

WORLD DEVELOPMENT REPORT (WDR) 2007

Development and the Next Generation

REGIONAL HIGHLIGHTS—SUB-SAHARAN AFRICA

This is a summary of references in *WDR 2007: Development and the Next Generation* to policy directions, actions, and programs relevant to youth in Sub-Saharan Africa (SSA).

Take advantage of Sub-Saharan Africa's demographic "window of opportunity"

- The region is home to over 200 million young people between the ages of 12 and 24. The number of young people in the region will peak in about 20 years.
- The region's window to invest in youth—to take advantage of its demographic transition—is yet to open. Countries have the opportunity to lay the foundation for a successful demographic transition. The challenge is to continue investing in basic health, education, and skills of its labor force, while preparing to address the needs of the coming youth bulge.
- This anticipated bulge presents a special challenge in a region that lags in many key areas, such as literacy and health, and is unlikely to meet any of the Millennium Development Goals.
- The HIV/AIDS crisis has already had affected well-being in Africa, and without renewed action, incomes could fall to levels not seen since the 1960s.

Invest in education: strengthen primary skills, expand secondary capacity

- The poor quality of primary education severely limits opportunities for youth.
 - In many countries, fewer than half of women aged 15 to 24 can read a simple sentence after three years' primary school.
 - Over 80 percent of children in Namibia reach the last primary grade, but less than 20 percent have minimum mastery of material.
- The region's annual public spending per secondary student is almost three times that per primary student. These expenditure levels will be unsustainable when secondary schooling is expanded to meet greater demand.
- Higher education increases the employment choices available to youth, and countries with more post-primary enrollment are less likely to be short of skilled workers—but the region's secondary school capacity is insufficient.
 - In Zambia, many children complete primary school, but there are very few places in secondary schools.

Priorities

- Increase secondary school capacity. In particular, expand lower secondary capacity with the help of the private sector.
 - Secondary school enrollment increased more quickly in Kenya than in Tanzania during the 1960s and 1970s, partly because Kenya encouraged private schools.
- Increase the supply of teachers in the region, especially for math and sciences.
- Reduce the barriers to continued education
 - An experiment in Kenya reduced drop-outs among girls by providing free uniforms and books.

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Increase youth access to information, particularly on health issues

- Young adults are at greatest risk from HIV/AIDS.
 - In many countries, life expectancy has fallen and mortality has increased. The probability that a 20-year-old in Kenya dies before age 40 may reach 36 percent in 2010; without HIV/AIDS, it would be only eight percent.
- Almost all HIV infections in sub-Saharan Africa can be attributed to unsafe sex.
 - Teenage girls surveyed in Kenya significantly underestimate the HIV prevalence among older men.
 - In Ghana, less than 20 percent of sixth-graders—an age where many begin sexual activity—know that condom use prevents HIV transmission.
 - In Mali, only about 20 percent of sexually active boys use condoms.
- Even among who know that condoms prevent HIV transmission, fewer than half actually use them. Knowledge alone does not always modify behavior.
- Incorrect information can have disastrous effects.
 - In Kenya, the announcement of two false “cures” for AIDS was followed by a significant decline in reported condom use.

Priorities

- Introduce reproductive health education in schools to increase knowledge and adoption of safe sex behaviors.
- Use social marketing to expand young people’s use of condoms.
 - Promotion by peer educators in Cameroon’s *Horizon Jeunes* reproductive health program increased the proportion of women who reported condom use from 58 percent to 76 percent.
- Give young people specific, explicit, and repeated information about HIV/AIDS.
 - A program in Kenya that told young girls that older men were more likely to be HIV-positive reduced the incidence of age-mixing in sexual intercourse.
- Educate youth about alcohol abuse, which is correlated with crime and violence.
 - In South Africa, high blood alcohol levels were found among a large percentage of those arrested for crimes, and the majority of those admitted to hospital for trauma.
- Help young people to be better prepared for parenthood.
 - In Kenya, only 40 percent of young men aged 15-24 knew of simple oral rehydration therapy for children, compared with 60 percent of older men.
 - Young women are more likely to be anemic, placing themselves and their babies at risk.

Create more and better jobs for young people; encourage civic engagement

- The energy, creativity, and enthusiasm of young people can be invaluable in consultations and oversight.
- Programs like AGETIP in Senegal combine public works with jobs training for unemployed youth. These programs can be useful, but raise concerns of governance and accountability.

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Priorities

- Provide practical training to increase the mobility of many young people employed in the informal sector.
 - Kenya's *Jua Kali* program enhanced master craftsmen's access to new technologies and skills, improving the quality and relevance of the training they offered to apprentices.
- Help young people make inroads and gain status in traditional African society, where governance is hierarchical and vested in elders.
 - Elections in many countries, such as Sierra Leone, are providing opportunities for young people to participate directly in policymaking.
 - Social and civil organizations such as the *kafoolu* in West Africa can also provide opportunities for young people to participate.

Provide second chances for youth to make up for past disadvantages or mistakes

- Almost 60 percent of SSA's women who have unsafe abortions are aged 15 to 24.
- 45 percent of young people in the region do not complete primary school.
- SSA has thousands of young combatants—100,000 in Sudan alone. By many measures of well-being, youth suffer more from war than any other age group.

Priorities

- Offer access to safe abortion services.
 - In Kenya, Nigeria, and Tanzania, half the women in hospital for complications from illicit abortions are adolescents.
- Provide services to treat sexually transmitted infections among youth.
 - Special training for doctors and pharmacists in Nigeria, combined with specific education in schools increased the use of STI services and reduced the incidence of infection.
- Provide appropriate schooling opportunities for young people who want to return to complete primary school in adulthood.
 - In Malawi, over half the 19-year-olds in school are at the primary level.
- Allow re-entry into school after pregnancy and childbirth, and allow pregnant girls to remain in school.
 - Supportive schooling policies in South Africa have encouraged young mothers complete their education.
- Take comprehensive measures to rehabilitate young combatants. Link intensive rehabilitation programs with larger development planning.
 - Offer medical and psycho-social support as well as training, jobs, and assistance with self-employment.
- Provide opportunities for restorative – rather than retributive – justice and rehabilitation programs for young people.
 - The Truth and Reconciliation programs in Sierra Leone, Uganda, and South Africa have been effective in restoring unity and peace among former combatants.