COVID-19 in Africa

A challenging road to recovery

MO IBRAHIM FOUNDATION

64.9	32.7	18.5	59.5	31.0	81.2	76.2	52.4	35.1	16.2	18.5	100.0	64.9
66.7	45.3	36.5	74.1	52.8	66.5	66.7	76.1	47.2	25.6	44.0	59.2	66.7
100.0	18.1	28.6	69.4	46.1	87.5	11.2	58.3	63.9	11.1	52.6	100.0	100.0
80.3	22.3	30.6	33.3	22.6	45.4	22.4	31.2	22.9	10.5	27.3	50.0	80.3
99.2	27.7	58.9	23.6	87.5	48.7	44.9	49.0	57.4	14.6	28.7	32.6	99.2
59.2	26.0	42.3	56.7	60.2	63.8	84.9	57.6	59.6	24.1	44.7	58.6	59.2
71.4	26.2	35.7	60.7	63.1	66.7	100.0	56.0	59.5	21.4	42.5	50.0	71.4
31.9	50.1	36.9	60.9	63.4	80.1	73.5	54.8	43.9	13.1	38.0	84.5	31.9
100.0	33.3	71.2	59.7	59.8	78.7	86.2	59.4	45.2	17.9	49.2	77.8	100.0
70.8	0.0	50.5	62.5	65.0	12.5	64.5	75.0	62.0	37.5	47.4	12.5	70.8
21.9	20.3	17.1	39.7	50.0	80.9	100.0	42.6	87.2	30.8	46.7	68.0	21.9
73.6	44.1	42.3	66.1	55.0	72.8	68.5	57.4	50.7	30.2	47.2	76.2	73.6
77.4	81.2	57.6	90.8	53.5	85.3	76.2	59.6	56.3	56.2	55.6	89.4	77.4
51.9	99.8	41.8	98.7	45.8	100.0	83.0	53.6	47.6	85.1	58.8	100.0	51.9
92.2	84.3	41.0	92.6	26.9	93.8	83.1	26.0	20.1	6.3	38.9	100.0	92.2
85.1	99.5	49.9	99.9	82.5	99.8	91.2	92.9	85.0	68.6	79.2	100.0	85.1
66.9	40.7	67.1	73.8	76.8	68.5	70.6	43.5	73.2	32.2	67.1	71.9	66.9
93.3	81.8	70.7	89.2	59.5	64.6	87.8	81.8	67.9	89.0	65.3	75.2	93.3
75.0	39.9	75.0	64.7	29.6	76.4	41.5	59.0	44.2	24.8	24.1	88.5	75.0
75.7	50.9	34.7	70.9	58.2	87.5	68.7	69.8	41.5	32.4	52.7	93.5	75.7
69.3	39.4	25.5	47.6	68.4	67.4	64.6	65.8	45.7	1.8	52.1	98.2	69.3
73.7	29.6	35.6	47.4	39.3	75.8	36.2	50.3	21.1	21.1	31.9	81.5	73.7
90.2	56.3	42.7	89.4	66.5	68.5	78.7	64.6	41.1	33.3	50.3	100.0	90.2
91.8	31.1	47.8	58.3	64.1	67.9	91.4	44.2	73.8	28.7	79.1	67.6	91.8
53.2	32.0	22.1	74.7	52.8	91.3	72.4	59.1	26.0	31.5	50.2	90.2	53.2
82.2	29.2	34.6	52.0	48.0	65.9	44.3	53.4	45.3	15.6	35.6	68.4	82.2
64.9	32.7	18.5	59.5	31.0	81.2	76.2	52.4	35.1	16.2	18.5	100.0	64.9
66.7	45.3	36.5	74.1	52.8	66.5	66.7	76.1	47.2	25.6	44.0	59.2	66.7
100.0	18.1	28.6	69.4	46.1	87.5	11.2	58.3	63.9	11.1	52.6	100.0	100.0
80.3	22.3	30.6	33.3	22.6	45.4	22.4	31.2	22.9	10.5	27.3	50.0	80.3
99.2	27.7	58.9	23.6	87.5	48.7	44.9	49.0	57.4	14.6	28.7	32.6	99.2
59.2	26.0	42.3	56.7	60.2	63.8	84.9	57.6	59.6	24.1	44.7	58.6	59.2
71.4	26.2	35.7	60.7	63.1	66.7	100.0	56.0	59.5	21.4	42.5	50.0	71.4
31.9	50.1	36.9	60.9	63.4	80.1	73.5	54.8	43.9	13.1	38.0	84.5	31.9
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73.7	29.6	35.6	47.4	39.3	75.8	36.2	50.3	21.1	21.1	31.9	81.5	73.7
90.2	56.3	42.7	89.4	66.5	68.5	78.7	64.6	41.1	33.3	50.3	100.0	90.2
91.8	31.1	47.8	58.3	64.1	67.9	91.4	44.2	73.8	28.7	79.1	67.6	91.8
53.2	32.0	22.1	74.7	52.8	91.3	72.4	59.1	26.0	31.5	50.2	90.2	53.2
82.2	29.2	34.6	52.0	48.0	65.9	44.3	53.4	45.3	15.6	35.6	68.4	82.2
64.9	32.7	18.5	59.5	31.0	81.2	76.2	52.4	35.1	16.2	18.5	100.0	64.9
85.1	99.5	49.9	99.9	82.5	99.8	91.2	92.9	85.0	68.6	79.2	100.0	85.1
66.9	40.7	67.1	73.8	76.8	68.5	70.6	43.5	73.2	32.2	67.1	71.9	66.9
93.3	81.8	70.7	89.2	59.5	64.6	87.8	81.8	67.9	89.0	65.3	75.2	93.3
75.0	39.9	75.0	64.7	29.6	76.4	41.5	59.0	44.2	24.8	24.1	88.5	75.0

INSIGHTS FROM THE IIAG

COVID-19 in Africa

A challenging road to recovery

MO IBRAHIM FOUNDATION

Contents

Chapter 02.
Society: Education, gender equality and civic freedoms threatened by COVID-19 fallout

Chapter 03.
Economy: Potential for recovery, provided that hurdles are overcome

Reading the IIAG results

The 2020 Ibrahim Index of African Governance (IIAG) measures governance performance over ten years (2010-2019) across 54 African countries.

The 2020 IIAG assembles 237 variables from 40 data providers to form 79 indicators, 90% of which are clustered to provide a governance assessment supported by multiple sources. The indicators are organised under key governance dimensions: four categories and 16 sub-categories that make up the *Overall Governance* score.

Each of the following layers of analysis can be applied to all measures in the IIAG and are used for countries, as well as for groups such as the continent, African geographical regions and Regional Economic Communities (RECs).

1 → Scores and ranks

The IIAG scores quantify a country's performance for each governance measure each data year, expressed out of 100.0 (with 100.0 being always the best score). Rounded to one decimal point, scores are relative to each country's performance in relation to the other 54 African countries.

Ranks are calculated based on the respective scores and are expressed out of 54. When two or more countries have the same score, they share the same place in the ranking table (tied ranks).

2 → 10-year trends

The IIAG 10-year trends offer an additional layer of analysis to scores and ranks, as they quantify change in absolute score between the last and the first data years of the time series. The 2020 IIAG 10-year trends compare a country's performance for each governance measure in 2019 compared to 2010, offering an assessment of the change.

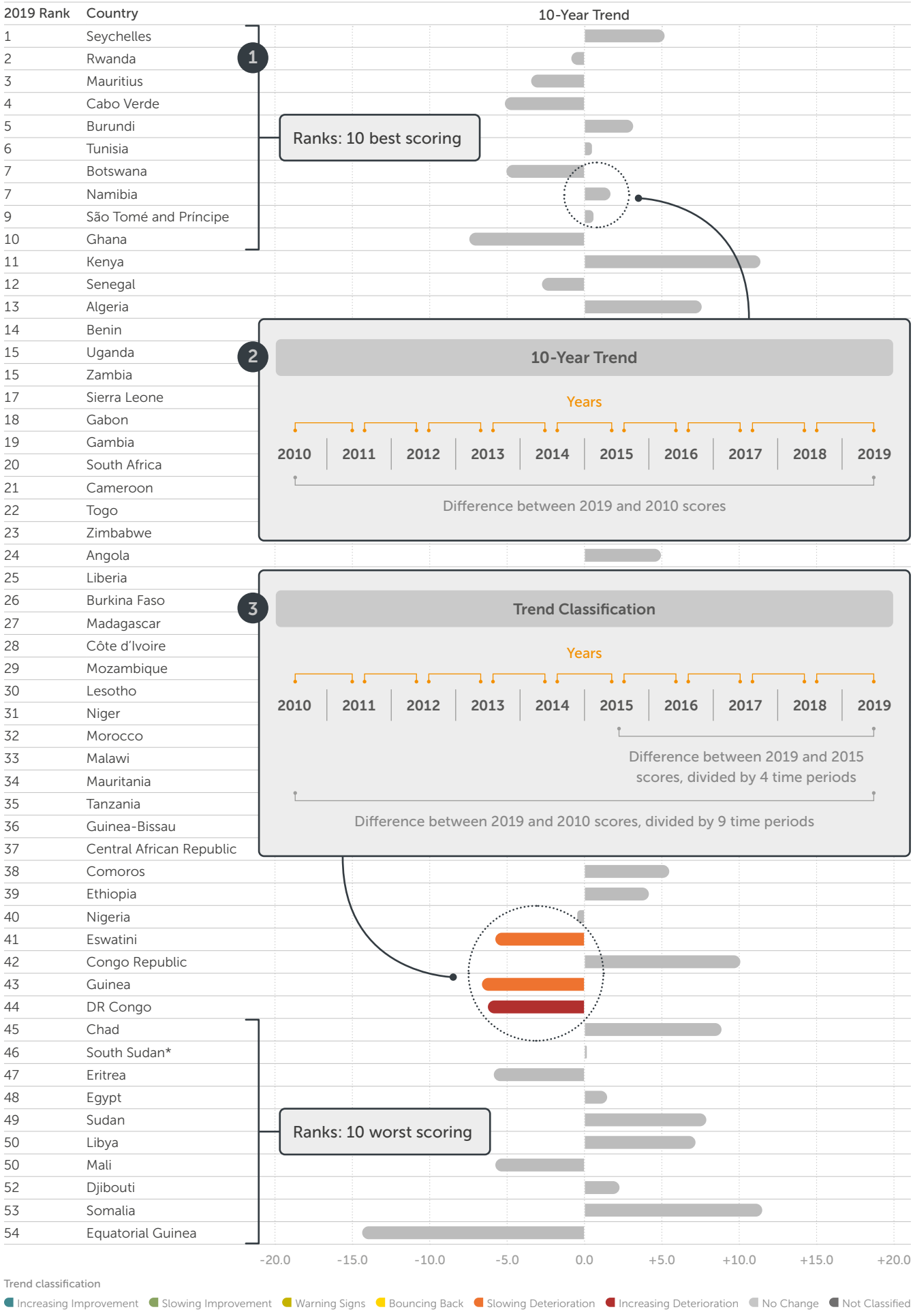
3 → Trend classifications

Trend classifications are a third layer of analysis, complementing scores, ranks and 10-year trends. The IIAG trend classifications serve to assess the mid-period trend (2015-2019 in the 2020 IIAG) in relation to the 10-year trend (2010-2019). The comparison of mid-period and full period trends help identify early signs of the direction and pace of country trajectories - 'trends within trends'.

Trend Classification	Characteristic
Increasing Improvement	Score is better in 2019 compared to 2010, with the rate of improvement increasing since 2015
Slowing Improvement	Score is better in 2019 compared to 2010, but the rate of improvement is slowing since 2015
Warning Signs	Score is better/no change in 2019 compared to 2010, but showing decline since 2015
Bouncing Back	Score is worse/no change in 2019 compared to 2010, but showing progress since 2015
Slowing Deterioration	Score is worse in 2019 compared to 2010, but the rate of deterioration is slowing since 2015
Increasing Deterioration	Score is worse in 2019 compared to 2010, with the rate of deterioration increasing since 2015

Note: There are instances where countries cannot be classified or show no change. An explanation of the calculation of the Annual Average Trends (AATs), used to assign trend classifications is contained in the Notes section in the Annex.

Measure x: 2019 rank, 10-year trend & trend classification (2010-2019)



Ibrahim Index of African Governance (IIAG)

OVERALL GOVERNANCE

SECURITY & RULE OF LAW

Security & Safety

- Absence of Armed Conflict
- Absence of Violence against Civilians
- Absence of Forced Migration
- Absence of Human Trafficking & Forced Labour
- Absence of Criminality

Rule of Law & Justice

- Executive Compliance with the Rule of Law
- Impartiality of the Judicial System
- Judicial Processes
- Equality before the Law
- Law Enforcement
- Property Rights

Accountability & Transparency

- Institutional Checks & Balances
- Civic Checks & Balances
- Absence of Undue Influence on Government
- Disclosure of Financial & Judicial Information
- Accessibility of Information

Anti-Corruption

- Anti-Corruption Mechanisms
- Absence of Corruption in State Institutions
- Absence of Corruption in the Public Sector
- Public Procurement Procedures
- Absence of Corruption in the Private Sector

PARTICIPATION, RIGHTS & INCLUSION

Participation

- Freedom of Association & Assembly
- Political Pluralism
- Civil Society Space
- Democratic Elections

Rights

- Personal Liberties
- Freedom of Expression & Belief
- Media Freedom
- Digital Rights
- Protection against Discrimination

Inclusion & Equality

- Equal Political Power
- Equal Political Representation
- Equal Civil Liberties
- Equal Socioeconomic Opportunity
- Equal Access to Public Services

Gender

- Political Power & Representation of Women
- Equal Civil Liberties for Women
- Socioeconomic Opportunity for Women
- Equal Access to Public Services for Women
- Laws on Violence against Women

Citizens' Voices (CV)

PUBLIC PERCEPTION OF OVERALL GOVERNANCE

Public Perception of Security & Rule of Law

- Public Perception of Security & Safety
- Public Perception of the Rule of Law
- Public Perception of Accountability
- Public Perception of Anti-Corruption

Public Perception of Participation, Rights & Inclusion

- Public Perception of Elections & Freedom
- Public Perception of Inclusion & Equality
- Public Perception of Women's Leadership

FOUNDATIONS FOR ECONOMIC OPPORTUNITY

Public Administration

- Civil Registration
- Capacity of the Statistical System
- Tax & Revenue Mobilisation
- Budgetary & Financial Management
- Professional Administration

Business Environment

- Regional Integration
- Trade Environment
- Business & Competition Regulations
- Access to Financial Services
- Labour Relations

Infrastructure

- Transport Network
- Access to Energy
- Mobile Communications
- Digital Access

Rural Sector

- Rural Land & Water Access
- Rural Market Access
- Rural Sector Support
- Rural Businesses & Organisations

HUMAN DEVELOPMENT

Health

- Access to Healthcare
- Access to Water & Sanitation
- Control of Communicable Diseases
- Control of Non-Communicable Diseases
- Control of Child & Maternal Mortality
- Compliance with International Health Regulations

Education

- Equality in Education
- Education Enrolment
- Education Completion
- Human Resources in Education
- Education Quality

Social Protection

- Social Safety Nets
- Poverty Reduction Policies
- Socioeconomic Inequality Mitigation
- Access to Housing
- Absence of Undernourishment

Sustainable Environment

- Promotion of Environmental Sustainability
- Enforcement of Environmental Policies
- Air Quality
- Sustainable Management of Land & Forests
- Land & Water Biodiversity

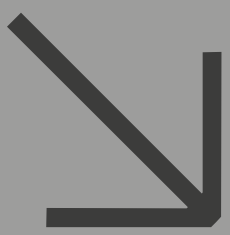
Public Perception of Economic Opportunity Foundations

- Public Perception of Public Administration
- Satisfaction with Economic Opportunities
- Satisfaction with Infrastructure

Public Perception of Human Development

- Satisfaction with Health Provision
- Satisfaction with Education Provision
- Lived Poverty & Public Perception of Social Protection

Challenge Zero: No real recovery with only 9.7% of Africa's population fully vaccinated



Challenge Zero: No real recovery with only 9.7% of Africa's population fully vaccinated

COVID-19 in Africa: An ongoing concern with many countries already in their fifth wave

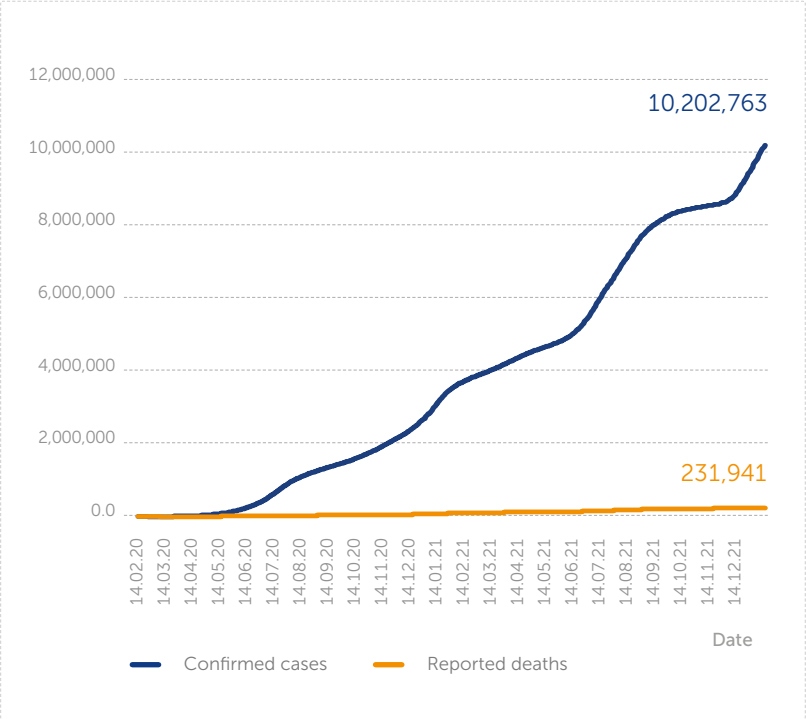
As of 10 January 2022, over 305 million COVID-19 cases and almost 5 and a half million deaths have been reported by 226 countries and territories to the World Health Organization (WHO).

Cases reported by African Union (AU) member states represent 3.3% of all cases and 4.2% of all deaths reported globally. Almost all have experienced a third wave, 84% experienced a fourth, and eight countries (Algeria, Benin, Congo Republic, Guinea-Bissau, Kenya, Mauritius, Somalia and Tunisia) are experiencing a fifth wave.

In absolute numbers, Southern Africa (4.9 million) and Northern Africa (2.8 million) are still the two regions with the most cumulative confirmed cases on the continent.

While Europe has seen a dramatic increase in new cases since the start of the year, new cases on the African continent have stabilised as more countries exit their third and fourth waves. Despite this, vaccination rates across the continent must be intensified as we see deaths decline in Europe while they continue to rise in Africa.

Africa: cumulative confirmed COVID-19 cases and reported deaths (14 February 2020 - 12 January 2022)



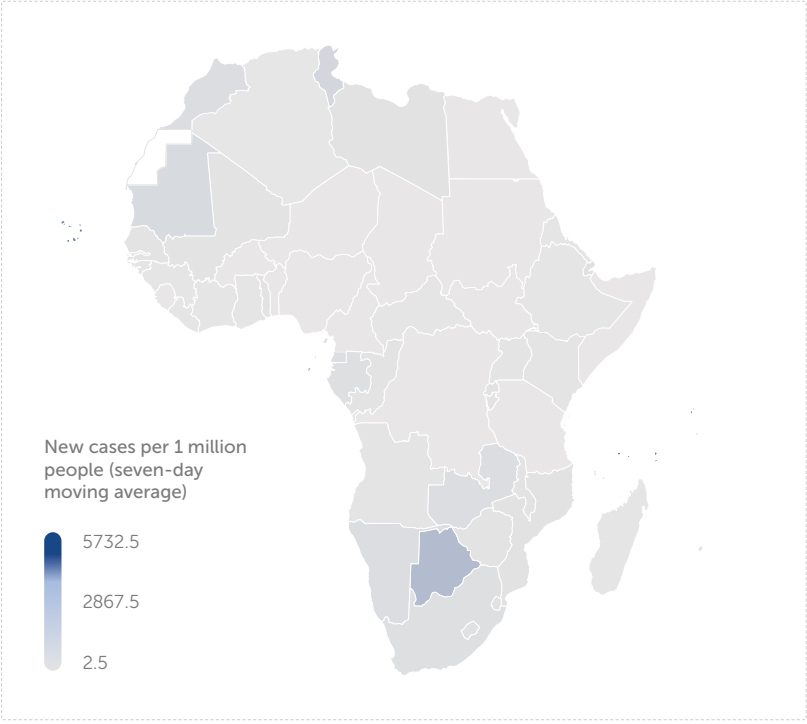
Five countries with the highest number of confirmed COVID-19 cases per 100,000 people

Seychelles	29195.5
Botswana	9521.4
Cabo Verde	9288.6
Tunisia	6276.9
South Africa	5828.0

Five countries with the highest number of reported COVID-19 deaths per 100,000 people

Tunisia	213.6
South Africa	152.8
Namibia	142.8
Seychelles	134.8
Eswatini	113.9

African countries: new cases of COVID-19 (12 January 2022)



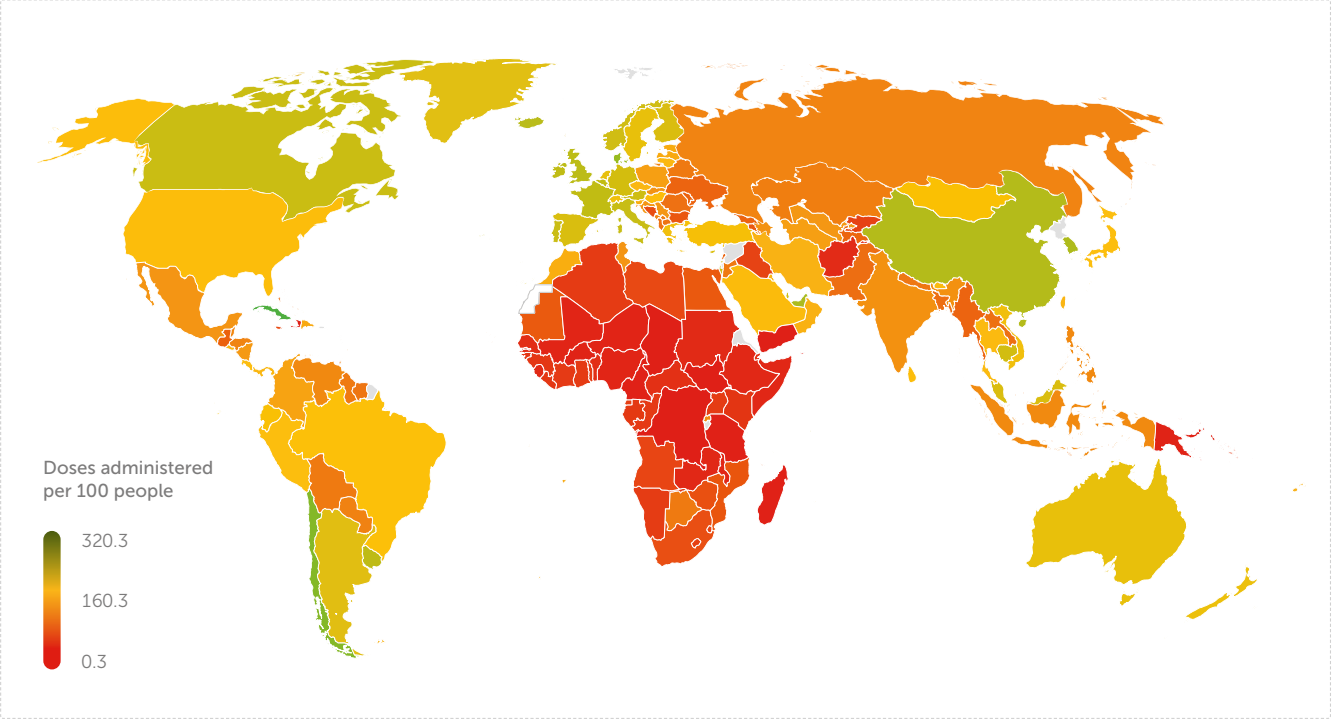
Source: MIF based on JHU CSSE and UNDESA
Updated: 12 January 2022

Botswana, as well as being the main driver for new cases in Southern Africa, also features in the five countries with the most new cases per million over a 7-day moving average

Of the ten countries with the highest number of new cases per million over a 7-day moving average, more than half are from Northern or Southern Africa: Botswana, Mauritania, Morocco, Namibia, Tunisia, Zambia

Only seven out of 54 African countries to have reached the 2021 year-end target of fully vaccinating 40% of their population

World countries: COVID-19 vaccine doses administered (13 January 2022)



Five African countries with the highest number of COVID-19 vaccine doses administered per 100 people

Seychelles	191.1
Mauritius	161.9
Morocco	143.9
Tunisia	118.3
Rwanda	108.4

Five African countries with the lowest number of COVID-19 vaccine doses administered per 100 people

DR Congo	0.3
South Sudan	2.2
Chad	2.3
Madagascar	3.6
Cameroon	4.0

Seychelles (191.1 per 100 people) has the 27th highest number of doses per 100 people globally, yet 41 African countries are still in the bottom 50 with fewer than 21.0 doses per 100 people on average.

In terms of the absolute number of COVID-19 vaccine doses administered, Egypt ranks first in Africa and 26th globally (almost 60 million) however, it only has the 11th highest number of doses administered per 100 people (59.2) on the African continent.

For the 52 African countries with data available, the average currently stands at 39.2 doses per 100 people, and the median at 27.6.

Only seven countries have reached the 2021 year-end World Health Organization (WHO) target of fully vaccinating 40% of their people, namely: Seychelles (81.5%), Mauritius (72.2%), Morocco (64.9%), Tunisia (51.5%), Cabo Verde (47.4%), Rwanda (44.6%) and Botswana (43.5%).

Seychelles and Mauritius are the only ones to have also reached the mid-2022 target of fully vaccinating 70% of their population. To be considered fully vaccinated, one or two doses may be required depending on the brand of vaccine.

Source: MIF based on Bloomberg Covid-19 Vaccine Tracker
Updated: 13 January 2022

COVID-19 vaccine access: Inequitable and inefficient

More than 9.57 billion COVID-19 vaccine doses have been administered across 204 countries and territories as of 13 January 2022 - the biggest and quickest vaccination campaign in history. However, disparities in access are still stark.

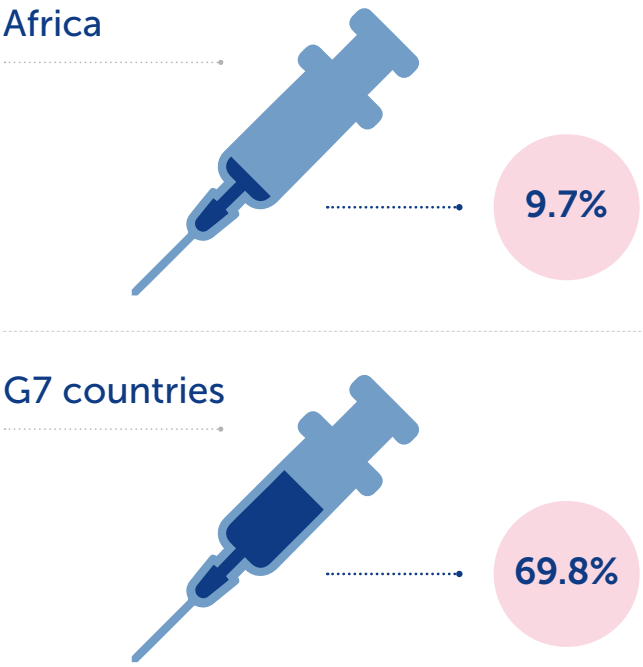
African countries account for only 3.5% of the COVID-19 vaccine doses administered globally, despite being home to nearly 18% of the world's population. At the same time, Group of Seven (G7) countries account for 13.9% of the doses administered globally while they only host 9.8% of the global population.

> Africa needs to vaccinate 70% of its population by the end of 2022 to have a chance of controlling the COVID-19 pandemic.

As of 13 January 2022, just 9.7% of Africa's population has been fully vaccinated

COVID-19 vaccination rates

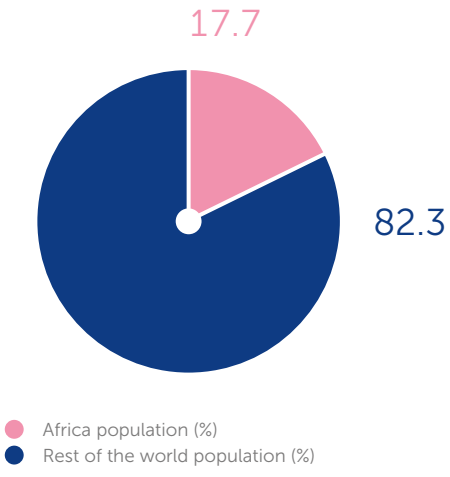
Source: MIF based on Bloomberg and UNDESA



> As of 19 January 2022, 888.7 million people in 105 countries received a booster shot – more than 14.3 times the total number of people who received a first dose in low-income countries.

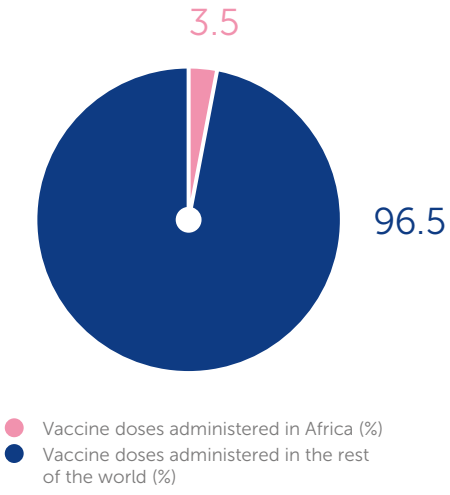
Africa: Nearly 18% of global population, but only 3.5% of vaccine doses administered globally

Africa & rest of the world: share of population (2022)



Source: MIF based on UNDESA

Africa & rest of the world: share of COVID-19 vaccine doses administered (13 January 2022)

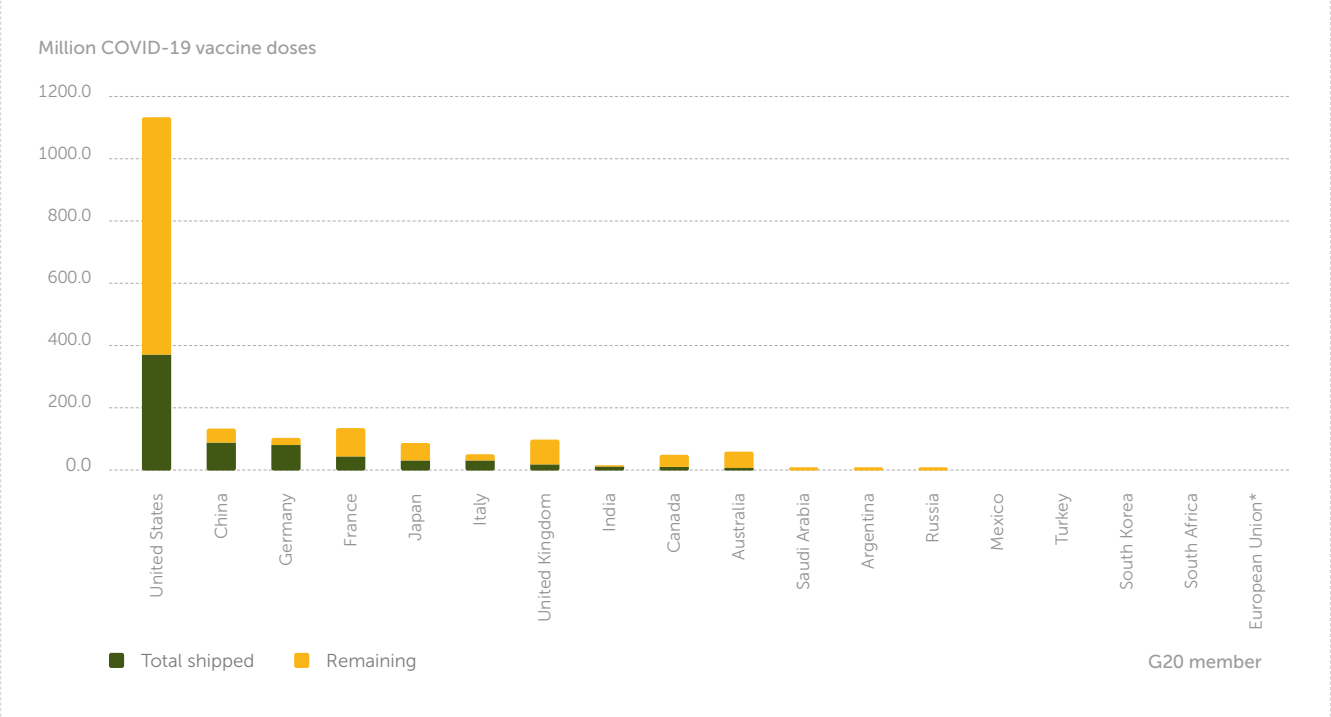


Source: MIF based on Bloomberg

New variants are driving high-income countries to recommend booster doses, even though much of the world's population has yet to receive their first dose. At this rate, 60% of the world's population live in countries that will not see widespread vaccination coverage until 2022 or later.

