

Social Policy and the Quest for Inclusive Development

Research Findings from Sub-Saharan Africa

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This United Nations Research Institute for Social Development (UNRISD) Programme Paper has been produced with the support of the Swedish International Development Cooperation Agency (Sida), the United Kingdom's Department for International Development (DFID) and the Ford Foundation. UNRISD also thanks the governments of Denmark, Finland, Mexico, Norway, Sweden, Switzerland and the United Kingdom for their core funding.

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Acronyms

AIDS	acquired immune deficiency syndrome
ANC	African National Congress
BWI	Bretton Woods institution
CDF	Comprehensive Development Framework
CSG	Child Support Grant
G8	Group of 8
GCF	gross capital formation
GDP	gross domestic product
GDS	gross domestic savings
HIPC	Heavily Indebted Poor Countries
HIV	human immunodeficiency virus
HMO	Health Maintenance Organization
IDASA	Institute for Democracy in South Africa
IMF	International Monetary Fund
MDG	Millennium Development Goal
NEPAD	New Partnership for Africa's Development
NGO	non-governmental organization
NHIS	National Health Insurance Scheme
NLC	National Liberation Council Ghana
OECD	Organisation for Economic Co-operation and Development
PPP	purchasing power parity
PRSP	Poverty Reduction Strategy Paper
WTO	World Trade Organization

Acknowledgements

I would like to express my appreciation to the several people whose support and commitment have contributed enormously to this research report. To Thandika Mkandawire, Huck-ju Kwon, Nina Torm and other colleagues at UNRISD in Geneva, I would like to say "thank you" for constant prodding and support. Second, I would like to thank the colleagues with whom I worked on the Africa-regional team. Third, I should thank Huck-ju Kwon and the two anonymous reviewers for their comments on earlier versions of this paper. Sadly, Chachage Seithy Chachage, an exemplary colleague and son of Africa, and a soulmate of long standing, passed away in 9 July 2006. This paper is dedicated to his memory.

Summary/Résumé/Resumen

Summary

This paper provides a reflective overview of the eight studies commissioned under the UNRISD project on *Social Policy in Late Industrializers: Sub-Saharan Africa and the Challenge of Social Policy*. The studies involved subregional and thematic social policy concerns. Within this framework, one study was concerned with overall conceptual issues and macroeconomic policy directions, focusing on the dominant or ruling ideas on development that shaped each phase of sub-Saharan Africa's post-colonial history, and how these ruling ideas shaped economic and social policies. A second set of studies focused on health, water and sanitation dimensions of social policy, while a third examined education and labour market policies. Using comparative techniques, these studies examined clusters of countries in East Africa, Southern Africa and West Africa.

Social policies are understood to be specific and deliberate policies (enacted and pursued) that positively affect social well-being and security. The critical areas of focus therefore were education, health and sanitation, and social security (including social insurance, pension schemes, and policies directed at reducing socioeconomic vulnerability). The idea of a tolerable, minimum level of livelihood and decency is intuitive and socially constructed, and normative (ideological) rather than technical. Such concerns define the links between economic and social policies; the desirable system of social relations and governance; and the specific instruments for achieving the perceived minimum level of well-being.

The paper examines the gaps that may exist between macroeconomic policies, social policies and social policy outcomes; and between the intended and unintended outcomes of social policies and social forces that impact on them. Variations in social development outcomes in the countries examined point to the importance of human agency in mitigating the worst impacts of a debilitating policy environment and a country's ability to manoeuvre. Equally important is the configuration and orientation of social forces within the state and civil society that shape (initiate, contest, enact) social policies.

One of the main ideas that has shaped economic and social policy thinking and practice in post-colonial sub-Saharan Africa is the nationalist discourse. In turn, two concerns have shaped the nationalist discourse, across the ideological divide: economic growth and national unity. The eradication of ignorance, poverty and disease were central to the nationalist agenda, and economic growth was seen as a means for achieving these objectives. If the nationalist projects of nation-building and growth provided the agenda or ends, however, changing advice and donor agendas shaped the means.

The period from 1960 to 1980 witnessed a significant improvement in a range of social development indicators. However, the post-1980 period—a period of neoliberal adjustment programmes—showed two patterns: significant volatility in gross domestic savings (GDS) and gross capital formation (GCF), and shortfall in GDS relative to GCF.

The research on the education and health policy environments highlighted the influence of the wider, dominant perception of education in the early (nationalist) post-colonial period. Education was not only about raising literacy levels and providing the human resources needed for economic growth, it was the individual's means of securing better livelihood. The crisis that was to become emblematic of the early 1980s emerged in different ways in the countries studied. Nigeria witnessed a collapse in public spending on education in the 1980s. In Ghana and Zimbabwe, there were efforts to protect social spending. In Botswana, growth in the economy was followed by an increase in social spending, albeit at a much later stage. An assessment of the education dimension of social policy objectives raises the twin issues of gender disparity and the role of agency in the pattern of achievement. There is evidence, however, of the adverse impact of the adjustment years. In countries where there has been a

dramatic rise in student enrolment, the increase has been “financed” by overcrowding, decline in quality of teaching and the neglect of research activities. While “user-fees” have often been promoted on the grounds of equity of access, there is little evidence that it achieved equity – indeed, the reverse has been the case.

As with education, two patterns of health provisioning emerged pre- and post-1980s, and it was perhaps in the area of health care provisioning that the aggressive retrenchment of the state and cuts in social expenditure had the most negative effects. In countries already faced with rapidly declining household income levels and the rising tide of poverty, the imposition of user-fees had the effect of mediating citizenship with capacity to engage in the market. The HIV/AIDS pandemic and its phenomenal spread across much of sub-Saharan Africa is emblematic of this massive entitlement failure, and of how the retrenchment of health provisioning undermined the capacity of many countries to cope with the pandemic. As the impact of the efforts to retrench the public realm in social provisioning has become clear, and as the mechanism of user-fees has been revealed as more ideological than financially sound, efforts are being made to find new ways of funding national health care needs.

On the broad social policy front, the current pursuit of the claimed objectives of reducing poverty and inequality through a raft of targeted mechanisms is paradoxical in the light of the existing body of knowledge about the relationship between institutional frameworks or models of social policy, on one hand, and poverty and inequality, on the other. Studies of targeted social policies have demonstrated that even in the most administratively robust state with extensive surveillance systems, targeting suffers from extensive problems, such as undercoverage and leaking to those outside the targeted group. What is significant for policy making and policy outcomes, generally, is that where coverage has improved, this was the result not of conflict between a virtuous civil society and a vicious state, but of key policy makers and state functionaries taking a leadership role, in partnership with advocacy agencies.

In many ways, the last 20 years have highlighted the crisis of citizenship and statehood in most African countries. The implications of widespread deprivation and the social development crisis, highlighted in the research and summarized in this paper, are evident in the rising number of state implosions and conflicts. While not wishing to suggest that adjustment policies created these horrendous events, the author suggests a link between the retrenchment of state capacity for social provisioning and the crisis of statehood. The retreat of the state from social delivery (health care, education, human security, and so on) undermined the relevance and the legitimacy of the state in the eyes of its citizens.

The paper concludes by highlighting six imperatives of rethinking social policy in sub-Saharan Africa, beyond the neoliberal policy thrust of the last 25 years. These are based on three normative concerns: inclusivity, development, and democracy – where “public reasoning” is the basis of public and civic relationships.

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Résumé

Ce document donne une vue d’ensemble de huit études commandées pour le projet *La politique sociale dans les pays venus tardivement à l’industrialisation: L’Afrique subsaharienne et le défi de la politique sociale*. Les études ont porté sur des thèmes et des préoccupations sous-régionales de la politique sociale. Dans ce cadre, l’une d’elles s’est intéressée aux questions conceptuelles générales et aux orientations de la politique macroéconomique, en se concentrant sur les idées dominantes qui ont marqué le développement lors de chacune des phases de l’histoire post-coloniale de l’Afrique subsaharienne, et sur la manière dont ces idées ont façonné les politiques économiques et sociales. Une deuxième série d’études a traité de la santé, de l’eau et de l’assainissement comme autant de dimensions de la politique sociale, tandis qu’une troisième a examiné les politiques de l’éducation et de l’emploi. Ces études, qui ont utilisé des techniques

comparatives, ont porté sur des groupes de pays de l'Afrique de l'Est, de l'Afrique australe et de l'Afrique de l'Ouest.

Par "politiques sociales" s'entendent ici des politiques spécifiques et délibérées (adoptées et appliquées) ayant des effets positifs sur les conditions d'existence et la sécurité sociale. Aussi les chercheurs se sont-ils surtout intéressés à l'éducation, à la santé et à l'assainissement et à la sécurité sociale (qui couvre les assurances sociales, les régimes de pension et les politiques tendant à réduire la vulnérabilité socio-économique). L'idée d'un niveau de revenu minimum, indispensable à une vie décente et tolérable, est intuitive et normative (idéologique) plutôt que technique et résulte d'une construction sociale. De telles préoccupations définissent les liens entre les politiques économiques et sociales; le système de gouvernance et les rapports sociaux souhaitables; et les moyens à employer pour parvenir à ce niveau de vie perçu comme minimum.

L'auteur du document examine les décalages qui peuvent exister entre les politiques macroéconomiques, les politiques sociales et les résultats de ces dernières; et entre les résultats voulus et inattendus des politiques sociales et les forces sociales qui ont interféré. Les variations des résultats obtenus en matière de développement social dans les pays examinés indiquent l'importance de l'agence humaine, qui atténue les pires conséquences d'une politique néfaste de l'environnement, et la capacité de manœuvre d'un pays. D'autres facteurs sont cependant tout aussi importants, comme la configuration et l'orientation des forces sociales qui façonnent (introduisent, contestent, appliquent) les politiques sociales dans l'Etat et la société civile.

Le discours nationaliste est l'un des courants qui ont le plus marqué les politiques économiques et sociales, leur théorie et leur pratique, en Afrique subsaharienne post-coloniale. Il était hanté par deux préoccupations, présentes des deux côtés de la fracture idéologique: la croissance économique et l'unité nationale. Les nationalistes tenaient avant tout à venir à bout de l'ignorance, de la pauvreté et de la maladie, et voyaient dans la croissance économique le moyen d'atteindre ces objectifs. Si les projets nationalistes de l'édification de la nation et de la croissance ont donné le cap ou fixé les objectifs, les moyens, eux, ont dépendu des conseillers et des donateurs dont les avis changeaient régulièrement.

Entre 1960 et 1980, divers indicateurs du développement social se sont sensiblement améliorés. En revanche, la période qui a suivi, celle des programmes néolibéraux d'ajustement, s'est caractérisée par une importante volatilité de l'épargne intérieure brute et de la formation brute de capital fixe (FBCF) et par un déficit de la première par rapport à la seconde.

Les recherches sur les politiques de l'éducation et de la santé ont mis en évidence la conception plus large de l'éducation qui dominait au début de la période post-coloniale (nationaliste) et son influence. L'éducation était le moyen non seulement d'élever les niveaux d'alphabétisation et de former les ressources humaines nécessaires à la croissance économique, mais aussi, pour l'individu, d'accéder à de meilleures conditions de vie. La crise qui devait devenir emblématique du début des années 80 a commencé de diverses manières dans les pays étudiés. Au Nigéria, les dépenses publiques consacrées à l'éducation se sont effondrées dans les années 80. Le Ghana et le Zimbabwe, eux, se sont efforcés de préserver les dépenses publiques. Au Botswana, la croissance de l'économie a été suivie, bien plus tard, d'une augmentation des dépenses sociales. Toute évaluation de l'éducation comme objectif de la politique sociale soulève deux questions: celles de l'inégalité entre les sexes et du rôle de l'agence dans le mode de réalisation. Il y a cependant des preuves des effets pervers des années d'ajustement. Dans les pays où le nombre des étudiants inscrits a augmenté de manière spectaculaire, cette augmentation s'est "payée" par la surpopulation, la baisse de la qualité de l'enseignement et des activités de recherche négligées. Si l'on a souvent favorisé les "services payants" pour des raisons d'équité d'accès, il n'est guère prouvé qu'ils aient contribué à l'équité; c'est en fait le contraire qui s'est produit.

Comme avec l'éducation, deux types de politiques de santé ont fait leur apparition avant et après les années 80, et c'est peut-être dans le domaine des soins de santé que le désengagement brutal de l'Etat et les réductions des dépenses sociales ont eu les effets les plus néfastes. Dans les pays où les revenus des ménages déclinaient déjà rapidement et où montait la pauvreté, l'introduction des services payants a eu pour effet d'assimiler la citoyenneté à la capacité d'être présent sur le marché. La pandémie du VIH/sida et sa propagation dans presque toute l'Afrique subsaharienne illustrent l'échec massif de l'accession aux droits et montrent à quel point la réduction des dépenses de santé a affaibli la capacité de nombreux pays d'affronter l'épidémie. Aujourd'hui, où les effets du désengagement du secteur public du social sont apparus clairement et où le système des services payants s'est révélé d'inspiration idéologique plutôt que le produit d'une saine gestion financière, des efforts sont faits pour trouver de nouveaux moyens de subvenir financièrement aux besoins nationaux en matière de santé.

Sur le front de la politique sociale, la poursuite actuelle des objectifs proclamés de réduction de la pauvreté et de l'inégalité par divers mécanismes de ciblage est paradoxale à la lumière des connaissances dont on dispose actuellement sur les rapports entre les cadres institutionnels ou les modèles de politique sociale, d'une part, et la pauvreté et l'inégalité, d'autre part. Les études de politiques sociales ciblées ont montré que, même dans les Etats dotés d'une administration forte et de larges systèmes de surveillance, le ciblage a de gros défauts en ce sens qu'il passe à côté de nombreuses personnes qui devraient faire partie du groupe cible et profite parfois à d'autres qui n'y ont pas leur place. L'important, pour la définition de politiques et leurs résultats, tient au fait que, en règle générale, là où la couverture s'est améliorée, ce fut le résultat, en règle générale, non pas d'un conflit entre une société civile vertueuse et un Etat vicieux, mais le fait de décideurs et de fonctionnaires de l'Etat qui avaient pris les choses en main et travaillé en partenariat avec des institutions spécialisées dans la défense des plus pauvres.

