place social objectives at the heart of their macroeconomic growth and stability policies, and to utilize EU funds to achieve them. According to one observer (Handoussa, 2007: 215), structural adjustment programmes and economic liberalization in the LDCs, for example, have, in some cases, widened the gap between rich and poor and have resulted in cutbacks by the typical SSA government on spending in the social services on which the poor depend. Such outcomes make the achievement of the MDGs in SSA, where they are being called upon by multilateral financial institutions and Western donors to implement structural adjustment policies (SAP) as a mechanism for correcting their economic imbalances, elusive. In other words, SSA countries ought to be able to direct EU funds toward social objectives such as reducing the level of poverty or containing the spread of HIV/AIDS, in order to mitigate the hardship on the masses of implementing the West's neo-liberal policies, and concomitantly achieve some of the MDGs.

Solicit the input of average Africans about the MDGs

No doubt, as noted above, the conception and the implementation of the MDGs to date have been largely driven by the elite. Perhaps one of the reasons why advancements toward the MDGs have been disappointing is that there is a disconnect between the architects and managers of the MDGs on the one hand, and the intended beneficiaries—the average African—on the other hand. Perhaps the African government and its people are not on the same page. Perhaps the average

African ought to be consulted. Gallup conducted such a poll of randomly selected African adults in 26 SSA countries about the MDGs in 2006. At least 1,000 Africans were surveyed in each of the 26 countries, for a total sample size of 26, 506 people. According to the in-depth survey, Africans ranked reducing poverty, reducing hunger, and reducing the spread of HIV/AIDS as their three most important goals, and providing access to new technology, achieving gender equality, and improving access to sanitation facilities as their three least important MDGs (Table 4). Interestingly enough, according to the survey, African men and African women ranked the MDGs practically alike (Table 5). For example, whereas both African women and African men selected the same top three MDGs, albeit they reversed the order of their top two selections—reducing hunger and reducing poverty—their bottom three MDGs were also the same, except that they reversed the order of the bottom two—access to new technology and achieving gender equality. The import of the survey, according to Gallup, is in informing and enriching public policy debate on the MDGs, by taking into account the voices of the people, which could refocus priorities and communications strategies. It may thus give impetus and renewed vigor to the implementation of the MDGs strategies by "knowing" the goals in which both the EU and SSA governments have buy-in from Africans.

Conclusion

The reality is that through myriad EU aid programmes in SSA through schemes like the EBA, EPAs, Cotonou Agreement (EDF), SSA has had ample opportunities to achieve the MDGs. The extent to which individual SSA countries are able to capitalize on the resources of the EU (and others) is a function of domestic (political stability, political leadership, social infrastructure, etc.) and foreign (prices of commodities, market access for SSA exports, global economy, competition from other emerging/developing economies, etc.) factors/variables. In order words, SSA countries that have done due diligence with regard to their domestic macroeconomic policies, transparency, governance, capacity building, infrastructure, and so on, are more likely to effectively absorb EU (and other) funds for the sole purpose of achieving the MDGs (e.g., Ghana and Rwanda). Similarly, it would behoove the EU (and other Industrialized societies) to meaningfully open up their markets to the mainly agricultural exports of SSA (and other LDCs), lest the EBA would derisively become "everything but agriculture").

Although we remain optimistic that some African countries are making good progress and good use of MDG funds, with a corresponding presence of improved governance, overall it appears unlikely that the broader targets of the MDGs are going to be met by 2015. Blame for this can partly be placed on the EU for only a moderately enthusiastic embrace of the programmes, but also upon many African states for less than perfect utilization of the funds. To some extent, nothing here is new or a surprise. A more aggressive stance by the EU over the MDGs—matching action to rhetoric—may bring greater success, although time is running down quickly to 2015.