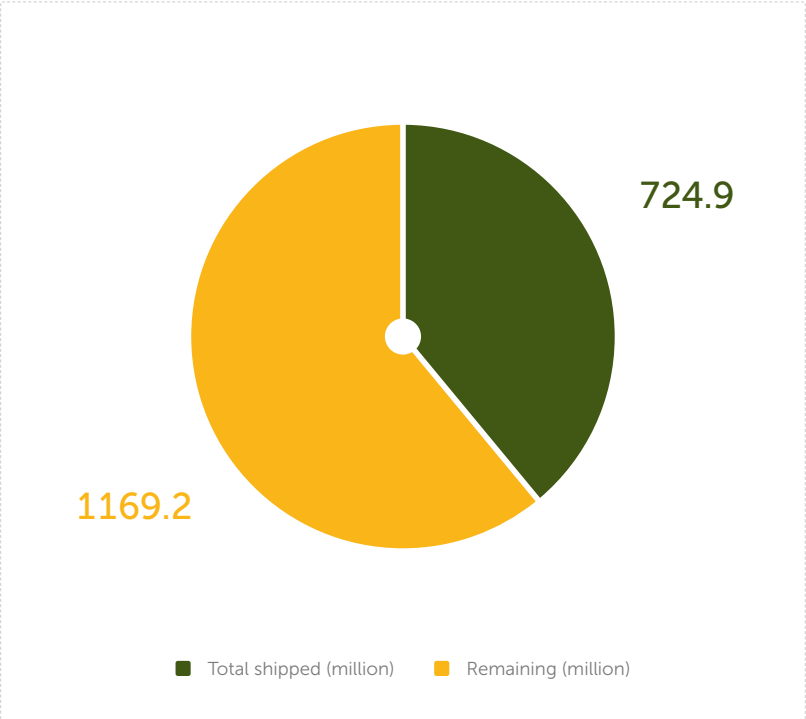
G20 vaccine donations: Pledges still very far from being met

G20 members: vaccine donation pledges (14 January 2022)



Note: The European Union* (20.7 million) has made COVID-19 vaccine donation pledges, however, in the latest update at source there is no data for how much of that pledged amount has been shipped and how much remains.

G20: vaccine donation pledges (14 January 2022)



As of 14 January 2022, the total vaccine donation pledges made directly to Africa (individual African countries and African Union) amounts to 494.6 million vaccine doses.

However, this figure does not include the total vaccine donation pledges of which the direct recipient is COVAX, the global vaccine-sharing scheme. This total amounts to 748.2 million vaccine doses, from which the African continent is expected to receive a large chunk.

Of the 47 entities making vaccine donation pledges directly to Africa, 41 of those are non-African countries. Additionally, three donating entities are multinational companies (Alrosa Group, MTN Group and Nordgold) and three African countries have donated vaccine doses to other African countries (Morocco has donated 280,000 vaccine doses to Mauritius, Senegal has donated 10,000 doses to Gambia, and Zimbabwe has donated 20,000 vaccine doses to Namibia).

Source: MIF based on Duke Global Health Innovation Center
Updated: 14 January 2022

The Under-estimated Toll of the COVID-19 Pandemic on the African Continent

Dr Matshidiso Moeti, Regional Director, WHO Regional Office for Africa

Africa has recorded an official toll of 8.7 million cases of COVID-19, but if that accounts for only one in every seven infections, then countries should actually be working seven times harder – and with seven times more resources – to curb the spread of the virus.

Amidst widespread scientific debate around whether Africa's youthful population and aggressive lockdowns could be credited for relatively low COVID-19 rates on the continent, WHO assessments instead revealed the serious underestimation in the toll the pandemic was taking.

The assessment, grounded in population-based studies and utilising the COVID-19 calculator, were conducted over the past year. Analysing registered cases and death rates, it revealed that as few as 14.2% – or only about one in seven – COVID-19 infections are being detected in Africa. As of 10 October 2021, the cumulative number of COVID-19 infections on the continent was instead estimated to stand at 59 million.

To back up the findings, WHO also conducted seroprevalence studies in 11 countries in the Region to determine the level of antibodies and conferred immunities. Based on those studies, estimates were that up to about 68% of the population had some conferred immunity (as of September 2021).

A further triangulation of Regional data analytics also revealed serious underestimates in death rates. COVID-19 mortality in the 18 months up to September 2021 was set at 618 000 – about three times more than the 223 000 being reported two months later, at the end of November this year.

The serious underestimation of the toll of the pandemic in Africa is likely to have resulted from differences and limitations in strategies and capacities implemented by African countries. For instance, the number of COVID-19 cases detected on the continent is a reflection of the number of people with symptoms reporting to health facilities, in addition to the arriving or departing passengers being tested for travel. Given the higher percentage of asymptomatic cases on the continent, the large-scale under-reporting becomes less surprising.

Taking account of the commonly held view that between 65% and 85% of COVID-19 infections in Africa generate few or no symptoms, it follows that most Africans infected with the virus would not seek treatment at local health facilities, where most testing occurs. Yet, asymptomatic people play a key role in facilitating transmission to those who are more vulnerable, raising the risk for severe disease or death.

The application of different case definitions and testing strategies are also potential alternative factors that could be influencing the underestimation, along with variable ways of counting cases. For example, testing and counting may not be applied to mild cases. Inconsistent handling of time lags, dissimilar quality of care or interventions being introduced at conflicting stages of

illness; and the varying profiles of patients (age, genders, ethnicity and underlying comorbidities variations between countries) are other possibilities.

Lack of reporting on the disruption of essential services could also have a role to play. WHO utilized a pulse survey to track the impact of the pandemic on the continuity of the essential services, by measuring health service interruptions in the first quarter of 2021. Preliminary analysis of data from 47 countries saw more than half report disruptions in the availability and quality of primary care services. About one in three countries said they had experienced disruptions to life-saving emergency, and critical and operative care, while 41% reported disruptions to rehabilitative, palliative and long-term care.

In the WHO African Region, 61% of countries have reported disruptions to HIV testing, 53% said tuberculosis (TB) diagnosis and treatment was impacted, while 40% reported disruptions in respect of Hepatitis B and C diagnosis and treatment. Almost half the countries in the Region reported disruptions to routine outreach immunisation services, while 43% said routine facility-based immunisation services had been interrupted.

For Non-Communicable Diseases, more than 40% of countries reported disruptions to hypertension management, diabetes management, cancer screening and cancer treatment services.

Disruptions results from a combination of supply and demand factors, with health workforce-related issues mostly responsible for supply disruptions. Unavailability/stockouts of essential medicines and cancellation of elective procedures were also reported. On the demand side, community fear/mistrust, financial difficulties during the pandemic, and decreases in outpatient volume due to absent patients were identified as the biggest contributors to disruptions.

One of the biggest concerns associated with underreporting of cases is the concomitant low vaccination rates, with only about 7.2% of people in Africa now fully vaccinated. This represents only 4.5% of COVID-19 doses administered globally. Meanwhile, only 27 African countries have administered at least one dose to 10% of their total populations, with 20 fully vaccinated one in ten of their citizens.

WHO set the target of all countries fully vaccinating 40% of their populations by the end of the year, but so far only five countries have got there – with no more predicted to follow suit at current rates of vaccine supply and uptake.

In the absence of good vaccine coverage, and with the threat of the emergence of new variants such as the latest Omicron, reduction of transmission in Africa is reliant on proactive community testing strategies. WHO is working with countries to ramp up testing to enhance surveillance efforts to provide a more realistic picture of the COVID-19 burden, and to

conduct seroprevalence surveys to determine the number of people with COVID-19 antibodies.

Focused initially on eight countries, the innovative community-based surveillance project uses cost-effective, easy-to-use diagnostics to augment the detection and management of COVID-19 cases in communities, while also improving testing and tracing capacities. In addition, 109 sero-surveillance studies are planned for 35 countries, 65 of which has already begun in 25 countries.

While it's not a quick-fix to address the under-estimated toll of the COVID-19 pandemic on African countries, it is an important start to the process to secure reliable data, that can in turn inform effective pandemic response in the Region.

Chapter 01. Health: Securing Africa's health sovereignty is imperative

Summary

Civil registration and vital statistics (CRVS) are a key enabler for policymakers to assess the needs and composition of their constituencies and are equally crucial for citizens to access public services through the acquisition of an official identity. However capacity is still low in much of Africa. The IIAG indicator *Civil Registration* is worse in 2019 than in 2010, although has picked up progress since 2015. While birth registration has improved, death registration had deteriorated. The COVID-19 pandemic has added further strain to the already weak civil registration capacity at a time where this is more critical than ever for the delivery of public health policies, vaccines and social protection.

CRVS are a key enabler for policymakers to assess the extent and make up of their constituencies and are equally crucial for allowing citizens to access public services through the acquisition of an official identity.

Civil registration capacities on the African continent are still low. Globally, nine out of the ten countries with the largest share of unregistered population are African - Angola, Chad, Equatorial Guinea, Eritrea, Ethiopia, Nigeria, Somalia, South Sudan, Zambia - and African countries represent more than 52% of the global unregistered populations.

Over 50% of children born in Africa are still deprived of a legal existence. Projections show that the number will exceed 100 million by 2030 if no immediate measures are taken.

Today, birth registration is free of charge in only four of 24 countries in Western and Central Africa.

In Africa, only eight countries - Algeria, Cabo Verde, Egypt, Mauritius, São Tomé and Príncipe, Seychelles, South Africa, and Tunisia - have a universal death registration system.

The COVID-19 pandemic disrupted the already weak provision of civil registration services, revealing the shortfalls of a system whose services are needed more than ever.

In March 2020, the United Nations Economic Commission for Africa (UNECA) sent a five-question survey to all 54 African countries to collect data on the impact of COVID-19 on CRVS systems. Of the 34 country-based civil registration services to have responded, 75% reported to be either disrupted or discontinued.

Most civil registration offices did not draw up business continuity plans and struggled to continue their operations, with reactions ranging from total shutdown, partial provision of services or "deprioritisation" of registration of some vital events, to uninterrupted services.

With governments needing to continuously monitor mortality by cause, gender, and place of occurrence to develop effective interventions, the importance of well-functioning CRVS systems to provide rapid responses to emerging outbreaks has become clear.

"Disinvestment in our technical institutions has really rendered statistical data on healthcare often as an estimation rather than a fact."

Mandipa Ndlovu, Now Generation Forum Representative, 2021 Ibrahim Governance Weekend

Over 50% of children in Africa do not have a legal existence

Only 10% of deaths are registered in Africa, compared to 98% in Europe

As highlighted in the 2021 Mo Ibrahim Foundation (MIF) Forum Report, excess deaths in Africa could have been greatly underestimated.

According to the WHO, 86% of COVID-19 cases in Africa go undetected.

Reports from the Institute of Health Metrics and Evaluation found estimated deaths on the continent to be six times as high as reported.

Seroprevalence studies in Africa support the underestimation of cases on the continent. The Lancet found that within three high-density communities in Harare, Zimbabwe, cases were more than 14 times higher than the reported cases for the whole city.

COVID-19 vaccinations also present a serious challenge for CRVS systems, given the need to deliver vaccine by priority groups, to issue vaccine certificates and with most vaccine types needing two doses for full immunisation.

Already low vaccination rates in African countries might be far worse, as unregistered populations remain unaccounted for and are at risk of being left out by vaccination campaigns.

African countries such as South Africa have introduced vaccine registration systems requiring valid identity documents, however estimates show the unregistered population is made up of over 15.3 million people, potentially excluding nearly 30% of the population from the vaccination campaign.

"Our friends in the development sector and our African leaders would not dream of driving their cars or flying without instruments. But somehow they pretend they can manage and develop countries without reliable data."

Mo Ibrahim, Founder and Chair, Mo Ibrahim Foundation, 2015

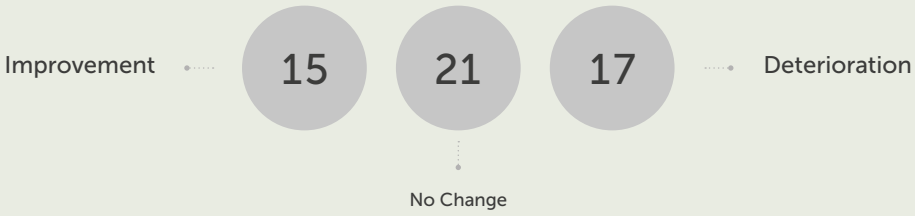
Civil Registration

African average

2019 score/100.0	60.0
10-year trend (2010-2019)	Deterioration (-0.1)
Trend classification: 5-year trend (2015-2019) compared to 10-year trend	Bouncing Back

African countries

10-year trend (2010-2019) by number of countries



Trend classification: 5-year trend (2015-2019) compared to 10-year trend by number of countries

Largest Improvement	Liberia**
Change 2010-2019	+37.5
Score/Rank (2019)	62.5/20th
Largest Deterioration	Eritrea***
Change 2010-2019	-37.5
Score/Rank (2019)	12.5/53rd

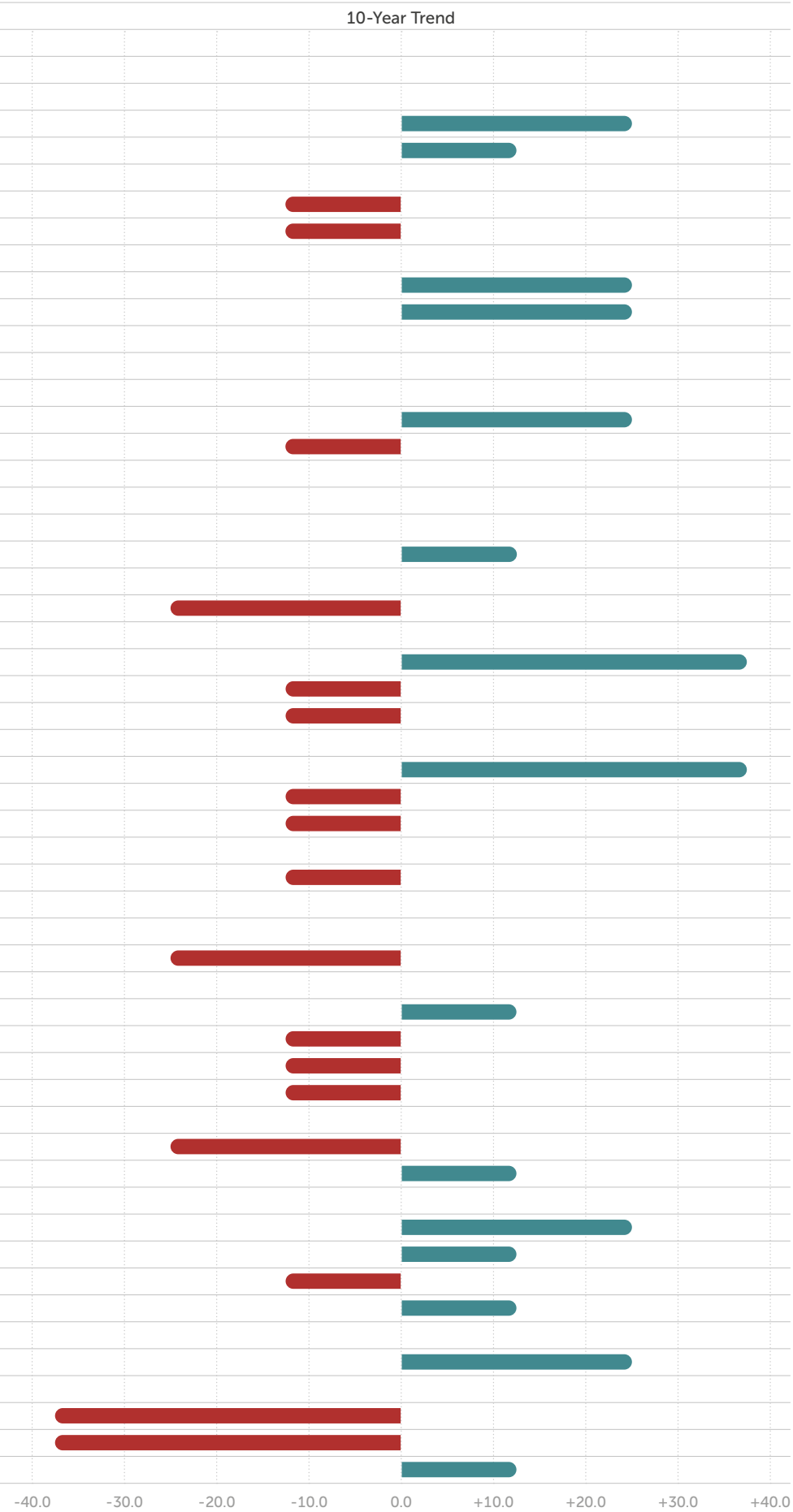
**Improvement score shared with São Tomé and Príncipe

***Deterioration score shared with Mali

*South Sudan does not have a 10-year trend or trend classification because the IIAG does not include data for the country prior to secession in 2011.

Civil Registration indicator: 2019 rank, 10-year trend & trend classification (2010-2019)

2019 Rank	Country
1	Algeria
1	Cabo Verde
1	Namibia
4	Chad
4	Gambia
4	Lesotho
4	Malawi
8	Botswana
8	Burkina Faso
8	Côte d'Ivoire
8	Ethiopia
8	Madagascar
8	Mauritius
8	Morocco
8	Mozambique
8	Senegal
8	Sierra Leone
8	Tunisia
8	Zambia
20	Benin
20	Djibouti
20	DR Congo
20	Guinea
20	Liberia
20	Libya
20	Mauritania
20	Rwanda
20	São Tomé and Príncipe
20	South Africa
20	Togo
20	Zimbabwe
32	Burundi
32	Central African Republic
32	Comoros
32	Egypt
32	Eswatini
32	Guinea-Bissau
32	Kenya
32	Niger
32	Nigeria
32	Seychelles
32	Sudan
32	Tanzania
32	Uganda
45	Angola
45	Cameroon
45	Congo Republic
45	Ghana
45	South Sudan*
50	Equatorial Guinea
50	Gabon
50	Mali
53	Eritrea
53	Somalia



Civil Registration in the 2020 IIAG: Stuttering performance since 2010

The IIAG *Civil Registration* composite indicator assesses the extent to which birth and death certificates are available within 30 days free of charge.

Data for the indicator are sourced from Global Integrity (GI).

With a 2019 African average score of 60.0 (out of 100.0), *Civil Registration* is the second highest scoring indicator in the *Foundations for Economic Opportunity* category.

At the continental level, civil registration capacities are worse in 2019 than in 2010 although progress has been made since 2015.

Over the decade, 17 countries have experienced a deterioration and 15 have improved their performance in *Civil Registration*. 21 countries have shown no change in score.

The deterioration since 2010 has been driven by the decline in *Death Registration*, which has continued to deteriorate at an even faster pace since 2015.

Further decline in civil registration has only been pre-empted by improvement in *Birth Registration*, whose progress has accelerated since 2015.

Of the 15 countries showing an improvement over the decade, Liberia and São Tomé and Príncipe have shown the largest increases (both +37.5).

Unlike the picture at the continental level, these countries have seen both *Civil Registration* and *Death Registration* improve, with both featuring in the 10 most improved on the continent.

They are followed by six countries who have managed to improve performance since 2010 (+25.0). These include Angola and Equatorial Guinea, but both still rank among the ten worst performing countries of the continent.

Angola has been the most improved (+50.0) in registering deaths.

Of the 17 countries whose performances have declined since 2010, the most deteriorated are Eritrea and Mali (-37.5) followed by DR Congo, Egypt and Sudan. The trend is particularly concerning for Eritrea, which receives the worst score in 2019 alongside Somalia.

Mali and Eritrea are among the joint most deteriorated for both birth and death registration.

DR Congo and Egypt have seen both forms of civil registration deteriorate since 2010, while Sudan sees a substantial deterioration in death registration.

Highest scoring: Algeria, Cabo Verde, Chad and Namibia

Lowest scoring: Gabon

For 11 countries *Death Registration* is worse in 2019 than in 2010, with deterioration accelerating since 2015

For 12 countries the *Birth Registration* system is worse in 2019 than in 2010, while 28 African countries have made no progress

Civil Registration & COVID-19 registered cases: a correlation?

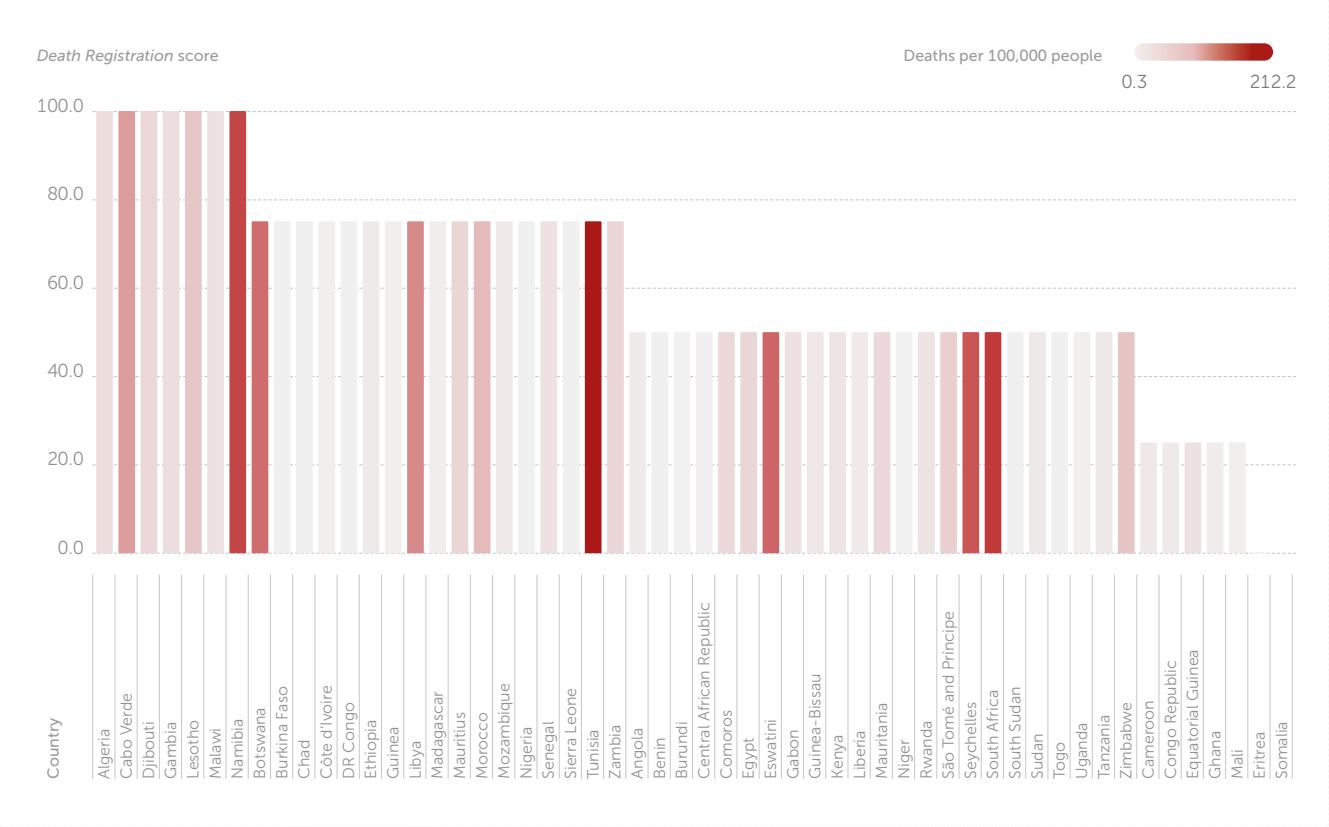
In 2019, the average IIAG *Civil Registration* indicator score for the ten countries with the most COVID-19 cases per 100,000 is 71.3.

By contrast the ten countries with the fewest recorded cases per 100,000 have an average score of 56.3.

When looking at the number of COVID-19 deaths per 100,000 in relation to the *Death Registration* sub-indicator, we find a similar picture with six of the ten countries with the most deaths per population in the top half of performers in death registration.

Six of the ten countries with the most COVID-19 deaths per 100,000 population are in the top half of performers for the IIAG *Death Registration* sub-indicator

African countries: cumulative COVID-19 deaths (17 November 2021) and *Death Registration* sub-indicator (2019)



Challenge 2: Healthcare is neither affordable nor accessible for most in Africa

Summary

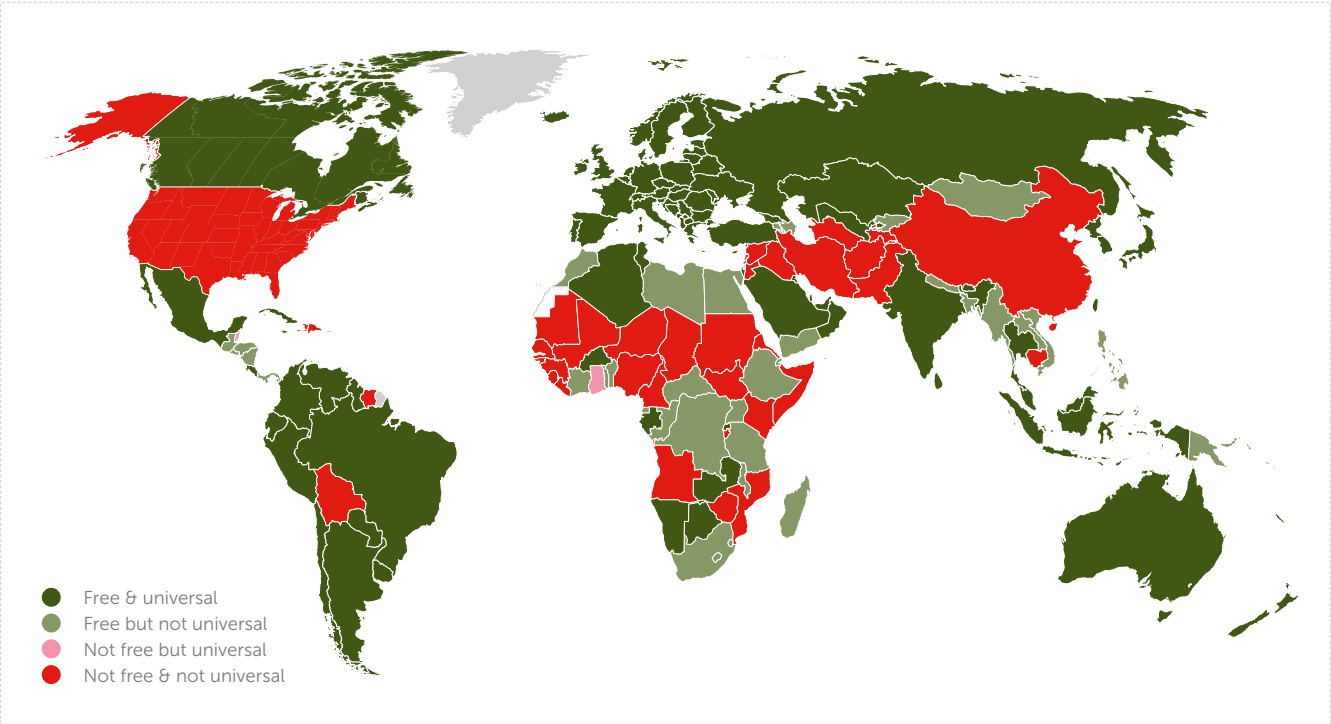
COVID-19 has pinpointed structural weaknesses in Africa's health systems. The 2020 IIAG shows that *Access to Healthcare*, though better on average in 2019 than in 2010, has started to deteriorate since 2015. This is driven by a deterioration in *Healthcare Equality* in this time period, making it a priority area for African countries to address. Furthermore, no African country met the target of spending 15% of its government budget on public health in 2018, the latest available data year. In 2021, only ten African countries provide their citizens with free and universal healthcare. Prioritising investments in Universal Health Coverage (UHC), particularly in primary healthcare and local health systems, will help countries tackle the COVID-19 pandemic fallout and provide a more secure and healthy future for all.

Universal Health Coverage (UHC) ensures that all citizens can access the quality health services they need without facing financial adversity from paying out of pocket for healthcare. Moving towards UHC requires expanding on investments to strengthen health systems, especially quality primary healthcare.

All African governments have committed to achieve UHC by 2030, but in 2021 only ten of them provided their citizens with free and universal healthcare (Algeria, Botswana, Burkina Faso, Gabon, Mauritius, Namibia, Rwanda, Seychelles, Tunisia and Zambia). Healthcare in 22 African countries is still neither free nor universal.

Only ten African countries, hosting less than 9% of the continent's population, provide their citizens with free and universal healthcare

World countries: Universal Healthcare (2021)



Note: Free & universal includes Mauritius and Seychelles.

Source: MIF based on Hudson's Global Residence Index

Almost 80% of respondents in MIF's 2021 Now Generation Network (NGN) survey state that citizens in their countries face obstacles to accessing free and universal healthcare. Over 90% cite lack of health capacity and almost 80% cite costs as the main obstacles to access to healthcare.

As of 2018, sub-Saharan Africa spent on average only 1.9% of its Gross Domestic Product (GDP) on domestic public health expenditure. The region has the second smallest public health expenditure globally, only ahead of South Asia (1.0%) and far below the global average (5.9%).

At 36.3%, domestic public health expenditure as a share of current health expenditure in sub-Saharan Africa was in 2018 notably smaller than the global level (59.5%).

Only seven countries have met the target of spending 15% of their government budget on health in at least one year since 2001, when African Union (AU) member countries made this pledge in Abuja, Nigeria.

In 2018 , no African country managed to meet this pledge.

Since the 2001 Abuja meeting where African governments committed to spending at least 15% of their annual budget on health, only seven countries met the target at least once until 2018.

The ten countries with the highest public expenditure on health are Algeria, Botswana, Cabo Verde, Lesotho, Madagascar, Namibia, São Tomé & Príncipe, Seychelles, South Africa and Tunisia, all of them spending more than 10% of their 2018 total general government expenditure.

In five countries, public spending on health is lower than 3% of the total government expenditure: Benin, Cameroon, Comoros, Eritrea and South Sudan.

As a result, in 2018, domestic private health expenditure as a share of current health expenditure in sub-Saharan Africa was more than 10 percentage points higher than the global average (51.4% and 40.3%, respectively).

In 2018, domestic public health expenditure as a share of GDP amounted to only 1.9% in sub-Saharan Africa, compared to a global average of 5.9%

Domestic public health expenditure as a share of current health expenditure has increased by only +0.6 percentage points to 36.3% between 2009-2018

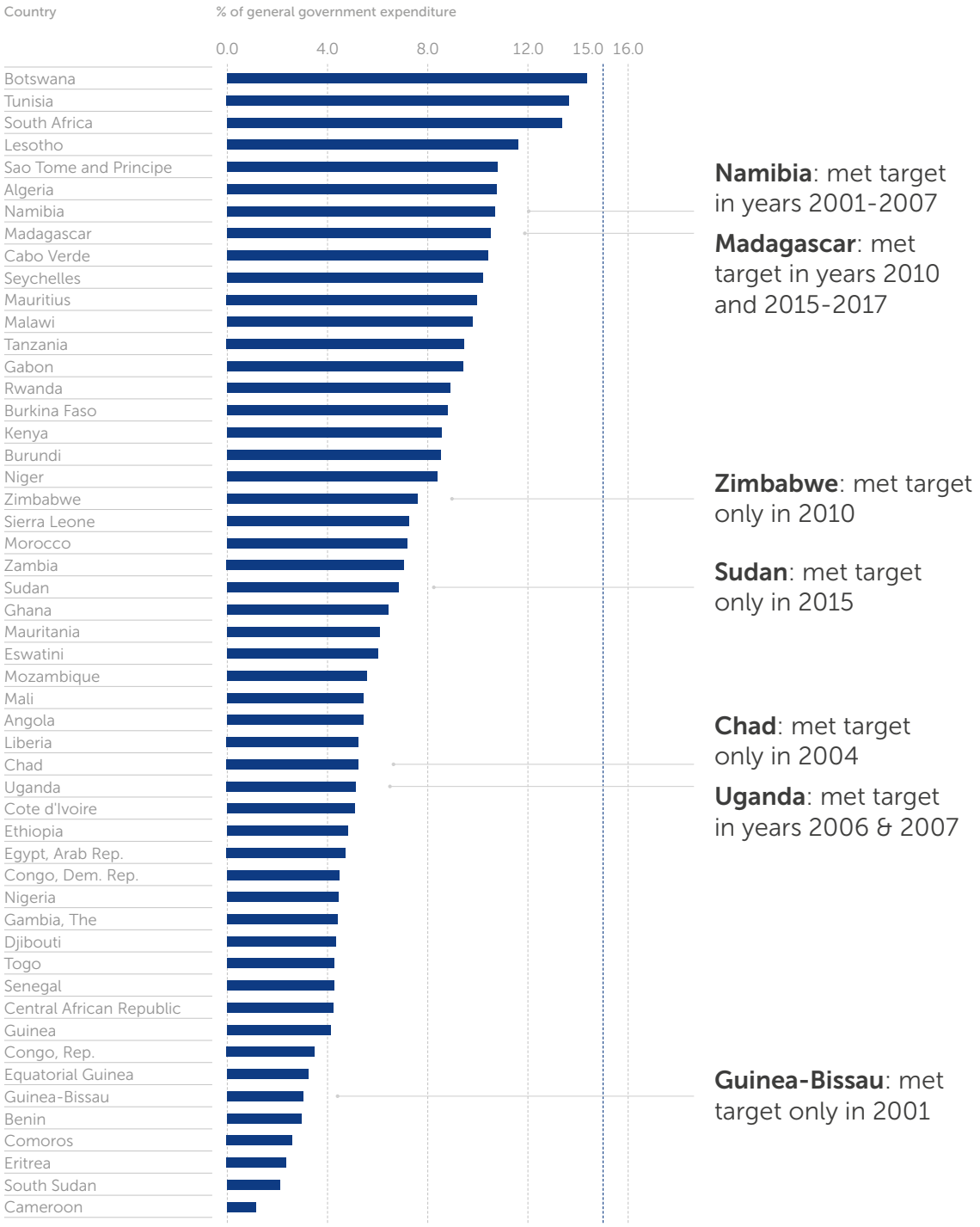
Benin, Cameroon, Comoros, Eritrea and South Sudan spent less than 3% of government expenditure on health

"The pandemic has underlined why it's so important to invest in Universal Health Coverage, based on primary healthcare and strong community engagement. Global health security begins in our local clinics and health systems."