Dans la plupart des pays d'Afrique, les 20 dernières années ont été, à bien des égards, celles de la crise des rapports entre Etat et citoyens. Les conséquences d'un dénuement généralisé et de la crise du développement social, mises en évidence par les recherches et résumées dans le document, se manifestent par le nombre croissant de conflits et d'Etats qui implorent. Sans vouloir mettre ces événements effroyables sur le compte des politiques d'ajustement, l'auteur suggère qu'il existe un lien entre la réduction des capacités de l'Etat en matière sociale et la crise de la notion d'Etat. En se désengageant des services sociaux (soins de santé, éducation, sécurité des personnes etc.), l'Etat a perdu de son utilité et de sa légitimité aux yeux des citoyens.

En conclusion, l'auteur invoque six raisons impérieuses de repenser la politique sociale en Afrique subsaharienne et de dépasser le néolibéralisme qui a inspiré les politiques des 25 dernières années. Elles reposent sur trois préoccupations normatives—le souci de ne pas exclure, le développement et la démocratie—dans lesquelles la "raison publique" est la base des rapports entre l'Etat et les citoyens.

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Resumen

Este documento presenta un panorama ponderado de los ocho estudios solicitados en el marco del proyecto de UNRISD sobre *Política social en países tardíamente industrializados: África subsahariana y el desafío de la política social*. Los estudios abarcaban una serie de inquietudes subregionales sobre diversos temas de política social. En este marco, uno de los estudios versaba sobre cuestiones conceptuales generales y direcciones de política macroeconómica, haciendo hincapié en las ideas predominantes o prevaletentes sobre el desarrollo que definieron cada fase de la historia postcolonial del África subsahariana, y en la forma en que estas ideas dieron forma a las políticas económicas y sociales. Otros estudios se concentraron en los aspectos de la política social relativos a la salud, el agua y el saneamiento, mientras otros se

ocupaban de las políticas sobre la educación y el mercado laboral. Mediante el uso de técnicas comparativas, estos estudios examinaron grupos de países del este, el sur y el oeste de África.

Por políticas sociales se entiende aquellas políticas (promulgadas y practicadas) específicas y deliberadas que inciden positivamente sobre el bienestar y la seguridad sociales. Por lo tanto, las áreas críticas de interés son la educación, la salud y el saneamiento y la previsión social (que incluye el seguro social, los planes de pensión y las políticas encaminadas a reducir la vulnerabilidad socioeconómica). La idea de un nivel mínimo tolerable de subsistencia y decencia es intuitiva y se desarrolla socialmente, y es normativa (o ideológica) más que técnica. Estas inquietudes definen las relaciones entre las políticas económicas y sociales, el sistema deseable de relaciones sociales y gobernabilidad y los instrumentos específicos para lograr un nivel mínimo percibido de bienestar.

Este documento examina las lagunas que podrían existir entre las políticas socioeconómicas, las políticas sociales y los resultados de la política social, así como entre los efectos intencionales e imprevistos de las políticas sociales y las fuerzas sociales que les afectan. Las variaciones entre los resultados de desarrollo social en los países examinados revelan la importancia de la intervención humana para mitigar las repercusiones más adversas de un ambiente de políticas venido a menos y la capacidad de maniobra de un país. La misma importancia ha de adscribirse a la configuración y orientación de las fuerzas sociales al interior del Estado y la sociedad civil que definen (inician, disputan, promulgan) las políticas sociales.

Una de las ideas principales que han dado forma al razonamiento y la práctica en materia de política económica y social en el África subsahariana de la era postcolonial es el discurso nacionalista, el cual se ha visto, a su vez, definido por dos elementos presentes en la brecha ideológica: el crecimiento económico y la unidad nacional. La erradicación de la ignorancia, la pobreza y las enfermedades fue un factor central de la agenda nacionalista, en la cual se entendía el crecimiento económico como un medio para lograr tales objetivos. Sin embargo, si bien los proyectos nacionalistas de construcción de la nación y crecimiento aportaron la agenda y los fines, el cambio de orientación y las agendas de los donantes determinaron los medios.

Entre 1960 y 1980, una serie de indicadores del desarrollo social mejoraron considerablemente. No obstante, durante el período posterior a 1980 (época de implantación de los programas neoliberales de ajuste), se observaron dos comportamientos: una alta volatilidad en el ahorro interior bruto y en la formación bruta de capital, junto a una deficiencia del primero respecto del segundo.

La investigación sobre los entornos de las políticas educativas y sanitarias destacó la influencia de la percepción más amplia y predominante que se tenía sobre la educación en el período postcolonial inicial (nacionalista). La educación no se limitaba al simple aumento de los niveles de alfabetización y la formación de los recursos humanos necesarios para el crecimiento económico; constituía también el medio con que contaban las personas para lograr una mejor subsistencia. La emblemática crisis de principios de los años 80 se manifestó de distintas formas en los países estudiados. Nigeria vivió el colapso del gasto público en educación en los años 80; Ghana y Zimbabwe tomaron medidas para proteger el gasto social; el crecimiento de la economía de Botswana fue seguido de un incremento del gasto social, si bien en una etapa muy posterior. La evaluación de la dimensión de la educación en los objetivos de la política plantea las cuestiones interconectadas de la disparidad de género y el papel de la intervención humana en el modelo de consecución. No obstante, existen indicios concretos del efecto pernicioso de los años de ajuste. En los países donde se ha registrado un aumento marcado de la matrícula estudiantil, el incremento ha sido obedecido al hacinamiento, la disminución de la calidad de la enseñanza y la relegación de las actividades de investigación. Aunque se ha fomentado la aplicación de una política de cobro al usuario en aras de la equidad de acceso, existen pocos datos probatorios de que esto ha permitido lograr la equidad; de hecho, el efecto ha sido justamente el contrario.

Al igual que en el caso de la educación, en los períodos previo y posterior a los años 80 surgieron dos modelos de provisión de servicios de salud, y fue probablemente en el área de prestación de atención a la salud donde la abrupta disminución de la presencia del Estado y los recortes del gasto social tuvieron los efectos más perniciosos. En los países que ya enfrentaban un rápido declive de sus niveles de ingreso y la marea creciente de la pobreza, la imposición del cobro al usuario tuvo el efecto de mermar los medios de la ciudadanía con capacidad para participar en el mercado. La pandemia del VIH/SIDA y su impresionante propagación en buena parte del África subsahariana es representativa de este fracaso generalizado de preservación de los derechos y de la forma en que la reducción de la prestación de servicios de salud socavó la capacidad de muchos países para hacer frente a la pandemia. A medida que se ha hecho patente el impacto de las medidas dirigidas a reducir la participación pública en la protección social y el mecanismo de cobro al usuario ha revelado una sustentación más ideológica que financiera, se han desplegado esfuerzos por encontrar nuevas formas de financiar las necesidades nacionales de atención a la salud.

En el ámbito más general de la política social, las medidas encaminadas a lograr los objetivos enunciados de reducción de la pobreza y la desigualdad por medio de un sinnúmero de mecanismos específicos resultan paradójicas a la luz de la información disponible sobre la relación entre, por una parte, los marcos institucionales o modelos de política social y, por la otra, la pobreza y desigualdad. Los estudios sobre determinadas políticas sociales han demostrado que, incluso en el estado de mayor solidez administrativa con amplios sistemas de vigilancia, la selectividad adolece de grandes problemas, como una cobertura limitada y la filtración de servicios hacia el exterior del grupo seleccionado. Lo importante de la formulación de políticas y sus resultados es, en líneas generales, que en los casos donde ha mejorado la cobertura, el resultado ha sido producto no de conflictos entre una sociedad virtuosa y un Estado vicioso, sino de planificadores y funcionarios estatales clave que han asumido el liderazgo y trabajado conjuntamente con entidades de promoción de la causa.

En los 20 últimos años se ha manifestado de distintas formas la crisis de ciudadanía y Estado en casi todos los países africanos. Las consecuencias de la privación generalizada y la crisis de desarrollo social, que se destacan en la investigación y se resumen en este documento, resultan obvias en el creciente número de implosiones de estados y conflictos internos. Sin pretender sugerir que las políticas de ajuste generaron estos horribles sucesos, el autor hace ver un vínculo entre la reducción de la capacidad del Estado para brindar protección social y la crisis de Estado. El retiro del Estado del ámbito de la prestación de servicios sociales (atención a la salud, educación, seguridad ciudadana, etc.) socavó la pertinencia y legitimidad del Estado ante sus ciudadanos.

El documento concluye realizando seis aspectos perentorios de la reformulación de la política social en el África Subsahariana, a fin de superar el impacto de la política neoliberal de los 25 últimos años. Estos aspectos se basan en tres inquietudes normativas: inclusión, desarrollo y democracia, donde el razonamiento público constituye la base de las relaciones públicas y cívicas.

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1. Introduction

This paper provides an overview of the research project on *Social Policy in Late Industrializers: Sub-Saharan Africa and the Challenge of Social Policy*. Eight studies were commissioned focusing on four regional and linguistic clusters, and organized around two sets of thematic concerns. East Africa, Southern Africa and West Africa formed the regional cluster, but this was supplemented by a study of selected francophone West and Central African countries. The thematic focuses of the studies are education and labour market issues on the one hand, and health, water and sanitation issues on the other. The concern of this paper is not so much to summarize the findings from the studies; it is more concerned with tying together some of the themes that have emerged from the studies, and reconnecting these to the conceptual issues in social policy broadly, and in the connection between social policy and development concerns, specifically. The concerns are tied up in section 4 of this paper with a reflection on six essential elements or *imperatives* in rethinking social policy in sub-Saharan Africa. The imperatives, as the research project, are based on three normative concerns: inclusivity, development, and democracy—where “public reasoning,” as Amartya Sen (2004) puts it, is foundational to the ordering of public and civic relationships.

For the purpose of analysis, social policy is defined as the collective public efforts at affecting and protecting the social well-being of the people within a given territory. Beyond immediate protection from social destitution, social policy might cover education and health care provision, habitat, food security and sanitation, and guarantee some measure of labour market protection. The idea of a tolerable, minimum level of livelihood and decency is intuitive and socially constructed, and normative (ideological) rather than technical. These define the links between economic and social policies; the desirable system of social relations and governance; and the specific instruments for achieving the perceived minimal level of well-being. But unlike much of the framing of social policy issues in the global North, social policy in sub-Saharan Africa has not been defined by guaranteeing a minimum level of social well-being through social insurance, unemployment insurance, state guaranteed old-age pension, or pronatalist social provisioning. Rather it has been largely defined by publicly guaranteed or mediated access to health care and education; much of the old-age pension or provident fund schemes is tied to formal sector employment, or contributory or fully funded retirement pension scheme for public sector employees. While this paper will reflect on pension schemes, the concern of the project and this paper is largely with the issues of health care and education.

Section 2 of this paper provides the conceptual and methodological framework for the research programme. Section 3 reviews at length on the research findings and core arguments; these are tied together by the author’s independent survey of secondary sources and reflection on the existing body of knowledge in the field of social policy. The fourth and the final section of the paper involves a reflection on rethinking social policy in the sub-Saharan African context.

2. Sub-Saharan Africa in Retrospect: Background to the Project

There has perhaps been no other time in Africa’s four decades of post-colonial statehood when the crisis of social development seems so pervasive as during the end of the twentieth century and the beginning of the twenty-first. In the two decades between 1981 and 2001, 134 million people dropped below the poverty line, putting the total number of people living in poverty (taking \$2.15¹ a day as the poverty line) at 516 million or 77 per cent of the population (United Nations Millennium Project 2005). While there was an 8 per cent reduction in the number of people living in poverty worldwide, sub-Saharan Africa registered an increase; the proportion of the population living in absolute poverty (less than \$1.08 per day) in the reference period was the highest of any region in the world: 46 per cent or 313 million, up from 45 per cent a decade earlier or 227 million; an increase of 86 million people (United Nations Millennium Project

¹ All \$ figures refer to US dollars.

2005:16). Of the countries listed as having the lowest human development index, 81 per cent are sub-Saharan African countries (UNDP 2002). Even if one were to quarrel with the estimation techniques used in these reports,² the idea of the region's association with poverty, and its characterization as a development wasteland, is dominant.

In specific social development outcomes, there is considerable unevenness. Between 1980 and 1994–1997, primary school enrolment fell from 81 per cent to 78 per cent (World Bank 2001). Excluding Nigeria and South Africa, primary school enrolment declined from 73 per cent in 1980, to 67 per cent in 1994–1997. Aggregate figures for secondary school enrolment rose from 15 per cent in 1980 to 27 per cent in 1994–1997. Again, when one excludes Nigeria and South Africa, the improvement in secondary school enrolment over the period becomes marginal: 14 per cent in 1980 and 17 per cent in 1994–1997. The probability of survival to the age of 65 years is the lowest of all the regions of the world (UNDP 2002:177). Per capita gross national income declined at an annual rate of 0.6 per cent between 1988 and 2000. Added to this is the dominant perception of sub-Saharan Africa as a region plagued by genocidal conflict, civil war and the HIV/AIDS pandemic. This perception is shared by political leaders, analysts and the media.

Yet such characterizations of the region hide three important issues in any analysis of social policy and outcome in the development process. First is the problem of *time sensitivity*. The economic growth figures for the region have not always been this anaemic. Indeed, given the perception two-and-half decades ago (that the 1970s was a period of stagnation and decline), the pre-1980 period has turned out to be what Adedeji (2002) referred to as “the golden age”. The average growth rate for sub-Saharan Africa was 4.3 per cent over the period 1967 to 1980—which was comparable to Asia and Latin America over the same period (see Mkandawire 2001b). By contrast gross national product for the region declined at an annual rate of 10 per cent between 1980 and 1990 (UNDP 1996). What is significant about the pre- and post-1980 disaggregation of performance data is the shift in understanding of the nature of macroeconomic and social policy, the nature and the role of the state, and the primary source and nature of incentives. Regardless of the spin that is being put on the experience of Africa since the 1980s, the negative impact of macroeconomic and social policy instruments is evident.

Second, aggregate regional statistics hide significant variations in the composition of the various economies, macroeconomic performance, and social development policies and outcomes. For instance, agriculture accounts for only 3 per cent of South Africa's gross domestic product (GDP), while in Zimbabwe it is around 20 per cent. Uganda's economy is heavily dependent on *robusta* coffee production, and agriculture accounts for over 42 per cent of its GDP. Botswana, on the other hand, is dependent on diamond extraction, with agriculture accounting for less than 4 per cent of GDP in 2000 (World Bank 2002a). There is also the question of size. In 2000, South Africa and Nigeria accounted for 50 per cent of the GDP (in current US dollars) of the whole of sub-Saharan Africa—with South Africa accounting for 75 per cent of that proportion. Ghana and Nigeria experience sharp fluctuations in international oil prices differently. Similarly, there are wide variations in social development outcomes. Using the 2000 data, the population living in poverty, using national poverty lines, ranged from 26 per cent in Zimbabwe to 86 per cent in Zambia.