What is unfortunate is that the MDGs are playing out in a very unstable global environment on the edge of the most serious recession in a century. As the European Commission concluded in its own report (2009:37), "developing countries are vulnerable to a host of fall-out effects from the past and current crises….The culmination of these negative effects seems to exacerbate inequality and jeopardize progress made on the MDGs, pushing the 2015 goalposts even further.” Even in perfect circumstances, the MDGs were a stretch. Now they appear to be outside of the range of what the EU, or the wider global community, can accomplish. Perhaps the solution to Africa’s predicaments must come and will come from within the continent itself. We hope so.

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Table 1: Millennium Development Goals: 2009 Progress Chart

Goals	Metrics	**SSA**	N. Africa	E. Asia	S.E-Asia	S. Asia	W. Asia	L.A & Caribbean
1: Eradicate extreme poverty & hunger	Poverty level	**very high**	low	high	high	very high	low	moderate
	Hunger level	**very high**	low	moderate	high	high	moderate	moderate
2: Achieve universal primary education	Enrolment level	**low**	high	high	high	moderate	moderate	high
3: Promote gender equality and women empowerment	Equal girls' enrolment in primary school	**close**	close	parity	parity	parity	close	parity
	Women's share in paid employment	**low**	low	high	medium	low	low	high
	Women's share in national parliament	**low**	very low	moderate	low	low	very low	moderate
4: Reduce child mortality	< 5-year olds mortality	**very high**	low	low	low	high	low	low
	Immunization coverage	**moderate**	high	high	moderate	moderate	moderate	high
5: Improve maternal health	Maternal mortality	**very high**	moderate	low	high	high	moderate	moderate
	Access to health care	**low**	moderate	high	moderate	moderate	moderate	high
6: Combat HIV/AIDS malaria, TB, other diseases	HIV/AIDS prevalence	**high**	low	low	low	low	low	moderate
	Mortality from TB	**high**	low	moderate	high	moderate	low	low
7: Ensure environmental sustainability	Forest density	**medium**	low	medium	high	medium	low	high
	Drinking water access	**low**	high	moderate	moderate	moderate	high	high
	Sanitation coverage	**very low**	moderate	low	low	very low	moderate	moderate
	Share of slum-dwellers	**very high**	moderate	high	high	high	moderate	moderate
8: Develop a global partnership for development	Internet usage	**very low**	moderate	high	moderate	low	moderate	high

Source: adapted from the ***UN MDG Report, 2009***

Table 2a: MDG— Health

Low Income States	Under 5 years mortality rate per 1,000	
	1990	**2006**
Benin	185	148
Burkina-Faso	206	204
Burundi	190	181
Central African Republic	173	175
Chad	201	209
Congo, Democratic Rep	205	205
Cote d'Ivoire	153	127
Eritrea	147	74
Ethiopia	204	103
Gambia	153	113
Ghana	120	120
Guinea	235	161
Kenya	97	121
Liberia	235	235
Madagascar	168	115
Malawi	221	120
Mali	250	217
Mauritania	133	125
Mozambique	235	138
Niger	320	253
Nigeria	230	191
Rwanda	176	160
Senegal	149	116
Sierra Leone	290	270
Sudan	120	89
Tanzania	161	118
Togo	149	108
Zambia	180	182
Zimbabwe	76	105

Lower Middle Income States	Under 5 years mortality rate per 1,000	
	1990	**2006**
Algeria	69	38
Cameroon	139	149
Congo Rep	103	126
Egypt	91	35
Lesotho	101	132
Morocco	89	37
Namibia	86	61

Swaziland	110	164
Tunisia	52	23

Upper Middle Income States	Under 5 years mortality rate per 1,000	
	1990	**2006**
Botswana	58	124
Gabon	92	91
Mauritius	23	14
South Africa	60	69

Source: *2008 World Development Indicators*

Table 2b: MDG— Health

Low Income States	Births attended by skilled health staff (%)	
	1990	**2000-06**
Gambia	44	57
Ghana	40	50
Kenya	50	42
Madagascar	57	51
Malawi	55	54
Mauritania	40	57
Niger	15	18
Nigeria	33	36
Rwanda	26	39
Sudan	69	49
Tanzania	53	46
Togo	31	62
Zambia	51	43
Zimbabwe	70	80