Dr Tedros Ghebreyesus, Director-General, World Health Organization (WHO), 2021 Ibrahim Governance Weekend

In 2018, the latest available data year, no African country met the Abuja target for government spending on health

African countries: domestic general government health expenditure (2018)



Source: MIF based on World Bank

SPOTLIGHT

Brain drain is specifically challenging in Africa's health sector

Africa's brain drain is particularly pervasive in the health sector.

In 2015, the WHO African region had an average of 1.3 health workers per 1,000 population, far below the 4.5 per 1,000 required for the Sustainable Development Goals (SDGs).

In the period 2015-2030, of the estimated global health workforce shortage of 14.5 million required to achieve Universal Health Coverage (UHC) and the SDGs, Africa has the most severe health workforce shortage, estimated to reach 6.1 million workers by 2030.

In 2015, the number of Africa-trained international medical graduates (IMGs) practising in the United States (US) reached 13,584, a +27.1% increase from 2005. This is equivalent to about one African-educated physician migrating to the US per day between 2005-2015. Of this number, 86.0% were trained in Egypt, Ghana, Nigeria, and South Africa.

It costs each African country between around $21,000 and $59,000 to train a medical doctor. Annually, it is estimated that Africa loses around $2.0 billion through brain drain in the health sector.

One in ten doctors in the UK come from Africa, allowing the UK to save on average $2.7 billion on training costs, followed by the US ($846.0 million), Australia ($621.0 million) and Canada ($384.0 million). The Africa-trained doctors recruited by these four top destination countries alone have saved them $4.6 billion in training costs.

COVID-19 has exacerbated the medical brain drain. The US, Canada, Germany, and France have issued calls for foreign medical professionals, especially those working on COVID-19 issues. Some of these requests are specifically targeting Africans. For instance, following a call for applications launched by the US Department of State Bureau of Consular Affairs in late March 2020, 8,600 Egyptian doctors were accepted into the US.

20% of African-born physicians currently work in high-income countries

Africa's health workforce shortage, the worst globally, is estimated to reach 6.1 million workers by 2030

10% of doctors in the UK come from Africa, allowing the UK to save on average $2.7 billion on training costs

COVID-19 exacerbates medical brain drain with calls for foreign medical professionals specifically targeting Africans

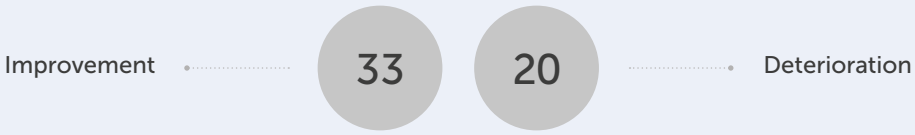
Access to Healthcare

African average

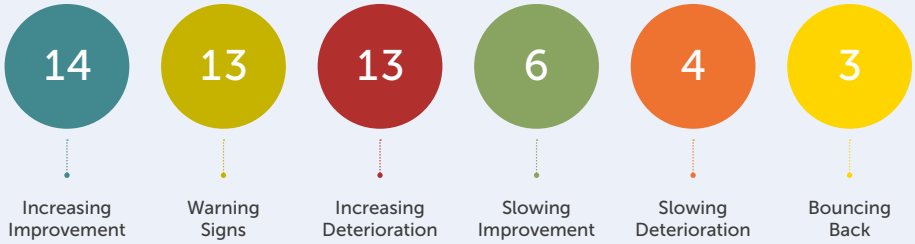
2019 score/100.0	45.5
10-year trend (2010-2019)	Improvement (+0.4)
Trend classification: 5-year trend (2015-2019) compared to 10-year trend	Warning Signs

African countries

10-year trend (2010-2019) by number of countries



Trend classification: 5-year trend (2015-2019) compared to 10-year trend by number of countries

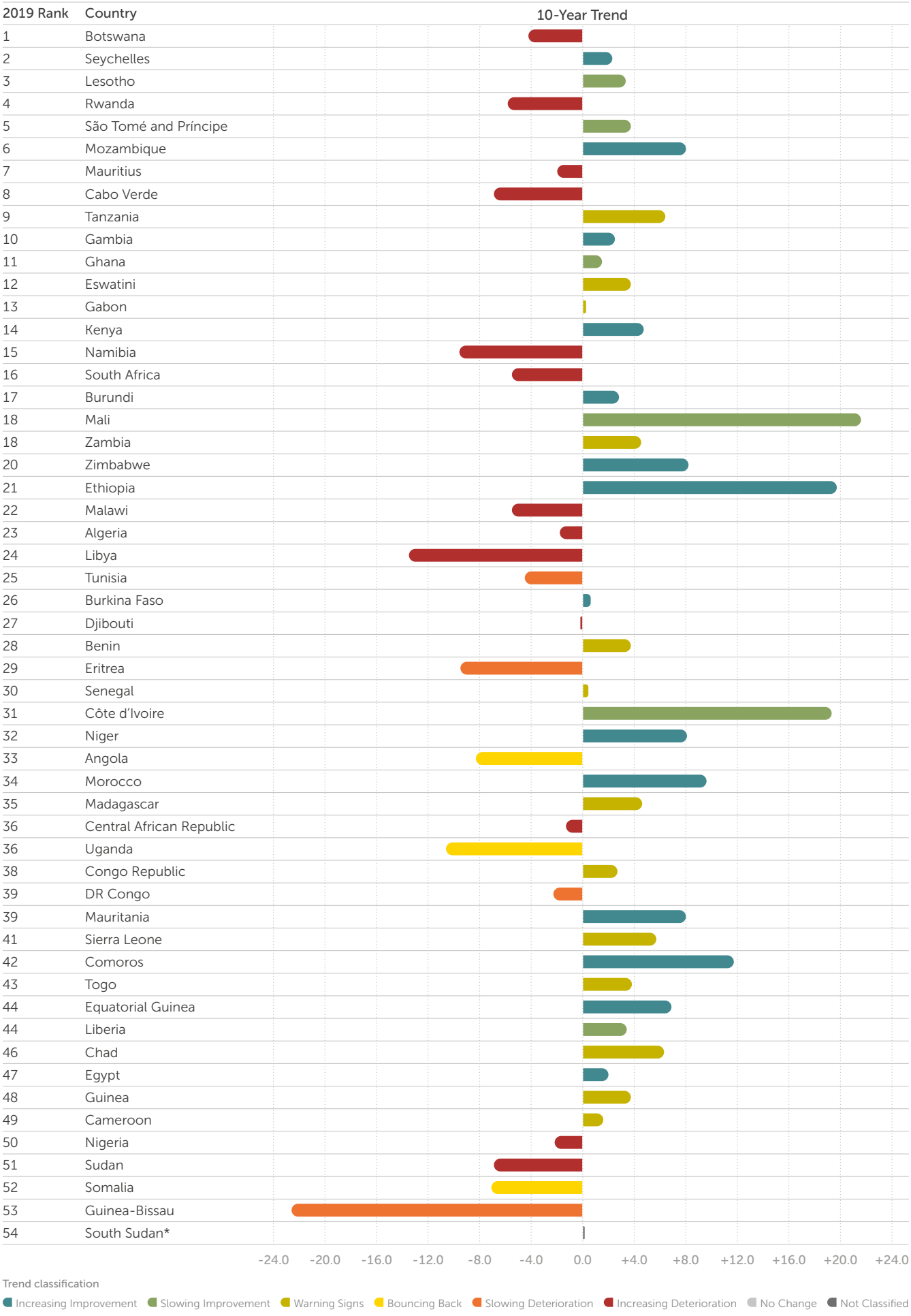


Largest Improvement	Mali
Change 2010-2019	+21.6
Score/Rank (2019)	58.6/18th
Largest Deterioration	Guinea-Bissau
Change 2010-2019	-22.6
Score/Rank (2019)	8.5/53rd

Underlying measures	Largest Improvement 2010-2019	Largest Deterioration 2010-2019
Healthcare Affordability	Mali	Guinea-Bissau
Healthcare Equality	Ethiopia	Central African Republic

*South Sudan does not have a 10-year trend or trend classification because the IIAG does not include data for the country prior to secession in 2011.

Access to Healthcare indicator: 2019 rank, 10-year trend & trend classification (2010-2019)



Access to Healthcare in the 2020 IIAG: A major stumbling block

The IIAG *Access to Healthcare* composite indicator assesses *Healthcare Affordability*, measured as the extent to which households are spending on health directly out of pocket, as well as *Healthcare Equality*, measured as the extent to which high-quality basic healthcare is guaranteed to all.

Data for the indicator are sourced from the World Health Organization (WHO) and the Varieties of Democracy (V-DEM) Institute.

With a 2019 African average score of 45.5 (out of 100.0), *Access to Healthcare* constitutes the lowest scoring indicator in the *Health* sub-category.

Even if the situation at continental level is better in 2019 than in 2010, deterioration since 2015 threatens this.

This concerning trend is driven by the fact that since 2010, improvement in *Healthcare Affordability* has been counteracted by the deterioration of *Healthcare Equality*.

African households spend less on health out-of-pocket in 2019 compared to 2010. On average, *Healthcare Affordability* has improved by +3.1 points since 2010.

But healthcare has become more unequal. On average, *Healthcare Equality* has deteriorated by -1.1 points since 2010.

Over the past five years, there has been a reversal of fortunes: *Healthcare Affordability* shows warning signs (-1.2), whereas *Healthcare Equality* bounces back (+1.1).

Highest scoring: Botswana

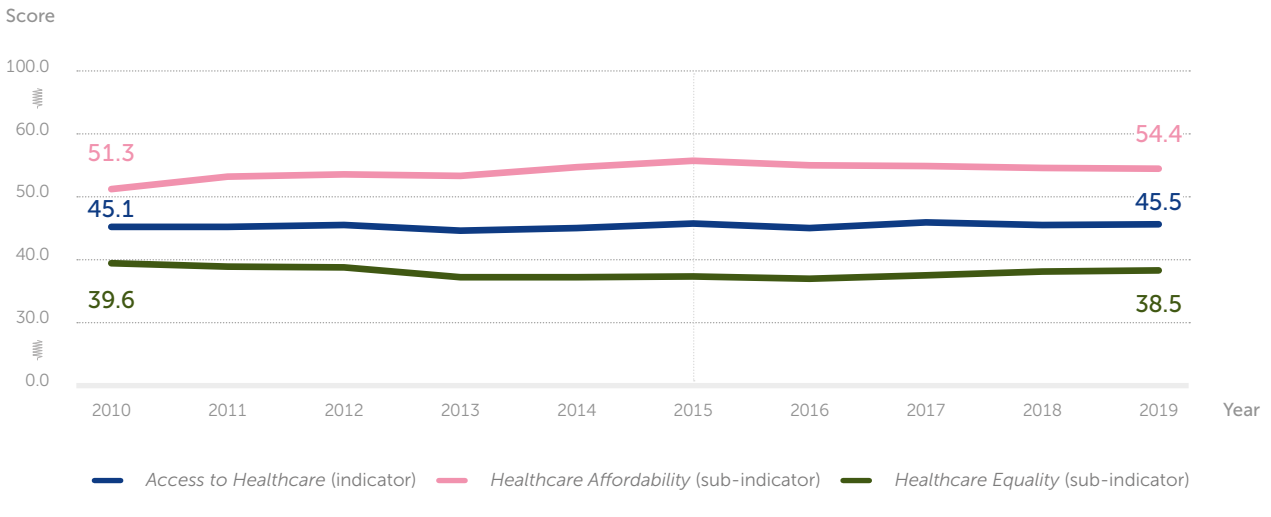
Lowest scoring: Sudan

Most improved: Mali

Most deteriorated: Guinea-Bissau

30 countries deteriorate in *Access to Healthcare* between 2015 and 2019, compared to only 20 countries over the decade

Africa: *Access to Healthcare* indicator and underlying sub-indicators (2010-2019)



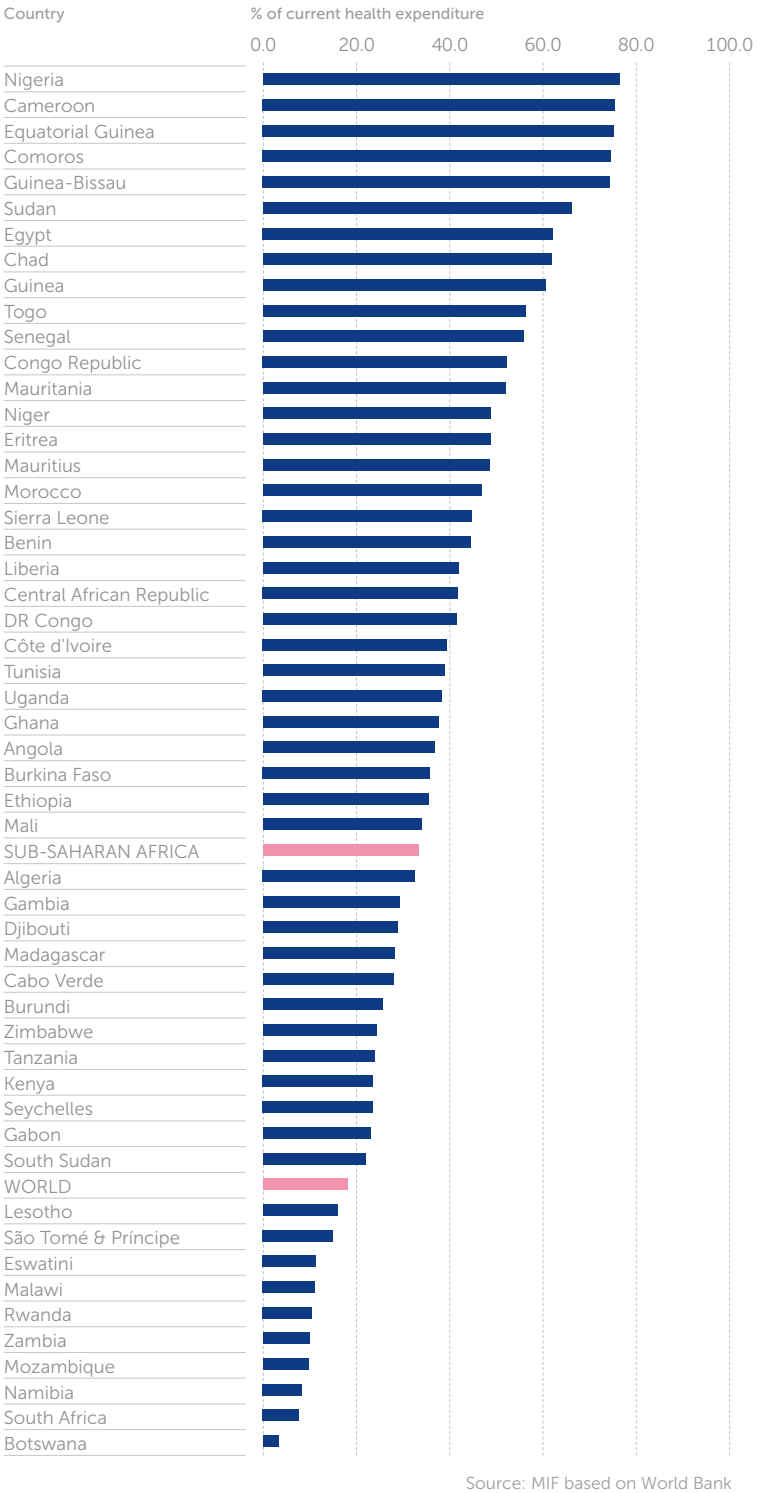
In *Access to Healthcare*, 33 countries have managed to improve since 2010. Mali (+21.6) is the most improved country, followed by Ethiopia (+19.7), Côte d'Ivoire (+19.3), Comoros (+11.7) and Morocco (+9.6).

The situation has deteriorated in 20 countries since 2010. Guinea-Bissau (-22.6) is the most deteriorated country since 2010, followed by Libya (-13.5), Uganda (-10.6), Namibia (-9.6) and Eritrea (-9.5).

Namibia (-10.6) also features in the five most deteriorated countries since 2015.

Ethiopia and Comoros also feature in the five most improved countries between 2015-2019

African countries: out-of-pocket health expenditure (2018)



Source: MIF based on World Bank

In raw data terms, out-of-pocket health expenditure as a share of current health expenditure in sub-Saharan Africa amounted to almost double the global average in 2018 (33.3% compared to 18.1%).

For 13 African countries, the share of out-of-pocket health expenditure exceeded half of their 2018 current health expenditure. Nigeria, the most populated country hosting 15.4% of Africa's population, performs the worst, followed by Cameroon, Equatorial Guinea, Comoros and Guinea-Bissau.

In 42 African countries out-of-pocket expenses on health as a share of current health expenditure are higher than the global average

SPOTLIGHT

COVID-19 is holding back the fight against other diseases and health challenges

Nearly two years after it was first detected, COVID-19 is threatening decades of progress in the fight against malaria, tuberculosis (TB) and HIV/AIDS. In Africa, the current refocusing of already limited resources on COVID-19 could lead to over a million excess deaths. According to the WHO, in May-July 2020 14 African countries experienced a more than 50% decline in average health services, ranging from the provision of skilled birth attendants to the treatment of malaria cases.

Malaria

Sub-Saharan Africa accounts for 94% of global malaria deaths, with Burkina Faso, DR Congo, Mozambique, Niger, Nigeria and Tanzania alone representing up to half of global deaths in 2019.

Fear of visiting clinics, lockdown restrictions and disruptions in the supply chain of essential malaria commodities have delayed malaria prevention campaigns as well as treatment.

The pandemic has however forged a path towards the speedy engineering and approval of vaccines, with the World Health Organization (WHO) approving and recommending the use of a new malaria vaccine for children in sub-Saharan Africa in October 2021 as well as the development of another vaccine for malaria with shown 77% efficacy in trials by the Oxford/AstraZeneca team.

Between 2019 and 2020 the tested number of people with suspected malaria improved by only 1% compared to almost 15% between 2018 and 2019

Tuberculosis

Sub-Saharan Africa accounts for 25% of the 1.4 million deaths globally resulting from TB.

Just as with malaria, the pandemic has adversely affected the tracking of TB cases as well as supply chains and budgets used for the fight against TB, resulting in millions of missed diagnoses.

According to the Global Fund, between 2019 and 2020, the number of people tested and treated for TB dropped by 18% globally; the declines were even worse for drug-resistant and extensively drug-resistant TB at 19% and 37%, respectively.

Achieving the 90% reduction of TB deaths by 2045 and not 2030 as targeted by the SDGs could cost 5 to 8 million deaths and up to $3.5 trillion in economic losses.

Between 2019 and 2020 the number of people tested and treated for TB dropped by 18% globally

HIV/AIDS

Of the 38 million people living with HIV worldwide, almost 26 million live on the African continent and 60% of the global deaths in 2019 were from sub-Saharan Africa.

Every week in Eastern and Southern Africa, 5,000 adolescent girls and young women are infected with HIV.

Just as with malaria and TB, there have been significant disruptions to the treatment and prevention campaigns as a result of the COVID-19 pandemic.

While the number of youth reached by HIV preventative programmes reached a 100% increase between 2018 and 2019, between 2019 and 2020 the number went down by - 12.1% The number of mothers receiving medicine to prevent transmitting HIV to their babies dropped by 4.5%.

The number of mothers receiving medicine to prevent transmitting HIV to their babies dropped by 4.5%

Child and maternal health

The pandemic has disrupted healthcare before, during, and immediately after childbirth, as healthcare workers previously managing preventable, treatable complications like severe bleeding and infection have been diverted to COVID-19 wards.

A meta-analysis by The Lancet on the effects of COVID-19 globally on maternal and perinatal outcomes has shown an increase in maternal deaths and depression as well as stillbirth, with the latter increasing particularly in low and middle-income countries (LMICs).

Remote consultations were less feasible in some LMICs, leading to many mothers missing out entirely on preventive antenatal care.

A coverage reduction of 39.5% in essential maternal health interventions over 6 months in LMICs could result in up to 1.2 million additional child deaths and over 55 thousand additional maternal deaths.

Mental health

Most countries with the fewest mental health professionals per 100,000 people are in Africa. Prior to the COVID-19 pandemic, mental health in Africa was a major concern with the continent underperforming on several key mental health metrics.

Less than 10% of people suffering from depression in low-resource settings have access to mental health treatment.

According to a survey of over 12,000 young people from 112 countries, with Africans representing 6.9% of survey respondents, over half of the youth have become prone to mental health problems such as anxiety and depression since COVID-19 struck.

MIF's NGN cohort also cite mental health, stress, and anxiety as some of the main health challenges on the continent

For adults, a meta-analysis of the impact of COVID-19 on mental health in Africa found than unlike in High Income Countries (HICs) and other regions, rates of depression in Africa (45%) were higher than anxiety (37%) and insomnia (28%).

In July-August 2020, the WHO sent out a survey to assess mental health services on the African continent.

Of the 28 countries that responded, all but one included mental health in their COVID-19 response plans, highlighting the growing recognition of the importance of this once neglected area of health.

→ Non-Communicable Diseases (NCDs)

NCDs such as diabetes and hypertension are on the rise on the continent and are projected to surpass communicable, maternal, neonatal, and nutritional diseases combined as the leading cause of mortality in sub-Saharan Africa by 2030.

In many countries in the region, patients with NCDs have had routine clinic services disrupted while drug pick-ups in some locations became inaccessible.

This is particularly distressing given patients with NCDs are at greater risk of developing severe complications from COVID-19 infection with case fatality ratios more than 10% higher for patients with cardiovascular disease.

COVID-19 Case Fatality Ratios are more than 10% higher for patients with cardiovascular disease

Universal Health Coverage and Pandemic Preparedness

Prof Agnes Binagwaho, Africa-Europe Foundation Health Strategy Group, Vice Chair

The COVID-19 pandemic has revealed how unprepared health systems across the globe are to respond to emergency health threats. The world went into a frenzy to procure the required materials such as personal protective equipment, sanitisers, vaccines and drugs in an attempt to curb the spread of the virus, mitigate suffering and prevent death. Yet, as of 5 November 2021, we have counted over 5 million deaths globally, nearly 220,000 of which occurred in Africa.

The majority of African countries have responded relatively better to the pandemic than on other continents, implementing known evidence-based interventions swiftly and adopting a regional approach. However, the toll on our health systems is not insignificant – stymying progress in health service delivery. Prior to the pandemic, while we were advancing towards delivering sufficient, quality health services to our populations, only 48% of people in Africa received the healthcare services that they needed according to the 2015-2017 WHO Universal Health Coverage (UHC) index of essential service coverage. The only way to ensure that we are prepared for an emergency health threat while continuing to deliver quality essential health services during that crisis is to adopt a UHC model – the provision of affordable, accessible, and quality health services to all.

First, countries need to invest in strong primary healthcare systems that serve as a reliable bridge between the healthcare system and communities. Geographic decentralisation of healthcare ensures that individuals can receive timely care near to where they live. Moreover, well trained community healthcare workers can play numerous roles such as health promotion, syndromic treatment of non-severe cases, referral of more complicated illnesses and follow up at the household level. This is especially critical during outbreaks to prevent overburdening health facilities and spreading infectious diseases.

Second, countries need to ensure that health services are of quality, affordable, and accessible. Establishing health insurance schemes that are affordable and even free of cost to the most vulnerable is a necessary step. In the absence of health threats, this allows citizens to exercise their right to healthcare regardless of their individual circumstances. An example is Rwanda's Community-Based Health Insurance program. During health threats, the affordability and accessibility of healthcare allow individuals to continue seeking care regardless of the challenges brought on by the crisis. Note that during COVID-19, individuals in many countries who could not afford to test or quarantine did not do so, threatening their own health and that of their community.

Third, countries need to protect and strengthen existing systems to prevent the disruption of essential health services during health threats. The indirect impacts of the COVID-19 pandemic were dire, with over 90% of countries reporting some level of disruption to their essential health services during the pandemic. While we have seen some evidence of restoration of service coverage in many African countries, the interruption of services, however transient, is expected to have a negative impact on health outcomes. Countries need to actively adopt and implement strategies to address both demand and supply side challenges.

Lastly, the drive towards UHC must be accompanied by the drive towards self-sufficiency. The COVID-19 pandemic has proven, once again, that Africa will be left behind unless we build the capacity to produce the medical products our population needs. Take, for instance, the difference in COVID-19 vaccination rates. Africa has fully vaccinated only 6% of its population while North America and Europe have both fully vaccinated over 50% of their population. This difference is due to the mismatch between our demand for vaccines and our contribution to the supply. Africa accounts for 25% of the global demand for vaccines but only produces 1% of the amount it consumes. Thus, if we seek to ensure availability of quality care for all, we need to produce the medical products we need.

UHC is integral to pandemic preparedness. Strengthening our primary health care systems, ensuring the affordability and accessibility of quality health services, protecting existing health systems and pushing for self-sufficiency are unavoidable tasks that we need to accomplish if we want to successfully prepare for the next pandemic. By doing so, we can prevent the failures that we saw in many countries during this health threat.

Challenge 3: Most African countries are unprepared for future pandemics

Summary

The course of the COVID-19 crisis was made worse by the fact that most countries globally, and the wealthiest countries in particular, were caught unprepared for a pandemic. The IIAG indicator measuring *Compliance with International Health Regulations (IHR)*, a WHO framework assessing country preparedness for global health emergencies, has been stagnating since 2015. At the same time, the frequency of zoonoses, human diseases or infections transmitted from animals to humans, has increased considerably. About one new disease is emerging every year, making a future new pandemic likely and pandemic preparedness a key target in preventing an outbreak from becoming another global crisis.

The COVID-19 pandemic has confirmed what many reports and experts had been saying since the 2009 H1N1 and 2014-2016 Ebola pandemics: the world is underprepared for large outbreaks of emerging infectious diseases.

The Independent Panel for Pandemic Preparedness and Response, convened by the WHO, was co-chaired by Ellen Johnson Sirleaf, former President of Liberia, and Helen Clark, former Prime Minister of New Zealand.

The main finding of the Panel is that the initial COVID-19 outbreak became a pandemic as a result of gaps and failings at every critical juncture of preparedness for, and response to, COVID-19.

Based on this, the Panel formulated seven main recommendations to ensure that a future outbreak does not become a pandemic:

1. Elevate pandemic preparedness and response to the highest level of political leadership
2. Strengthen the independence, authority and financing of the WHO
3. Invest in preparedness now to prevent the next crisis
4. Create a new agile and rapid surveillance information and alert system
5. Establish a pre-negotiated platform for tools and supplies
6. Raise new international financing for pandemic preparedness and response
7. Provide a direct line from National Pandemic coordinators to Heads of State or Government

In its 2020 report, the Global Preparedness Monitoring Board (GPMB), an independent monitoring and accountability body hosted at the WHO, emphasised the massive investment return of preparedness for global health security.

Costs of COVID-19	Investments in preparedness
Over $11 trillion, and counting, to fund the response	Additional $5 per person annually
Future loss of $10 trillion in earnings	

Source: MIF based on Global Preparedness Monitoring Board

"Africa has much to be proud of in its response to the pandemic. Leaders responded early and in a coordinated manner with swift implementation of public health measures. And when it comes to epidemics, early action is critical, there is no time to lose."

Professor Peter Piot, Director, London School of Hygiene & Tropical Medicine, 2021 Ibrahim Governance Weekend

In November 2021, the second ever special session of the WHO Health Assembly was convened to develop an international instrument on pandemic preparedness and response

COVID-19 is not an anomaly and investing in pandemic preparedness is key.

About one new disease is emerging each year. Not all have human-to-human transmission, but enough do, such as severe acute respiratory syndrome (SARS), Middle East respiratory syndrome coronavirus (MERS) and Ebola.

The frequency of zoonoses, human diseases or infections that are transmitted from animals to humans, has also increased considerably.

- About 60% of human infections are estimated to have an animal origin.
- Of all new and emerging human infectious diseases, some 75% jump species from animals to people.
- Across Africa, the risk of emergence and spread of zoonoses is rising significantly with the increasing human population and increasing demand for milk, meat and eggs due to rising urbanisation and purchasing power.

In Africa, the COVID-19 pandemic has laid bare the continent's lack of capacity when dealing with more complex health challenges that require highly qualified staff and specialised equipment, such as critical care facilities and ventilators. More generally, it has exposed the continent's insufficient human capacities and challenging infrastructure environment.

- Hospital beds and critical care: 135.2 hospital beds and 3.1 Intensive Care Unit beds per 100,000 people on average in Africa
- Ventilators: fewer than 2,000 working ventilators to serve hundreds of millions of people in public hospitals across 41 countries - 10 countries have no ventilators at all
- Human resources: 0.2 doctors and 1.0 nurses/midwives per 1,000 people
- Energy: reliable electricity in only 28% of sub-Saharan African health facilities.

Despite the structural weakness of Africa's health systems, and concerns about the reliability of death registration systems on the continent, a key factor for the relatively lower number of COVID-19 cases and death toll was undoubtedly the early and coordinated response across the continent, building on the experience from previous pandemics such as the 2013-2016 Ebola outbreak in West Africa.

In response to the first cases of COVID-19 reported on the continent, African leaders put containment measures in place speedily (although they also eased them quickly).

- Almost all African countries had some form of internal movement restriction within the first month of the first confirmed case.
- By 15 April 2020, 48 African countries had implemented five or more stringent Public Health and Social Measures (PHSMs). Of those, 36 still had them in place by 31 December 2020.
- More than half of the 23 countries that had the most stringent international travel restrictions for foreigners at the date of their first confirmed case were African.

According to Dr John Nkengasong, Director of the Africa Centres for Disease Control and Prevention (AfCDC), Africa needs a 'New Public Health Order' to be more resilient and to cope with 21st century disease threats. This New Public Health Order calls for "cross-continental and global collaboration, cooperation, and coordination", and should be based on four pillars: strengthened public health institutions; strengthened public health workforce; expanded and strengthened African manufacturing of vaccines, diagnostics, and therapeutics; and respectful, action-oriented partnerships.

"Most countries globally, including some of the wealthiest, ignored recommendations from top scientists and delayed the response to the unfolding COVID-19 pandemic... Africa's relatively lower COVID-19 cases and death toll may be because the early and coordinated response across African countries, building on the experience from previous pandemics."