² Vandermoortele (2000) has queried the validity of the \$1/day “international norm” for estimating core poverty. The studies of 10 low-income countries, “found that the cost of a minimum basket of goods and services was equivalent to \$1 per day per person, when expressed in purchasing power parity of 1985” (Vandermoortele 2000:4). His concerns were that, first, this produces a static idea of poverty (a 1985 benchmark). Second, the norm “violates the standard definition of income-poverty” where someone is considered poor if the person fails to “reach a minimum level of economic well-being *set by society*” (p. 5, emphasis in original). This minimum level is higher in wealthier societies than in some of the poorest countries. The norm is not a measure of poverty but of “how many people are struggling to survive every day on less than \$1” (p. 5). While accepting the validity of Vandermoortele's critique of this norm, the implications of the second leg of his argument for “poorer” countries is not necessarily valid. To illustrate, if there were to be a massive collapse in standard of living or wealth in a society so that everyone in the country became poorer, and this were to persist for two generations or more—such that people start getting “used to living at a severely diminished level of livelihood,” poverty would not *ipso facto* reduce. There is a minimum level of human existence that must serve as a floor, regardless of how many people in society fall below that floor or the normative orientation to such level of livelihood.

Third is the paradox of the lack of fit between macroeconomic indicators of performance and social development outcomes. Understanding social policy outcomes requires more intimate knowledge and understanding of the nature of social forces in a territory that impact on or shape social policy making and the realization of outcomes (see Kangas 1992:27). Nigeria and South Africa have relatively strong civil society organizations—especially their labour movements—that make the terrain of social policies highly contested. But both countries, for different reasons, show remarkably divergent internal variations in social development outcomes and profiles—the one regional, the other racial.

The linkages between economic growth and social development outcomes, and the way in which we conceptualize the interactions have become increasingly central to the development debate in the last two decades (see Mkandawire 2001a). After several years of vilifying the state, the idea of a developmental state is back on the policy agenda. Clearly, the challenge of a developmental state that is democratic—however defined in relation to economic growth and the nature of state-market interaction—remains a compelling issue for sub-Saharan Africa. It is in this context that we have seen a rash of global declarations and commitments on a range of social policy outcomes: basic education, sanitation, health care, and so on. It is to this challenge of a democratic developmental state and implications for the social development/economic growth nexus that I turn.

Research concepts and methodology

The work of the Africa research group was shaped by a specific conceptual and methodological framework. We understand social policies to be specific and deliberate policies (enacted and pursued) that positively impact on social well-being and security. Critical areas of focus were therefore education, health and sanitation, and social security, which includes social insurance, pension schemes and policies directed at reducing socioeconomic vulnerability. There were four critical conceptual dimensions to the research programme of the regional network. The first dimension was the understanding that social policies *do* matter. The second dimension was the idea of a virtuous relationship between consideration of economic development and improvements in social development outcomes. A study by Kangas and Palme (2000) shows that even in the countries of the Organisation for Economic Co-operation and Development (OECD), social policies do matter. The extent of general reduction in poverty and the dampening of poverty cycles are important outcomes of specific social policies in the various countries. Further, studies on the linkages between social policy outcomes and economic growth show that at both microeconomic and macroeconomic levels, social development outcomes have virtuous effects on economic growth (Mkandawire 2001a); and that economic growth oriented toward social equity and redistribution ensures the sustainability of growth. Where macroeconomic policies fail to pay attention to social policies, they not only undermine the microeconomic basis of growth, they are also likely to weaken its social and political basis.³

It was also clear at the design phase that our studies would need to be sensitive to the gaps that may exist between macroeconomic policies, social policies and social policy outcomes: in other words, between the intended and unintended outcomes of social policies, and the social forces that impact on this. The widespread collapse in industrial output, escalation in poverty prevalence and the disintegration (at least severe shrinkage) in administrative capacity might not have been the *intended* consequences of adjustment policies, but collapse resulted nonetheless—this aspect between policy intention and outcome is most dramatic in the area of social service provisioning: in health and education. Yet variations in social development outcomes among countries undergoing adjustment, point to the importance of human agency in

³ While there is increasing concession from the side of Walrasian neoclassical economists and policy makers on the possible virtuous interplay of equity and efficiency (Mkandawire 2001a), there has been no fundamental shift—concessions are made only to the extent that equity considerations and policies are limited in their coverage (basic education, for instance), and involve targeted social safety nets in the design of social security policies; there remains a strong antipathy to redistribution as a core principle of macroeconomic policy. See Bhagwati (1988) and the design of policies rooted in the World Bank's Poverty Reduction Strategy Paper (PRSP) approach. Wolfensohn's internal memo in 1999 on the Comprehensive Development Framework (CDF) is driven by the same logic (see Adésinà 2002, 2006).

mitigating the worst impacts of a debilitating policy environment and to countries' ability to manoeuvre (see Hutchful 2002). Even among non-adjusting countries, social development outcomes have proved to be quite varied.

This leads us to the third dimension of the conceptual framework of the research programme: the fundamental importance of a nuanced exploration of the social and political contexts of social policies, and their outcomes. This requires attention to the nature of "elite" politics and of allied social forces; the configuration and orientation of social forces within "civil society" that shape (initiate, contest, enact) social policies. There is, however, no *a priori* assumption of virtuous civil society forces confronting vicious state forces.

The fourth dimension concerns the combined effects of time sensitivity and spatial disaggregation in making sense of social policy "transitions" and outcomes. Given the Afro-pessimism of almost any discussion of sub-Saharan Africa, we need to pay attention to temporal disaggregation and discontinuities in social policies and social policy environments across the region. It is broadly possible to identify at least three distinct phases: (a) late colonialism, (b) post-colonial contexts until 1980 (or the early 1980s), and (c) post-1980; and the variations within each phase. The implications for Southern African countries like Zimbabwe and South Africa is that their post-colonial period coincides with the post-1980 phase for most of sub-Saharan Africa. An important dimension of the phases is also the macro-political logic that drove social policy and equity concerns. In spite of what has been said about the preponderance of autocratic states in the pre-1980s post-colonial phase, there is little doubt about the widespread concerns with nation-building among state agents—especially at the top echelons of the polities. An appreciation of this concern is important for making sense of very autocratic contexts such as Hasting Banda's Malawi or Jomo Kenyatta's Kenya. The extent to which the recent spate of violent social upheavals in countries like Cote d'Ivoire derives from the falling away of nation-building concerns should be an important consideration for researchers looking at specific country situations. Julius Nyerere might be vilified for the "failure" of *Ujamaa*,⁴ but it is as a nation-builder that he will probably be remembered by history.⁵ Equity considerations were therefore not only vertical, in class terms, but horizontal, in ethno-religious terms. Considerable intracountry disaggregation will be required in countries like Nigeria that have highly disaggregated national political systems with highly differentiated social policies.

From a methodological perspective, the agenda that was set for the research programme was not so much to generate new primary data, but to creatively interact with and make sense of secondary data, while being conscious of the limitations and strengths of each data source. Here, the understanding of the social and political contexts of data sources is important. Beyond this—and a methodological-conceptual issue—is the need to go beyond description. Researchers in the network were challenged to locate their specific sectoral works within the wider policy-making contexts, as well as give explanatory and *theoretical focus* to their works.

Within this framework one study was concerned with overall conceptual issues and macroeconomic policy directions, focusing on the dominant or ruling ideas on development that shaped each phase of sub-Saharan Africa's post-colonial history, and how these ruling ideas shaped economic and social policies. A second set of studies focused on health, water and sanitation dimensions of social policy, while a third examined education and labour market policies. Using comparative techniques, these studies examined clusters of countries in East Africa, Southern Africa and West Africa.

⁴ *Ujamaa* means "extended family" in Swahili and formed the basis of Nyerere's social and economic development policies. It emphasizes community, and sees each individual existing as part of the community and therefore in the service of the community.

⁵ Mkandawire 1999; Mazrui 2002; Mamdani 2002.

3. Social Policy in Sub-Saharan African Context

This section discusses the major findings of the studies undertaken within the framework of this project in sub-Saharan Africa. While the studies are comparative, the basis of comparison has been subregional—that is, intercountry comparison within each of the three subregions—drawing lessons across countries and between subregions, and sometimes drawing illustrations from countries that were not the focus of the individual studies. Further, while the individual studies are thematic in focus, we seek here to draw lessons within each thematic area as well as across the themes, including the implications afforded by Abdul-Ganiyu Garba’s study (2003) of ruling ideas and the politics of policy enforcement. A major gap in the individual studies concerns social security and/or social insurance. Apart from the traditional employment-based contributory old-age pension schemes for those in the private “formal sector”, or non-contributory schemes for those in the public service, new health insurance schemes have been rolled out across several sub-Saharan African countries since the various studies in this collection were commissioned. The latter part of this section provides a review of some of these schemes. The insights from Garba’s schematic discussion of ruling ideas and their implications for economic and social policy are important for the analysis of these new pension and health insurance schemes.

Ruling ideas, policy advice and the politics of sovereign rentier capitalism

Garba identified three ruling ideas that have shaped economic and social policy thinking and practice in post-colonial sub-Saharan Africa. The first he identified as the nationalist discourse and paradigm of social policy; the second strand is broadly associated with the works of John Maynard Keynes; the third strand is associated with neoclassical economics: economic thinking and policies that privilege market-transactional mechanisms for allocating resources. Within the broad stream of development economics, the “nationalist paradigm” can be regarded as being out of the mainstream.

Unlike the other two broad discursive approaches, the nationalist approach was driven by three core values: an “explicit commitment to high moral standards”, a “people-centred” approach to development, the moral commitment to ending colonial occupation of the continent and a pan-African orientation. The pan-African orientation was both ethically driven and pragmatic or instrumental. The moral commitment informed the allocation of scarce resources to the liberation project, even “at the expense” of national or local economic and social investment. It was pragmatic because of the concern for overcoming the debilitating impact of the fragmented nature of state territories in the post-colonial context. The small states and small markets, and the fragmented infrastructure and resource endowment, combined to inform the regional approach to development. The moral commitment also informed the effort to ensure a “Better Life for All”, even if rhetorically so, which underscored the anti-colonial and post-colonial social pact. Garba identified Kwame Nkrumah and Julius Nyerere with this development policy strand, which differed from the mainstream modernization thinking in that it was more Afrocentric and less about following the growth path of the Northern-Western European and North American countries. The 1980 Lagos Plan of Action was the first real continental effort in the direction that Nkrumah (1961, 1964) envisaged—that is, an immediate concern with crafting a continental development agenda. The political ferment of the immediate anti-colonial and post-independence venture resonated with a generation of African intellectuals with a radical pan-African focus, “in which”, as Ki-Zerbo (2005:84) puts it, “we opted for immediate independence, the United States of Africa and a socialism that had to be premised on local realities, interests and values”. It produced some early attempts at creating regional economic communities, such as in East Africa, and attempts at dissolving the colonial boundaries such as the Ghana-Guinea union in 1958, and the Ghana-Guinea-Mali union shortly after. In the wider geopolitics of the immediate post-independence context, however, this was a minority: the Casablanca Bloc of the integrationist pan-African states and political leaders was confronted by a more introverted and conservative Monrovia Bloc. The latter was defined by the Cold War politics of the West. The African coalition that emerged in the form of the Organisation of African Unity was constructed around a minimalist project of ending colonial rule and interaction within existing colonial boundaries. The feasibility of the pan-Africanist

“nationalist” developmental project is one that Garba questioned, especially in light of the local and global constraints, as seen from the “game theoretical framework” within which Garba organized his discussion. As he puts it, “the failure meant that each [sub-Saharan African country] coexisted within a global political-economic system unilaterally even when the system was dominated by two antagonistic power blocs” (Garba 2003:23).

There are, however, two distinct and dominant – although by no means generic – concerns that cut across the ideological divide: these are the concerns with economic growth and national unity. The “eradication of the ‘unholy trinity of ignorance, poverty, and disease’ was a central component of the nationalist agenda” (Mkandawire 2005a:13), and economic growth was seen as a means for achieving these objectives. The reality of having inherited very weak or non-existent human resource prerequisites for embarking on the campaign meant that there was a second imperative for the synergy between social sector expenditure and economic growth. For example, for a country whose economy depended mainly on mining, Zambia at independence did not have a single indigenous mining engineer. Chachage (2004) made a similar point about Tanzania. At independence, the Democratic Republic of Congo, a country larger than Western Europe, had only 30 university graduates.⁶ Social spending on education was clearly not only about the moral imperative of overcoming the legacy of colonialism, but a *sine qua non* for the human resources needs of a modern economy. While there might have been differences in the degree of commitment to this broad project, the ideological orientation (liberal capitalism, radical socialism, social democratic), and the policy mix considered appropriate, the link between social expenditure and economic development were largely seen as a more immediate priority. The link between the social and the economic could not protect citizens when the markets failed in providing them entitlements, nor a proactive protection against the decline of living standard to which citizens had grown accustomed. The concern with national unity and nation-building was partly in reaction to what were considered the divisive ethnic policies of the colonial regime. The murder of Patrice Lumumba, on 17 January 1961 – in the context of the Moïse Tshombe-led secession of the Katanga Province – and the role played by a range of international⁷ and domestic forces, profoundly marked the psyche of a generation of African nationalists. While Mkandawire (2005a:12) has pointed to its implications for the “perception of ethnicity and regional claims that ‘Tshombes’ and ‘Katanga’ were seen behind every movement challenging the authority of the central government”, it produced a contrary result in many countries. From Senegal to Kenya, social expenditure played an active role in the efforts to create national unity and social cohesion. The nation-building agenda was defined by efforts at developing a new generation of citizens committed to the nation-state⁸ rather than ethnic or regional loyalties. Public spending on education and schooling policies was often designed to reduce huge interregional variations in educational accomplishments and enhance national unity. In several countries – such as Ghana, Malawi, Nigeria, Senegal and Tanzania – the schooling strategies involved bringing young people of different ethnic or regional backgrounds together in secondary schools, and even more so at the university level. The policy involved a conscious effort to create a new elite that grew up within the educational system with shared experience of young adulthood, in the hope that this would develop a transethnic leadership corps. Admission into top public secondary schools and national universities involved deliberate policies of bringing together young people from different regional and ethnic backgrounds. The schooling policy went hand-in-hand with an active use of public expenditure either through “free education” (or publicly-funded schooling) or use of

⁶ BBC, *The Story of Africa*. www.bbc.co.uk/worldservice/africa/features/storyofafrica/14chapter7.shtml, accessed on 23 December 2005.