Lower Middle Income States	Births attended by skilled health staff (%)	
	1990	**2000-2006**
Algeria	77	95
Cameroon	58	63
Egypt	37	74
Morocco	31	63
Namibia	68	76
Tunisia	69	90

Upper Middle Income States	Births attended by skilled health staff (%)	
	[1990]	[2000-06]
Botswana	77	94
Mauritius	91	99

Source: *2008 World Development Indicators*

Table 3: MDG— Education

Low Income States	Primary School Completion Rate (%)	
	1991	**2000-2006**
Benin	21	65
Burkina-Faso	20	31
Burundi	46	36
Central African Republic	27	24
Chad	18	31
Congo, Democratic Rep	46	38
Cote d'Ivoire	43	43
Eritrea	19	48
Ethiopia	26	49
Gambia	44	63
Ghana	61	71
Guinea	17	64
Madagascar	33	57
Malawi	29	55
Mali	13	49
Mauritania	34	47
Mozambique	26	42
Niger	18	33
Rwanda	35	35
Senegal	39	49
Sudan	42	47
Tanzania	62	85
Togo	35	67
Zimbabwe	97	81

Lower Middle Income States	Primary School Completion Rate (%)	
	1991	**2000-2006**
Algeria	80	85
Cameroon	53	58
Congo Rep	54	73

Lesotho	59	78
Morocco	48	84
Namibia	78	76
Swaziland	60	67
Tunisia	74	99
Upper Middle Income States	Primary School Completion Rate (%)	
	1991	**2000-2006**
Botswana	89	95
Gabon	58	75
Mauritius	107	92
South Africa	76	100

Source: *2008 World Development Indicators*

Table 4: Overall Rankings of MDGs by Sub-Saharan Africans in order of Most Important to Least Important

Rank	MDG	Weighted Average score	N
1	Reducing poverty	2.41	13,200
2	Reducing hunger	2.48	13,153
3	Reducing spread of HIV/AIDS	3.05	13,261
4	Providing more jobs for youth	3.17	13,239
5	Reducing death rate of < 5-yr olds	3.34	13,545
6	Reducing # women dying @ childbirth	3.38	13,160
7	Achieving pry school education for all	3.62	13,052
8	Reducing spread of malaria & TB	3.64	13,346
9	Improving access to safe drinking water	3.75	13,516
10	Improving access to sanitation facilities	4.09	12,901
11	Achieving gender equality/empowerment	4.38	13,261
12	Providing access to new technology	4.65	13,305

Source: adapted from ***Gallup Poll: Sub-Saharan Africans Rank the MDGs, 2009***

Table 5: MDGs Ranking by Gender in Sub-Saharan Africans in order of Most Important to Least Important

Rank	MDGs Ranked by Women	Weighted Average score	Rank	MDGs Ranked by Men	Weighted Average score
1	Reducing hunger	2.44	1	Reducing poverty	2.31
2	Reducing poverty	2.53	2	Reducing hunger	2.57
3	Reducing spread of HIV/AIDS	3.09	3	Reducing spread of HIV/AIDS	2.99
4	Reducing # women dying @ childbirth	3.17	4	Providing more jobs for youth	3.01
5	Providing more jobs for youth	3.29	5	Reducing death rate of < 5-yr olds	3.41
6	Reducing death rate of < 5-yr olds	3.31	6	Reducing # women dying @ childbirth	3.47
7	Reducing spread of malaria & TB	3.66	7	Achieving pry school education for all	3.57
8	Improving access to safe drinking water	3.74	8	Reducing spread of malaria & TB	3.61
9	Achieving pry school education for all	3.96	9	Improving access to safe drinking water	3.77
10	Improving access to sanitation facilities	3.97	10	Improving access to sanitation facilities	4.12
11	Achieving gender equality/empowerment	4.25	11	Providing access to new technology	4.48
12	Providing access to new technology	4.78	12	Achieving gender equality/empowerment	4.57

Source: adapted from ***Gallup Poll: Sub-Saharan Africans Rank the MDGs, 2009***