President Ellen Johnson Sirleaf, Co-Chair, the Independent Panel for Pandemic Preparedness and Response, 2021 Ibrahim Governance Weekend

Compliance with International Health Regulations (IHR)

African average

2019 score/100.0	56.7
10-year trend (2010-2019)	Improvement (+15.1)
Trend classification: 5-year trend (2015-2019) compared to 10-year trend	Warning Signs

African countries

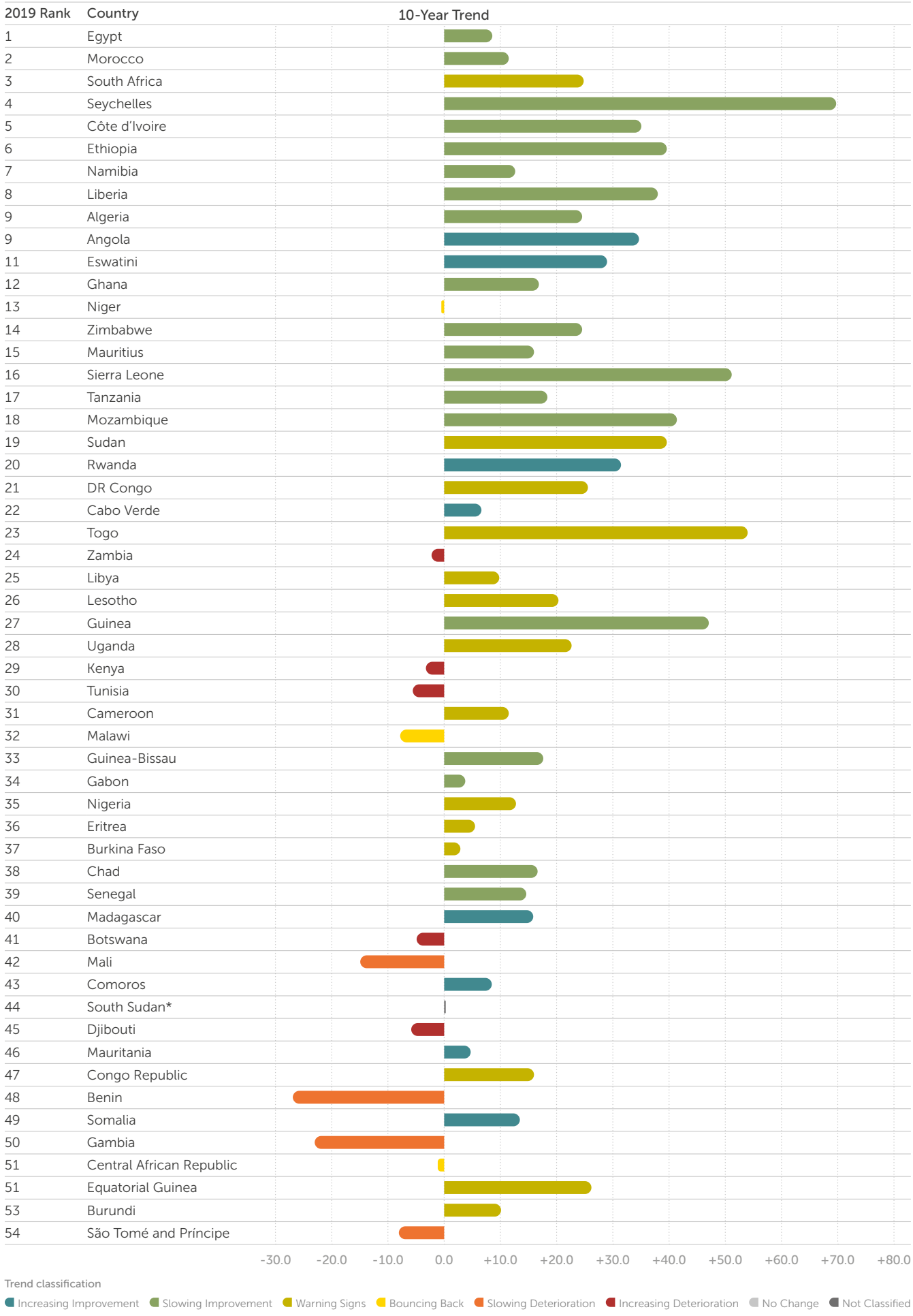
10-year trend (2010-2019) by number of countries

Trend classification: 5-year trend (2015-2019) compared to 10-year trend by number of countries

Largest Improvement	Seychelles
Change 2010-2019	+69.6
Score/Rank (2019)	86.8/4th
Largest Deterioration	Benin
Change 2010-2019	-27.0
Score/Rank (2019)	29.6/48th

*South Sudan does not have a 10-year trend or trend classification because the IIAG does not include data for the country prior to secession in 2011.

Compliance with International Health Regulations (IHR) indicator: 2019 rank, 10-year trend & trend classification (2010-2019)



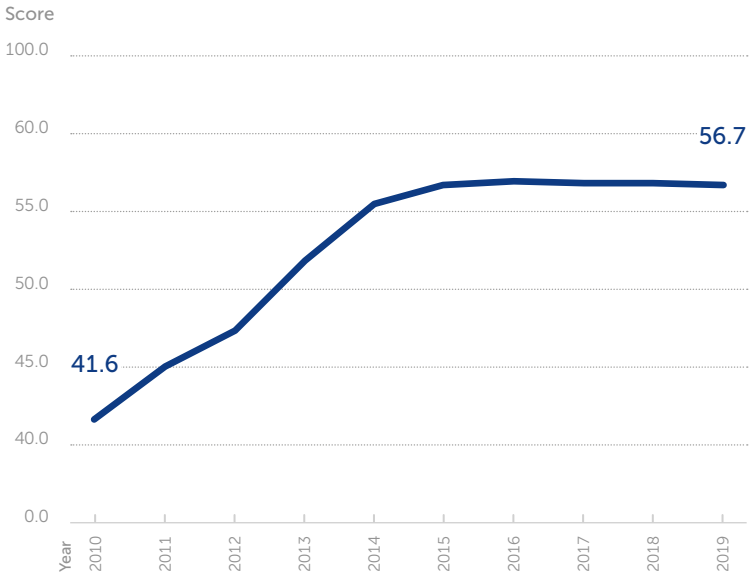
Compliance with International Health Regulations (IHR) in the 2020 IIAG: Progress since 2010, but still very low capacity

The IIAG *Compliance with International Health Regulations (IHR)* indicator assesses the level of preparedness of countries to handle international public health emergencies. It is based on the average of 13 IHR core capacity scores from the WHO's core capacity index: (1) National legislation, policy and financing; (2) Coordination and National Focal Point communications; (3) Surveillance; (4) Response; (5) Preparedness; (6) Risk communication; (7) Human resources; (8) Laboratory; (9) Points of entry; (10) Zoonotic events; (11) Food safety; (12) Chemical events; (13) Radio nuclear emergencies.

The data are sourced from the World Health Organization (WHO).

The 2019 African average score for the *Compliance with International Health Regulations (IHR)* indicator amounts to 56.7 (out of 100.0), constituting the third lowest scoring indicator in the *Health* sub-category.

Africa: *Compliance with International Health Regulations (IHR)* indicator (2010-2019)



Even though the African average score has positively increased (+15.1 points) between 2010 and 2019, progress has stagnated with no change in score since 2015.

41 countries improve their performance in *Compliance with International Health Regulations (IHR)* over the ten-year period 2010-2019. Seychelles (+69.6) is the most improved country followed by Togo (+53.9), Sierra Leone (+51.1), Guinea (+47.0) and Mozambique (+41.3).

Of the 12 countries registering decline between 2010 and 2019, Benin (-27.0) is the most deteriorated, followed by Gambia (-23.1), Mali (-15.0), São Tomé and Príncipe (-8.1) and Malawi (-7.9).

Highest scoring: Egypt

Lowest scoring: São Tomé and Príncipe

Most improved: Seychelles

Most deteriorated: Benin

Of the 41 countries improving in *Compliance with International Health Regulations (IHR)* over the decade, 14 countries experience a deterioration since 2015

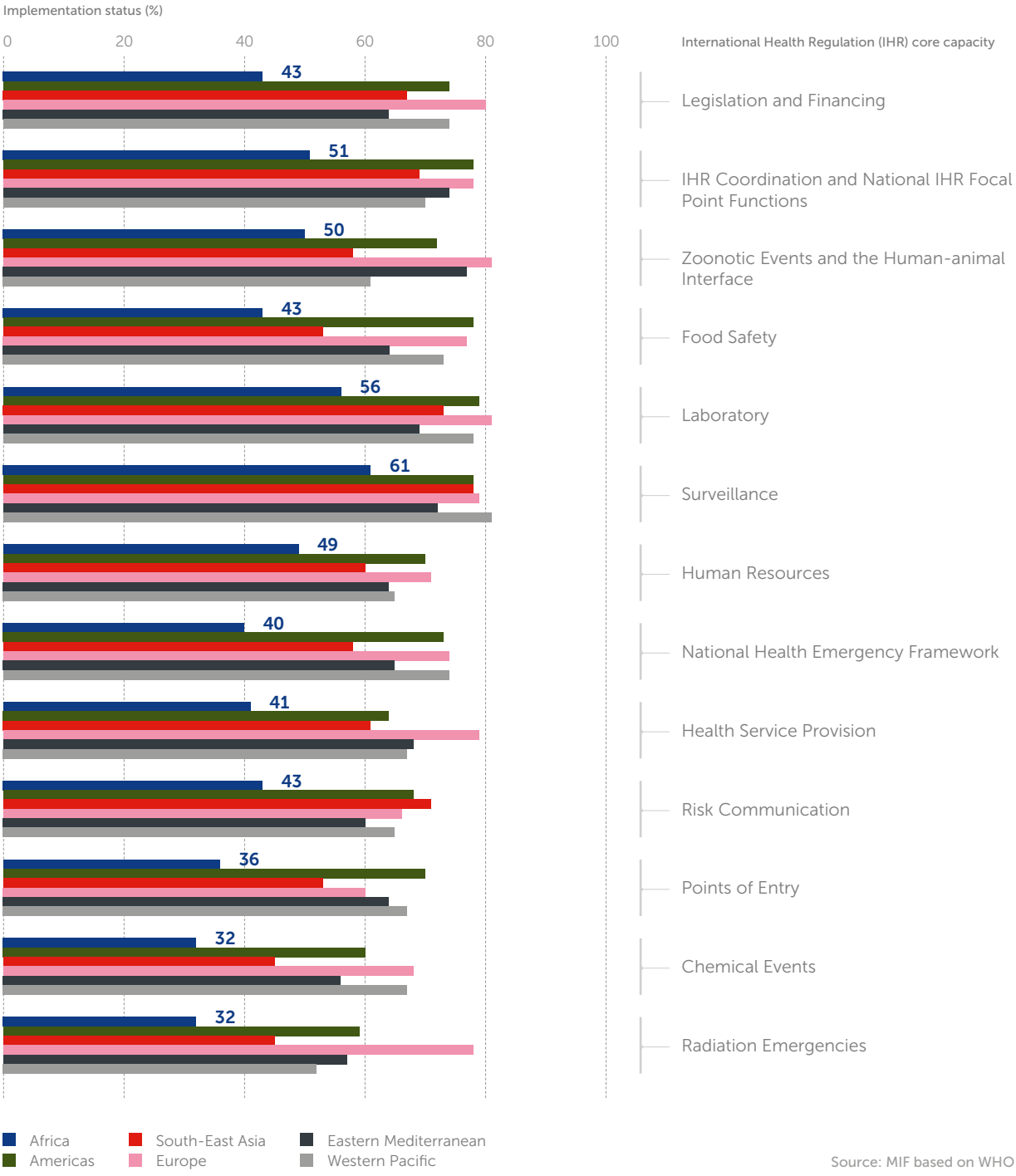
In raw data terms, the International Health Regulations (IHR) Monitoring and Evaluation Framework (MEF), developed by the World Health Organization (WHO) since 2010, shows that Africa has the lowest capacity region globally in all 13 IHR core capacities*.

Africa's lowest average performance is in capacity to respond to Chemical Events and Radiation Emergencies (32% in both), and its highest capacity is in Surveillance (61%) and Laboratory (56%).

*IHR core capacities are the public health capacities required to detect, assess, notify and report events, and respond to public health risks and emergencies of national and international concern.

Africa performs worse than all other world regions in all 13 IHR core capacities

World regions: International Health Regulations core capacities (2019)



Source: MIF based on WHO

SPOTLIGHT

To achieve Africa's vaccine autonomy, action needs to start now

Africa accounts for 25% of global vaccine demand but produces less than 0.1% of the world's supply

Local manufacturing is almost non-existent: about 99% of Africa's routine vaccines are imported.

Only 10 local vaccine value chain players are currently operating in Africa, representing about 30% of overall vaccine value chain players on the continent.

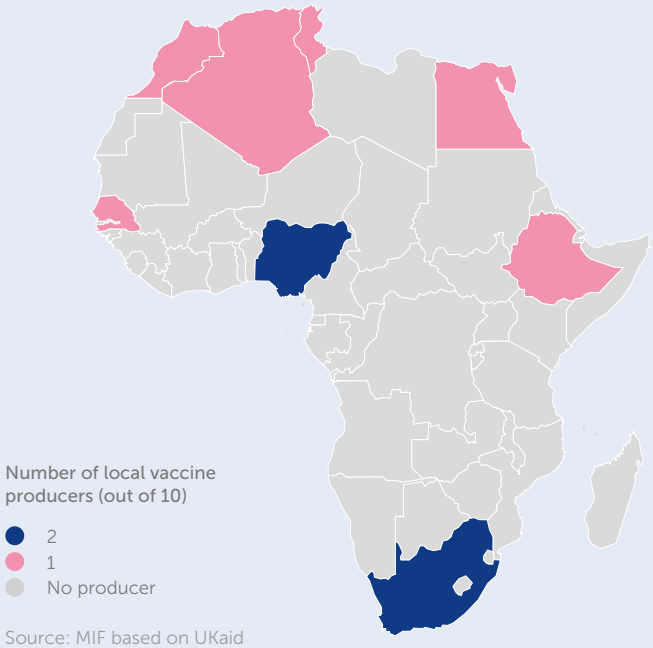
The majority engage in downstream steps (fill and finish, packaging and labelling, import to distribute).

Only six have current capacity in some degree of drug substance manufacturing, but mostly still on a very small scale: Biovac (South Africa), Biovaccines (Nigeria), Ethiopian Public Health Institute, Institut Pasteur Algeria, Institut Pasteur Dakar (Senegal) and Institut Pasteur Tunis (Tunisia).

Research and Development (R&D) capacities are very limited on the continent and only located in South Africa and Nigeria.

10 African vaccine value chain players

African countries: local vaccine value chain players (2020)



Source: MIF based on UKaid

The ten local vaccine value chain players are located in Nigeria (2), South Africa (2), Algeria (1), Egypt (1), Ethiopia (1), Morocco (1), Senegal (1) and Tunisia (1).

Today, 99% of the routine vaccines Africa needs are imported, making it a market opportunity for vaccine production

About 70% of global vaccine drug substance manufacturing sites are located in Western Europe (40%) and North America (30%)

Global vaccine production is mostly concentrated in Asia with about 42% of vaccines produced by three manufacturers (Bharat Biotech, BioMed and the Serum Institute of India)

Despite this, there is a large opportunity for growth with Africa already currently representing about 25% of global vaccine demand. Existing manufacturing capabilities for related products (animal vaccines, injectables, monoclonal antibodies) can be harnessed for African vaccine manufacturing.

This striking unbalance has led the African Union (AU) to co-host with the Africa Centres for Disease Control and Prevention (AfCDC) an emergency Summit on 12-13 April 2021, focusing on vaccine manufacturing in Africa.

The major outcome of the Summit is the launch of the **Partnership for African Vaccine Manufacturing (PAVM)** to deal with the continent's general vaccine needs, with the following roadmap:

- Vaccines for known African pathogens: local production of 100% of vaccines needed for at least 1-3 emerging diseases such as Ebola, Lassa fever and Rift Valley fever by 2040.
- Vaccines for unknown global pathogens: local capacity to manufacture 30-60% of vaccines needed for a pandemic by 2040.
- Routine immunisation: local capacity for 60% of annual production of routine vaccines needed.

Before that, the **African Vaccine Acquisition Task Team (AVATT)** was established in August 2020 as the entity responsible for leading the continent's COVID-19 vaccination strategy.

- The direct acquisition of vaccines by African countries through the AVATT initiative is part of the continental objective to vaccinate a minimum of 60% of the African population. In a historic COVID-19 procurement Agreement signed on 28 March 2021, African countries now have access to 400 million doses of the Johnson & Johnson single-shot COVID-19 vaccine.
- When it comes to the manufacturing of vaccines, AVATT can also play a big role in building capacities via institutionalising and leveraging pooled demand arrangements created for the procurement of COVID-19 vaccines on the continent.

Recent developments in vaccine manufacturing in Africa

June 2021: US Development Finance Corporation together with World Bank Group, Germany and France announced a joint investment plan to enable a South African company (Aspen Pharmacare) to ramp up manufacturing capacity and produce more than 500 million doses of the Johnson & Johnson COVID-19 vaccine by the end of 2022.

July 2021: The Medicine Patents Pool (MPP), a newly created consortium including the AfCDC and WHO among other partners, aims at establishing a South African messenger RNA (mRNA) technology transfer hub.

August 2021: Senegal and Rwanda signed an agreement with a German company, BioNTech, for malaria and TB vaccine production. BioNTech, which developed the Pfizer BioNTech COVID-19 vaccine, is working with the Institut Pasteur in Dakar (Senegal) and the Rwandan government to start construction of its first start-to-finish factories to produce mRNA vaccines in Africa in mid-2022.

September 2021: Under the deal with the Chinese pharmaceutical company Sinovac signed in September 2021, Egypt would become the biggest vaccine producer in the Middle East & Africa, with a factory in Cairo reportedly planning to produce more than 200 million COVID-19 vaccine doses per year to cover national needs and a second factory with a capacity of 3 million doses per day to be exported within Africa.

October 2021: Moderna announced an investment of up to $500 million to build an mRNA manufacturing plant in Africa within two to four years with the goal of producing 500 million doses of its COVID-19 vaccine and other jabs each year.

Intellectual property rights and technology transfers

The TRIPS framework (Trade-Related Aspects of Intellectual Property) of the World Trade Organization's (WTO) regulates trade-related intellectual property matters, including patents. To increase access to COVID-19 vaccines, in October 2020 South Africa and India proposed a temporary waiver of TRIPS patent rights to allow wider production of COVID-19 vaccines and other medical products. In May 2021 the United States backed the proposal, however most developed countries are still opposing the waiver under the allegation that most of the world's developing countries do not have adequate manufacturing capacity for COVID-19 vaccines yet. While the WTO's 12th Ministerial Meeting was postponed from 30 November 2021 to March 2022 due to the Omicron variant emergency, the WTO's Council for TRIPS remains engaged on the matter in various configurations. Since the waiver proposal, 32 formal or informal Council for TRIPS meetings took place.

Two alternatives to the TRIPS waiver are already possible within current provisions:

- Voluntary licensing agreements (VLAs) enable a patent holder to allow others to manufacture, import, and/or distribute its patented products.
- Compulsory licenses (CLs) enable governments to allow others to manufacture, import, and/or distribute patented products without the consent of the patent owner.

However, historically the use of CLs often faced backlash, including threats of sanctions. Moreover, TRIPS-compliant compulsory licenses on patents do not extend to the additional intellectual property rights (trade secrets, regulatory data, copyright and industrial design) necessary for COVID-19 vaccine production, which are covered by the TRIPS waiver.

Team Europe Initiative on Manufacturing and Access to Vaccines in Africa: a Key Pillar of the 2022 AU-EU Summit

Martin Seychell, DG INTPA Deputy Director General, European Commission

The African Union has set an ambitious goal to produce locally 60% of the vaccines needed in the continent by 2040. In response to the call made by African leaders to boost local pharmaceutical production, at the Global Health Summit of 21 May in Rome the President of the European Commission, Ursula von der Leyen, announced the Team Europe initiative (TEI) on Manufacturing and Access to Vaccines, Medicines and Health Technologies (MAV+) in Africa. This will become a major deliverable for the African Union – European Union Summit in early 2022.

The Team Europe initiative is comprehensive, sustainable and designed for the long run. It aims to provide comprehensive support ("360° package") to African partners to tackle all barriers to manufacturing and access to health products and technologies and works at three levels: continental, regional and national. It is backed by €1 billion from the European Union (EU) budget and the European development finance institutions such as the European Investment Bank. This amount will be further enhanced by contributions from Member States and is subject to programming in the next few years.

The solution aims at strengthening the African pharmaceutical system and the regional manufacturing capacities to facilitate access to quality, safe, effective and affordable essential vaccines, medicines and health technologies for all. In a coordinated effort, it will leverage resources from various services of the European Commission, European financing institutions and EU Member States. Integrated, multi-layered and comprehensive support packages will tackle barriers to manufacturing and access to health products and technologies in Africa from different angles, and will place the continent's own actors and institutions at its heart. Following a 360-degree approach, it will encompass support under three dimensions: 1) supply side (manufacturing), 2) demand side (market creation) and the 3) enabling environment (improving regulation and governance of pharmaceutical products, including coherent national policies that provide the right incentives; promoting human capital development; supply chain management and integrity; research and scientific cooperation).

To ensure coordination, aid efficiency and innovative partnerships, the European Commission works in a synergistic fashion with the AU-led Partnerships for African Vaccine Manufacturing (PAVM), the COVAX Manufacturing Task Force, the Gates Foundation, and other interested parties.

At the country level, bilateral support is being mobilised for Senegal, South Africa and Rwanda in the context of the COVID-19 pandemic, expanding existing capacities (viral vector) and establishing new ones (for mRNA). Discussions involve several international partners (notably IFC, US). Other countries like Ghana are advancing their plans. The Commission is also following opportunities in other countries. At the continental level, initial support will include: regulatory convergence, harmonisation and use of reliance mechanisms (e.g. in the context of the African Medicines Agency); technology transfer and innovation for local production; strategic purchasing, demand consolidation; coordination and programme management. Regional programming will also support a digital solution for supply chain integrity which in turn will help tackle falsified and counterfeit products.

It represents an opportunity to target several development objectives (SDG 3, SDG 9, SDG 17), stimulate growth and decent jobs, facilitate trade, diversify global value chains, engage with the private sector –mobilising its technical expertise and financial power–, and reinforce scientific and diplomatic ties with partner countries while advancing universal health coverage (UHC) and human development.

Chapter 02. Society: Education, gender equality and civic freedoms threatened by COVID-19 fallout

Challenge 4: In sub-Saharan Africa, being out of school means being out of learning

Summary

The 2020 IIAG shows that over the decade (2010-2019) the continent has progressed in education enrolment, completion and equality but regressed in education quality. School closures due to the pandemic exacerbated the underlying learning crisis, given the scarcity of remote learning tools, amplified by low digital access and a lack of devices. Higher dropouts are also linked to extended school closures, putting at risk gains made over the last decade in education enrolment and completion. This is of particular concern for girls and young women and is set to have wider implications for the prospects of Africa's youth, the continent's strongest asset. Fallouts in education will impact employability in a labour market where already more than 90% of young people work in the informal sector and where youth unemployment rates are high and have been impacted even further by the economic impact of the pandemic.

A learning crisis was already affecting sub-Saharan Africa before the COVID-19 crisis.

Students' minimum proficiency levels in sub-Saharan Africa were the lowest globally pre-pandemic, with a learning deprivation gap of around 20%, double the global average rate.

The impact of COVID-19 will worsen this situation, as sub-Saharan Africa is likely to see the largest increase in both the learning deprivation gap and in learning deprivation severity*.

Studies in Ethiopia, Kenya and South Africa estimate learning gains in 2020 to be only about 30% to 50% of expected gains in a non-pandemic scenario.

23 low-income countries in Africa could lose an average of 0.5 learning-adjusted years of schooling, dropping to an average of 3.8 years.

Extended school closures due to COVID-19 reached peaks of more than a year in some African countries.

On average, schools in Africa were closed or partially closed for more than 30 weeks between March 2020 and September 2021, slightly under the global average of 35 weeks.

With 77 weeks, Uganda had the longest school closures on the continent, followed by Libya (58 weeks) and Eswatini and Ghana (57 weeks each).

Students' minimum proficiency levels in sub-Saharan Africa are already the lowest in the world

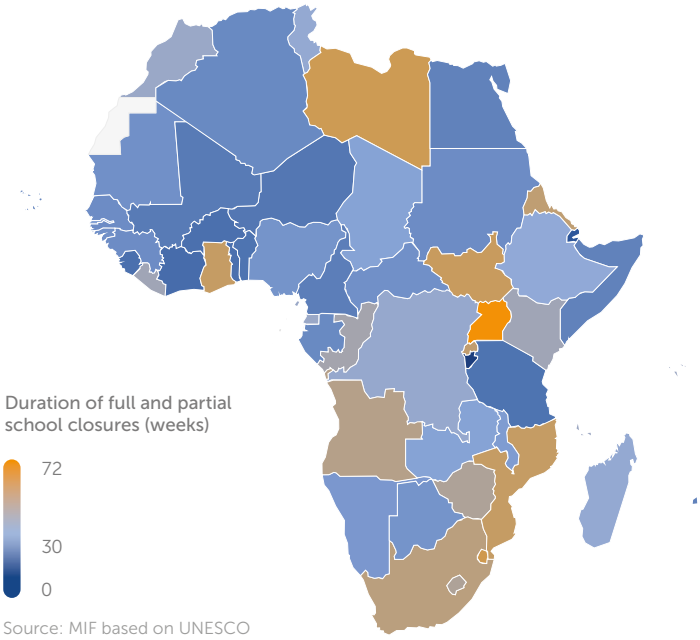
"Although it is relatively easy to observe the number of kids who aren't going to school, or the number of schools that have shut their doors, it's much harder to quantify how far children are falling behind on their learning."

Laurence Chandy, Director of Global Insight & Policy, UNICEF, Ibrahim Governance Weekend 2021

* The learning deprivation gap means the average distance of a learning deprived child to the minimum reading proficiency level. Learning deprivation severity means the inequality among the learning deprived children.

Schools in Africa were closed for more than 30 weeks on average, the longest closures being in Uganda, Libya, Eswatini and Ghana

African countries: duration of school closures
(March 2020 - September 2021)



According to Save the Children, seven of the eight countries where school systems are at an extreme risk are in Africa: DR Congo, Libya, Mali, Nigeria, Somalia, South Sudan and Sudan.

The shortfall in adequate remote learning opportunities and the digital divide exacerbated the impact of school closures, further aggravating the pre-existing learning crisis.

According to United Nations Educational, Scientific and Cultural Organization (UNESCO) and the International Telecommunication Union (ITU), 89% of learners in sub-Saharan Africa do not have access to household computers, 82% lack internet access and at least 20 million live in areas not covered by a mobile network.

Around 94% of students from pre-primary to upper secondary school in sub-Saharan Africa are unlikely to be reached online for learning.

Almost 50% of children in sub-Saharan Africa are unlikely to be reached by remote learning, such as radio, TV or online classes.

Almost 50% of children in sub-Saharan Africa are unlikely to be reached by remote learning

Around 94% of students from pre-primary to upper secondary school in sub-Saharan Africa are unlikely to be reached online for learning

School closures can lead to increased school dropouts.

Nine African countries (Chad, Côte d'Ivoire, Guinea, Liberia, Mali, Mauritania, Niger, Nigeria, Senegal) are classified by Save the Children as having an extreme risk of a rise in out-of-school children and learning inequalities. Twelve additional countries feature in the high-risk classification: Angola, Benin, Burundi, Cameroon, DR Congo, Ethiopia, Gambia, Rwanda, Sierra Leone, Sudan, Uganda, Tanzania.

The situation tends to be worse for girls, setting back years of hard-won progress.

Girls are often the first to be pulled out of school to help alleviate domestic burdens and are also less likely to benefit from remote learning.

Approximately one million girls in sub-Saharan Africa may never return to school due to becoming pregnant during COVID-19 school closures.

Decreased food security is another fallout of school closures as millions of children in Africa rely on school meals as their main source of nutrition. At the peak of school closures during April 2020, more than 65 million children in Africa missed out on school meals.

"The pandemic has reversed many of the development gains and made our task of achieving the SDGs by 2030 even more difficult. (...) school closures and digital divides are jeopardising hard-fought gains in learning (...)"

Amina J. Mohammed, Deputy Secretary General, United Nations, Ibrahim Governance Weekend 2021

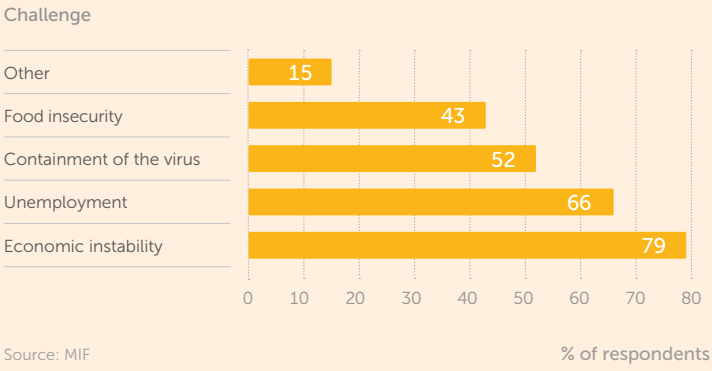
SPOTLIGHT

Youth prospects are shrinking further

The learning crisis is affecting Africa's youth at a time when they are already facing bleak employment prospects. Already in a state of emergency before COVID-19, the pandemic has made youth unemployment worse. In June 2020, MIF surveyed its Now Generation Network (NGN) to examine what COVID-19 means to young people in Africa. Results of the survey show that for African youth, economic challenges are of greater concern than health challenges, with economic instability and unemployment being the two biggest challenges reported.

For Africa's youth the economic impact of COVID-19 weighs heavier than the health impact

Now Generation Network: biggest challenge of countries during COVID-19 (June 2020)



Source: MIF

Young people are at a higher risk of losing their jobs due to COVID-19 because a disproportionate number of them work in the informal sector. They face greater difficulty in landing jobs, while good jobs are even rarer, post-COVID-19. Marginalised youth groups, including young Africans living with disabilities, refugees or displaced youth are now facing challenges due to COVID-19 as well as previously existing obstacles.

In the MIF Forum Reports of 2017 and 2019, it was repeatedly highlighted that youth is Africa's largest asset but warned that poor economic prospects combined with political disenfranchisement could turn youth into a destabilising force. This may drive them to irregular migration or extremist and criminal activities.

The AU estimates that approximately 20 million jobs may be lost in Africa as a result of COVID-19

Education

African average

2019 score/100.0	49.3
10-year trend (2010-2019)	Improvement (+1.7)
Trend classification: 5-year trend (2015-2019) compared to 10-year trend	Slowing Improvement

African countries

10-year trend (2010-2019) by number of countries

Trend classification: 5-year trend (2015-2019) compared to 10-year trend by number of countries

Largest Improvement	Burundi
Change 2010-2019	+10.2
Score/Rank (2019)	52.7/23rd
Largest Deterioration	Libya
Change 2010-2019	-15.3
Score/Rank (2019)	48.2/31st

Underlying measures	Largest Improvement (2010-2019)	Largest Deterioration (2010-2019)
Equality in Education	Mali	Guinea-Bissau
Education Enrolment	Morocco	Liberia
Education Completion	Niger	Tanzania
Human Resources in Education	Kenya	Guinea
Education Quality	Togo	Niger

*South Sudan does not have a 10-year trend or trend classification because the IIAG does not include data for the country prior to secession in 2011.

Education sub-category: 2019 rank, 10-year trend & trend classification (2010-2019)

2019 Rank	Country
1	Mauritius
2	Seychelles
3	Algeria
4	Tunisia
5	Cabo Verde
6	Botswana
7	Morocco
8	Rwanda
9	Kenya
10	Ghana
11	Lesotho
12	Namibia
13	Togo
14	Egypt
15	Benin
15	South Africa
15	Zimbabwe
18	Gambia
19	Comoros
20	São Tomé and Príncipe
21	Eswatini
22	Cameroon
23	Burundi
24	Tanzania
25	Gabon
26	Malawi
27	Zambia
28	Sierra Leone
29	Senegal
30	Liberia
31	Libya
32	Uganda
33	Côte d'Ivoire
34	Congo Republic
34	DR Congo
36	Djibouti
37	Mauritania
38	Mozambique
39	Burkina Faso
39	Ethiopia
41	Mali
42	Equatorial Guinea
43	Madagascar
44	Guinea
45	Nigeria
46	Angola
47	Guinea-Bissau
48	Niger
49	Sudan
50	Eritrea
51	Chad
52	South Sudan*
53	Central African Republic
54	Somalia

Education in the 2020 IIAG: Deterioration in *Education Quality* since 2010

The IIAG *Education* sub-category assesses equality and gender parity in education, education enrolment and completion, human resources in education, as well as education quality and the alignment with market needs.

Data for the sub-category are sourced from the Bertelsmann Stiftung (BS), the United Nations Development Programme (UNDP), the United Nations Educational, Scientific and Cultural Organization (UNESCO), the Varieties of Democracy (V-DEM) Institute, the World Bank (WB) and the World Economic Forum (WEF).

The African average score in 2019 for the *Education* sub-category is 49.3 (out of 100.0), the seventh highest scoring of the 16 sub-categories.

The continent has on average improved in *Education* since 2010, but the pace of progress has slowed down since 2015.

Progress has been driven by increased human resources, enrolment rates and completion levels, as well as more equal access to education and improved gender parity.

However, quality of education - measured as the delivery of high-quality education, the support for research and development and the alignment of the education system with the needs of a competitive economy - is an area of concern: *Education Quality* is the seventh most deteriorated IIAG indicator (out of 79) over the ten-year period with 30 countries declining.

Highest scoring: Mauritius

Lowest scoring: Somalia

Human Resources in Education: 7th highest scoring IIAG indicator and 9th most improved since 2010

Education Enrolment: 7th lowest scoring IIAG indicator in 2019

Education Quality: 7th most deteriorated IIAG indicator since 2010

Since 2010, 39 countries have improved in *Education* while 13 have deteriorated.

Burundi (+10.2) is the most improved country in *Education* over the decade, followed by Burkina Faso (+10.0), Benin (+9.7), Côte d'Ivoire (+9.6) and Sierra Leone (+9.1).