⁷ Including Belgium and the United States (see de Witte 2001).

⁸ Categories such as the “nation” and “nation-state”, even “nationalism” or “nationalist”, are of dubious value in making sense of post-colonial Africa or the Africa of late-colonialism. Strictly speaking, the nationalist movements were anti-colonial rather than nationalist in what inspired them; they were hardly concerned with the political or territorial redemption of people with shared linguistic and cultural heritage or consanguinity. The aspiration for unity was not about national unity – that is, based on consanguinity – as much as overcoming ethnic and religious divisiveness, which was the basis on which colonialism had flourished, and which was a principal weapon of colonial demagoguery. The new commitment is more to the post-colonial “country-territory” (country-state, perhaps) than to the nation-state. The unity sought was one forged out of the crucible of shared victimhood arising from the racist-colonial enterprise. It is in this sense that pan-Africanism represents the ideal of such aspiration.

scholarships and bursaries to provide access. In national or subnational contexts where there was strong commitment to active social policy of this nature, the social development outcomes were quite significant and beyond what the conventional mapping of social indicators against economic indicators might suggest.

If the nationalist projects of nation-building and growth provided the agenda or ends, the means were shaped by a changing pattern of ruling advice. In the period between the 1950s and the 1990s, Garba identified four distinct, often contradictory, regimes of policy advice. The diagnoses undergirding them ranged from market failure to government failure, policy failure and, more recently, institution failure. The policy advice ranged from promoting the state as the primary agent of change to the vilification of the state; from getting prices right to getting institutions right. What was, however, common and constant across the policy regimes was the nature of the lead agents: visiting missions, foreign advisors and state agents of the global North! Within the same theoretical framework in which he analysed the relationship, Garba highlighted the emergence of “sovereign rentier capitalism” and its politics, identifying this as a largely post-colonial shift in the nature of global capitalism in which rent extraction and rentier relationships are organized around sovereign lending and/or borrowing.

The history of sovereign rentier capitalism of the last half a century leads us to conclude that *orthodox development thought and development advice* wittingly or unwittingly served sovereign rentier capitalists that primarily sought their services in *creating* and *sustaining* the demand for sovereign rentier capital. Influential development theories such as the vicious cycle of poverty model deepen fatalism by its conclusion that poor nations are trapped in a vicious cycle and cannot get out without outside help. The gap models then help to create the demand for sovereign rentier capital by encouraging a habit of dependence, as the models offer sovereign borrowing as a panacea to closing savings-investment and foreign exchange gaps (2003:22).

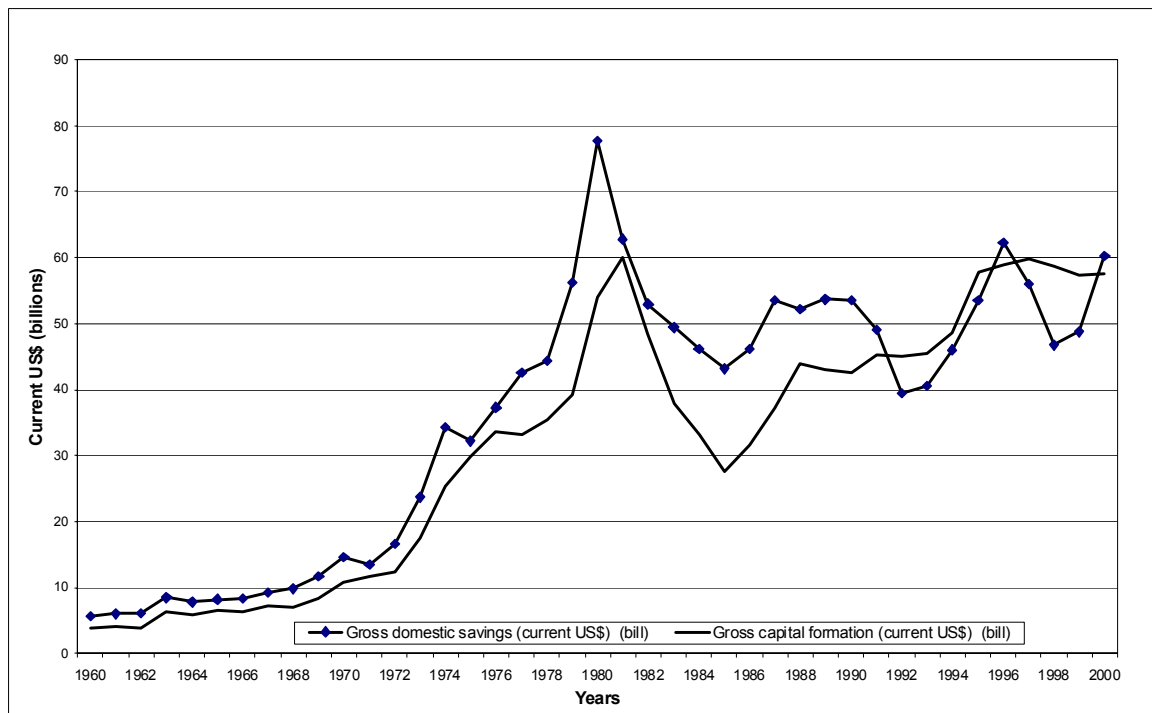
We might add that the “capital” that sovereign rentier capitalist institutions offered was not only financial (aid or investment) but intellectual – policy advice. The “most ingenious strategic move of (the sovereign rentier capitalist) is its successful marketing of itself as a donor” (Garba 2003:footnote 26). The overall objective is “control over policy making” (Garba 2003:24; Toyé 1991). From Nigeria, through Zimbabwe in the early 1980s, and South Africa in the 1990s, the consistency with which the “donor-sovereign rentier” establishment sought to maintain control over policy making is remarkable.⁹ The degree of policy intrusiveness has been defined by ideological affinity of the local state agents and the external policy merchants, and fiscal vulnerability that results from a combination of domestic policies and external shocks. Ghana and Zambia were early examples of the crisis (external shock and the resulting fiscal vulnerability) that would become endemic after the 1980s. In Ghana’s case, external shock occasioned by the collapse of commodity price of cocoa created the fiscal vulnerability (Hutchful 2002:9–10) and the ideological coup that overthrew the government in February 1966. The big-push strategy of the Nkrumah government had been financed by favourable international commodity price of cocoa. The ideological affinity between the new military regime and fiscal vulnerability made Ghana the first country in the region whose policy-making process was under the direct control of the International Monetary Fund (IMF); and the consequences of the stabilization and liberalization project were severe indeed. The deflationary bias at the heart of public finance policy persisted for a long time. In Zambia’s case, vulnerability was without ideological affinity, but the severe trade and budgetary crises that followed the sharp fall in the price of copper, and the simultaneous steep rise in the price of oil in the mid-1970s, created similar results.

For much of the 1960s and 1970s, however, the IMF played little part in shaping fiscal and broad economic policies in most African countries. The dominant policy advice was from the World Bank, private, multilateral and national policy advisors. In the period after the 1980s, the

⁹ See Yesufu (1969); Mhone and Bond (2001); Bond (1998, 2000); Gumede (2005).

degree of policy autonomy of local authorities and policy advisors—autonomous of the Washington consensus establishment—diminished. In the pre-1980 period, the more Keynesian of these policy regimes resonated with the rather expansive nationalist objective in the underlying argument of the virtuous relationship between equity and efficiency, especially in a context where much of the socialist orientation was inspired or influenced by Fabianism and a widespread commitment to social expenditure. Even so, profound changes have occurred in the policy space available to most governments in sub-Saharan Africa. The multipolar world of the 1960s and the 1970s offered a greater diversity of “learning sources” in comparison to the highly diminished policy space of the late twentieth century.

Figure 1: Gross domestic savings and gross capital formation in sub-Saharan Africa



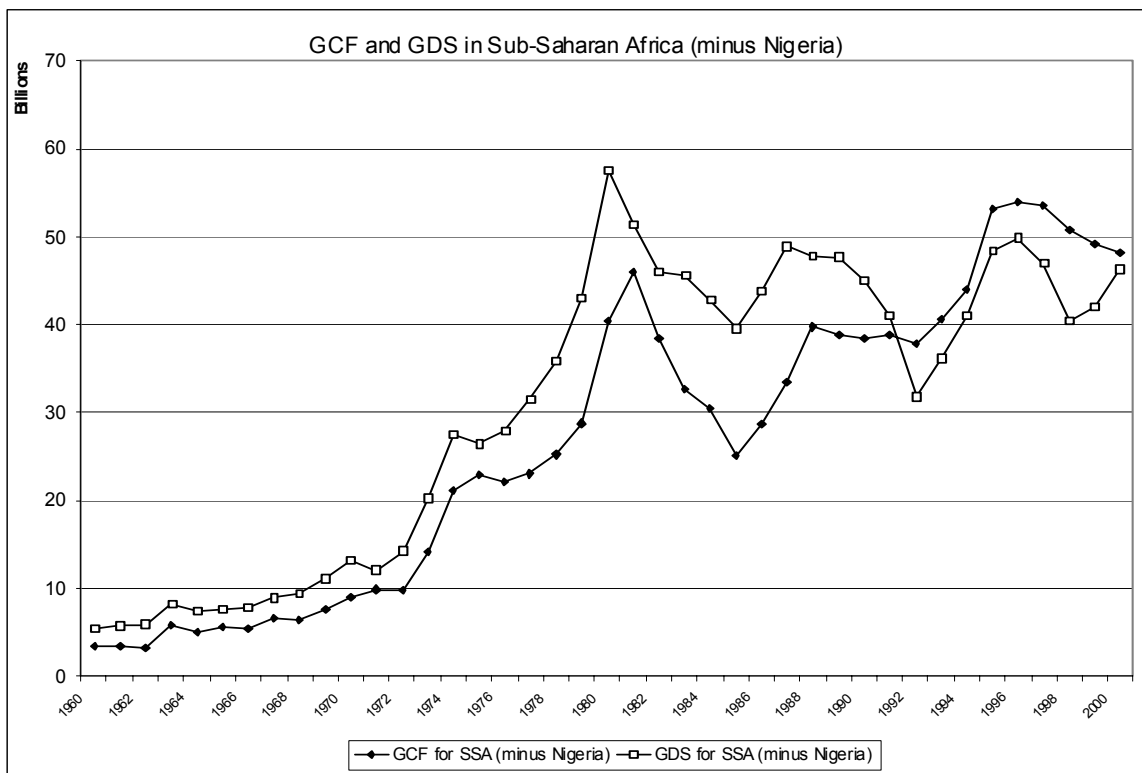
The transitional phase involved demands by donors and Bretton Woods institutions (BWIs) for the replacement of personnel responsible for economic policies, and the use of

brute economic force...to push through certain ideas. The unresponsiveness of African bureaucracies and their apparent unwillingness to learn has been used to justify the conditionalities that have accompanied policy making. It has also led to the hijacking of key policy-making agencies by international financial institutions (Mkandawire 2004:5).

The personnel change was part of a much wider agenda of reshaping not only Africa’s economies but its polities and civil societies (Adésinà 2004); an agenda that involved active efforts at developing, financing and promoting a new cadre of economists, and deployment of local experts belonging to the market-centric “epistemic” community. Capacity building became a mechanism for proselytizing and cloning (Mkandawire 2004; Adésinà 2004). Elson and Cagatay (2000:1354–1357) argued that the policy framework itself was shaped by three biases, with fundamental implications for social policy and social development outcomes: “deflationary bias,” “male-breadwinner bias,” and “commodification bias.” We will return to this in the next section of this paper.

The period from 1960 to 1980 witnessed a significant improvement in a range of social development indicators (see table 1).¹⁰ Figure 1 would suggest that, for sub-Saharan Africa as a whole, much of the domestic investment from 1960 to 1980 was financed largely by domestic resources. The contrast with the next 20 years (1980 to 2000) could not be sharper: the adjusted R² for the strength of fit between gross capital formation (GCF) and gross domestic savings (GDS) for the period between 1960 and 1980 is 0.978, in contrast to 0.253 for the period between 1980 and 2000.¹¹ Removing Nigeria from the dataset used for the analysis did not alter the trend or the shape of the graph (see figure 2), at least not for the period between 1960 and 1980. The post-1980 period showed two patterns. One is significant volatility in GDS and GCF; the other is that GCF outstripped GDS. The post-1980 period, we should be reminded, has been the era of “stabilization”, adjustment and donor monopoly of the policy landscape: the period of neoliberal ascendancy.

Figure 2: Gross capital formation and gross domestic saving (minus Nigeria)



As Mkandawire (2001b:303) pointed out, “despite the many distortions of import substitution, until the second ‘oil’ crisis many African economies had performed relatively well”. The nationalist consensus was not exclusively that of politicians. Hutchful (2002) noted that the IMF inspired “the shoddy treatment of the state enterprises” by the National Liberation Council (NLC) military junta, and the sell-off of state (essentially national) assets sparked off public protest. The stabilization programme found little favour with domestic businesses.

¹⁰ The data are meant to capture the medium- to long-term shifts.

¹¹ GCF is the dependent variable and GDS the predictor. (Data source: World Bank’s 2002 World Development Indicators CD-Rom.)

Table 1: Selected social development indicators of some sub-Saharan African countries

	Life expectancy at birth (years)		Child mortality rate (aged 1–4)		Adult literacy (per cent)		Primary school enrolment (per cent age group)		Basic needs index	
	1960	1982	1960	1982	1960	1985	1960	1981	1960	1982
Botswana	40	60	23	13	33	72	42	102	48	80
Cameroon	37	53	28	16	19	56	65	107	48	73
Chad	35	44	60	37	6	25	17	35	25	42
Congo	37	60	23	10	16	63	78	156	52	78
Côte d'Ivoire	37	47	40	23	5	43	46	76	37	61
Gabon	36	49	34	22	12	62	100	202	54	72
Ghana	40	55	27	15	30	53	38	69	45	66
Kenya	41	57	21	13	20	59	47	109	47	76
Lesotho	42	53	29	17	59	73	83	104	64	77
Madagascar	37	48	45	23	34	68	52	100	45	73
Malawi	37	44	58	29	22	41	30	62	33	55
Niger	37	45	45	27	1	14	5	23	25	39
Nigeria	39	50	50	20	15	42	36	98	35	68
Somalia	36	39	61	47	2	12	9	30	22	34
Sudan	39	47	40	23	13	20	25	42	34	49
Swaziland	38	54	33	27	29	68	58	110	48	74
Uganda	44	47	28	22	35	57	49	54	50	59
DRC (Zaire)	40	50	32	20	31	61	60	90	50	70
Zambia	40	51	38	20	47	76	42	96	48	76

Source: Ghai 1987:24; see Adésinà (2006).