All these countries have improved across all areas of education as measured by the IIAG, apart from Benin which has seen its education quality deteriorate. Sierra Leone is the only country sustaining its improvement in all areas of education over both the ten- and five-year period. However, Burkina Faso, Côte d'Ivoire and Sierra Leone still sit in the lower half of the ranking table in 2019.

Libya (-15.3) recorded the largest decline in *Education* due to declined equality in and quality of education, as well as lower completion rates. Eritrea (-8.7), Nigeria (-8.1), Guinea-Bissau (-6.7) and Tunisia (-4.8) follow Libya with their respective declines.

Eritrea is the only country on the continent that declined in all five areas of education while Libya also declined in all indicators for which it has data (3 out of 5). Nigeria's and Tunisia's deterioration has been driven by lower education quality and Guinea-Bissau's by less equal access to education.

Guinea-Bissau is the most declined country for *Equality in Education* and the second lowest scoring after South Sudan. Mali has made the most progress, gaining 26 ranks and sitting at 21st place in 2019.

Enrolment rates have fallen the most in Liberia, most worryingly in pre-primary and primary education, with the country going from ranking 5th in 2010 to 17th place in 2019.

Kenya has seen the largest improvement in its human resources for education, going from the bottom ten in 2010 to ranking 23rd in 2019, while Guinea has declined the most.

Of the 30 countries that have declined in *Education Quality*, 12 have improved in all other indicators. This divergence is particularly concerning in Central African Republic, Chad, Gambia, Niger and Sudan that among these countries have seen the biggest declines in *Education Quality*.

Most improved: Burundi
Most declined: Libya

Since 2010, Morocco recorded the largest improvement in enrolment rates, in particular in tertiary education, reaching 4th rank in 2019

Niger has made the most progress in *Education Completion* but still ranks 44th for this indicator in 2019. Tanzania has declined the most, falling 20 ranks to 40th in the table

Five countries receive the lowest possible score of 0.0 for *Education Quality*: Central African Republic, Eritrea, Niger, Somalia, South Sudan

Challenge 5: Women and girls bear the brunt of COVID-19 impact

Summary

According to the 2020 IIAG, gender equality in Africa has started to follow a positive trajectory since 2015, while still lower in 2019 than in 2010. But these signs of progress are now being put at risk by the severe consequences of the pandemic for women's health, economic and social situation. The worsening legal situation regarding gender-based violence on the continent is an area of particular concern already outlined by the 2020 IIAG. Considering the rise in gender-based violence during the COVID-19 pandemic, it must remain a focus.

The fallout of the pandemic is aggravated for women and girls due to the intensification of existing intersecting vulnerabilities and inequalities, more prominently for women and girls in rural areas, or those of lower socioeconomic status or with disabilities.

Women are severely impacted by the economic and financial consequences of the pandemic, with approximately 92% of sub-Saharan African women working in the informal sector with very limited social protection.

Due to COVID-19, women have also taken on more unpaid domestic care work than men. Across nine African countries, on average almost 10% more women reported an increase in time spent on at least one unpaid domestic activity since the start of the pandemic compared to men.

At the same time, women are under-represented in COVID-19 task forces accounting for only 19% of task force members in Africa.

Food security is a major challenge for women and girls due to decreasing incomes. The closure of markets, as well as socio-cultural practices in households affect the quality and quantity of food they consume during crises situations such as COVID-19.

Stay-at-home orders and reduced access to support and emergency services have exposed girls and women to increased levels of sexual and gender-based violence (SGBV).

COVID-19 has already reversed progress in maternal care and childcare, due to restricted maternal, child, sexual and reproductive health services. According to a WHO analysis of 22 African countries, between February and July 2020, the maternal mortality rate compared to the same period in the previous year increased in ten countries with the largest increases recorded in Comoros, Mali, Senegal and South Africa.

Around 92% of women in sub-Saharan Africa are working in the informal sector with very limited social protection

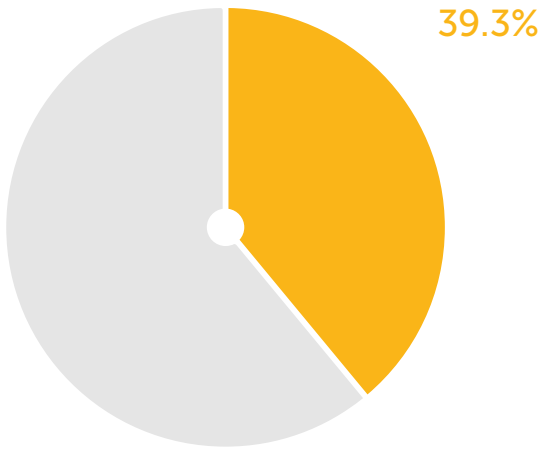
According to surveys in Eswatini, South Africa and Uganda, at least 70% of women have felt an increase in violence since the start of the pandemic

The majority of COVID-19 mitigation efforts by African countries are not gender-sensitive.

According to UNDP's COVID-19 Global Gender Response Tracker, about 80% of African countries (43 of 54 countries) have established at least one gender-sensitive measure in their COVID-19 response, but less than half (39%) of the total 539 COVID-19 measures on the continent are gender-sensitive.

The majority of COVID-19 mitigation measures by African countries are not gender-sensitive

Africa: share of gender-sensitive COVID-19 measures (2021)



Source: MIF based on UNDP

"For the first time in two decades, (...) progress towards gender equality might be pushed back a generation."

Amina J. Mohammed, Deputy Secretary General, United Nations, Ibrahim Governance Weekend 2021

Gender

African average

2019 score/100.0	50.2
10-year trend (2010-2019)	Deterioration (-0.2)
Trend classification: 5-year trend (2015-2019) compared to 10-year trend	Bouncing Back

African countries

10-year trend (2010-2019) by number of countries

Trend classification: 5-year trend (2015-2019) compared to 10-year trend by number of countries

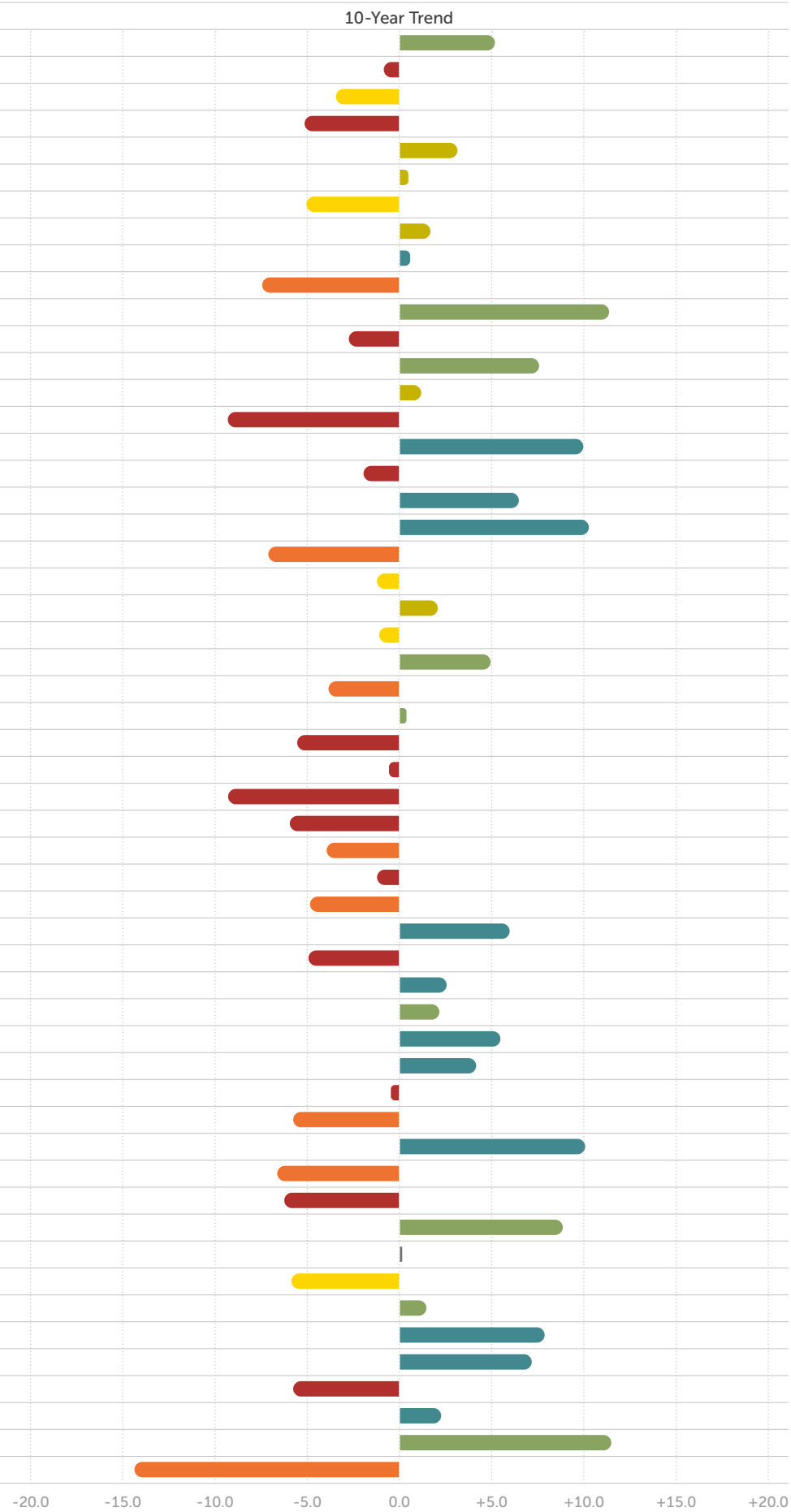
Largest Improvement	Somalia
Change 2010-2019	+11.5
Score/Rank (2019)	24.1/53rd
Largest Deterioration	Equatorial Guinea
Change 2010-2019	-14.3
Score/Rank (2019)	20.2/54th

Underlying measures	Largest Improvement (2010-2019)	Largest Deterioration (2010-2019)
Political Power & Representation of Women	Ethiopia	Burkina Faso
Equal Civil Liberties for Women	Tunisia	Congo Republic
Socioeconomic Opportunity for Women	Congo Republic	Eswatini
Equal Access to Public Services for Women	Mauritania	Libya
Laws on Violence against Women	Somalia	Equatorial Guinea

*South Sudan does not have a 10-year trend or trend classification because the IIAG does not include data for the country prior to secession in 2011.

Gender sub-category: 2019 rank, 10-year trend & trend classification (2010-2019)

2019 Rank	Country
1	Seychelles
2	Rwanda
3	Mauritius
4	Cabo Verde
5	Burundi
6	Tunisia
7	Botswana
7	Namibia
9	São Tomé and Príncipe
10	Ghana
11	Kenya
12	Senegal
13	Algeria
14	Benin
15	Uganda
15	Zambia
17	Sierra Leone
18	Gabon
19	Gambia
20	South Africa
21	Cameroon
22	Togo
23	Zimbabwe
24	Angola
25	Liberia
26	Burkina Faso
27	Madagascar
28	Côte d'Ivoire
29	Mozambique
30	Lesotho
31	Niger
32	Morocco
33	Malawi
34	Mauritania
35	Tanzania
36	Guinea-Bissau
37	Central African Republic
38	Comoros
39	Ethiopia
40	Nigeria
41	Eswatini
42	Congo Republic
43	Guinea
44	DR Congo
45	Chad
46	South Sudan*
47	Eritrea
48	Egypt
49	Sudan
50	Libya
50	Mali
52	Djibouti
53	Somalia
54	Equatorial Guinea



Gender in the 2020 IIAG: Progress since 2015 impaired by COVID-19 impact

The IIAG *Gender* sub-category assesses the political power and representation of women, equal civil liberties for women, socioeconomic opportunity for women, equal access to public services for women and laws on violence against women.

Data for the sub-category are sourced from Global Integrity (GI), the International Parliamentary Union (IPU), the Organisation for Economic Co-operation and Development (OECD), the Varieties of Democracy (V-DEM) Institute and the World Bank (WB).

At continental level, Africa achieves an average score of 50.2 (out of 100.0) in 2019 in *Gender*, the fifth highest score among the IIAG's 16 sub-categories.

Between 2010 and 2019, the African average score for the sub-category *Gender* has declined, driven by deteriorations in countries' legal frameworks for protection against sexual assault or rape, domestic violence and sexual harassment, and to a lesser extent by declines in the level of civil liberties enjoyed by women.

The continent has made progress in creating socioeconomic opportunities for women, in providing women with more political power and better political representation, as well as more equal access to public services. Increasing progress in these last two areas has put the continent on a positive trajectory for the sub-category between 2015 and 2019.

Somalia is the most improved country in the *Gender* sub-category over the past decade (+11.5). However, the country still sits at 53rd place in the ranking table in 2019. Only Equatorial Guinea, which recorded the largest decline in the sub-category (-14.3), ranks lower (54th).

Somalia's progress is driven by a strengthening of the legal framework to counter violence against women for which it is the continent's most improved country. Women have less equal access to public services than ten years ago, but all other gender areas, as measured by the IIAG, progressed over the last ten years.

Equatorial Guinea has strengthened political power and representation of women as well as civil liberties for women. Socioeconomic opportunity and access to public services for women have deteriorated but the largest regression has been seen in the legislation to counter violence against women.

Highest scoring: Seychelles

Lowest scoring: Equatorial Guinea

Somalia is the most improved country in *Gender* but still only ranks 53rd

Equatorial Guinea is the most declined country for *Laws on Violence against Women* and the only country to receive the lowest possible score of 0.0 for this indicator in 2019

Kenya (+11.4), Gambia (+10.3), Congo Republic (+10.1) and Zambia (+10.0) follow Somalia as the most improved countries over the decade.

Gambia has improved in all underlying *Gender* indicators while Kenya and Zambia have progressed in all but one indicator - *Equal Civil Liberties for Women* in the case of Kenya, and *Laws on Violence against Women* in the case of Zambia. Congo Republic's progress was driven by improved socioeconomic opportunities for women, increased political power and representation of women, as well as more equal access to public services.

Besides Equatorial Guinea, Mozambique (-9.2), Uganda (-9.2), Ghana (-7.4) and South Africa (-7.1) are among the countries that recorded the largest decline.

Mozambique's decline has been driven solely by its deteriorated legal framework to combat violence against women. This was also the main but not only driver for the decline in Ghana, Uganda and South Africa.

Only eight countries (Benin, Burkina Faso, Central African Republic, Gambia, Kenya, Libya, Somalia, Sudan) have improved their legal frameworks to combat violence against women. Thirty-two countries declined, making it the largest indicator decline within the IIAG over the decade.

More than half of all the countries on the continent have stepped up political power and representation as well as socioeconomic opportunities for women.

Ethiopia is the most improved country for *Political Power & Representation of Women*, going from 42nd in the rankings in 2010 to 5th in 2019. Burkina Faso and Cabo Verde are the most declined, having deteriorated at a startling pace. Burkina Faso has dropped to the bottom five in the ranking table and Cabo Verde has gone from 2nd in 2010 to 27th in 2019.

Socioeconomic opportunities for women have been most strengthened in Congo Republic, allowing the country to move from the bottom five to the upper half of the ranking table (26th). Such opportunities have shrunk the most in Eswatini.

Most improved: Somalia

Most declined: Equatorial Guinea

Gambia is the only country across all 54 to have made progress in all gender-related areas since 2010

Accountability of COVID-19 Fiscal Responses Falling Short in Africa, but Innovative Practices Emerge from the Crisis

Expert Perspective

David Robins, Program Officer for the Open Budget Initiative, International Budget Partnership

The COVID-19 pandemic swept across the globe in 2020, forcing countries to confront not only a health crisis, but a devastating social and economic one as well. By the end of the year, governments mobilised more than $14 trillion through a variety of emergency fiscal policy measures, including new spending programs, tax relief measures, and new loans and loan guarantees.

The pandemic arrived in a world already facing significant challenges, including growing inequality and weakening democratic institutions, and so concerns were high among activists and watchdogs that governments' emergency fiscal responses were ripe for mismanagement and corruption. Early in the pandemic, the International Monetary Fund urged governments to "do whatever it takes, but keep the receipts".

Unfortunately, in many places this guidance has not been followed, which has jeopardized the effectiveness and impact of government response to the crisis.

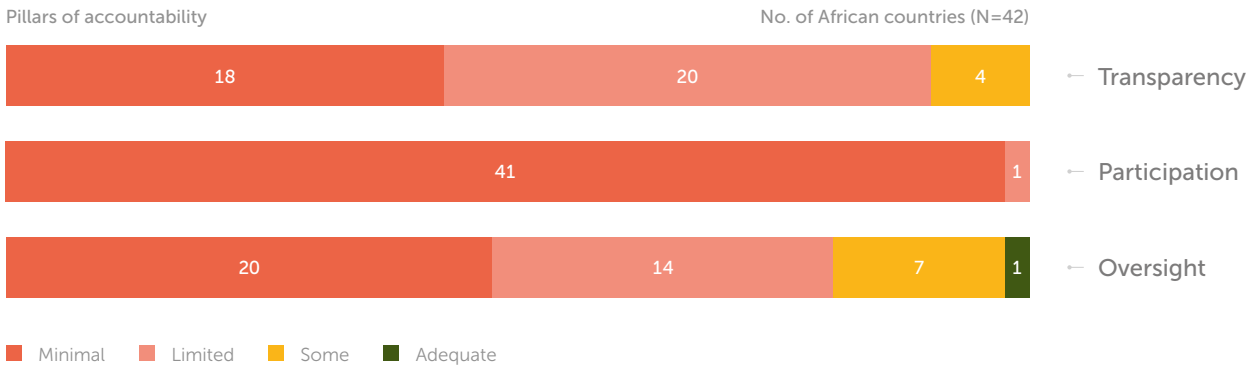
In late 2020, the International Budget Partnership worked with civil society partners in 120 countries around the world, including 42 African countries, to examine central governments' fiscal responses to COVID-19 during the initial phase of the pandemic, from March to September 2020. Building on the work we do with these researchers on the Open Budget Survey, we examined the transparency and formal oversight of the emergency fiscal policy packages that governments put into place, as well as the opportunities available for the public to participate in the formulation, implementation, and oversight of the packages.

We found that all African governments are falling short and are failing to provide adequate accountability of their emergency fiscal responses to the pandemic. Nigeria, Sierra Leone, and South Africa rated the highest across Africa in our evaluation of transparency, participation, and oversight, with the other countries in the continent only providing limited or minimal accountability.

Our assessment revealed that governments failed to adopt key policies that would have improved accountability in their COVID-19 response packages. The overwhelming majority of the African countries included in this assessment – 40 out of 42 – provided only limited or minimal information on the implementation of their packages, while 57% failed to publish any guidance on the use of emergency procurement practices that were implemented to respond to the pandemic.

Almost all African governments failed to meet key fiscal accountability standards in their response to COVID-19

African countries: levels of accountability in early COVID-19 fiscal policy responses (March - September 2020)



Relatedly, the role of legislatures in the fiscal response to the pandemic has been limited – 45% of legislatures in Africa were bypassed during the approval of the emergency fiscal packages, which gave the executive broad powers to skip normal procedures, access special funds, and act without adequate checks and balances. And 88% of legislatures in Africa failed to provide adequate oversight on the approval and implementation of the policies.

The opportunities for the public to engage in the formulation, approval, and oversight of the emergency fiscal policy packages were few and far between. Only six countries in Africa provided the public with the opportunity to engage with either the executive or the legislature during the formulation and approval of the package, but none of these countries made an effort to include vulnerable and underrepresented groups, which are precisely the populations most likely to be adversely impacted by the crisis.

But experience has shown that times of crisis can be real moments of innovation. Despite overall bleak trends and findings, there are examples throughout Africa showing that a better way is possible.

In Côte d'Ivoire, the Support Fund for Informal Sector Actors website provides details of eligibility conditions and regular reports on subsidies paid to beneficiaries.

In Sierra Leone, building on their experience with Ebola, the Audit Service implemented real time auditing which captured mismanagement and wrongdoing, and led to further investigation by the anti-corruption commission.

In Togo, the government built a digital cash transfer system in only 10 days, targeting female workers in the informal sector.

And we've also seen incredible examples of civil society leading the way – from Gambia to South Africa – showing the potential for when government and citizens work together.

The pandemic is far from over. There are practical steps governments and donors can take now to strengthen accountability in the ongoing responses and prepare for future crises:

- Governments can adopt reforms now such as publishing monthly progress reports and disclosing procurement details in open formats. They can increase resources for national auditors to conduct expedited audits and take remedial measures in response to their reports. They can take actions to restore legislative oversight. Further, they can also leverage existing mechanisms in the executive, legislatures, and within national audit offices to facilitate citizen participation in the formulation, approval, and execution of new COVID-19-related packages.
- Over the long-term, governments can strengthen systems in the annual budget cycle to be better prepared for future crises. These include reforming legal and regulatory frameworks to clarify roles and responsibilities in areas such as procurement, oversight, and participation. They can also integrate innovations that emerged from this crisis, such as providing user-centered information.
- The international donor community can play an important role in advancing accountability norms in emergency spending. As part of their assistance, donors should urge and support country-led efforts to publish more information about what governments are spending and its impacts and to facilitate oversight by legislatures, auditors, and citizens.

We must keep mobilising resources for the global COVID-19 response, including filling the funding gap to ensure equitable access to diagnostics, vaccines, and therapeutics. But if we are serious about equity and justice, we must simultaneously get serious about accountability. This is about ensuring assistance reaches those who need it most. When governments do not deliver as promised, underserved communities bear the brunt.

Challenge 6: COVID-19 impact has further shrunk civic space and media freedom

Summary

Results from the 2020 IIAG indicate that participation, rights and inclusion, including civil society space and media freedom, have been deteriorating long before the pandemic. The implementation of COVID-19 containment measures and the related restrictions have added further strain to participatory and civic spaces, as seen most notably in the restriction of media freedom. This has happened against the backdrop of decreasing trust by citizens in their political leadership.

In Africa, the civic space has been narrowing for a few decades. Since the early 2000s, the space for civil society organisations (CSOs), the media and activists on the continent has been shrinking with these actors facing restricting laws and policies as well as physical attacks, threats and discrimination.

The COVID-19 pandemic has led to the implementation of restrictive measures in the response to the public health crisis. Pre-existing restrictions to civic space have been accelerated by the use of either excessive measures or by keeping emergency provisions in place for extended time periods.

Long-standing concerns by African citizens about their public leadership have been amplified by the pandemic.

Afrobarometer data shows that pre-pandemic across 34 African countries, only 46.8% of citizens trusted their political leaders. Trust in the military (64.7%), police (50.8%) and in community leaders, such as traditional (55.8%) and religious leaders (69.4%), was much higher.

More recent Afrobarometer surveys during the pandemic show that, against a backdrop of already low trust in political leadership, African citizens are concerned about their leaders abusing the pandemic situation.

Across 12 African countries, almost 60% of respondents surveyed by Afrobarometer fear that politicians are increasing their power and authority under the guise of managing the health crisis.

A large majority of African countries adopted measures violating democratic standards during the first year of the pandemic.

According to data from V-DEM, all 44 African countries under review have restricted at least one democratic practice as part of their COVID-19 response between March and December 2020.

However, more recent data from V-DEM show some improvement: 27 countries have scaled-down their level of democratic violations in the first half of 2021.

Media freedom has been the most violated democratic standard during COVID-19. The large majority of countries have applied a major level of restrictions at least once between March 2020 and June 2021. However, fewer countries engaged in media restrictions in 2021 than in 2020.

Pre-pandemic across 34 African countries, only 46.8% of citizens trusted their political leaders

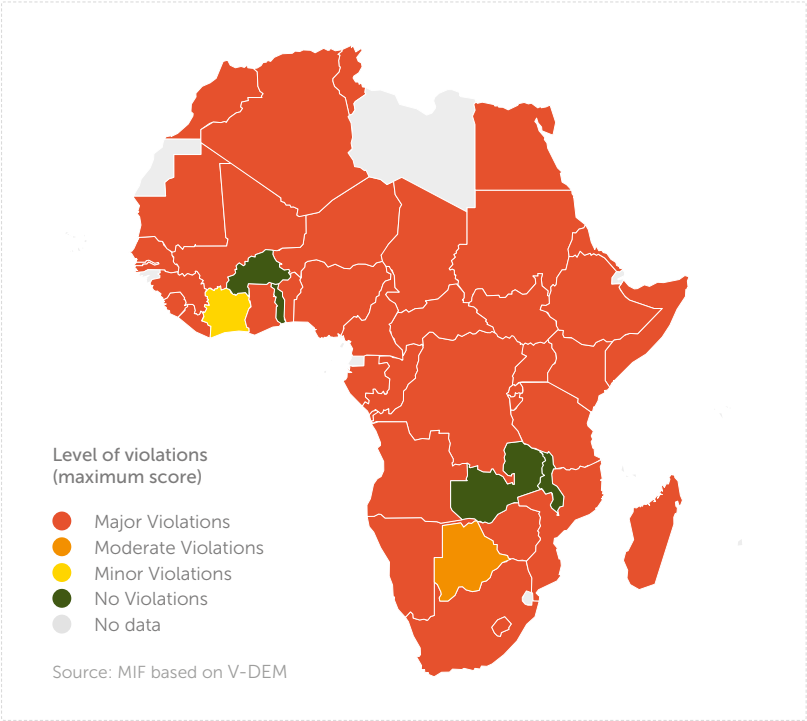
Almost 60% of respondents across 12 countries fear that politicians are increasing their power and authority under the guise of managing the COVID-19 pandemic

"Key priorities are a democratic space where rights are respected, where leaders are trusted, where active citizenship is exercised, and an enabling environment for the expression of different views and a culture of parallels and respect."

Elhadj As Sy, Chair, Kofi Annan Foundation, Ibrahim Governance Weekend 2021

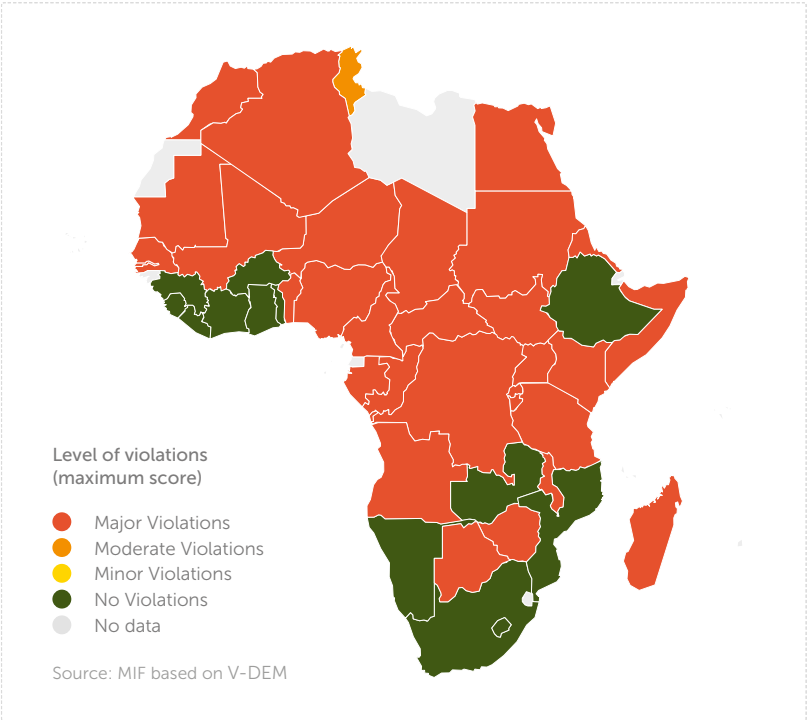
In the first half of 2021, major levels of media freedom restrictions still happened in 29 countries

African countries: pandemic restrictions on media freedom (March - December 2020)



40 African countries restricted media freedom between March and December 2020, 38 of those applied major violations

African countries: pandemic restrictions on media freedom (January - June 2021)



30 African countries restricted media freedom between January and June 2021, 29 of those applied major violations

"As a young person, I feel let down (...) Young people are now more than ever expressing frustrations and aspirations. But they need to feel they are being heard."

Abiy Shimelis, Now Generation Forum Representative, Ethiopia, Ibrahim Governance Weekend 2021

V-DEM's Pandemic Backsliding Project assesses the extent to which government responses to the COVID-19 pandemic have violated democratic standards for emergency measures. The scores thus may not take into account democratic violations happening outside the context of governments' pandemic response.

Media Freedom

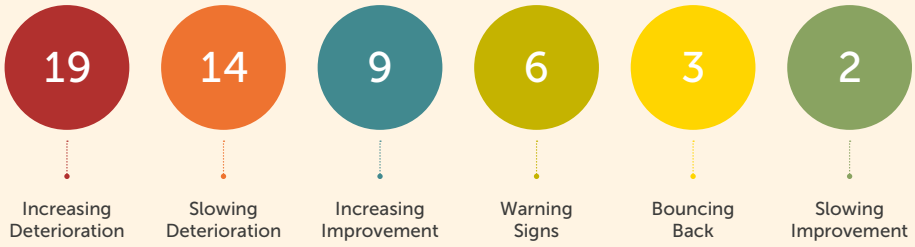
African average

2019 score/100.0	53.7
10-year trend (2010-2019)	Deterioration (-4.8)
Trend classification: 5-year trend (2015-2019) compared to 10-year trend	Increasing Deterioration

African countries

10-year trend (2010-2019) by number of countries

Trend classification: 5-year trend (2015-2019) compared to 10-year trend by number of countries

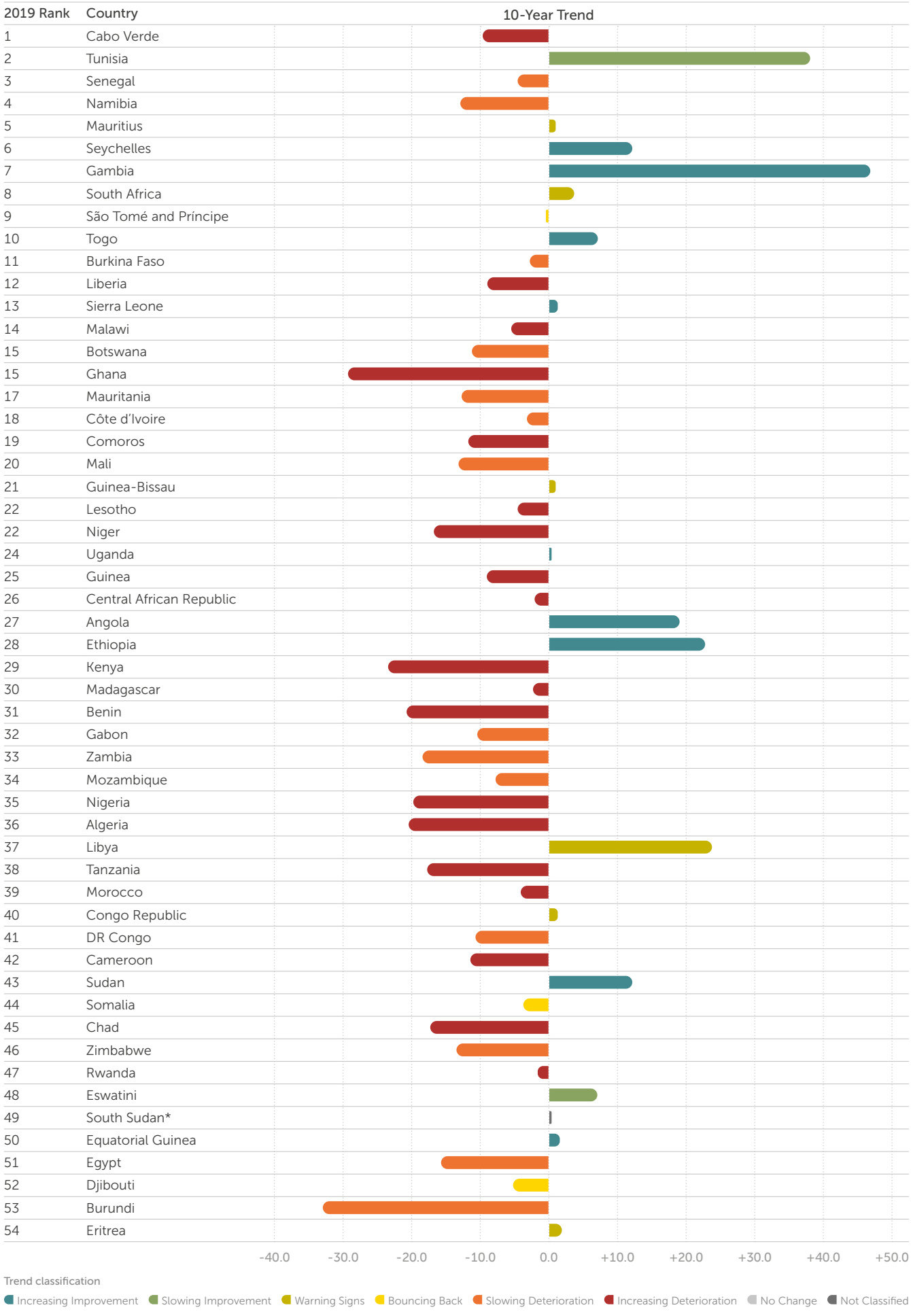


Largest Improvement	Gambia
Change 2010-2019	+46.8
Score/Rank (2019)	75.4/7th
Largest Deterioration	Burundi
Change 2010-2019	-33.0
Score/Rank (2019)	15.7/53rd

Underlying measures	Largest Improvement (2010-2019)	Largest Deterioration (2010-2019)
Press Freedom	Somalia	Libya
Media Impartiality	Libya	Burundi
Absence of Media Censorship	Gambia	Ghana
Absence of Harassment of Journalists	Gambia	Burundi

*South Sudan does not have a 10-year trend or trend classification because the IIAG does not include data for the country prior to secession in 2011.