The changing dynamics of education provisioning

In surveying the changing education policy environment in the three East African countries (Kenya, Tanzania and Uganda), Chachage (2004:3) noted the influence of the wider, dominant perception of education as “a means to social and economic development at national level, a way to employment opportunities at personal level, and a means to forging national cohesion and reducing inequalities left by the colonial legacy”. Education was not only about the national strategy for raising literacy levels and providing the human resources needed for the economic growth objective, it was the individual’s means of securing better livelihood. Unemployment was not considered a major national problem in many of the countries in the immediate years following independence; the misalignment of skill endowment relative to need of the economy was something to be fixed with educational training. Apart from the problem of financing, the labour market structure did not make unemployment insurance a major policy objective. Universal access to primary education was a distinct objective of various governments including Ghana, southwestern Nigeria and Tanzania. In the early post-colonial years, this expansive approach to education provisioning coincided with rapid economic expansion. Even in Tanzania, whose narratives these days might suggest that the crisis started as soon as the *Ujamaa* programme was launched, manufacturing output grew at a healthy 7.5 per cent per annum between 1965 and 1975. Botswana had an inverse experience—in the early years following independence until the 1970s when diamonds provided for a phenomenal rise in GDP and government revenue, it had considerable resource constraints. In southwestern Nigeria, the ethical commitment to universal access to primary education, and a publicly funded education system were financed on a shoe-string budget in an environment of tight fiscal resource management (Awolowo 1960). Zimbabwe, with a similar post-independence

commitment to expanding access to education, faced an initial few years of massive fluctuations in monetary and fiscal policy conditions (Kadhani 1986).¹²

The crisis that was to become emblematic of the early 1980s emerged in different ways in the countries studied. In Ghana it was a function of external shock, made worse by the deflationary and aggressive liberalization that followed the NLC regime's tie-up with the IMF. In Uganda, it was fundamentally the crisis of erratic and murderous policies of Idi Amin's regime, with the expulsion of 70,000 Ugandans of Asian descent—who were the mainstay of Uganda's manufacturing and service sectors—in 1972 and the abduction and murder of the vice chancellor of Makerere University that were emblematic of the maniacal regime. In Tanzania's case, the impact of the second oil shock of the late 1970s was compounded by the war against Idi Amin's army, which had invaded northwest Tanzania. While the war freed Uganda from Idi Amin, it was at a cost of \$50 million to the Tanzanian fiscus.

The impact on social policy of the policy reactions to the crisis on social policy differed significantly from one country to another. Early response in Ghana in the 1960s was aggressive in the impact on public spending on social services; this phenomenon was even more dramatic in the Nigerian case, where public spending on education plummeted under the regime of Ibrahim Babangida. In Ghana and Zimbabwe, from the 1980s onward, there were efforts to protect social spending, even as the government of Jerry Rawlings in Ghana sought constantly to negotiate the policy margins with the BWIs—and in several instances “played the BWIs game” (see Hutchful 2004). In this regard Botswana's example shows real growth in the economy accompanied by real growth in social spending, where an affirmation of education as a social right also involved quality funding at all levels of the education system. The paradox of South Africa is quite interesting here: faced with the enormous challenges of redressing the inequities of apartheid and a speculative run on its currency in 1996, the government *opted* for tight monetary and fiscal regimes, with negative implications for real spending on education: as a percentage of GDP, this declined from 6.3 per cent in 1990 to 5.7 per cent in 2002 (UNDP 2004). Real per capita recurrent expenditure on education declined, annually, by 1.2 per cent between 1997 and 2002—from R793¹³ in 1997 to R719 in 2002; and per capita gross fixed investment (capital expenditure) declined from R73 in 1995 to R60 in 2002 (UNDP 2003:24).¹⁴ The South African case is all the more significant since the economy grew between 1990 (when the country was in the throes of ending the racist sociopolitical order) and 2001; so did the resources (tax-based revenue) needed by the post-apartheid government to address the crises of equity and poverty.

We can discern three trends in the attempts to fill the resource gap that emerged at various times in different countries in the late twentieth century, which reflect different levels of commitment within the state and the ability of social movements to influence the state (that is, issues of agency): utter neglect, shifting the burden to the citizens and efforts to protect social spending, typified by Nigeria, Tanzania and Ghana, respectively. Nigeria's case involves the neglect of social spending, resulting in a decline in education spending from 6 per cent of GDP in 1980, when the economy was at the peak of its performance, to 0.65 per cent in 1995. In real terms, this was a decline in public spending from \$3.719 billion in 1980 to \$181 million in 1995

¹² Net factor payments and remittances abroad grew from \$14 million in 1979 to \$206 million in 1982—the removal of the exchange control was a legal requirement of the Lancaster House agreement. There was a balance-of-payment crisis—the deficit grew from \$74m in 1979 to \$533 million in 1982. World Bank policy advisors were not short of loan offers and arrangements for various segments of the country: there were 94,000 such loans by 1987 (Mhone and Bond 2001; Bond 2000). Both the finance minister and the World Bank were confident that while indebtedness might rise in the early years of post-independence, it would fall rapidly as the economy picked up and the loans were paid off (Kadhani 1986; Mhone and Bond 2001). It did not; the fiscal crisis that this created became the basis for the stranglehold that the BWIs would, by 1985, impose on the country. In other words, the economy was undermined by a combination of iniquitous “peace agreement” for the country's independence, exogenous factors like drought, South African geopolitics and destabilization, sovereign rentier politics, and errors on the side of domestic policy makers. Like South Africa, Zimbabwe emerged from racist, settler colonial rule “out of sync” with the nationalist phase and a more policy-plural context into one in which the neoliberal geopolitics came to determine donor/BWI relationship with countries around the world.

¹³ \$1 = R 7.2 approximately (February 2007).

¹⁴ The figure that the government often quotes—R31.1 billion in 1995 to R59.6 billion in 2002—refers to nominal spending: that is, before accounting for the impact of inflation.

(World Bank 2005). Ghana, with a similar experience of adjustment, more than doubled its public spending on education (Udegbe 2004), which increased from \$132 million in 1980 to \$273 million in 1995 (World Bank 2005). At the other end, Tanzania experienced a dramatic shifting of the burden of education financing (especially at the tertiary level) to citizens and to the institutions themselves. In Tanzania and Uganda, the aggressive “re-commodification” of access to education has received complimentary attention, as illustrative of “institutional dynamism” (see Court 2000). Yet Chachage’s “frog-eye” view of the experiences revealed not only the massive degradation in the teaching and research environment, but the extent to which the market logic deployed at Dar-es-Salaam University and Makerere University undermined the very rationale for education—a qualitative link that was central to the nationalist mission or functioning of universities in developed countries. Despite declining government subvention, universities in Tanzania, Kenya and Uganda have experienced a dramatic rise in student numbers, even with declining staff. The dramatic increases in student enrolment has been “financed” by overcrowding, decline in quality of teaching and the neglect of research activities (especially in relation to the pre-crisis period). While “user-fees” were promoted on the grounds of equity of access and the need to shift resources away from tertiary to primary education, there is little evidence that such equity of access is being achieved when compared to the quality of education at all levels in the 1970s. On the other hand, there is ample evidence of a sharp decline in public funding for social services in many countries and that user-fees have been used to substitute for budgetary allocation. The fiscal objective of restraining public spending—often to service external debt—has been the primary objective, rather than equity. In Makerere the percentage of privately sponsored students in the total student population grew from 32 per cent in 1993 to 86 per cent in 2000 (Obong 2004:111). Both Ghana and Zimbabwe have also seen significant rises in user-fees levied on citizens who seek various types of social services.

The imposition of user-fee charges as a mechanism for financing social services will be addressed in greater depth later. Anecdotal evidence suggests that the attempts to meet the basic education targets of the Millennium Development Goals (MDGs) are resulting in the same crisis of overcrowding, since an increase in enrolment numbers is not matched by an increase in the number of classrooms and teachers. In Uganda, with the introduction of universal primary education¹⁵ in 1997, enrolment increased from 3.06 million in 1996 to 7.6 million in 2003. This was a remarkable feat, but the number of students per classroom was an astonishing 110 in 2000, declining slightly to 94 children per classroom in 2003 (Bategeka 2005)! What is instructive about universal basic education—not even primary education—is that 50 years after the Action Group government (Western region, Nigeria) rolled out what is widely acknowledged as a very successful universal primary education effort, and over 40 years after several nationalist governments took the same road, African countries are embarking on a journey to their own past: without a full acknowledgment, within the same community framing the agenda, of the impact of 25 years of structural adjustment in reversing post-colonial social development outcomes. And there is a second paradox: while universal primary education involved more focused and programmatic planning, largely financed by domestic resources, the reinvention of past achievement is currently being driven by donor-financing and fiscal conservatism, and is project-focused!

An assessment of the education aspect of social policy objectives would take us back to the twin issues of gender disparity and the role of agency in the pattern of achievement. While illiteracy rates have declined significantly across sub-Saharan Africa, table 2 shows gender differentials of this achievement. Across the countries that were the focus of this study, female non-literacy rates are on average twice those of men—with the exception of Botswana, where the female literacy rate is slightly higher than the male, and South Africa, where the difference is marginal.

¹⁵ Four children per family could go to school without paying fees, which begs the question of what happens in the case of a family in acute poverty with more than four children. To blunt the gender impact, policy makers decreed that where the household has female children, at least two of the four non-fee-paying children must be female—which means that families have to decide which children should go to school, and which should stay on the farm or learn a trade. The contrast with nationalist phase universal access is stark, indeed. In 2003, enrolment of girls in primary school was 49 per cent of total enrolment (see Bategeka 2005).

This is even more remarkable in the case of Zimbabwe, whose literacy achievement was significant; showing what public commitment to social objectives can produce, even in the face of adverse economic performance.

Table 2: Gender and illiteracy rates, 1970–2000 (per cent of people aged 15 and above)

Countries		1970	1975	1980	1985	1990	1995	2000
Nigeria	Adult total	79.9	74.1	67.1	59.3	51.4	43.7	36.1
	Adult female	89.8	85.0	78.5	70.4	61.9	53.1	44.3
	Adult male	69.4	62.7	55.2	47.6	40.4	33.8	27.6
Ghana	Adult total	70.5	63.6	56.3	48.9	41.6	34.9	28.5
	Adult female	83.4	77.0	69.5	61.5	53.0	45.0	37.1
	Adult male	57.1	49.7	42.5	36.0	29.9	24.5	19.7
Kenya	Adult total	59.3	51.7	43.8	36.2	29.2	23.0	17.6
	Adult female	74.2	66.4	57.3	48.0	39.2	31.1	24.0
	Adult male	44.2	36.9	30.0	24.2	19.0	14.7	11.1
Tanzania	Adult total	64.3	57.8	50.9	43.8	37.0	30.8	24.9
	Adult female	80.2	73.8	66.1	57.5	49.0	41.1	33.5
	Adult male	47.3	40.8	34.9	29.4	24.4	20.0	16.1
Uganda	Adult total	63.7	59.1	54.2	49.2	43.9	38.2	32.9
	Adult female	78.3	73.6	68.4	62.7	56.6	49.8	43.2
	Adult male	48.6	43.9	39.4	35.0	30.7	26.3	22.5
Botswana	Adult total	53.9	48.1	42.5	36.7	31.9	27.4	22.8
	Adult female	52.4	46.7	40.9	34.9	29.7	25.0	20.2
	Adult male	55.9	49.8	44.4	38.7	34.2	30.0	25.5
South Africa	Adult total	30.2	26.9	23.8	21.1	18.8	16.7	14.7
	Adult female	32.0	28.5	25.2	22.3	19.7	17.5	15.4
	Adult male	28.4	25.3	22.4	19.9	17.8	15.8	14.0
Zimbabwe	Adult total	42.5	35.8	29.9	24.2	19.3	15.2	11.3
	Adult female	51.0	43.8	37.5	30.9	25.0	20.1	15.3
	Adult male	33.8	27.6	22.1	17.3	13.4	10.2	7.2

Source: World Bank World Development Indicators 2002 (CD-Rom).

Nigeria's abysmal public commitment to education is made even worse by the quality of spending. At the time that spending declined to 0.6 per cent of the GDP (see p. 10), much of this went toward personnel costs. It would seem that without the agitation by education sector unions to ensure payment of salaries, although sporadic, social spending in this sector might have been even worse.

Equally important, for making sense of social policy making, is the role of agency: the lack of fit between basic economic indicators and education achievement (see table 3). Botswana, with five times Zimbabwe's per capita income, has a lower level of literacy; its literacy rate is similar to that of Tanzania whose per capita income is less than a tenth of Botswana's. South Africa's literacy rate is about the same as Kenya's although South Africa's economy and GDP are eight and a half times and almost six times, respectively, those of Kenya. The comparative difference between Botswana and Zimbabwe is particularly evident in the public sector commitment, with Botswana spending 2 per cent of its GDP on education, compared with 10 per cent in Zimbabwe; Ghana, with a slightly lower per capita income than Nigeria, spends more than four times its share of GDP on education. As noted earlier, while public spending on education declined dramatically in Nigeria, it more than doubled in Ghana. Both countries were under structural adjustment. In Nigeria, the argument by state functionaries and their BWI "handlers" regarding the imperative of rebuilding the country's education infrastructure focused on private sector provisioning and cost-sharing rather than significantly increased public spending on the sector. A similar crisis is evident in the health sector. The relationship between the level of inequality in the various countries and public spending on education speak to the dynamics of social pressure that can be brought to bear on public policy makers.

Table 3: National wealth, public spending and social policy outcomes, 2002

	GDP <i>(billion dollars)</i>	GDP per capita <i>(dollars)</i>	Adult literacy	Public expenditure on education as per cent of GDP	Infant mortality rate**	Public expenditure on health as per cent of GDP+	Human poverty index	Gini index	Gender-related development index
Kenya	12.3	393	84.3	6.2	78	2.2	37.5	44.5	0.486
Tanzania	9.4	267	77.1	3.2*	104	2.7	36.0	38.2	0.401
Uganda	5.8	236	68.9	2.5	82	2.1	36.4	43.0	0.487
Botswana	5.3	3,080	78.9	2.1	80	3.7	43.5	63.0	0.581
South Africa	104.2	2,299	86.0	5.7	52	3.5	31.7	59.3	0.661
Zimbabwe	8.3	639	90.0	10.4	76	4.4	52.0	56.8	0.482
Nigeria	43.5	328	66.8	0.9*	110	1.2	35.1	50.6	0.458
Ghana	6.2	304	73.8	4.1	57	2.3	26.0	30.0	0.564

Notes: All data refer to 2002 except: * 1990 data; **Infant mortality figures are per 1,000 live births. **Source:** UNDP (2004). +: UNDP (2005).

The paradox of the last 20 years, which was supposed to correct the distortions in the economies of sub-Saharan African countries, is twofold. First is the rise of unemployment among university graduates, within the context of a general rise in unemployment. Studies from Ghana, Tanzania and South Africa record this phenomenon. The impact of a deflationary macroeconomic policy approach and aggressive liberalization on the one hand, and the “public sector” reform with massive cut-backs in employment levels on the other hand, have led to a phenomenal rise in unemployment in several countries—with Botswana as the lone exception among the countries covered in our studies. Hendricks (2004) pointed to the South African case where the rate of unemployment among black graduates is much higher than the average unemployment. The growth path that South Africa has pursued since 1996 has been particularly regressive in the area of employment; in March 2003, the official unemployment rate was 31 per cent, up from 20 per cent in 1996. Much of this was the result of the monetary and fiscal policies that encouraged capital-intensive production; while output rose between 1996 and 2002, employment stagnated or declined while the number of new entrants into the labour market grew (UNDP 2003). The second paradox is the phenomenal rise in the number of expatriate “technical assistance” personnel that have poured into sub-Saharan Africa. Chachage cited a 1990 report on Kenya, which showed that of the 324 technical assistance positions that were filled by expatriates, 204 could easily have been filled by Kenyans (Chachage 2004:10). A study in Tanzania showed that the salary and emoluments of the expatriate staff consumed \$200 million out of \$300 million in technical assistance support in 1988; the total personnel cost of the Tanzanian public sector employees (civil servants, teachers, health workers, and so on) for the year was \$100 million!

Apart from South Africa, none of the other seven countries covered in our study has any unemployment insurance or wage-protection scheme in place. The result of unemployment is therefore likely to trigger widespread entitlement failure in these countries, which partly explains the significant increase in the number of people living in poverty within the region. South Africa’s unemployment scheme dated back to the 1966 Unemployment Insurance Act until 2001, when a new act was promulgated—a contributory scheme funded by payroll deduction, employers’ contribution and funds appropriated by the South African parliament. The scheme, which covers non-public servants, excludes anyone working for less than 24 hours a month for an employer, non-South African citizens who are working on contract, and workers whose income derives from commissions.¹⁶ On 1 April 2004, the act was amended to cover domestic workers.

¹⁶ See Department of Labour Web site (www.labour.gov.za); Republic of South Africa, *Unemployment Insurance Act 2001*.

Under Section 13(3) of the Unemployment Insurance Act, 2001, “a contributor’s entitlement to benefits...accrues at a rate of one day’s benefit for every completed six days of employment as a contributor subject to a maximum accrual of 238 days benefit in the four year period immediately preceding the date of application for benefits.” Benefits can be claimed for unemployment, maternity leave or period of illness not covered by the employer. Dependents of a contributor may also claim from the fund upon the death of the contributor. At the end of 2004 the Unemployment Insurance Fund had built up a reserve of R8.4 billion, and “expected to exceed its actuarial valuation reserves by R500 million” by the end of the 2005/6 fiscal year.¹⁷ Net contribution to the fund was R3.63 billion in 2003/4, against benefit claims of R3.28 billion; a significant turnaround from 1999 when net contribution stood at R27 billion against benefit payout of R2.98 billion.¹⁸

The changing dynamics of health care provisioning

The comparative studies on the changing dynamics of health and related services show both similarities and distinct divergences when compared with the education sector. Here, as in education, two patterns of social provisioning emerge: the pre- and post-1980s. As table 1 shows, child mortality (for children aged between 1 and 4 years) declined across sub-Saharan Africa, even for the more errant states like Mobutu Sese Seko’s Zaire. Much of this was achieved through the socialization of consumption, especially at the level of primary health care services; social spending on health was part of a wider objective of defeating the triad of “ignorance, poverty, and disease” (Mkandawire 2005a:13). In Tanzania, part of the reasoning behind “villagization” –concentrating rural communities in distinct villages– was to benefit from the economies of scale that this brought in the provision of social services and efforts to raise production. The moral crisis of enforced concentration of the population, no matter its expected social and economic benefits, and the mistakes made in the process, are things that Mwalimu Nyerere himself readily accepted (see Mkandawire 1999). Similarly, as Bond (2005) noted, the first decade of post-independence in Zimbabwe witnessed significant improvements in health indicators: infant mortality declined from 86 to 49 per 1,000 live births; immunization coverage rose from 25 per cent to 80 per cent, and life expectancy increased from 56 to 62 years.

As Atieno (2003) shows for East Africa, the under-five mortality rate declined in Kenya from 98 for every 1,000 live births in 1970 to 81 in 1980; in Tanzania it declined from 125 to 98 over the same period. These improvements had been reversed within 10 years of adjustment; even in the case of Uganda, under-five mortality had risen from 118 per 1,000 live births to 187 in 1990, 132 in Tanzania and 94 in Kenya. Maternal mortality more than doubled in Tanzania between 1985 and 1990; in Uganda it rose fourfold within the period, in spite of the fact that in 1985 the country was in the grip of the civil war waged by the Youveru Museveni’s National Resistance Army (NRA). While maternal mortality fell back to lower levels in 1996, the number of women dying in childbirth was still higher than in 1985.

It was perhaps in the area of health care provisioning that the aggressive retrenchment of the state and cuts in social expenditure had its most damaging effects. The erroneous assumption of orthodox adjustment was threefold: one was to assume that there was a market in health care services to take care of the impact created by the fiscal retrenchment of the state; the second was to assume, as unproblematic, availability of resources for all citizens to procure their health care needs in the new marketplace; the third was to assume that public resources spent subsidizing the citizens were wasted. The consequence has been particularly grim across most of sub-Saharan Africa. People did not just fall through the net of social provisioning; they died! The impact on increased women’s burden in the care economy within the household has been pointed out by several researchers (see Elson and Catagay 2000). As Atieno’s (2003) figures show, the impact of the retrenchment of state provisioning was particularly damaging for women—both for their personal health care needs and for their children’s—because women

¹⁷ Labour Department Spokesperson, Page Boikanyo, 11 March 2005. www.southafrica.info/ess_info/sa_glance/social_delivery/update/uif-030305.htm, accessed in January 2007.

¹⁸ Department of Labour 2004.

overwhelmingly bear the burden of nurturing and childcare. The weight of health care provisioning shifted from the national fiscus to the end-users. Okuonzi (2004) showed that gynaecological and obstetrics services suffered particularly under this policy regime.

The shift from “stabilization-and-liberalization” to the “social dimensions of adjustment” (SDA) followed overwhelming evidence of the damage that adjustment was wreaking on child and maternal health in the countries under adjustment, generally, but on Africa specifically (see Cornia et al. 1987). The initial response was to focus on using “safety nets” for what was considered short-term market failure to raise social welfare. The social service delivery to address vulnerability was premised on targeting the “deserving poor” rather than universal access. The framework of the earlier phase was retained; privileged market-transactional social policy provisioning, cost-recovery, and user-fee charges became the basis for accessing publicly financed social services. All the countries that implemented the BWIs’ adjustment programmes followed the user-fee (cost-recovery and cost-sharing) policy, mainly in the areas of health and education. Botswana implemented a user-fee policy in the area of health care, even though it is not an adjusting country.¹⁹

Again, social policy was regarded largely as a residual aspect of public policy. The widespread evidence was that even under the SDA palliatives, poverty continued to rise and social development indicators continued to regress; generally speaking, the adjustment policy was not working. This prompted a search for explanations (see Garba 2003) and alternative approaches to liberalization. The attempt at a comprehensive development framework (Wolfensohn 1999) and the use of Poverty Reduction Strategy Papers as the World Bank’s delivery vehicle have not altered the fundamental economic ontological discourse, the focus of macroeconomic policy in restraining public spending and liberating the market from *dirigisme*, or the “no-free-lunch” logic that requires end-users to finance their social service consumption.

Studies continue to show that claims about empowerment and consultation with civil society are perfunctory at best. Both the BWIs and the donor countries persist in pushing the same macroeconomic policy instruments that failed to address the structural impediments in most African economies, which created the vulnerability to external shocks in the first instance. Not only has there been a failure to sustain the pre-1980s regional growth rates, but the capacity for sustainable recovery has been undermined even in successful adjusting economies (Adésinà 2004, 2006). In many ways we are back to the same imbalances in the current account and balance of payments that were emblematic of the 1970s – when imports to feed the consumerist appetite of the middle class and urban areas escalated, even as export receipts stagnated or declined. While growth may be good for the poor and social policy broadly, there is evidence that the BWIs’ policies have not been particularly good for growth, much less development (Weisbrot et al. 2001).

In countries already faced with rapidly declining household income levels and the rising tide of poverty, the imposition of user-fees or “cost-sharing” excluded those who did not have the capacity to engage in the market. Bond (2005) discussed at length the counter-productive impact of the user-fees policy in the provision of water and sanitation services in South Africa; where people in poor neighbourhoods are forced to use unsafe water. The case of KwaZulu Natal Province in 2002 – where the cost of responding to the cholera outbreak far outstripped the outlay that would have been needed to provide households with clean water – is an important reminder of the dubious cost-benefit analysis that underscores much of the aggressive neoliberal thinking. The shift in state policy, to universal provisioning of 6,000 litres per month per household might be less than what the anti-poverty coalition (within and outside the African National Congress/ANC) bargained for, but it is a key reminder of how tentative, and often tenuous, is the effort at “dissolving the public realm” (Clarke 2004).

As Okuonzi (2004:1629) notes:

¹⁹ Singh 2003; Hutton 2004; Pearson 2004.

Despite the theoretical benefits of such fees (equality, resource mobilisation, quality of care, and efficient use of services), the reality was starkly different. The envisaged fund generation through user-fees was clearly negligible, always less than 5% of total health expenditure. There were no demonstrable benefits of these fees on the quality or efficiency of social services.

As Pearson (2004) shows, even as a proportion of the recurrent budget in the public health care sector (that the fees were supposed to cover), the contribution of user-fees were as little as 2 per cent; Guinea and Burkina Faso, which recorded 20 per cent and 15 per cent respectively, were outliers by a very wide margin. As Hutton (2004) shows, many of the arguments advanced in favour of the introduction of user-fees do not hold in sub-Saharan Africa. The argument that user-fees will reduce frivolous use of services is a case in point, as it started off with an invalid premise: you first have to assume an “important level of frivolous use” (Hutton 2004:67) for the argument to hold. Yet evidence suggests that there was an initial condition of “serious underuse of services” (Hutton 2004:67) created by several barriers—such as geographical ones—to health care access. User-fees added to the list of barriers to access that the policy claimed it would help. While fiscal constraints are often cited for the charging of user-fees, and these constraints treated as exogenous (Mkandawire 2005b), it is useful to remember that the fiscal contraction of the state was itself the consequence of the macroeconomic policies pursued within the wider adjustment programme. Massive reduction in tariff-based revenue, reduction in taxes and tax rates, were such cases undermining the fiscal base of the state.

In several cases, as Okuonzi (2004) noted in respect of health care services, the state was discouraged from investment in health care services; the same applies in the area of education. Stephen Lewis’s (2005:14–15) recollection of his experience in this area during his recent 2005 Massey Lectures *Race Against Time* is worth quoting at length:

I remember being in Malawi in 2002 at a roundtable discussion with the vice-president and a number of civil servants from the Ministry of Finance. They were complaining bitterly about the limits imposed by the International Monetary Fund on Malawi’s public sector pay levels and hiring intentions. It was surreal: here you had a country with huge human capacity problems that wanted desperately to retain its professionals in health and education, and increase their numbers, but the IMF wouldn’t allow them to do so. We’re talking about a sovereign government, fighting the worst plague in history, with but a handful of professionals: according to the minister of health, Malawi has one-third of the nurses it needs (4,000 instead of the 12,000) and perhaps 10 per cent of the doctors (300 rather than 3,000) for a population of 12 million. And they weren’t being allowed—I repeat, this sovereign government wasn’t being allowed—to hire more staff and pay better salaries, because it would breach the macroeconomic straitjacket...

What makes me nearly apoplectic—and I very much want to say this—is that the Bank and the Fund were fully told about their mistakes even as the mistakes were being made. They were so smug, so all knowing, so incredibly arrogant, so wrong. They simply didn’t respond to arguments which begged them to review the human consequences of their policies.

The fact that poverty became increasingly entrenched, or that economies were not responding to the dogma as the dogma predicted, made no difference. It was a form of capitalist Stalinism. The credo was everything; the people were a laboratory.

The purpose of this extensive citation is not that the account in Lewis’s lecture is new to most African scholars and administrators, or that Africans and others have not written extensively about this; the relevance is that Lewis cannot be accused of being ignorant of the detailed inner workings of the international donor environment or the havoc that two decades of what the “social vivisection” (Adésinà 1994:viii)—structural adjustment and the politics of sovereign rentier capitalism—has done to Africa and continues to do.

As the macro-level data show (see table 3), none of the countries covered in the research project had a share of public expenditure on health (as a percentage of GDP) that approached 5 per cent in 2002. In Nigeria, with a huge population, spending on health was an abysmal 1.2 per cent of the GDP (up from 0.8 per cent the previous year).

Botswana's spending on health is particularly instructive in deciphering the extremely low pattern of health spending and commitment in most of the other countries; Zimbabwe's ability to increase per capita spending on health—part of a wider commitment to social spending, married often with user-fees, reflects the off-and-on, flip-flop relationship that it has with the BWIs. The crisis in the health sector is emblematic of the horrors of neoliberal fundamentalism and the politics of the resurgent new imperialism (Adésínà et al. 2006). The HIV/AIDS pandemic and the phenomenal way in which it has spread across much of sub-Saharan Africa is emblematic of the massive entitlement failure; of how the retrenchment of health provisioning capacity undermined the capacity of many of the countries to cope with the pandemic. The response of policy makers (local and international) has been slow in most countries, and the interventions of the international donor institutions seem to have become another mechanism for deepening the stranglehold on the policy terrain of many African countries. The 45 per cent increase in public health spending in Botswana is largely an attempt to cope with the human tragedy unleashed by the disease. The 2005 report on HIV/AIDS prevalence and the decline registered in Kenya, Uganda and Zimbabwe would suggest that the quantum of spending is only one aspect of the response to the crisis; leadership and civil society response are two others.