Media Freedom indicator: 2019 rank, 10-year trend & trend classification (2010-2019)



Media Freedom in the 2020 IIAG: Worrying deterioration since 2010 has worsened since 2015

The IIAG composite indicator *Media Freedom* assesses the extent to which journalists are free to do their work, and whether the media are unbiased, free and diverse and free from censorship.

The data for the indicator are sourced from Global Integrity (GI), Reporters Without Borders (RSF) and the Varieties of Democracy (V-DEM) Institute.

The 2019 African average score for the indicator *Media Freedom* is 53.7 (out of 100.0).

The *Media Freedom* indicator has registered the second largest indicator decline since 2010 in the *Rights* sub-category after *Digital Rights*. The decline in media freedom has accelerated since 2015.

Since 2010, media censorship on the continent has driven the decline, while there has also been a deterioration in press freedom and media impartiality. There is less harassment of journalists in 2019 than in 2010, but the situation has again worsened since 2015, almost overturning the progress made over the decade.

Two-thirds of countries (36) have declined in *Media Freedom* since 2010, and only 17 have improved.

Gambia is the most improved country both since 2010 (+46.8) and 2015 (+49.4). The West African country went from sitting among the bottom ten countries for *Media Freedom* in 2010 to being among the top ten in 2019, jumping 41 ranks.

Tunisia (+38.1), Libya (+23.7), Ethiopia (+22.8) and Angola (+19.0) follow Gambia as the most improved countries since 2010.

Ethiopia, Gambia and Tunisia have progressed in all areas related to media freedom as measured by the IIAG. The same applies to Angola with the exception of *Absence of Media Censorship* for which the country shows no change and receives the lowest possible score of 0.0 in 2019. Libya's strides are due to improvements in *Media Impartiality* and less harassment of journalists.

Burundi (-33.0) has seen the largest restrictions to media freedom since 2010, followed by Ghana (-29.3), Kenya (-23.5), Benin (-20.8) and Algeria (-20.5). Benin, Ghana and Kenya were all among the top ten scoring countries in 2010.

Burundi's deterioration has been driven by declining media impartiality, increasing harassment of journalists as well as shrinking press freedom. Over the whole ten-year period, Burundi has received the lowest possible score of 0.0 in *Absence of Media Censorship*.

In Algeria and Ghana all areas of media freedom have worsened. Benin and Kenya have seen declines in all areas apart from the harassment of journalists, with both countries having seen fewer such incidents since 2010.

Highest scoring: Cabo Verde

Lowest scoring: Eritrea

In 2019, 26 countries receive the lowest possible score of 0.0 for *Absence of Media Censorship*

Most improved: Gambia

Most declined: Burundi

***Civil Society Space*: almost two-thirds of all African countries have declined since 2010**

Civil Society Space is the sixth most declined IIAG indicator (out of 79) over the decade and the third most declined since 2015. It has become more difficult for civil society organisations to be established and operate, while they also face higher levels of harassment. Since 2010, civil society space has shrunk in 35 African countries.

The largest declines have been observed in Malawi, Niger and Nigeria. Most progress has been made in Gambia, Libya and Tunisia. While Tunisia and Gambia managed to join the upper half of the ranking table, Libya remains in the bottom half at 34th place.

***Digital Rights*: the worst trending IIAG indicator since 2015**

Digital Rights is the fourth most declined IIAG indicator (out of 79) over the decade and the most declined between 2015-2019. This has been driven by increasingly high levels of government censorship of both citizen-created and political content on the internet, as well as weaker legal frameworks to protect internet users' privacy and data. In 39 countries digital rights have worsened since 2010 and they improved in only 13 countries.

Digital Rights have improved most in Gambia, Guinea-Bissau and Tunisia and deteriorated most in Benin, Cameroon and Mauritania.

Citizens' Trust in the Context of the Pandemic

Expert Perspective

Carolyn Logan, Director of Analysis, Afrobarometer

Popular trust and legitimacy are critical resources for governments trying to implement a development agenda. This is especially true during crises like the COVID-19 pandemic, when effective responses depend on public engagement and cooperation.

A trust deficit

Unfortunately, across much of Africa, elected leaders face a trust deficit. Afrobarometer conducted surveys across 34 countries during its Round 8 series of surveys (2019-2021). We found that on average, fewer than half (45%) of citizens trust their elected leaders (an average of trust in presidents, parliaments and local government councils). While Tanzanians stand out as exceptionally trusting (89%), no other country tops 58% (Niger), and only 23% trust elected leaders in Gabon, 24% in Lesotho, and 30% in South Africa.

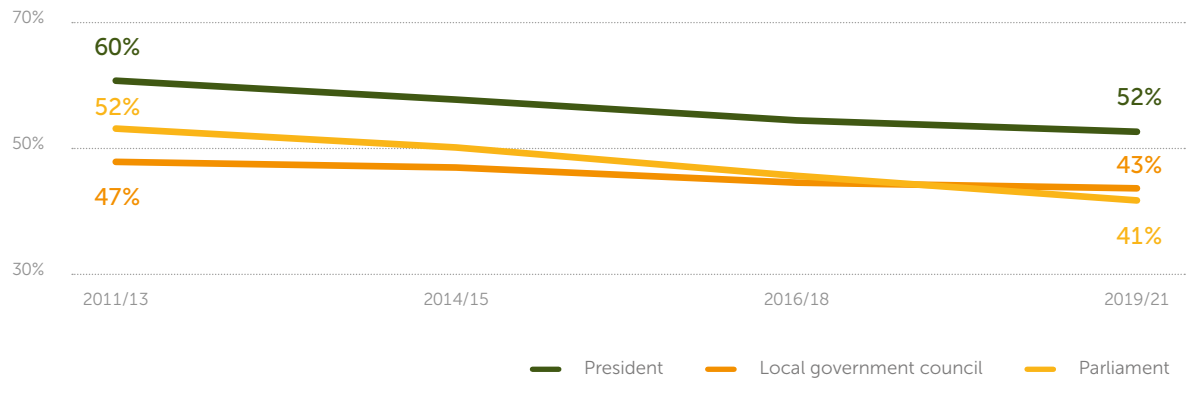
The public has most confidence in their traditional and religious leaders (60% and 69%, respectively). The strong standing of informal leaders is a potential asset that governments can call on in implementing COVID-19 responses. Traditional and religious leaders can lend their credibility to messaging strategies designed to explain public health interventions and obtain higher levels of citizen compliance.

Waning trust in elected leaders

Trust in elected leaders has been in decline throughout the past decade. Across 30 countries tracked from 2011 to the latest surveys in 2021, trust in the presidency has dropped 8 percentage points, from 60% to 52%, and trust in parliaments has fallen 11 points, from 52% to 41%*. Confidence in the work of local government councils has fallen a more modest 4 points, but it was already starting at a significantly lower level.

* Across 29 countries, Sudan not included

African countries: trust in elected officials (2011-2021)



Trust in the time of COVID-19

The pandemic has emphasised even further the issue of trust in government. Public confidence that governments are imposing weighty lockdown measures to protect citizens, rather than to preserve their hold on power, is critical.

But across 15 countries where Afrobarometer has collected data on COVID-19 since the onset of the pandemic, it is clear that citizens are wary of their governments' reliability and intentions.

Overall, publics seem to be willing to give their governments some benefit of the doubt when it comes to their handling of the difficult challenges faced during the pandemic. 80% credit their government with keeping the public informed about the pandemic and 68% say their government has done "fairly well" or "very well" in managing the pandemic response - including more than eight in ten citizens in Mauritius (85%), Eswatini (84%), Benin (83%), and Zimbabwe (81%). Sudan is the notable exception: just 31% there agree.

At the same time, people are skeptical of their governments' intentions. Only 38% trust government COVID-19 statistics, and suspicion that COVID-19 resources are being misused is even more widespread: Two-thirds (67%) think that "some" or "a lot" of the resources available for the pandemic response were lost or stolen due to corruption.

Trust may play an especially critical role in efforts to vaccinate citizens against the coronavirus, and here governments face an especially steep hurdle: Vaccine hesitancy is widespread. Fewer than half (47%) say they are "somewhat likely" or "very likely" to try to get vaccinated. Only 37% say they trust their government to ensure that vaccines are safe, and low levels of trust are highly correlated with a low likelihood of getting the vaccine.

Pandemic impacts on trust

Afrobarometer provides the basis for some preliminary assessments on how the pandemic will affect citizen perspectives on their governments. Overall, there is some preliminary evidence that citizens are feeling greater trust in core government institutions in the wake of COVID-19. It remains to be seen whether these positive impacts will persist as the pandemic wears on or, eventually, recedes.

If we compare changes between Round 7 (2016-2018) and Round 8 (2019-2021) in 15 countries where the Round 8 survey was done before the pandemic and 15 countries surveyed since the onset of the pandemic, we note two key points.

- First, within the pre-COVID batch of countries, the downward trends in trust described above are quite evident. Trust in the president in these countries dropped 5 percentage points (from 56% to 51%), and trust in parliament fell 8 points (46% to 38%).
- Second, the pattern in the post-COVID-onset countries is notably more positive. The presidency actually gained 1 point in trust in this batch and parliament was unchanged.

Rebuilding trust: COVID-19 and beyond

Each country's capacity to navigate and eventually move past the pandemic will be rooted in citizen trust. If the pandemic seems to have checked the pre-existing slide in institutional trust, it has also left citizens with serious misgivings about their governments' responses.

The rubber may meet the road when it comes to widespread vaccine hesitancy. In addition to obtaining adequate quantities of vaccines, governments across the continent must invest in building sufficient trust among citizens so that they will be willing to receive them. This may entail taking advantage of all trust resources – including widespread confidence in informal leaders – while also focusing on building confidence in government institutions as an essential asset for responding to both current and future crises.

Chapter 03. Economy: Potential for recovery, provided that hurdles are overcome

Challenge 7: No social recovery without wider social safety nets

Summary

The arrival of the pandemic in Africa highlighted the continent's lack of social safety nets, leaving many of its most vulnerable citizens exposed. Beyond this, many were still excluded from newly introduced social safety nets due to data gaps, informality, and fiscal constraints. The IIAG indicator *Social Safety Nets* is a cause for concern with a low continental score and no progress between 2010 and 2019. More revenue must be mobilised to strengthen the provision of social safety nets. However, the fragility of fiscal revenues is evident in the limited mitigation packages African countries were able to provide in comparison to other regions.

Limited social protections made evident by pandemic

In addition to the health crisis, the COVID-19 pandemic has triggered economic insecurity on a global scale, with considerable impact in Africa.

Governments used social safety nets to mitigate the economic fallout and provide support for livelihoods throughout the pandemic. In Africa, social protection policies and measures have been implemented by the majority of countries.

As of February 2021, as many as 46 sub-Saharan countries had introduced a total of 166 new social-protection policies. The policies ranged from cash transfers and food support to energy subsidisation and the expansion of existing welfare programmes.

- Ghana subsidised electricity costs and provided free water.
- Togo launched a mobile cash transfer scheme targeting informal workers.
- Ethiopia provided more than 600,000 urban poor with first-time bank accounts.

Within the same period, 36 African countries provided citizens with COVID-19-related cash transfers, while 18 provided food assistance.

Despite the extent of these efforts, social safety nets on the continent have been more limited than in other regions and the financial resources allocated have not been in line with global averages. In many African countries safety nets remain smaller in scope, and new initiatives have often failed to reach all of those in need of assistance.

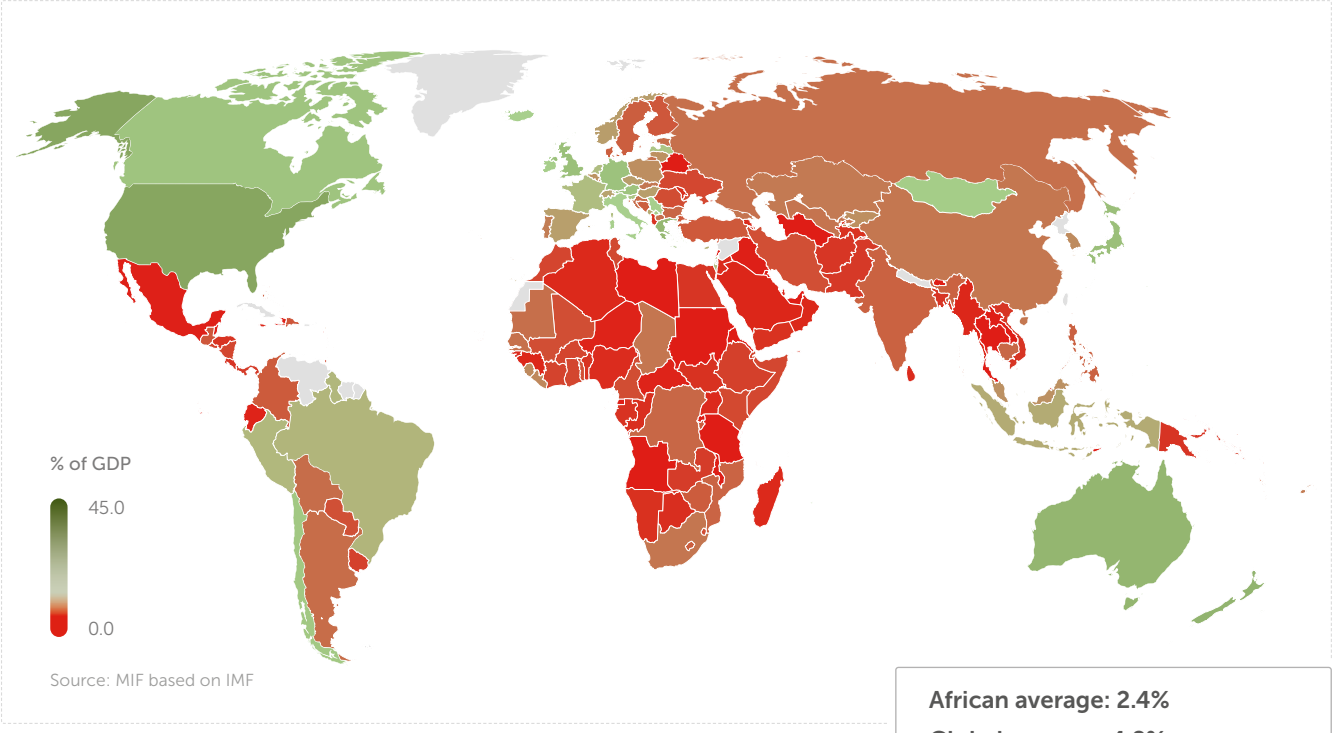
Data gaps have hindered the effectiveness of social safety nets. For example, in Nigeria the total number receiving support only represented a tiny proportion of the 95.9 million living in extreme poverty. Many in need missed out owing to data gaps, with no national census in 14 years.

01/20 - 09/21: African countries spent an average of 2.4% of GDP on their COVID-19 response measures outside of healthcare, less than half the global average of 4.8%

Fiscal revenue to GDP ratio: African average – 22.2%. Eurozone – 46.4%

African countries spent much less than the global average on pandemic response

World countries: COVID-19 fiscal response measures (January 2020-September 2021)



Source: MIF based on IMF

African average: 2.4%
Global average: 4.8%

Limited financial resources have also restricted many African countries from pursuing the full range of mitigation measures seen elsewhere. The COVID-19 crisis created a liquidity crunch for many countries, in a context where fiscal and monetary capacity is already weak.

Limited fiscal space reduces capacity to respond. International Monetary Fund (IMF) data show fiscal revenues in Africa averaged 22.2% of GDP in 2019, a lower rate than both emerging (27.2%) and advanced (35.0%) G20 economies, and less than half the 46.4% recorded in the Eurozone.

Improved revenue mobilisation would extend the provision of social safety nets. According to UNDP, it would be feasible to implement temporary basic income in sub-Saharan Africa with between 0.76% and 2.71% of the region's GDP.

Basic income support is a type of social safety net that can safeguard citizens in the event of crises. Evidence suggests that the provision of a 'temporary basic income' for people living in informal settlements through unconditional cash transfers can also help meet basic rights such as food security.

74.7% of respondents of MIF's 2021 NGN Survey think that the lack of social safety nets is exacerbating the impact of COVID-19 to a large extent.

"Unless a new growth model is inclusive, unless that model lifts all boats, not simply some boats, unless that model reinforces social safety nets, it cannot be sustainable."

Dr Donald Kaberuka, Special Envoy on COVID-19, African Union

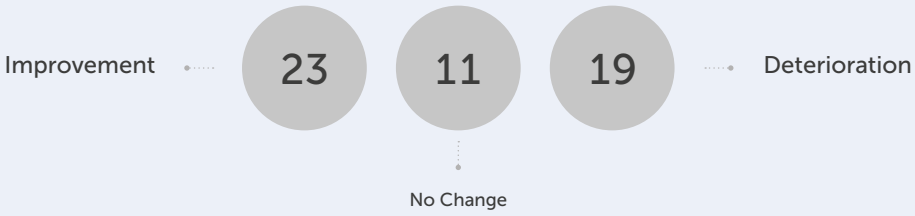
Social Safety Nets

African average

2019 score/100.0	33.9
10-year trend (2010-2019)	No Change (0.0)
Trend classification: 5-year trend (2015-2019) compared to 10-year trend	Bouncing Back

African countries

10-year trend (2010-2019) by number of countries

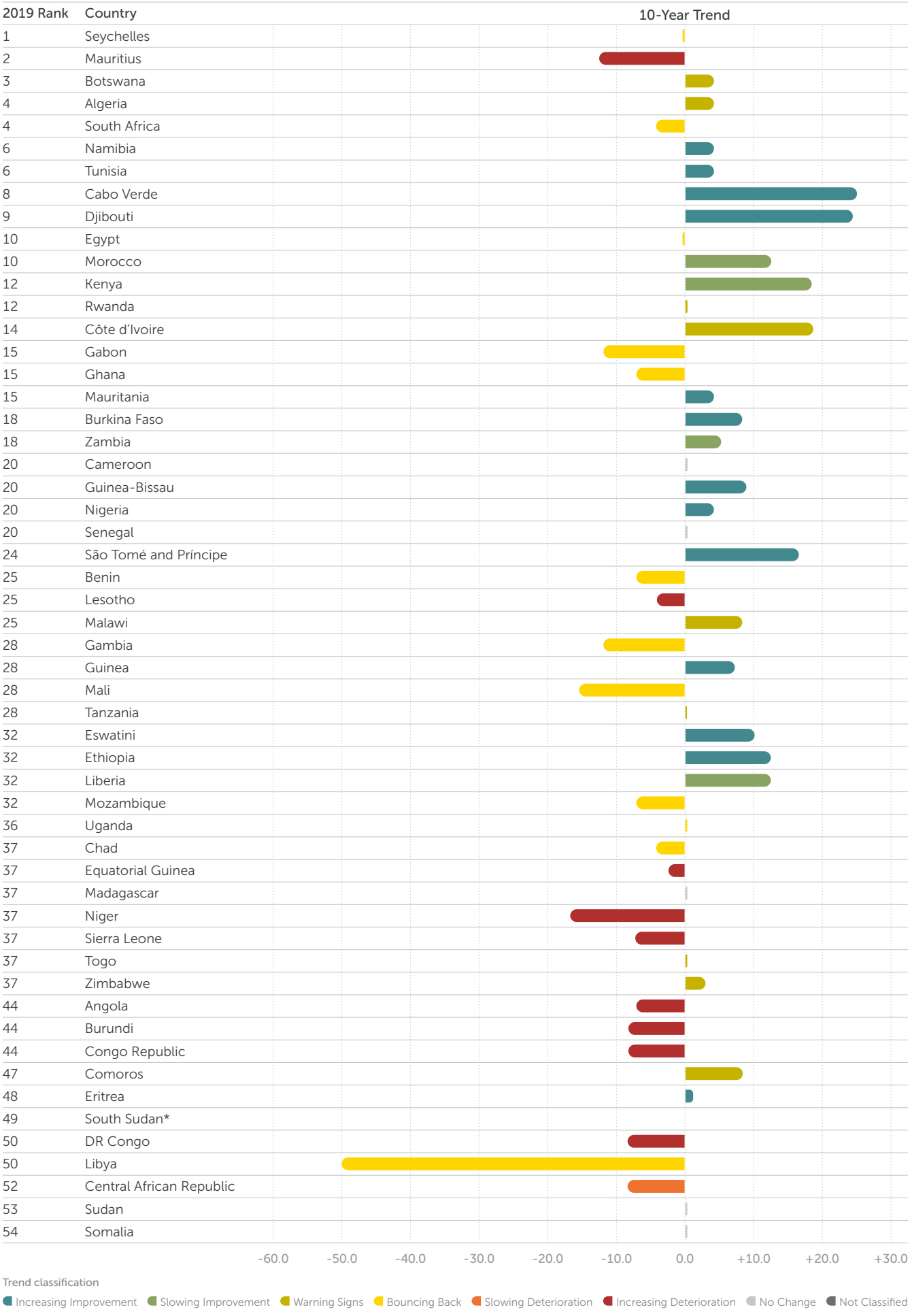


Trend classification: 5-year trend (2015-2019) compared to 10-year trend by number of countries

Largest Improvement	Cabo Verde
Change 2010-2019	+25.0
Score/Rank (2019)	58.3/8th
Largest Deterioration	Libya
Change 2010-2019	-50.0
Score/Rank (2019)	8.3/50th

*South Sudan does not have a 10-year trend or trend classification because the IIAG does not include data for the country prior to secession in 2011.

Social Safety Nets indicator: 2019 rank, 10-year trend & trend classification (2010-2019)



Social Safety Nets in the 2020 IIAG: Stagnation since 2010

The IIAG *Social Safety Nets* composite indicator measures the extent to which there are safety nets in place to mitigate for social risks in a market economy. It specifically measures the provision and access to safety nets for the elderly, unemployed and those with illnesses or health conditions.

Data are sourced from Bertelsmann Stiftung (BS) and Global Integrity (GI).

In 2019, *Social Safety Nets* ranks among the ten worst scoring IIAG indicators (out of 79), scoring 33.9 (out of 100.0) and has shown zero progress over the decade at the African average level.

While small improvements have been registered in safety nets for the elderly, unemployed and the ill, they have not been sufficient to compensate for the social risks of the market economic system.

Since 2010, 23 countries have improved in *Social Safety Nets*, 19 have declined and 11 have experienced no change.

Of the 23 countries to improve, nine have displayed warning signs since 2015.

The biggest strides have been achieved in Cabo Verde (+25.0), Djibouti (+24.4), Côte d'Ivoire (+18.5), Kenya (+18.4) and São Tomé and Príncipe (+16.6).

Cabo Verde, Côte d'Ivoire and Kenya all improved safety nets for the elderly.

Cabo Verde, Djibouti and São Tomé and Príncipe all improved safety nets for the unemployed.

Djibouti and São Tomé and Príncipe improved safety nets for those with illnesses or health conditions.

The biggest deterioration has been seen in Libya (-50.0), whose decline has been almost three times that of the next biggest, Niger (-16.7). Mali (-15.4), Mauritius (-12.5) and Gabon (-11.9) make up the rest of the five most declined.

In Libya, social safety nets have collapsed, with provisions no longer compensating for the social risk of a market economy.

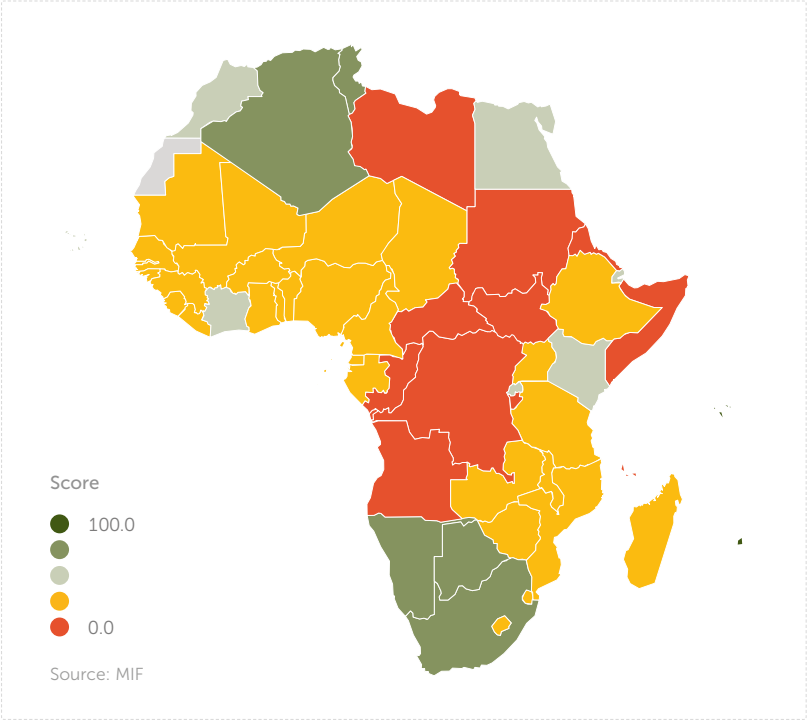
In Mauritius and Niger, declines are registered in social safety nets for the elderly, unemployed and those with illnesses and health conditions.

In Mali, decline appeared in social safety nets for those with illness, while in Gabon the safety nets for the elderly deteriorated. Both countries have registered a decline in safety nets for the unemployed.

Most improved: Cabo Verde
Most deteriorated: Libya

Only eight African countries score over 50.0 in *Social Safety Nets* in 2019

African countries: *Social Safety Nets* indicator (2019)



Only eight countries score above 50.0 in 2019

Somalia is the lowest scoring country with a score of 0.0

Seychelles is the best scoring country in 2019, followed by Mauritius and Botswana

Mauritius, the highest scoring or joint highest scoring country between 2010 and 2018, was the most declined country in 2019

SPOTLIGHT

Tax and revenue mobilisation: the key to financial autonomy

According to the IMF, Africa will need an additional $285 billion to respond to the pandemic, while as much as $425 billion will be needed in sub-Saharan Africa alone to secure a robust recovery and regain lost ground. These funds cannot be secured without mobilising significantly more domestic resources.

2020 IIAG: African *Tax & Revenue Mobilisation* has shown worrying signs since 2015

Though faring better in 2019 than in 2010 at continental average level, the IIAG indicator *Tax & Revenue Mobilisation* has deteriorated in the last five years. While 30 countries have improved since 2010, 22 countries have declined.

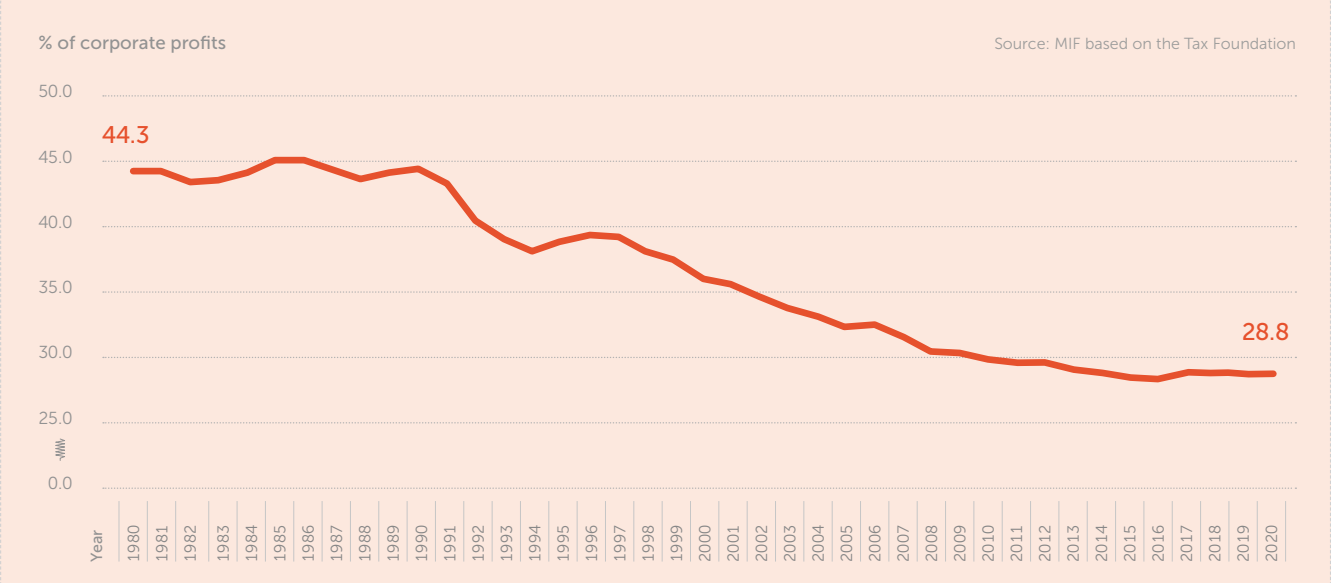
African governments could lose -12% to -30% of their fiscal revenues due to the pandemic

Sub-Saharan Africa will need an additional $425 billion between now and 2025 to secure a robust recovery

The United Nations Conference on Trade and Development (UNCTAD) estimates that improving tax efficiency in Africa could raise tax revenue by +3.9% of GDP, enough to support basic income. African governments could also increase revenue by raising corporate tax rates and eliminating unnecessary tax exemptions for investors. The IMF reported that tax incentives very often have no impact on the investment decisions of multinationals. A World Bank Survey of investors in East Africa found 93% would have invested regardless of tax incentives. In 2019, a single tax incentive cost the Nigerian government $3.2 billion, equivalent to its entire healthcare spend that year.

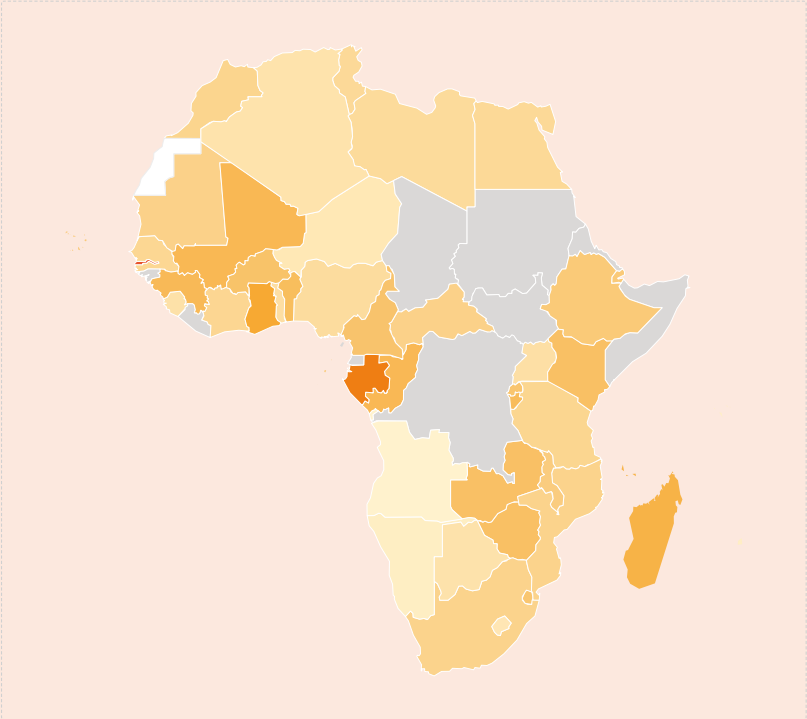
African countries' corporate tax rates have been falling since the 1980s

African average: corporate tax rate (1980-2020)



Illicit financial flows represent over 20% of total African trade

African countries: average invoice related illicit financial flows (2008-2017)



Source: MIF based on Global Financial Integrity (GFI)

Africa average: 21.4%

Better control of corruption and effective enforcement of existing laws could reduce administrative inefficiencies and raise an additional $110 billion per year in revenue on the continent. The onset of the pandemic saw a wave of capital flight from African economies, reducing the resources available to governments. Capital flight is so prevalent that the continent has been rendered a net creditor to the rest of the world. Related losses between 1970 and 2015 across 30 African countries outweighed the combined stock of debt owed and foreign aid received over this period. UNCTAD estimates that between 34% and 59% of all capital flight comes from trade mis-invoicing, estimated by Global Financial Integrity to have cost $107.6 billion per year across 42 African countries between 2008 and 2017.