Table 4: Per capita government expenditure on health at average exchange rate (dollars)

	1998	1999	2000	2001	2002
Kenya	9	7	8	8	8
Tanzania	6	6	6	8	7
Uganda	4	5	4	5	5
Botswana	73	76	78	85	106
South Africa ^a	117	109	103	92	84
Zimbabwe	33	17	24	26	61
Nigeria	4	5	6	6	5
Ghana	9	9	6	6	7

^a When converted to international purchasing power US dollar, South Africa's health sector spending shows a small increase. I have opted for prevailing exchange rate for two reasons: purchasing power parity (PPP) estimation is a function of the composition of the basket of items; more importantly, the health sector is heavily dependent on imports for both recurrent and capital spending—once it is discounted for wages and salaries. **Source:** WHO 2005 (current prices).

In instances where user-fees have been abolished, the impact has been phenomenal. Okuonzi (2004:1629) noted the instance of Swaziland:

Under political pressure, and with nothing tangible to show from user-fees, the policy was abolished by the government in 2001. The surge of more than 100% in the use of public services soon after the abolition of the fees shows the extent to which poor people were excluded from social services by an inappropriate policy.

As noted earlier, the introduction of universal primary education in 1997 in Uganda led to a 73 per cent rise in total enrolment in the first year and 148 per cent rise by 2003 (Bategeka 2005).²⁰ The crisis of budgetary restraint and a programmatic approach—rather than ad hoc responses

²⁰ The problem with data and arguments such as those used by Singh (2003)—of increased utilization following the introduction of user-fees—is that they suffer from the tendency to compare this with the period immediately preceding the introduction, which fails to account for the “noise” created by the collapse in health care spending due to budgetary and balance of payments crises. A more useful comparison would be between pre-crisis and post-introduction periods.

to international goal setting, and the whimsical shift in moods of the sovereign rentier forces—is that increase in demand has not been met by commensurate resources or investment in personnel and infrastructure.

As the huge impact of efforts to retrench the public realm in social provisioning has become clear, and user-fees have turned out to be a more ideological than financially sound mechanism, new efforts are being made to find new ways to fund national health care needs. In February 2005 the Nigerian government launched the National Health Insurance Scheme (NHIS). According to the announcement on the official Web site of Nigeria's Office of Public Communications,²¹ the scheme has six components.

Contributors can access healthcare needs from approved public and private health service providers. Health Maintenance Organisations (HMOs) which are limited liability companies will be licensed by the NHIS to facilitate the provision of healthcare benefits to contributors under the Formal Sector Social Health Insurance Programme to interface between eligible contributors, including voluntary contributors and the healthcare providers.

Formal sector employees will have 5 per cent of their basic salary deducted as contribution, while the employers contribute 10 per cent. Benefits will cover the member, his/her spouse and up to four children. Other components of the scheme are the Urban Self-Employed Social Health Insurance Programme—which has to be occupation-based and involve more than 500 members. A monthly contribution by each member of between Naira (N) 120 and N150 (about \$1 or \$1.25 per annum), would cover treatment for “the most common ailments like malaria, typhoid fever, diarrhoea etc.”. The Rural Community Social Health Insurance Programme has the same framework; the only exception is the occupational category. The programmes for under-five children and those with permanent disability similarly require contribution for entitlement to benefits.

The scheme in Ghana follows the same broad principle that of Nigeria.²² However, in Ghana it is compulsory for all citizens to join the scheme, which is to be funded by a combination of a “2.5 per cent Health Insurance Levy on selected goods and services” and member contributions. Annual contribution is scaled up from zero-contribution for those defined as “core poor,” 72,000 *cedis* (about \$8) for the “very poor” and the “poor” rising to 480,000 *cedis* (\$52.7) for the “very rich”. There is also the stigma for those defined as core poor who try to access health care services, but made no contributions to the scheme. Even at its best the scheme would face defaulting by the very poor and poor in meeting their contributions. There is no evidence of an appreciation of the need to commit funds from the fiscus to the scheme, which would prevent those defined as poor from falling through the cracks. As with similar cases, where quasi-market logic is inserted into social provisioning, the denial of health care service for those who default on their contributions will happen at the level of service providers. In the meantime, state functionaries and supporters of the approach use the scheme to justify less public spending on health care—the same crisis that beset user-fees.

For formal sector workers, 2.5 per cent of their social security contribution will be paid into the scheme as their contribution. There will be a waiting period of six months, between the commencement of contribution and accessing health care services (similar in coverage to the Nigerian scheme). The benefits exclude, however, AIDS drugs, treatment of chronic renal failure, or heart and brain surgery, and “cosmetic” services such as hearing aids, dentures or cosmetic surgery. At district levels, the collection of contributions is to be managed by the Health Insurance Communities with Health Insurance Committees. Those seeking exemptions will have to get them through the committees. This raises the question of who defines one person as very poor, another as core poor, and the other as very rich. The scheme is another example of the abuse of the concept of community within the neoliberal policy discourse—

²¹ See www.nigeriafirst.org, accessed on 25 November 2005.

²² National Health Insurance Scheme, Government of Ghana. www.ghana.gov.gh, accessed on 25 November 2005.

pecuniary advantages replace relations of mutual support and obligation. Community-based interventions and resource management are primarily to mobilize the people in policing and enforcing compliance with system of social relations which ontologically renders individuals as atomized economic agents. In the World Bank's more comprehensive manual (Aiyar 2001) community empowerment and community-driven development are so tied to local collection of user-fees and taxes that the very idea of community as a network of mutual support, protection and obligation disappears. Foregrounding the idea of community empowerment is the "taken-for-granted" idea of limiting public financing through the fiscus. The perception that public welfare provisioning will crowd out the community-based or informal social support system is often used to justify not extending public support to the vulnerable. As the study by Heemskerk et al. (2004) shows, this claim is largely without basis. In anything, "public welfare systems and informal insurance systems are mutually supportive...Receipt of public transfers not only enhances the capacity to self-insure, but a more central position in social exchange networks also facilitates access to public welfare" (p. 951). The impact is particularly positive for women (Heemskerk et al. 2004:952). As they conclude, "informal reciprocity networks are social glue of poor communities and help their members cope with a great number and variety of shocks... where they do work, these systems generate feelings of pride and empowerment" (2001:953). What is instructive about the schemes in Ghana and Nigeria is that there is no defined contribution from the fiscus to fund the scheme. Indeed, in the case of Ghana, the government is using "funds from HIPC"²³ to facilitate setting up the scheme.²⁴

The new insurance schemes in relation to health care provisioning in Nigeria and Ghana that have been discussed are intended as illustrations of a much wider programme. Across several African countries, new insurance schemes have been designed and implemented to cover pension schemes – largely involving a shift from non-contributory to contributory schemes.

Social policy regime and access: The inequality and poverty nexus

The current pursuit of the claimed objectives of reducing poverty and inequality, through a raft of targeted mechanisms, is paradoxical in the light of the existing body of knowledge about the relationship between institutional frameworks or models of social policy on the one hand, and poverty and inequality on the other hand. Korpi and Palme's (1998) analysis of the data from 11 countries of the Organisation of Economic Co-operation and Development (OECD) shows that "the lowest income inequality is found in the three encompassing countries – Finland, Norway, and Sweden" (1998:674).²⁵ By contrast, "the highest income inequality figures occur in the basic security and targeted model, especially in the United States, Switzerland, Australia and United Kingdom" (Korpi and Palme 1998:674). The poverty rate for 1985 in the United States was 17.8 per cent among those between the ages of 25 and 59 years, against 1.6 per cent for Finland and 2.6 per cent for Sweden. The Gini coefficient of inequality was 0.18 in Sweden, for those 65 years or older compared with 0.35 in the United States. The paradox of targeted models, as Korpi and Palme (1998:672) note, is that in "discriminating in favour of the poor...it creates a zero-sum conflict of interest between the poor and the better-off workers and the middle classes who must pay for the benefits of the poor without receiving any benefits". The "paradox of redistribution" is that:

²³ HIPC refers to the Heavily Indebted Poor Countries initiative which provides debt relief or cancellation in exchange for deep liberalization and "reform" of the economy and public services. The funds released under this initiative are what the Ghanaian government is using to set up *the structures* of the health insurance scheme—the community and district structures—but not for funding the scheme itself.

²⁴ National Health Insurance Scheme, Government of Ghana. www.ghana.gov.gh, accessed on 25 November 2005.

²⁵ The "encompassing" model of social insurance institutions is one of the five "ideal-typical" models of social welfare regimes that Korpi and Palme (1998) identified. This comes closest to the idea of "universal entitlement". Entitlement is based on "citizenship *and* labour force participation;" the principle guiding benefit level is flat-rate and earnings-related, and non-employer/employee cooperation is required in administering the programme (p. 666). At the other extreme is the targeted model, for which entitlement is based on "proven need" and benefit level is kept to the minimum. In between are three other models: the "voluntary state-subsidized" model that relies on membership and contributions, with flat rate or earnings-related benefits; the "corporatist" model in which entitlement derives from "occupational category *and* labour force participation," and benefits are earnings related; and the "basic security" model, for which entitlements are based on citizenship *or* contributions, and benefits paid out on flat-rate principle. It is only the corporatist model that involves the participation of employers and employees in the administration of the scheme. Korpi and Palme's classifications (regimes of social policy, one would say) are for me, far more useful than Esping-Andersen's (1990) three regimes of welfare.

by providing high-income earners with earnings-related benefits, encompassing social insurance institutions can reduce inequality and poverty more efficiently than can flat-rate or targeted benefits...the more we target benefits at the poor only and the more concerned we are with creating equality via equal public transfers to all, the less likely we are to reduce poverty and inequality (Korpi and Palme 1998:681-682).

The social cohesion effect of encompassing models – and something close to the nation-building incentive for encompassing access during the early nationalist phase – was also found to be more robust:

The targeted model...tends to drive a wedge between the short-term material interest of the poor and those of the rest of the population, which must rely on private insurance. It gives the better off categories no rational basis for including the poor, and *leaves the poor to trust in the altruism of the more fortunate* (Korpi and Palme 1998:672, author's emphasis).

In the face of mounting poverty induced by the neoliberal policies of the sovereign rentier regime, the response has been to address poverty by targeting the deserving poor; a mantra that serves to obscure the primary concern which maintains harsh spending restrictions on the fiscus. The claim that preference for targeting was motivated by equity and efficiency considerations rests on a dubious logic: the assumption was that through a more efficient and focused use of resources it was possible to do more with fewer funds (Mkandawire 2005b). This argument was used not just by the BWIs but the donor countries generally, on whose aid flow and approval many of the adjusting countries have come to depend as the fiscal basis of the state was progressively undermined. Mkandawire (2005b:21-22) drew attention to the paradox of the contradictory logic deployed by the World Bank against universalism in social policy and in favour of it in economic policies:

the preference for targeting [in social policy] by the Bretton Woods institutions is rather paradoxical, especially in light of their aversion to targeting in many economic activities, such as selective industrial policies or credit rationing in the financial sector. ... The World Bank's dislike for such selectivity and targeting was partly based on the arguments that they would not be market conforming. ... The more serious arguments deployed against targeting revolved around possibilities of information distortion, incentive distortions, moral hazard and administrative costs, invasive loss, and corruption. It was asserted that governments did not have the knowledge to pick winners or to monitor the performance of selected institutions. In situations of asymmetric information, beneficiaries of such policies would conceal the information necessary for correct interventions.

Yet the same governments that are bedevilled with weak administrative capacity were supposed to implement targeted social policy. The information asymmetry and incentive distortions that were used to justify universalism in economic policy did not feature in the discussion regarding social policy. That anyone would consider targeting an appropriate policy option, given a context in which 77 per cent of the population lives below \$2.15 a day, beggars reason – especially where the macro policies of the policy vendors are largely responsible for the massive entitlement failure in the first instance.

Studies of targeted social policies have demonstrated that even in the most administratively robust state with extensive surveillance systems, targeting suffers from extensive type I error (under-coverage, where those deserving are left out) and type II error (leakages to those outside the targeted group). In the case of South Africa, type I error for the Child Support Grant (CSG) was 90.7 per cent nationally; and it was in those provinces with the highest levels of poverty that under-coverage was most acute: 93 per cent in KwaZulu Natal Province, 91.9 per cent in the Eastern Cape Province, and 91.7 per cent in Limpopo Province (Samson et al 2005:8). The onerous procedure for accessing the grant (documentation, forms to fill and means-testing) by

applicants in mostly rural provinces, and for those who are less able to navigate the bureaucracy, is without doubt the primary source of the low take-up rate. Extending the reach of CSG's was inspired by a complex array of social forces within and outside the state—and involved an active campaign to go out and register people in the rural communities and poor urban and peri-urban neighbourhoods—leading to a significant decline in type I error (Samson et al. 2005); even so, 42.5 per cent of those eligible in 2004 did not receive the grant. Similarly, type I error for the disability grant was 83.9 per cent in 2000, down to 55.4 per cent in 2004. By contrast, in the case of the old age pension scheme, which has a more encompassing approach,²⁶ type I error was 17.7 per cent in 2000 and 10.2 per cent in 2004. Further, Samson et al (2005) estimated that the old-age pension alone accounts for 47 per cent closure of the poverty gap in South Africa.

The argument that Europe has moved from limited to encompassing coverage to justify targeting in sub-Saharan Africa—i.e., that the region should start with targeted provisioning—suffers from a simple problem. In sub-Saharan Africa, the limited coverage, often based on labour market location as in Europe, was the object of attacks during the ascendance of neoliberal discourse. This was the framework for the claims that an urban coalition was distorting public (development) spending and flourishing in an environment of rent-seeking. The result, it was claimed, was to create 'urban bias,' and so on. Rather than move from the limited coverage model to the encompassing model, the policy choice was to dismantle the limited coverage that existed through severe retrenchment of state/public spending and market-based entitlements. Current efforts to address the enormous negative impact of the retrenchment of the state remain patchy (basic education, for instance), involve continuing preference for market-based access, or self-financed insurance schemes such those discussed earlier in section 3.

There is overwhelming evidence that targeting—through mechanisms such as user-fees-mediated and means-testing—involves considerable administrative costs.²⁷ But the onerous procedure for eligibility or access is often designed precisely to exclude (Pratt 2001). In an effort to discourage the "non-poor" from benefiting, the mechanisms adopted in most targeted programmes tend to stigmatize, through mechanisms that are "disempowering and even humiliating" (Mkandawire 2005b:23). As Amartya Sen (1995:13, cited in Mkandawire 2005b:24) noted:

Any system of subsidy that requires people to be identified as poor and that is seen as a special benefaction for those who cannot fend for themselves would tend to have some effects on their self-respect as well on the respect accorded them by others.