A World Bank Survey of investors in East Africa found 93% would have invested regardless of tax incentives

Estimates show illicit financial flows cost African countries roughly $1 trillion between 2008 and 2017

Challenge 8: No economic transformation without energy access

Summary

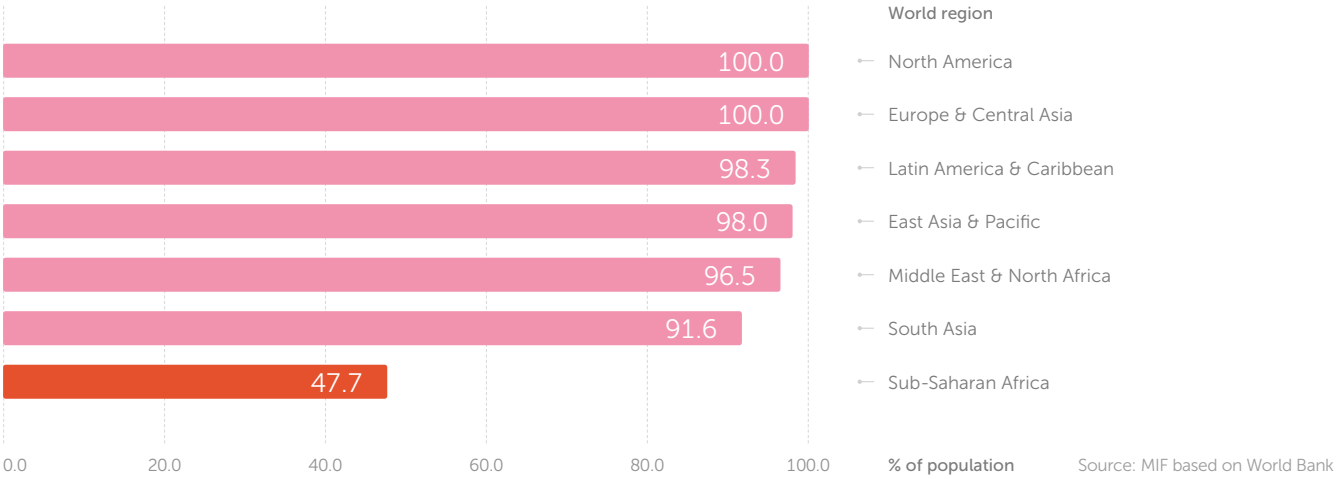
Energy access is pre-requisite for transforming Africa's economies and achieving development goals such as the SDGs or the AU's Agenda 2063. Without energy access, chances of bridging the digital divide or leveraging the continent's digital potential will be slim. Energy access will also be essential for the development of infrastructure and for the implementation of the African Continental Free Trade Area (AfCFTA). The IIAG indicator *Access to Energy* shows that energy access has improved at an increasing rate over the last ten years (2010-2019), going up in all but two countries, Libya and Mauritius. However, progress must continue, with 600 million citizens still lacking electricity.

Electricity access in Africa is the lowest of any world region

Sub-Saharan Africa had the lowest access to electricity (47.7% of population) globally in 2018. By contrast, more than 90.0% of the population has access to electricity in every other world region.

There are over 600 million Africans still off-grid, equivalent to almost twice the total population of the US

World regions: access to electricity (2018)



Source: MIF based on World Bank

Lack of electricity access has had major impacts on the COVID response:

It reduced healthcare capacity.

- Survey data from 13 health facilities in 11 sub-Saharan African countries, covering years 2001 to 2012, showed that on average, 72% lacked reliable access to electricity, while 26% had no access at all.

It limited the ability to mitigate the impact of school closures.

- Two thirds of schools in sub-Saharan Africa lack reliable electricity, making distance learning a distant aspiration.

Electricity will be a key driver of economic recovery too. Without energy access it will be difficult to leverage the potential of the digital economy or capitalise on the AfCFTA.

Access to Energy in the 2020 IIAG: Progress since 2010, but too many still off grid

The IIAG *Access to Energy* indicator measures the proportion of the population with access to electricity.

Data are sourced from the World Bank (WB).

Access to Energy is among the five most improved IIAG indicators (out of 79) at the African average level going from a score of 40.4 in 2010 to 52.7 in 2019, with progress accelerating since 2015.

Almost all countries (51 out of 54) have managed to increase energy access, while only Mauritius and Libya have seen declines.

By far the biggest improvement has been in Kenya (+58.2), with a 2019 score (73.9) more than four times as large as in 2010 (15.7). Eswatini (+32.3), Uganda (+31.9), Lesotho (+31.2) and Congo Republic (+27.3) make up the rest of the top five improvers.

All five countries have continued to improve between 2015 and 2019, though the rate of improvement has slowed in Congo Republic and Eswatini.

Since 2015, Libya has continued to decline, while two countries, Burkina Faso and Tunisia, have displayed warning signs, threatening their progress over the decade.

This is of particular concern for Burkina Faso, which already had the third lowest access on the continent in 2019.

Algeria, Egypt, Morocco and Seychelles are the joint top scorers (100.0) in this indicator, with all four countries having universal electricity access.

Burundi (7.2) is the lowest scoring country.

Most improved: Kenya

Most declined: Libya

Africa's off-grid population is equivalent to more than 1.3 times the total population of the EU

Algeria, Egypt, Morocco and Seychelles are the only 4 African countries with universal electricity access in 2019

Burundi has the lowest electricity access on the continent in 2019

Access to Energy

African average

2019 score/100.0	52.7
10-year trend (2010-2019)	Improvement (+12.3)
Trend classification: 5-year trend (2015-2019) compared to 10-year trend	Increasing Improvement

African countries

10-year trend (2010-2019) by number of countries

Trend classification: 5-year trend (2015-2019) compared to 10-year trend by number of countries

Largest Improvement	Kenya
Change 2010-2019	+58.2
Score/Rank (2019)	73.9/13th
Largest Deterioration	Libya
Change 2010-2019	-15.0
Score/Rank (2019)	65.6/16th

*South Sudan does not have a 10-year trend or trend classification because the IIAG does not include data for the country prior to secession in 2011.

Access to Energy indicator: 2019 rank, 10-year trend & trend classification (2010-2019)

2019 Rank	Country
1	Algeria
1	Egypt
1	Morocco
1	Seychelles
5	Tunisia
6	Mauritius
7	Cabo Verde
8	Gabon
9	South Africa
10	Ghana
11	Comoros
12	Eswatini
13	Kenya
14	São Tomé and Príncipe
15	Congo Republic
16	Côte d'Ivoire
16	Equatorial Guinea
16	Libya
19	Senegal
20	Botswana
21	Cameroon
22	Djibouti
23	Gambia
24	Sudan
25	Nigeria
26	Namibia
27	Togo
28	Mali
29	Eritrea
30	Lesotho
31	Ethiopia
32	Mauritania
33	Guinea
34	Angola
35	Uganda
36	Benin
37	Zimbabwe
38	Zambia
39	Tanzania
40	Somalia
41	Rwanda
42	Central African Republic
43	Mozambique
44	Guinea-Bissau
45	South Sudan*
46	Sierra Leone
47	Liberia
48	Madagascar
49	DR Congo
50	Malawi
51	Niger
52	Burkina Faso
53	Chad
54	Burundi

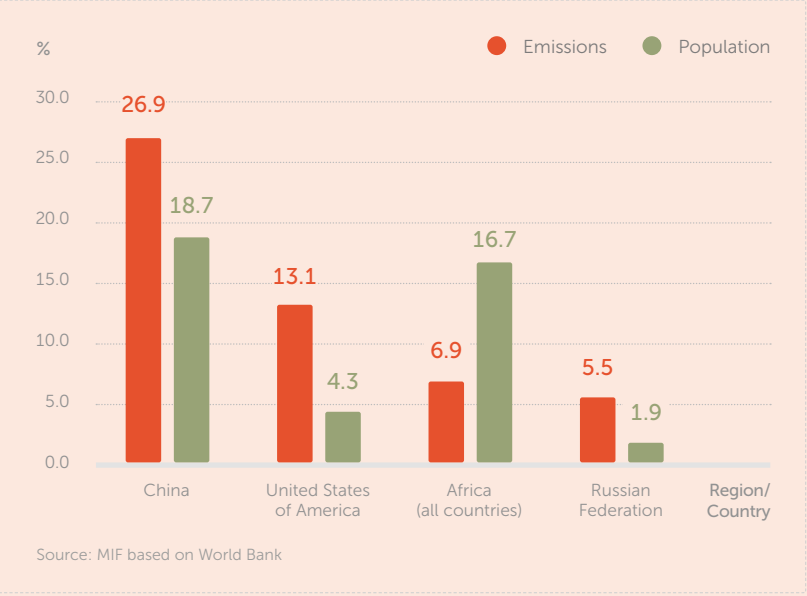
SPOTLIGHT

Africa's unique challenge: marrying climate justice and energy justice

African countries contributed the least to climate change and will be among the countries to suffer the most from its consequences, but with Africa's population likely to double by 2050 and its energy consumption set to surpass the European Union's around the same time, Africa will be key to realising a green and sustainable future for all. However, in a continent where many countries remain energy poor, combatting the climate crisis should be viewed in a holistic way and not exclusively through the lens of renewable energies.

The African continent's contribution to global emissions is far less than its share of the world population

Selected regions/countries: share of world emissions and population (2018)



Source: MIF based on World Bank

In recent years, international donors have focused overwhelmingly on investing in renewable energies in Africa. The continent has vast potential in renewables such as hydro, solar and wind, but a one-size-fits-all approach is inappropriate, as energy resources vary greatly between countries. A country like Ethiopia, endowed with hydro-and geothermal assets, in the short-term has much greater potential to utilise green technologies than countries such as Nigeria, heavily dependent on oil and gas. Exclusively pushing renewables across the continent will leave many with unreliable and expensive power. Cleaner non-renewables such as gas and nuclear, or low polluting renewables such as biomass could provide a solution. But instead, many donors from the global north are focusing on solar and wind. This pits the global effort to combat climate change against African countries' own efforts to combat poverty and industrialise.

COP26: Africa's special needs and circumstances not taken into account

COP26 commitments in Glasgow failed to consider the requests and needs of African countries. Commitments to transitionary financing fell well short of the $1.3 trillion African delegates requested which better reflects the potential cost for the continent. Furthermore, there was 'extreme disappointment' at the lack of action around 'loss and damage'. Rich countries pulled back on a 'loss and damage fund', instead opting for a 'workshop', absent of financial commitments.

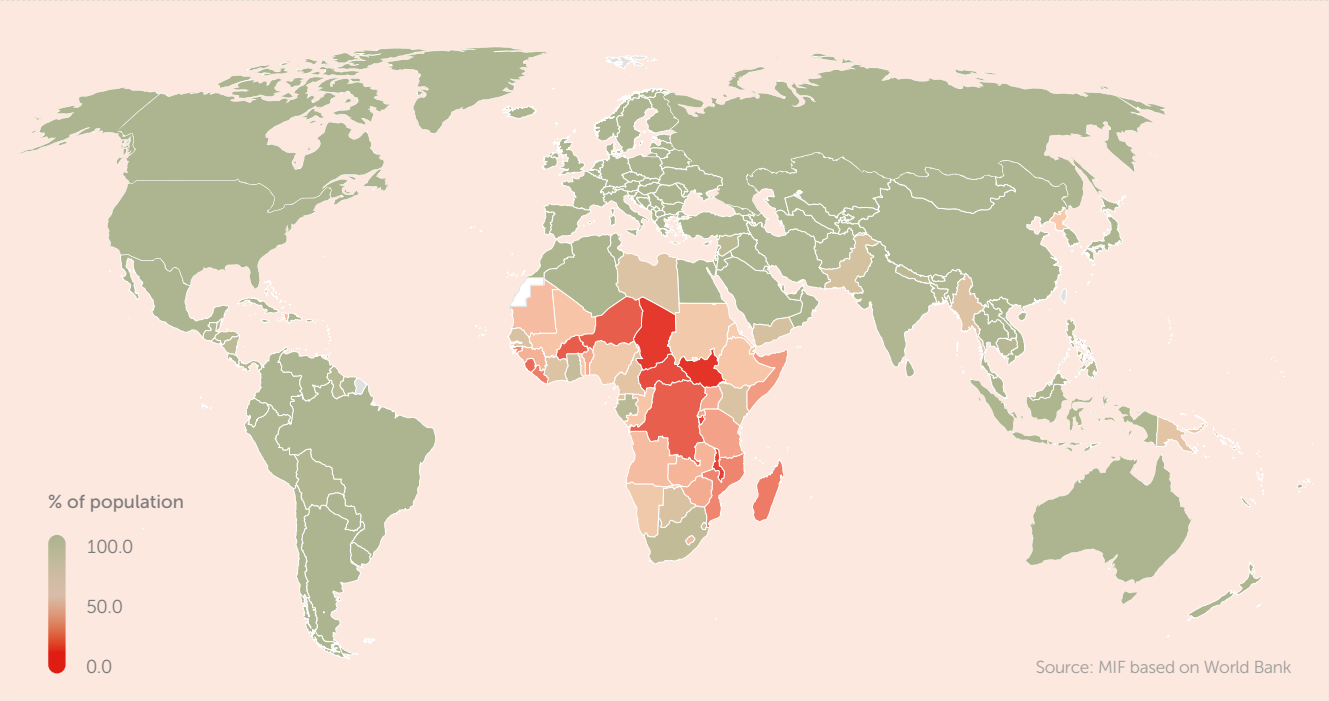
On top of this, 25 countries and development agencies pledged to stop funding overseas fossil fuel projects at COP26, while failing to make similarly concrete domestic commitments. This means donor-funding for gas projects in energy poor countries will dry up at the end of 2022, while many of these same countries continue to invest in new drilling projects and subsidise fossil fuels at home.

"No other continent in history has been tasked with the challenge of developing without polluting, whilst being simultaneously the major victim and the lowest contributor to emissions."

Former Nigerian President Olusegun Obasanjo

Less than 50% of the population have access to electricity in half of African countries

World countries: access to electricity (2019)



This does not mean however that going green and the continent's development goals are mutually exclusive. Many African countries have the potential to build thriving green economies beyond renewables, such as carbon capture sectors, that can support climate change mitigation and adaptation. These can also provide jobs for the continent's growing youth population and rejuvenate economies wounded by the pandemic.

Agriculture is one such area of promise. Evidence from a UNDP study in Zimbabwe shows that up to 30,000 jobs were created for every million dollars invested in conservation agriculture, a climate resistant form of agriculture that has the potential to sequester up to 372 million tonnes of carbon dioxide from the atmosphere per year. In contrast, only 25 jobs were created for each million dollars invested in commercial solar. Forestry activities, including conservation and reforestation can also be a job creator and a vital tool for carbon capture. Gabon plans to marry conservation of its stretch of the Congo Basin Rainforest, which alone sequesters roughly 140 million tonnes of carbon per year, with a high value eco-tourism sector.

The financing is out there. With $10 trillion in ESG (Environmental, Social & Governance) capital looking for a return there is a unique opportunity for the continent to grow green African financial markets. Efforts are already underway, with the African Union in the process of developing a Green Stimulus Programme to boost the recovery and support key sectors such as ecotourism and biodiversity. If this investment can be leveraged for a variety of sectors, including but not limited to renewable energies, then the continent can realise a green post-COVID recovery.

"We do have a blueprint for how we get out of this crisis: we grow out of the crisis by growing out sustainably."

Dr Vera Songwe, Executive Secretary, UNECA

Challenge 9: No digital economy without fixing the digital divide

Summary

The 2021 Forum Report and Ibrahim Governance Weekend discussions pointed to the digital economy as an area of promise for the continent, not just for the economy, but also for education and health. But the use of digital devices and the development of digital literacy is hampered by restricted internet coverage and access to electricity, creating a digital divide. This is highlighted by the low standing of the *Digital Access* indicator in the 2020 IIAG, the second lowest in 2019. However, the continent was moving in the right direction prior to the pandemic. If this momentum is maintained post-pandemic, African countries can improve performance in this area and leverage their digital potential.

Digital potential is strong but undermined by low access

The digital economy is an area of strength for African countries, enabling them to boost their economic recoveries and in the process draw on a young generation of digital entrepreneurs adapting to the new global conditions.

- Over 640 tech hubs are active across the continent.

FinTech is a source of real promise and could be used to provide basic financial services to informal workers.

- Africa has the world's highest number of mobile money accounts at 300 million, while 72% of Africans now use mobile phones regularly.

Africa has the world's highest number of mobile money accounts

The COVID-19 pandemic also boosted the development and use of digital technology, including artificial intelligence (AI), in the medical sector.

- 19 African countries took part in virtual training sessions for the WHO Go.Data tool, provided free to Ministries of Health, which allowed them to collect electronic contact and patient data on mobile phones.
- AI proved useful in several applications, including contact tracing algorithms and systems for access control to spaces.
- Rwanda leveraged existing IT frameworks to complement traditional contact-tracing methods and reduce workloads for health workers during spikes of cases.

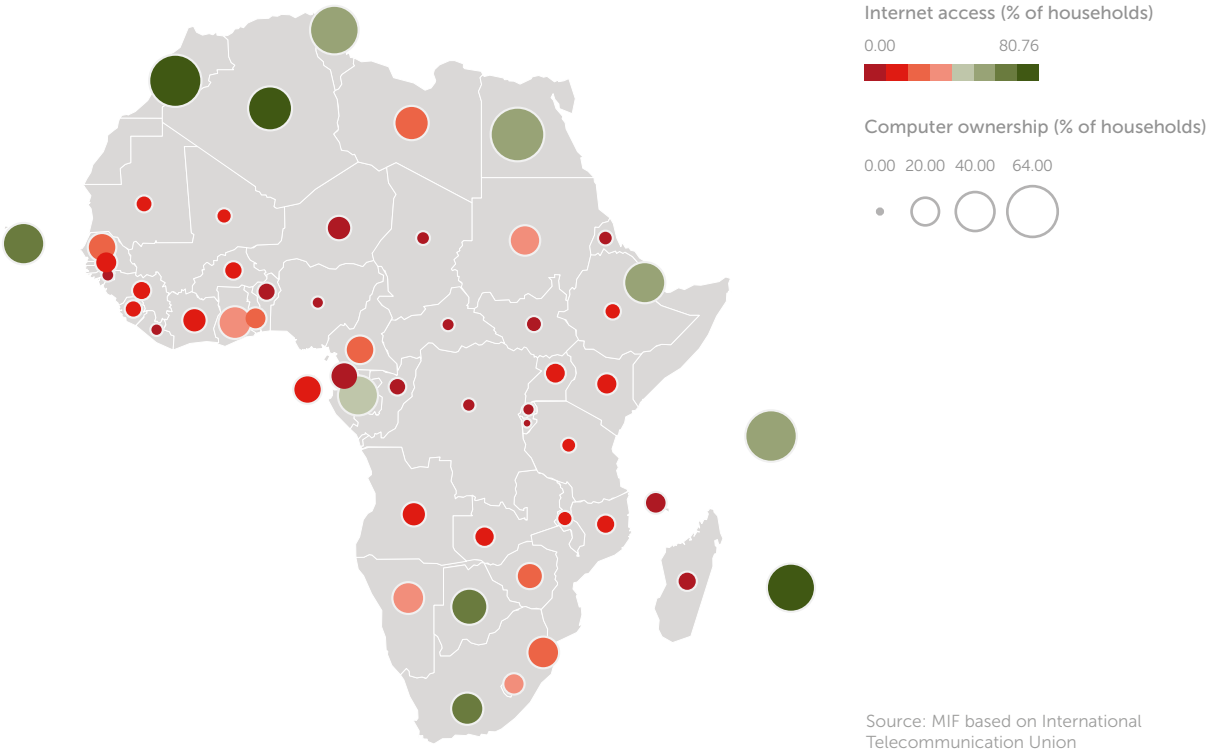
The digital divide remains a challenge to realising Africa's digital potential.

- In 2019, in 29 African countries, less than 10% of households owned a computer.
- In 2018, less than half of the population in sub-Saharan Africa (47.7%) was connected to the electric grid, limiting digital engagement.
- Afrobarometer surveys across 34 countries show that less than half of all respondents' electricity supply is reliable (43.5%).

In 2019, there were only 10 African countries where over 50% of households had internet access

Widespread access to internet and computers does not exist in many African countries

African countries: households with internet access and computer ownership (2019)



The digital divide impacted a wide range of areas during the pandemic.

- It prevented widespread home-working and limited cash transfers for social safety nets.
- It prevented home-learning.

According to data from UNESCO and ITU, 89% of learners in sub-Saharan Africa do not have access to household computers, 82% lack internet access and at least 20 million live in areas not covered by a mobile network.

Digital Access

African average

2019 score/100.0	24.6
10-year trend (2010-2019)	Improvement (+18.4)
Trend classification: 5-year trend (2015-2019) compared to 10-year trend	Increasing Improvement

African countries

10-year trend (2010-2019) by number of countries

Trend classification: 5-year trend (2015-2019) compared to 10-year trend by number of countries

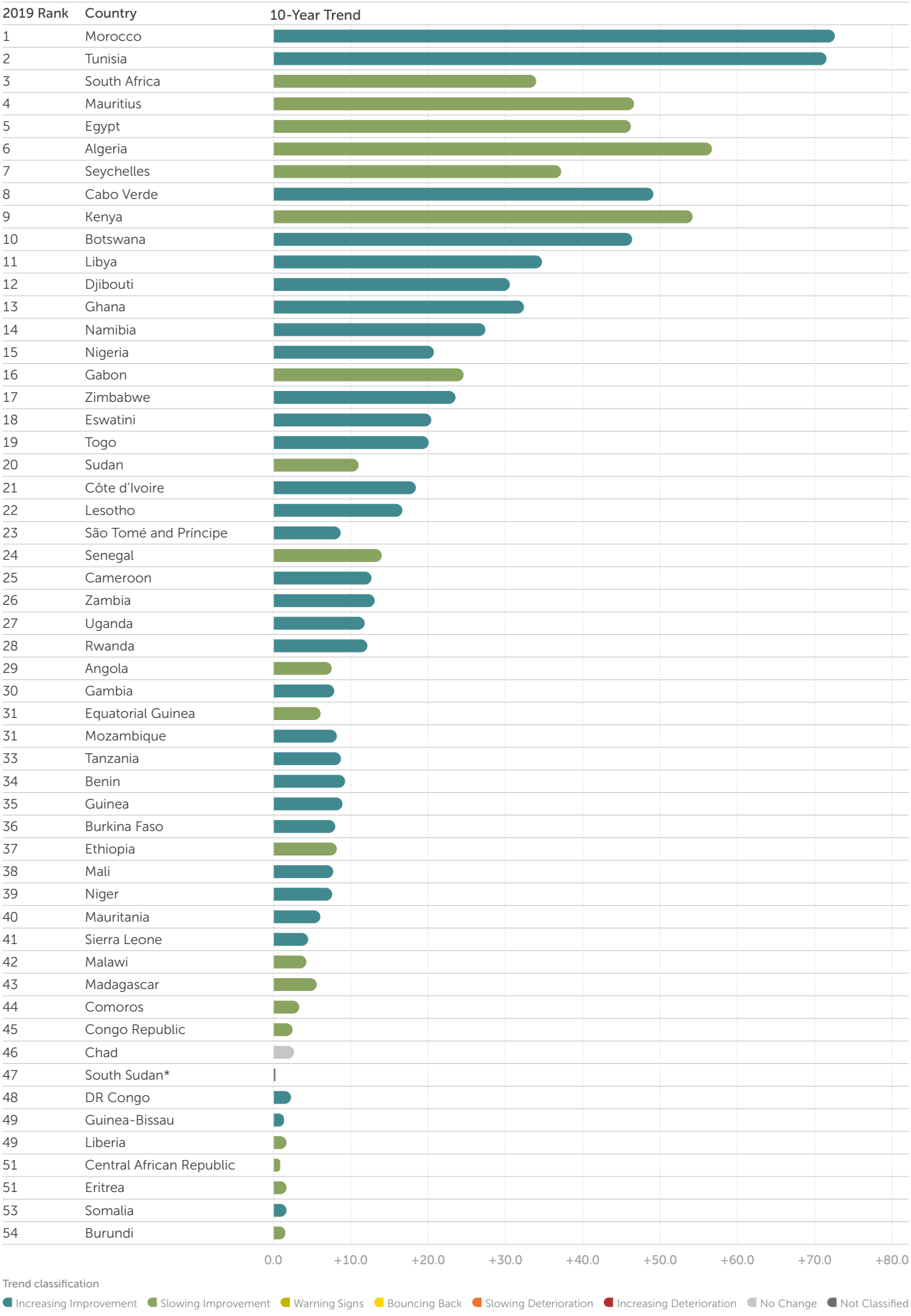
Largest Improvement	Morocco
Change 2010-2019	+72.6
Score/Rank (2019)	98.6/1st
Largest Deterioration	NA
Change 2010-2019	NA
Score/Rank (2019)	NA

Underlying measures	Largest Improvement (2010-2019)	Largest Deterioration (2010-2019)
Households with Computers	Tunisia	Nigeria
Households with Internet Access	Algeria	NA
Internet Speed	Kenya	South Africa
Internet Security	Libya	NA

*South Sudan does not have a 10-year trend or trend classification because the IIAG does not include data for the country prior to secession in 2011.

Digital Access indicator: 2019 rank, 10-year trend & trend classification (2010-2019)

2019 Rank	Country	10-Year Trend
1	Morocco	
2	Tunisia	
3	South Africa	
4	Mauritius	
5	Egypt	
6	Algeria	
7	Seychelles	
8	Cabo Verde	
9	Kenya	
10	Botswana	
11	Libya	
12	Djibouti	
13	Ghana	
14	Namibia	
15	Nigeria	
16	Gabon	
17	Zimbabwe	
18	Eswatini	
19	Togo	
20	Sudan	
21	Côte d'Ivoire	
22	Lesotho	
23	São Tomé and Príncipe	
24	Senegal	
25	Cameroon	
26	Zambia	
27	Uganda	
28	Rwanda	
29	Angola	
30	Gambia	
31	Equatorial Guinea	
31	Mozambique	
33	Tanzania	
34	Benin	
35	Guinea	
36	Burkina Faso	
37	Ethiopia	
38	Mali	
39	Niger	
40	Mauritania	
41	Sierra Leone	
42	Malawi	
43	Madagascar	
44	Comoros	
45	Congo Republic	
46	Chad	
47	South Sudan*	
48	DR Congo	
49	Guinea-Bissau	
49	Liberia	
51	Central African Republic	
51	Eritrea	
53	Somalia	
54	Burundi	



Digital Access in the 2020 IIAG: Access is still too low despite sustained progress

The IIAG *Digital Access* composite indicator measures the level, quality and security of access to digital devices and services by measuring computer access, internet access, internet speed and internet security.

Data are sourced from the International Telecommunication Union (ITU) and the World Bank (WB).

At the continental level, *Digital Access* is the second most improved indicator on the IIAG since 2010, only behind *Mobile Communications*.

This has been driven by strides in internet security and speed, as well as by increasing the share of households with internet and computer access.

Despite the pace of improvement accelerating in recent years, *Digital Access* is the second lowest scoring IIAG indicator (out of 79) in 2019.

Every country on the continent has improved its score in *Digital Access* since 2010, highlighting the promise of the digital economy.

Digital Access is highest in Morocco (98.6) and lowest in Burundi in 2019, which despite progress still only scores 1.7 (out of 100.0) in this indicator.

Morocco (+72.6) is also the most improved country over the decade, with a score three times as high as in 2010. It is followed by Tunisia (+71.5), Algeria (+56.7), Kenya (+54.1) and Cabo Verde (+49.1).

All five countries have improved across all underlying aspects of *Digital Access*.

Kenya, Morocco and Tunisia's improvement has primarily been driven by strides in internet speed and security, with computer and internet access improving as well.

Cabo Verde has primarily improved internet security, while Algeria has managed greater internet access and internet speed.

Digital Access improved in every country between 2010 and 2019 but is still the IIAG's second lowest scoring indicator

Most improved: Morocco

Twenty countries, hosting 31.2% of Africa's population, score less than 10.0 in *Digital Access* in 2019

Egypt has the most households with computers in Africa in 2019

Burundi has the fewest households with computers in Africa in 2019

Morocco has the most households with internet access in Africa in 2019

Burundi has the fewest households with internet access in Africa in 2019

Challenge 10: No integrated economy without adequate intercontinental transport networks

Summary

The pandemic hit African economies hard and laid bare the vulnerabilities of Africa's trade structures, making the implementation of the transformational AfCFTA, introduced in January 2021, more relevant than ever. The AfCFTA, paving the way to a single African market, can transform the continent's place in the world economy, building local supply chains, diversifying the economy, creating jobs and fostering resilience in the face of future crises. However, committing to the removal of 90% of tariff barriers, as outlined by the AfCFTA, will not be enough to achieve this. The success of an integrated Africa-centric trade model is arguably more dependent on addressing non-tariff barriers, namely the continent's transport infrastructure. Without the infrastructure to ease movement within the continent, intra-regional trade will continue to be costly and inaccessible, regardless of tariff reductions. Africa needs a more integrated transport network to effectively implement the AfCFTA and realise its transformative potential. However, the IIAG indicator *Transport Network* underscores that there is still more groundwork to be done.

Pandemic outlined vulnerability of existing trade structures

The pandemic exposed vulnerabilities in the trade structures underpinning Africa's growth models. For many African countries, growth has been heavily concentrated around the export of a few products, principally primary commodities (resources in a raw or unprocessed state such as crude oil, copper and cocoa) to destinations outside the continent.

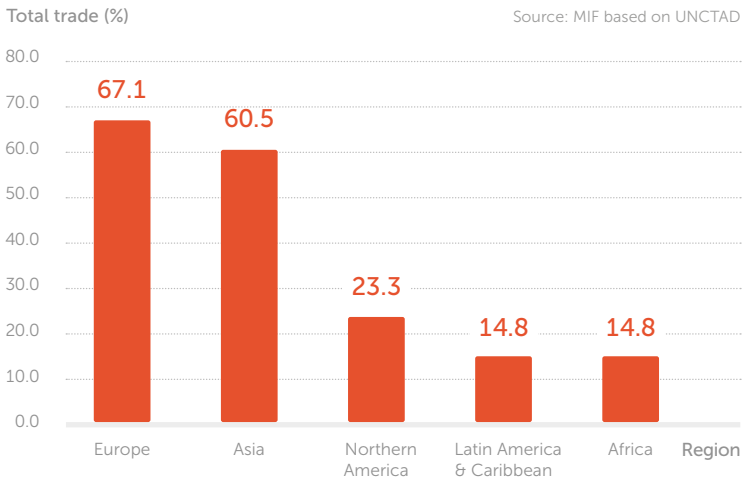
In 2019, Africa had the least diversified exports of any world region, and the joint lowest rate of intra-regional trade.

Primary commodities made up 76.7% of Africa's exports in 2019

In 2019, over 90% of African countries' primary export destinations were outside the continent

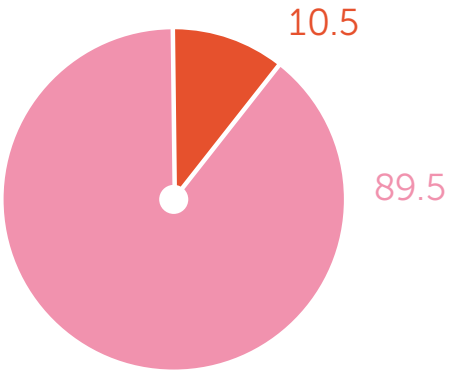
Intra-regional trade in Africa is lower than in any other world region bar Latin America & the Caribbean

World regions: intra-regional trade (2019)

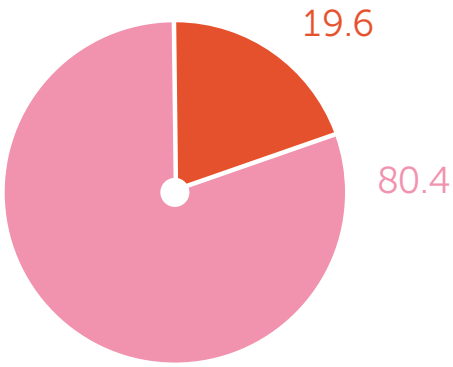


African countries mostly import key goods from outside the continent

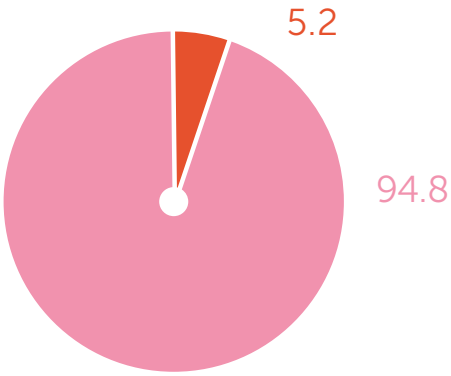
Africa: origin of manufactured goods imports (2019)



Africa: origin of food imports (2019)



Africa: origin of all medicinal and pharmaceutical imports (2019)



Africa
Rest of world

Source: MIF based on UNCTAD

With the onset of the pandemic, major export partners closed their economies, suppressing demand for commodities and triggering a liquidity crisis for many African governments and businesses. The lack of diversification left resource-dependent countries little to fall back on.

The pandemic led to disruptions and shortages in the supply of essential goods. African countries primarily import key goods such as clothing (86.1%), food products (80.4%), electronics (96.5%), road vehicles (87.8%) and medicinal and pharmaceutical goods (94.8%) from outside the continent.

Supply chain disruption triggered spikes in food prices for many countries, while shortages also contributed to inflation in countries such as Zimbabwe.

Africa had limited regional supply chains to fall back on, with intra-continental trade less than 15% of total continental trade in 2019. By boosting intra-African trade and generating regional supply chains the AfCFTA can improve the continent's resilience to shocks such as COVID-19.

"The pandemic illustrates how profoundly dependent Africa is on the choices, the blunders, the actions and even sometimes the self-interests of others. I think we should look to dismantle Africa's dependency."

Rosa Whitaker, President & CEO, Whitaker Group

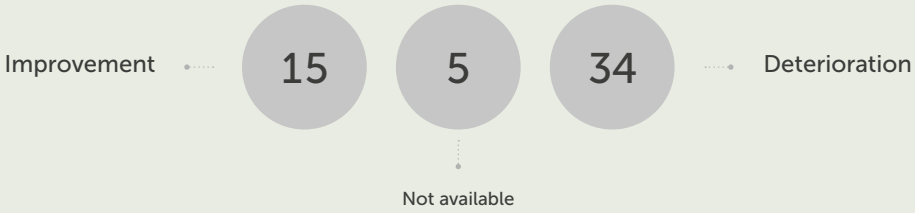
Transport Network

African average

2019 score/100.0	39.9
10-year trend (2010-2019)	Deterioration (-2.9)
Trend classification: 5-year trend (2015-2019) compared to 10-year trend	Slowing Deterioration

African countries

10-year trend (2010-2019) by number of countries



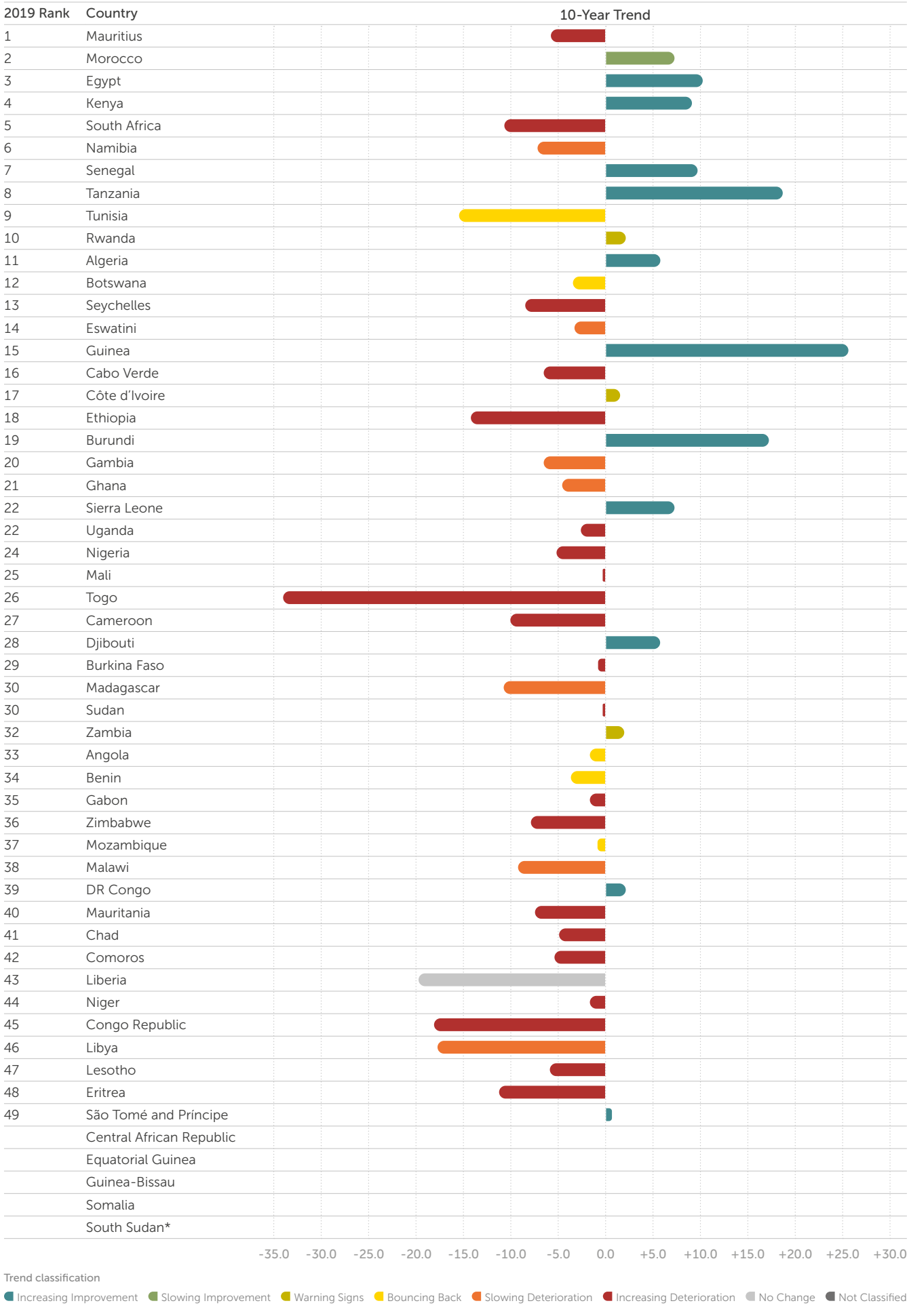
Trend classification: 5-year trend (2015-2019) compared to 10-year trend by number of countries

Largest Improvement	Guinea
Change 2010-2019	+25.6
Score/Rank (2019)	49.9/15th
Largest Deterioration	Togo
Change 2010-2019	-34.1
Score/Rank (2019)	35.4/26th

Underlying measures	Largest Improvement (2010-2019)	Largest Deterioration (2010-2019)
Road Infrastructure	Guinea	Tunisia
Rail Infrastructure	Guinea	Liberia
Air Infrastructure	Eswatini	Tunisia
Postal Development	Tanzania	Togo

*South Sudan does not have a 10-year trend or trend classification because the IIAG does not include data for the country prior to secession in 2011.

Transport Network indicator: 2019 rank, 10-year trend & trend classification (2010-2019)



Transport Network in the 2020 IIAG: Concerning performance worsened since 2010

The IIAG *Transport Network* composite indicator measures the quality, coverage and efficiency of a country's air, road and rail network. It also assesses the performance of a country's postal service.

Data are sourced from the World Economic Forum (WEF) and the Universal Postal Union (UPU).

The indicator *Transport Network* has declined (-2.9) at the African average level between 2010 and 2019, with only *Labour Relations* (-5.2) declining more in the *Foundations for Economic Opportunity* category.

This is driven by a reduction in the extensiveness and condition of airport infrastructure, as well as backward slides in postal network development.

This deteriorating trend has been countered by positive developments in the road and rail networks, with more extensive roads of better condition and more efficient rail services than in 2010.

Only 15 countries improved in *Transport Network* over the decade, while 34 countries declined.

Guinea (+25.6) made the biggest improvements, followed by Tanzania (+18.7), Burundi (+17.2), Egypt (+10.2) and Senegal (+9.7).

Burundi, Guinea and Tanzania made substantial improvements across road, rail and air, while Burundi and Tanzania also upgraded their postal network.

Egypt and Senegal primarily saw improvements to the condition and extensivity of the road network.

Togo has seen the biggest decline in the *Transport Network* indicator (-34.1), followed by Liberia (-19.8), Congo Republic (-18.1), Libya (-17.8) and Tunisia (-15.5).

Togo and Congo Republic have both seen large declines in postal development.

Libya's decline has primarily been driven by road infrastructure, while Tunisia's has been driven by road and air.

Liberia has seen large declines in the quality of road, rail and air travel infrastructure.

Although Mauritius (78.0) still registers the highest overall score in the *Transport Network* indicator in 2019, it's performance has been declining since 2010, at an accelerating pace since 2015, driven by deteriorating rail and postal networks.

Highest scoring: Mauritius

Lowest scoring: São Tomé and Príncipe

Most improved: Guinea

Most deteriorated: Togo

Regional Integration: EAC and ECOWAS lead the way

Commitment to regional integration is essential to the transformation of the economic model. The IIAG shows governments of East African Community (EAC) member states are on average doing more to promote integration than other Regional Economic Communities (RECs). No other country's efforts match Rwanda's, with a score 100.0 in the *Regional Integration* indicator in 2019. However, EAC member states' efforts have dwindled over the course of the decade, with a lower score in 2019 than in 2010.

Economic Community of West African States (ECOWAS) member states are doing the next most to promote regional integration. On average, efforts have increased within the bloc since 2010 more than in any other region. No country has stepped up their efforts more than Liberia, though Burkina Faso and Senegal remain the biggest champions of regional integration in the bloc.

South Africa has the highest quality air infrastructure in Africa in 2019

Mauritius has the most efficient rail network in Africa in 2019

Namibia has the highest quality road infrastructure in Africa in 2019

Tunisia has the most developed postal network in Africa in 2019

The Old Economic Model is Broken: the Solution Lies within our African Borders

Expert Perspective

Ma Soukha Ba, NGN Representative, Private Sector Development Specialist

Undeniably, Africa is set to become a demographic powerhouse, with its population projected to reach 1.7 billion people by 2030, thus generating a large consumer base. According to Signé (2018), consumer spending is expected to more than double in ten years, up from up from $1.1 trillion US dollars in 2015, to $2.5 trillion by 2030, while business-to-business spending will reach $4.2 trillion, up from $1.6 trillion in 2015.

Will this serve Africa, or the rest of the world? If anything, COVID-19 has served as a wakeup call. It has clearly shown to the least convinced that the old model of stagnating at the bottom of global value chains and competing between neighbours on exporting low value-added products is not serving us well. While Africa accounts for about 3% of global trade, it is overly dependent on the rest of the world, and has less intra-regional trade than any other part of the world, approximately 16%, compared to more than 55% in America, Asia and Europe.

The solution lies within our African borders, through intra-African trade. An interesting feature about intra-African trade is that higher technology manufactures make up a higher share of trade than extra-African trade. While medium and high technology manufactures account for 14.1% of African countries' exports to developed countries they represent just over one quarter of intra-African trade. The African Continental Free Trade Area (AfCFTA) provides a great opportunity to increase the share of regional and high and medium technology goods through the promotion of regional value chains. Industries will access larger markets and countries will trade in intermediate goods, thus mutually benefit from the agreement.

The Fourth Industrial Revolution (4IR) is already in Africa and should be leveraged. Africa's demography is a huge boon in this regard, representing both a source of data and a reservoir of increasingly digitally savvy consumers. The African Development Bank has identified no less than 6,500 technology start-ups in Africa, among which around 10% develop 4IR applications (712 start-ups). 3D printing for example could speed up industrial development in Africa by lowering barriers to entry for small businesses such as investments in machinery, infrastructure, and labour, compared to traditional industry.

Leveraging these game changers will, of course, require deliberate efforts in several well-known constraints, especially access to infrastructure, skills and knowledge, finance, and improved governance. I will focus on three catalysts that can enable Africa as a continent to claim its rightful place in the global stage.

1. **A mindset shift and unapologetic leadership:** Africa must refuse to be both the world's most populous and most externally dependent continent at the dawn of 2050. The narratives describing Africa's fate are most often framed in terms of constraints and the need for catching up with the rest of the world. This positions the continent as a victim lacking agency, an ideal consumer

of goods, services, external advice and solutions. Fortunately, official African voices are getting stronger, with countries actively positioning themselves as leaders and solution providers, from the areas of climate change to diamond trade. African leaders should unapologetically protect the continent's best interests while implementing industrialisation strategies.

2. Creating a critical mass of African led regional business champions: Africa needs to nurture a critical mass of entrepreneurs whose long-term interests are aligned with Africa's aspirations, who have the scale and agency to drive the growth of regional value chains, thereby generating sizeable spillover effects in their regions in terms of small-medium enterprise development and formal job creation. Such champions are already emerging in the continent, but remain concentrated in South Africa, thus suggesting that many more champions can emerge and benefit from the AfCFTA.

3. Sustained investment in human capital: In addition to the sheer population growth, the share of our working age population is expected to rise for several decades, from 35% in 2019 up to 43% of our total population in 2050. If the requisite investments are consistently made over the next decades, this group can constitute a wealth of future business, political and social leaders, workers, consumers, savers and investors. If Africa is to leverage the 4IR, not just as a consumer of 4IR technologies, but as a producer, a deliberate and sustained focus is needed on nurturing human capital, leveraging talent from the diaspora and promoting entrepreneurial skills and character.

Acronyms

4IR	Fourth Industrial Revolution
AfCDC	Africa Centres for Disease Control and Prevention
AfCFTA	African Continental Free Trade Area
AI	Artificial Intelligence
AIDS	Acquired Immunodeficiency Syndrome
AU	African Union
AVATT	African Vaccine Acquisition Task Team
BS	Bertelsmann Striftung
CEO	Chief Executive Officer
CL	Compulsory Licence
COP26	2021 United Nations Climate Change Conference
COVAX	COVID-19 Vaccines Global Access
COVID-19	Coronavirus Disease
CRVS	Civil Registration and Vital Statistics
CSO	Civil Society Organisation
DG INTPA	Directorate-General for International Partnerships (of the European Union)
EAC	East African Community
ECOWAS	Economic Community of West African States
ESG	Environmental, Social and Governance
EU	European Union
FinTech	Financial Technology
G20	Group of Twenty
G7	Group of Seven
GDP	Gross Domestic Product
GFI	Global Financial Integrity
GI	Global Integrity
GPMB	Global Preparedness Monitoring Board
H1N1	Influenza A virus subtype H1N1
HIC	High Income Country
HIV	Human Immunodeficiency Virus
IFC	International Finance Corporation
IHR	International Health Regulations
IIAG	Ibrahim Index of African Governance
IMF	International Monetary Fund
IMG	International Medical Graduate
IPU	International Parliamentary Union
IT	Information Technology
ITU	International Telecommunication Union
JHU CSSE	The Center for Systems Science and Engineering at John Hopkins University
LMIC	Lower Middle Income Country
MAV+	Manufacturing and Access to Vaccines, Medicines and Health Technologies
MEF	Monitoring and Evaluation Framework
MERS	Middle East Respiratory Syndrome
MIF	Mo Ibrahim Foundation
MPP	Medicine Patents Pool
mRNA	Messenger Ribonucleic Acid
NCD	Non-Communicable Disease
NGN	Now Generation Network
OECD	Organisation for Economic Co-operation and Development
PAVM	Partnerships for African Vaccine Manufacturing
PHSM	Public Health and Social Measures
R&D	Research and Development
REC	Regional Economic Community
RSF	Reporters Without Borders
SARS	Severe Acute Respiratory Syndrome
SDGs	Sustainable Development Goals
SGBV	Sexual and Gender-based Violence
TB	Tuberculosis
TEI	Team Europe Initiative
TRIPS	rade-Related Aspects of Intellectual Property Rights
UHC	Universal Health Coverage
UK	United Kingdom
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
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNICEF	United Nations Children's Fund
UPU	Universal Postal Union
US	United States of America
V-DEM	Varieties of Democracy
VLA	Voluntary Licensing Agreement
WB	World Bank
WEF	World Economic Forum
WHO	World Health Organization
WTO	World Trade Organization

Civil Registration (GI)	This indicator assesses the extent to which birth and death certificates are available within 30 days free of charge.
Access to Healthcare (V-DEM/WHO)	This indicator measures the extent to which households spend on health directly out of pocket and basic high-quality healthcare is guaranteed to all.
Compliance with International Health Regulations (IHR) (WHO)	This indicator measures compliance with the WHO International Health Regulations. It is based on the average of 13 International Health Regulations core capacity scores from the core capacity index and shows the percentage of attributes of 13 core capacities that have been attained at a specific point in time. The 13 core capacities are: (1) National legislation, policy and financing; (2) Coordination and National Focal Point communications; (3) Surveillance; (4) Response; (5) Preparedness; (6) Risk communication; (7) Human resources; (8) Laboratory; (9) Points of entry; (10) Zoonotic events; (11) Food safety; (12) Chemical events; (13) Radio nuclear emergencies.
Education (BS/UNDP/UNESCO/V-DEM/ WB/WEF)	This sub-category assesses equality and gender parity in education, education enrolment and completion, human resources in education, as well as education quality including alignment with market needs.
Gender (GI/IPU/OECD/V-DEM/WB)	This sub-category assesses the political power and representation of women, equal civil liberties for women, socioeconomic opportunity for women, equal access to public services for women and laws on violence against women.
Media Freedom (GI/V-DEM/RSF)	This indicator assesses the extent to which the journalists are free to do their work, the media is unbiased, free and diverse and there is no media censorship.
Social Safety Nets (BS/GI)	This indicator accesses the extent to which social safety nets exist to compensate for social risks of the market economic system, including social safety nets for the elderly, those with an illness or health conditions, or the unemployed.
Access to Energy (WB)	This indicator measures the percentage of the population with access to electricity. Electrification data are collected from industry, national surveys and international sources.
Digital Access (ITU/WB)	This indicator measures the share of households with a computer and internet access, as well as internet speed and internet security.
Transport Network (WEF/UPU)	This indicator assesses the quality, coverage and efficiency of a country's transport network including road, rail and air infrastructure. It also assesses the performance of the postal service.

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Drawing on the key findings that emerged from the 2021 Forum Report: *COVID-19 in Africa one year on: Impact and Prospects* and accompanying debates at the 2021 Ibrahim Governance Weekend (IGW), *COVID-19 in Africa: a challenging road to recovery* analyses the impact of COVID-19 in Africa and the continent's potential to respond. This research publication does not intend, by any means, to be exhaustive. The topics and data selected are those that the Mo Ibrahim Foundation (MIF) finds the most relevant.

In addition to the vaccination issue (Challenge Zero), this report unpacks ten key challenges in the areas of health, society, and the economy that African countries need to overcome to ensure both a sustainable and transformational recovery, as well as preparedness for future pandemics. Each challenge section contains key findings from the Forum Report and IGW discussions, as well as analyses using data from the Ibrahim Index of African Governance (IIAG). The IIAG analysis uses the most relevant IIAG measure to provide a picture of where each African country stands to overcome that challenge on the road to recovery.

The main sources for this report are the 2021 Forum Report – COVID-19 in Africa one year on: Impact and Prospects, the 2021 Ibrahim Governance (IIAG) Weekend Summary of the discussions, as well the 2020 IIAG dataset. All additional sources for this document are listed in the references provided at the end of this report.

Each graph is accompanied by its respective data source. Where necessary, additional notes on the data used are also provided throughout the report.

African averages are, in most cases, taken directly from source. When they have been calculated for the purpose of this report, they are unweighted. As not all sources provide data for the 54 African countries, some averages may not include data from all countries. Please see the sources for full details.

Data for Morocco may or not may include Western Sahara depending on the source.

The IIAG is a composite index which gives a statistical measure of governance performance in 54 African countries, produced by MIF. The 2020 IIAG, its latest iteration, covers a ten-year time period from 2010 to 2019. Compiled by combining 237 variables from 40 independent African and international data sources, the 2020 IIAG is the most comprehensive dataset on African governance. To distinguish the IIAG, all measures from the IIAG included in this report are italicised, as opposed to measures obtained from other sources. To download all IIAG resources and datasets, please visit: https://mo.ibrahim.foundation/iiag/downloads

The Foundation consults on a regular basis with its Now Generation Network (NGN), a group of over 350 young and mid-level career representatives from 54 African countries and a wide range of disciplines. This report contains relevant findings from two NGN surveys, the first one published in July 2020 with responses by 143 members and the second one, unpublished, with responses by 100 members gathered in May 2021. For more information about MIF's NGN, please visit: https://mo.ibrahim.foundation/ngn

The expert perspectives included in this report are solely the opinions of the respective authors, and do not necessarily reflect the opinions or views of the Mo Ibrahim Foundation nor is the inclusion of the expert perspective an endorsement of the authors' opinions.

All data on COVID-19 confirmed cases and reported deaths, COVID-19 vaccine doses administered per 100 people, and G20 COVID-19 vaccine donations have been taken from MIF's COVID-19 in Africa tracker (update from 18 November 2021). Unless stated otherwise, primary sources are the following: the COVID-19 Dashboard by the Johns Hopkins University Center for Systems Science and Engineering (JHU CSSE) for epidemiologic statistics, Bloomberg's COVID-19 Vaccine Tracker for the data on COVID-19 vaccine doses administered per 100 people, and Duke Global Health Innovation Center's Launch and Scale Speedometer for the data on G20 COVID-19 vaccine donation pledges.

Unless stated otherwise, all GDP and growth figures are taken from the World Economic Outlook from the International Monetary Fund (IMF), and population statistics are taken from the 2019 revision of the World Population Prospects from the United Nations Department of Economic and Social Affairs (UNDESA). For population projections, medium variant estimates are used.

Dollars ($) are US dollars unless indicated otherwise.

MIF is committed to making data freely available and accessible. We welcome and encourage any accurate reproduction, translation and dissemination of this material. The material must be attributed to the Mo Ibrahim Foundation, but not in any way that suggests that the Foundation endorses you or your use of the material.

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Annual Average Trends (AATs)

The AATs for the ten-year (2010-2019) and five-year (2015-2019) periods are calculated as follows:

- The AAT for the ten-year period (AAT10) is the total change in score between 2010 and 2019, divided by nine (the number of annual time periods experienced).
- The AAT for the five-year period (AAT5) is the total change in score between 2015 and 2019, divided by four (the number of annual time periods experienced).

Trend classifications are assigned based on the full precision of the ten- and five-year AATs. Please see the Reading the IIAG results section for more information on the trend classifications.

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31.0	30.2	64.9	32.7	18.5	59.5	31.0	81.2	76.2	52.4	35.1	16.2	18.5
52.8	45.1	66.7	45.3	36.5	74.1	52.8	66.5	66.7	76.1	47.2	25.6	44.0
46.1	18.1	100.0	18.1	28.6	69.4	46.1	87.5	11.2	58.3	63.9	11.1	52.0
22.6	22.0	80.3	22.3	30.6	33.3	22.6	45.4	22.4	31.2	22.9	10.5	27.1
87.5	18.9	99.2	27.7	58.9	23.6	87.5	48.7	44.9	49.0	57.4	14.6	28.7
60.2	38.4	59.2	26.0	42.3	56.7	60.2	63.8	84.9	57.6	59.6	24.1	44.1
63.1	27.4	71.4	26.2	35.7	60.7	63.1	66.7	100.0	56.0	59.5	21.4	42.5
63.4	46.3	31.9	50.1	36.9	60.9	63.4	80.1	73.5	54.8	43.9	13.1	38.0
59.8	49.0	100.0	33.3	71.2	59.7	59.8	78.7	86.2	59.4	45.2	17.9	49.2
65.0	25.0	70.8	0.0	50.5	62.5	65.0	12.5	64.5	75.0	62.0	37.5	47.4
50.0	44.6	21.9	20.3	17.1	39.7	50.0	80.9	100.0	42.6	87.2	30.8	46.1
55.0	50.4	73.6	44.1	42.3	66.1	55.0	72.8	68.5	57.4	50.7	30.2	47.2
53.5	87.4	77.4	81.2	57.6	90.8	53.5	85.3	76.2	59.6	56.3	56.2	55.6
45.8	98.7	51.9	99.8	41.8	98.7	45.8	100.0	83.0	53.6	47.6	85.1	58.8
26.9	88.8	92.2	84.3	41.0	92.6	26.9	93.8	83.1	26.0	20.1	6.3	38.9
82.5	99.8	85.1	99.5	49.9	99.9	82.5	99.8	91.2	92.9	85.0	68.6	79.2
76.8	49.8	66.9	40.7	67.1	73.8	76.8	68.5	70.6	43.5	73.2	32.2	67.1
59.5	99.7	93.3	81.8	70.7	89.2	59.5	64.6	87.8	81.8	67.9	89.0	65.3
29.6	48.8	75.0	39.9	75.0	64.7	29.6	76.4	41.5	59.0	44.2	24.8	24.1
58.2	36.3	75.7	50.9	34.7	70.9	58.2	87.5	68.7	69.8	41.5	32.4	52.1
68.4	1.6	69.3	39.4	25.5	47.6	68.4	67.4	64.6	65.8	45.7	1.8	52.1
39.3	65.8	73.7	29.6	35.6	47.4	39.3	75.8	36.2	50.3	21.1	21.1	31.9
66.5	69.1	90.2	56.3	42.7	89.4	66.5	68.5	78.7	64.6	41.1	33.3	50.3
64.1	62.8	91.8	31.1	47.8	58.3	64.1	67.9	91.4	44.2	73.8	28.7	79.1
52.8	57.4	53.2	32.0	22.1	74.7	52.8	91.3	72.4	59.1	26.0	31.5	50.2
48.0	26.9	82.2	29.2	34.6	52.0	48.0	65.9	44.3	53.4	45.3	15.6	35.0
31.0	30.2	64.9	32.7	18.5	59.5	31.0	81.2	76.2	52.4	35.1	16.2	18.5
52.8	45.1	66.7	45.3	36.5	74.1	52.8	66.5	66.7	76.1	47.2	25.6	44.0
46.1	18.1	100.0	18.1	28.6	69.4	46.1	87.5	11.2	58.3	63.9	11.1	52.0
22.6	22.0	80.3	22.3	30.6	33.3	22.6	45.4	22.4	31.2	22.9	10.5	27.1
87.5	18.9	99.2	27.7	58.9	23.6	87.5	48.7	44.9	49.0	57.4	14.6	28.7
60.2	38.4	59.2	26.0	42.3	56.7	60.2	63.8	84.9	57.6	59.6	24.1	44.1
63.1	27.4	71.4	26.2	35.7	60.7	63.1	66.7	100.0	56.0	59.5	21.4	42.5
63.4	46.3	31.9	50.1	36.9	60.9	63.4	80.1	73.5	54.8	43.9	13.1	38.0
59.8	49.0	100.0	33.3	71.2	59.7	59.8	78.7	86.2	59.4	45.2	17.9	49.2
65.0	25.0	70.8	0.0	50.5	62.5	65.0	12.5	64.5	75.0	62.0	37.5	47.4
50.0	44.6	21.9	20.3	17.1	39.7	50.0	80.9	100.0	42.6	87.2	30.8	46.1
39.3	65.8	73.7	29.6	35.6	47.4	39.3	75.8	36.2	50.3	21.1	21.1	31.9
66.5	69.1	90.2	56.3	42.7	89.4	66.5	68.5	78.7	64.6	41.1	33.3	50.3
64.1	62.8	91.8	31.1	47.8	58.3	64.1	67.9	91.4	44.2	73.8	28.7	79.1
52.8	57.4	53.2	32.0	22.1	74.7	52.8	91.3	72.4	59.1	26.0	31.5	50.2
48.0	26.9	82.2	29.2	34.6	52.0	48.0	65.9	44.3	53.4	45.3	15.6	35.0
31.0	30.2	64.9	32.7	18.5	59.5	31.0	81.2	76.2	52.4	35.1	16.2	18.5
82.5	99.8	85.1	99.5	49.9	99.9	82.5	99.8	91.2	92.9	85.0	68.6	79.2
76.8	49.8	66.9	40.7	67.1	73.8	76.8	68.5	70.6	43.5	73.2	32.2	67.1
59.5	99.7	93.3	81.8	70.7	89.2	59.5	64.6	87.8	81.8	67.9	89.0	65.3
29.6	48.8	75.0	39.9	75.0	64.7	29.6	76.4	41.5	59.0	44.2	24.8	24.1

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30.2	64.9	32.7	18.5	59.5	31.0	81.2	76.2	52.4	35.1	16.2	18.5	100.0
45.1	66.7	45.3	36.5	74.1	52.8	66.5	66.7	76.1	47.2	25.6	44.0	59.2
18.1	100.0	18.1	28.6	69.4	46.1	87.5	11.2	58.3	63.9	11.1	52.6	100.0
22.0	80.3	22.3	30.6	33.3	22.6	45.4	22.4	31.2	22.9	10.5	27.3	50.0
18.9	99.2	27.7	58.9	23.6	87.5	48.7	44.9	49.0	57.4	14.6	28.7	32.6
38.4	59.2	26.0	42.3	56.7	60.2	63.8	84.9	57.6	59.6	24.1	44.7	58.6
27.4	71.4	26.2	35.7	60.7	63.1	66.7	100.0	56.0	59.5	21.4	42.5	50.0
46.3	31.9	50.1	36.9	60.9	63.4	80.1	73.5	54.8	43.9	13.1	38.0	84.5
49.0	100.0	33.3	71.2	59.7	59.8	78.7	86.2	59.4	45.2	17.9	49.2	77.8
25.0	70.8	0.0	50.5	62.5	65.0	12.5	64.5	75.0	62.0	37.5	47.4	12.5
44.6	21.9	20.3	17.1	39.7	50.0	80.9	100.0	42.6	87.2	30.8	46.7	68.0
50.4	73.6	44.1	42.3	66.1	55.0	72.8	68.5	57.4	50.7	30.2	47.2	76.2
87.4	77.4	81.2	57.6	90.8	53.5	85.3	76.2	59.6	56.3	56.2	55.6	89.4
98.7	51.9	99.8	41.8	98.7	45.8	100.0	83.0	53.6	47.6	85.1	58.8	100.0
88.8	92.2	84.3	41.0	92.6	26.9	93.8	83.1	26.0	20.1	6.3	38.9	100.0
99.8	85.1	99.5	49.9	99.9	82.5	99.8	91.2	92.9	85.0	68.6	79.2	100.0
49.8	66.9	40.7	67.1	73.8	76.8	68.5	70.6	43.5	73.2	32.2	67.1	71.9
99.7	93.3	81.8	70.7	89.2	59.5	64.6	87.8	81.8	67.9	89.0	65.3	75.2
48.8	75.0	39.9	75.0	64.7	29.6	76.4	41.5	59.0	44.2	24.8	24.1	88.5
36.3	75.7	50.9	34.7	70.9	58.2	87.5	68.7	69.8	41.5	32.4	52.7	93.5
1.6	69.3	39.4	25.5	47.6	68.4	67.4	64.6	65.8	45.7	1.8	52.1	98.2
65.8	73.7	29.6	35.6	47.4	39.3	75.8	36.2	50.3	21.1	21.1	31.9	81.5
69.1	90.2	56.3	42.7	89.4	66.5	68.5	78.7	64.6	41.1	33.3	50.3	100.0
62.8	91.8	31.1	47.8	58.3	64.1	67.9	91.4	44.2	73.8	28.7	79.1	67.6
57.4	53.2	32.0	22.1	74.7	52.8	91.3	72.4	59.1	26.0	31.5	50.2	90.2
26.9	82.2	29.2	34.6	52.0	48.0	65.9	44.3	53.4	45.3	15.6	35.6	68.4
30.2	64.9	32.7	18.5	59.5	31.0	81.2	76.2	52.4	35.1	16.2	18.5	100.0
45.1	66.7	45.3	36.5	74.1	52.8	66.5	66.7	76.1	47.2	25.6	44.0	59.2
18.1	100.0	18.1	28.6	69.4	46.1	87.5	11.2	58.3	63.9	11.1	52.6	100.0
22.0	80.3	22.3	30.6	33.3	22.6	45.4	22.4	31.2	22.9	10.5	27.3	50.0
18.9	99.2	27.7	58.9	23.6	87.5	48.7	44.9	49.0	57.4	14.6	28.7	32.6
38.4	59.2	26.0	42.3	56.7	60.2	63.8	84.9	57.6	59.6	24.1	44.7	58.6
27.4	71.4	26.2	35.7	60.7	63.1	66.7	100.0	56.0	59.5	21.4	42.5	50.0
46.3	31.9	50.1	36.9	60.9	63.4	80.1	73.5	54.8	43.9	13.1	38.0	84.5
49.0	100.0	33.3	71.2	59.7	59.8	78.7	86.2	59.4	45.2	17.9	49.2	77.8
25.0	70.8	0.0	50.5	62.5	65.0	12.5	64.5	75.0	62.0	37.5	47.4	12.5
44.6	21.9	20.3	17.1	39.7	50.0	80.9	100.0	42.6	87.2	30.8	46.7	68.0
65.8	73.7	29.6	35.6	47.4	39.3	75.8	36.2	50.3	21.1	21.1	31.9	81.5
69.1	90.2	56.3	42.7	89.4	66.5	68.5	78.7	64.6	41.1	33.3	50.3	100.0
62.8	91.8	31.1	47.8	58.3	64.1	67.9	91.4	44.2	73.8	28.7	79.1	67.6
57.4	53.2	32.0	22.1	74.7	52.8	91.3	72.4	59.1	26.0	31.5	50.2	90.2
26.9	82.2	29.2	34.6	52.0	48.0	65.9	44.3	53.4	45.3	15.6	35.6	68.4
30.2	64.9	32.7	18.5	59.5	31.0	81.2	76.2	52.4	35.1	16.2	18.5	100.0
99.8	85.1	99.5	49.9	99.9	82.5	99.8	91.2	92.9	85.0	68.6	79.2	100.0
49.8	66.9	40.7	67.1	73.8	76.8	68.5	70.6	43.5	73.2	32.2	67.1	71.9
99.7	93.3	81.8	70.7	89.2	59.5	64.6	87.8	81.8	67.9	89.0	65.3	75.2
48.8	75.0	39.9	75.0	64.7	29.6	76.4	41.5	59.0	44.2	24.8	24.1	88.5