Yet in the design of the mechanism for social service provisioning, stigma avoidance is of crucial concern (Titmuss 1968; Jones et al. 1983). The humiliation that comes with queuing and being identified as welfare recipients or to secure exemption from user-fees has meant that take-up rate is often low. Even for countries with the capacity, the "process of means-testing or identifying the 'deserving poor' is often invasive and stigmatizing" (Mkandawire 2005b:23) The attempt within the World Bank projects to shift the mediation of targeting mechanism to community level does not avoid the crisis of stigma and humiliation. As Mkandawire (2005b:26) noted, neither community-based targeting nor geographical targeting (meant to improve on earlier forms of targeting) diminishes the inherent problem of targeted social policy or how "abuse and humiliation [become] common features of citizens' interaction with the state" (Mkandawire 2005b:26). The vulnerability of recipients identified on the basis of such means-tests exposes people to the powers of what Sen called "minor potentates": the petty authoritarianism of minor bureaucrats, community power brokers and local chieftains. And, the perversion of power relations is not only about the vulnerability of the poor generally but it is

²⁶ The "trigger mechanism" (Jones et al. 1983) here are old age (65 years for men and 60 years for women) and individual income below R1,226 a month for single persons, and R2,226 for married persons (Samson et al. 2005).

²⁷ Jones et al. 1983; Korpi and Palme 1998; Vandemoortele 2000; Lavelette and Pratt 2001; Mkandawire 2005b.

often profoundly gendered. The power brokers and chieftains are more likely to be men and the victims women: the widows in the community and women who tend to be less literate.

Many issues suggest the imperative of the shift to a more encompassing social provisioning framework. First, in a context where between 50 per cent and 70 per cent of people in many sub-Saharan African countries are living in extreme poverty (less than \$1/day), selectivity or a targeting variant does not make much administrative or financial sense. Second, in most of the mineral-based sub-Saharan African economies, the smug distinction between tax payers and beneficiaries of social services makes very little sense—the overwhelming proportion of state revenue is from collectively-owned resources. The experience of countries like Nigeria is that as the neoliberals rolled back the state and championed the mantra of “there is no free lunch” — as if petroleum-based revenue is a particular individual’s property — the quantum of national financial resources available for discretionary (mis-)use increased, which in many ways fuelled corrupt appropriation of national resources. A more encompassing entitlement to social services and protection would reduce the margin of resources available for such discretionary (mis-)allocation; it would also reinforce the capacity of the citizens to demand services from their governments. Third, locking those with voice into such provisioning, especially with funding from the fiscus, ensures protection for the budgetary allocation and the quality of service delivery as well. Across sub-Saharan Africa, what has developed over the last 25 years in the education and health care sector is a dual system: an underresourced and neglected public sector, and a private sector.

The paradox of the dual system of social service delivery is that as the neglect and underfunding take hold, those with voice and resources in society relocate to the private sector for their health care and education needs; the quality of services in the public sector declines further as does the commitment to invest in them—the senior public servants and politicians source their health care needs and education for their children in the private sector or outside their countries, and the public service institutions decline. The public sector for social services is weakened because of the decline in investment and commitment; it is then condemned for its inability to match the private sector in the quality of service delivery—a classical case of a self-fulfilling prophecy! Anecdotal evidence in several countries shows that those employed in the public sector—especially when tied to teaching hospital and medical school posts moonlight in the private sector to augment their incomes. The effect is that the private sector may provide the service faster for steep charges but lack experienced medical experts or academics and is on the whole rarely able to undertake the investment needed for a decent medical establishment. The result is a downward spiral of quality of service—not anywhere near what the public institution offered in the 1970s, nor what their private sector counterparts would offer in other parts of the world. The Gini index of inequality (see table 3) reveals the persistent sharp disparity in command over resources, and poverty, in many of the countries studied. The annex presents a radar chart of literacy, life expectancy, poverty and inequality. While the collapse in life expectancy is a result of factoring the HIV/AIDS pandemic into the calculation, the others are direct results of how sub-Saharan African societies have been reshaped in the last 30 years. Indeed, poverty and inequality rose sharply in these countries over the last 25 years; South Africa and Zimbabwe are the exceptions, due to the colonial racist order during the period.

Social policy, entitlement failure and social cohesion

In many ways, the last 20 years have highlighted the crisis of citizenship and statehood in most African countries. The implications of widespread deprivation and the social development crisis, highlighted in section 2, are evident in the rising number of state implosions and genocidal conflicts. I do not wish to suggest that the adjustment policies created these horrendous events—the pogrom in Nigeria in 1966 and the following civil war, and the earlier horrors in Rwanda in 1959 are two cases in point. However, I would suggest a link between the retrenchment of state capacity for social provisioning and the tide of crisis of statehood. The state-citizens relationship is a web of obligations and privileges; citizens’ stake in a polity is affected by the extent to which the state is seen to be responsive to their needs. The retreat of the state from social delivery (health care, education, human security, and so on) undermined the relevance and the

legitimacy of the state in the eyes of its citizens. In the absence of social policy-based engagement with the citizens, the coercive face of the state becomes the dominant (if not the only) area of interaction. Rising inequality during the period did little to enhance the legitimacy or social links between the dominant classes (elites) and ordinary people. The first wave of adjustment, typified as the “decade of greed”, provided avenues for massive enrichment of individuals in a widening sea of human vulnerability and deprivation. From Sierra Leone to Rwanda, the fundamental questioning of state legitimacy and the spillover of difference into conflict, occurred within this context of declining legitimacy of the state. While not the root cause of these conflicts—domestic policy and leadership issues were strong contenders—the retrenchment of the state at least served as the trigger mechanism.

4. Rethinking Social Policy, Beyond Adjustment: The Challenge of Inclusive Development

I wish to conclude this paper by highlighting six imperatives of rethinking social policy beyond adjustment in sub-Saharan Africa. This is within the central normative framework for the research programme—that of a state-society nexus that is *developmental*, *democratic* and *socially inclusive* (UNRISD 2001) and raises several possibilities. A socially inclusive state-society linkage is more likely than not to privilege equity considerations and strive for universal entitlements in social policy making and implementation. A democratic state-society nexus is likely to privilege popular engagement, transparency and accountability in policy making and execution. However, social inclusion and democratic ethos are conceptualized as a dimension of the “developmental” rather than separate from it. These are important dimensions of what Amartya Sen refers to as the “ends of development” (Sen 1999:5). As he further notes: “Development requires the removal of major sources of unfreedom: poverty as well tyranny, poor economic opportunities as well as systematic social deprivation, neglect of public facilities as well as intolerance or overactivity of repressive states” (Sen 1999:3).

While we have said a lot about the value of the nationalist model of the symbiosis between economic and social policy, and the value of social policy as a mechanism for securing social cohesion and nation-building, it was developmentalism that became increasingly authoritarian. It is often argued that the excessive developmentalism of the state and obsession with nation-building were at the source of the rising tide of authoritarianism, single-party rule, and the shrinking democratic space. Hanging on the door of the state, as Joseph Ki-Zerbo (2005:82) puts it, was the notice: “Silence, We are developing!” The democratic objective and a civic public realm are the foundations for the reconstitution of the state-society nexus.

A second aspect is the developmental context itself, and there are three compelling issues: the regressive economic policy driven by a neoliberal ontology; the debt crisis—in spite of what the Group of 8 (G8) summit in Gleneagles in 2005 was supposed to have delivered; and the global trade regime, both within the World Trade Organization (WTO) framework and the increasing scale and number of bilateral “economic partnership agreements” that are foundationally damaging to Africa’s development prospects. As Ohiorhenuan (2000:22) notes:

Developing countries today face the additional burden of building capacities to project and protect national interests and to be more effective negotiators; to develop the capacity to comply creatively with agreed obligations and exercise their rights; and to put in place a whole panoply of new institutional arrangements in order to be competitive.

A third aspect, crucial for transcending the current crisis of state-society relations, is to transcend the false dichotomy that neoliberal discourse created regarding the experience of many of sub-Saharan Africa’s peoples. The state versus market discourse confused all that was not private sector with the state, missing the significant role that collective community efforts in social provisioning played in the early post-colonial efforts of many countries, and some even

under colonial rule, when communities pooled resources to fund education of young men and women, provide health care services, and so on. In several cases social provisioning in health and education involved the government and communities in a partnership (Cornia 1987:170–172). Re-inventing this partnership, outside of the transactional logic of the neoliberal discourse, is important for ownership of institutions and programmes, but it must be one that fundamentally addresses the gender content of community relations and interaction.

Rethinking social policy

I would like to suggest that a return to a broader vision of social policy is important for its long-term efficacy, development and inclusive social citizenship. Reconnecting social policy to the wider development objectives and the nation-building project is essential for sustainable social policy outcomes, as it is for sustainable economic development.

First, it is difficult to see one's way through the objective of poverty reduction, for instance, without improving the productive capacity of the sub-Saharan African economies. In 14 of the 16 sub-Saharan African countries classified as having low human development and for which data exists, more than two-thirds of the population lives in poverty (UNDP 2002). While a lot more can be done at lower levels of economic growth, as noted earlier, social policy objectives become sustainable when undergirded by sustained improvements in economic development; much in the same way that sustained economic development requires sustained social policy outcomes. The synergy between the two is enhanced with significantly reduced levels of inequality in society – to which both economic and social policy must contribute actively. There is a need to rethink social policy expenditure not as a favour to citizens, but as investment in development and nation-building or social cohesion.

The prevailing discourse (from the New Partnership for Africa's Development (NEPAD) to the report of the Blair Commission for Africa) mistakes trade discourse for development discourse. When President Youweri Museveni asserted that what Africans want is not aid but to “trade our ways out of poverty”, I agree with him intuitively; the question, however, is “With what? Coffee?” (Adésinà 2002 ; Adésinà et al. 2006). Successful economic development involves not only quantitative growth in the economy but structural changes—and that requires a shift toward industrial output, however much we may speak of the knowledge economy. Maligned as industrial policy in the neoliberal discourse, the examples of China and India most recently and the early industrializers (who now discourage sub-Saharan African countries from engaging in industrial policies) are evidence of the importance of dynamic industrialism for trading out of poverty: these countries came to dominate world trade not on the basis of primary commodities, but manufactured output. Moving in that direction requires African countries to mount a challenge against the current global trade regimes – both multilateral and bilateral. The shrinking of the trade and industrial policy space (Ohiorhenuan 2002; Chang 2005) is not a natural aspect of globalization, but the result of the conscious and deliberate steps taken by the powerful countries to advance their own interests and those of their transnational corporations. The proposition of the late 1970s of a regional development approach, where African countries seek to internalize the engine of their development, remains valid; it compels us to return to the Lagos Plan of Action as our starting point.

Second, it is important to rethink social policy in its social cohesion and nation-building dimensions. The last two decades have brought the imperative of nation-building back onto the agenda. From Sierra Leone to Somalia, from Nigeria to Sudan, the crisis of social cohesion threatens the foundations of many African states. Enhancing citizens' stake in their polities is not only about the exercise of civic rights, but social citizenship as well. The Afrobarometer studies conducted by the Institute for Democracy in South Africa (IDASA, Cape Town) show that, across Africa, citizens make a direct link between their livelihood and democracy. The retrenchment of state capacity not only affects its capacity to deliver on social policy, but also the basic task of the physical security of its citizens.

Third, a move away from targeting and means-testing in social policy is important not only because of the debilitation and humiliation associated with targeting, but because we know that: (i) where social policy has been developmental, with improved social well-being and enhanced social cohesion, more encompassing, universal access has been important; it secures wider commitment to sustaining it—especially where it is financed from income tax; and (ii) a state-citizen nexus based on mutual exchange of obligations and privileges has a greater chance of securing social stability, which itself is valuable for sustained economic development. The urban bias and narrow coverage that were the focus of the criticism against the universalism of the nationalist phase were, in fact, not atypical among the late industrializers.²⁸ Social protection grew outward from the social groups that were considered to be central to the industrialization project. But moving up such a social policy “value chain” requires leadership and a state bureaucracy capable of sustained policy making.

This brings us to the fourth point: the imperative of reconstituting the state in its policy-making capacity, ability to run the state, administer society and define the parameters of economic activities. There is an urgent need to overcome the creeping policy atrophy of the last 20 years. As Peter Evans (1995:3) notes: “Without the state, markets, the other master institution of modern society, cannot function”. The “embedded autonomy” of a competent civil service has always been integral to a successful developmental agenda (Evans 1995). The reconstitution of the state has to be part of a *wider reconstitution of the public realm* in which both horizontal and vertical relationships are driven by a democratic ethos of participatory rather than the perfunctory and technocratic ideas of governance: horizontal in the relationship within civil society and vertical in the relationship between state and society. Simply framing the issue in terms of leadership alone will not do or capture the crisis of the militarization of social consciousness within civil society or the casual disregard for civic order.

Fifth, leadership matters; so does policy. Constructing social consensus around a developmental project is fundamental: it calls for visionary leadership that is locally grounded in the peculiarities of Africa’s realities; it calls for putting at the heart of our collective social contract social justice, equity and the vicarious indignity that we should experience when others in our societies contend with poverty and destitution. Social mobilization around these values can only proceed on the basis of justice rather than charity, and it requires leadership in and outside the state. This takes me back to the issue of agency raised in section 2. Rather than a state versus civil society, or state versus market, much of the expansive use of social policy in the pre-1980s period involved active agency of state functionaries in understanding the links between social expenditure and economic growth (producing doctors, engineers, teachers, and so on) and promoting national unity as illustrated by the schooling policy discussed earlier. While there are significant variations across countries in terms of depth and size of such use of social policy, there is sufficient evidence of shared use across sub-Saharan Africa. In many cases the commitment flowed from the social pact that developed in the anti-colonial struggles. The differences in attempts to protect social expenditure (most glaring in the contrast between Nigeria and Ghana, discussed earlier) also reveal the differences in the commitments of state functionaries and political leaders; again an issue of agency. Equally important for the nature of leadership—in this instance, leadership from outside the state—has been the agency of the civil society in protecting social spending. In countries from Nigeria to Zambia and South Africa, labour movements have played significant roles in “persuading” state functionaries to maintain or expand social expenditure. From Senegal to Nigeria, student movements were equally important. The important thing here is that structural variations alone do not explain variations in social policy outcomes in the region; agency remains an important factor. It requires leadership and policy commitment within and outside the state.

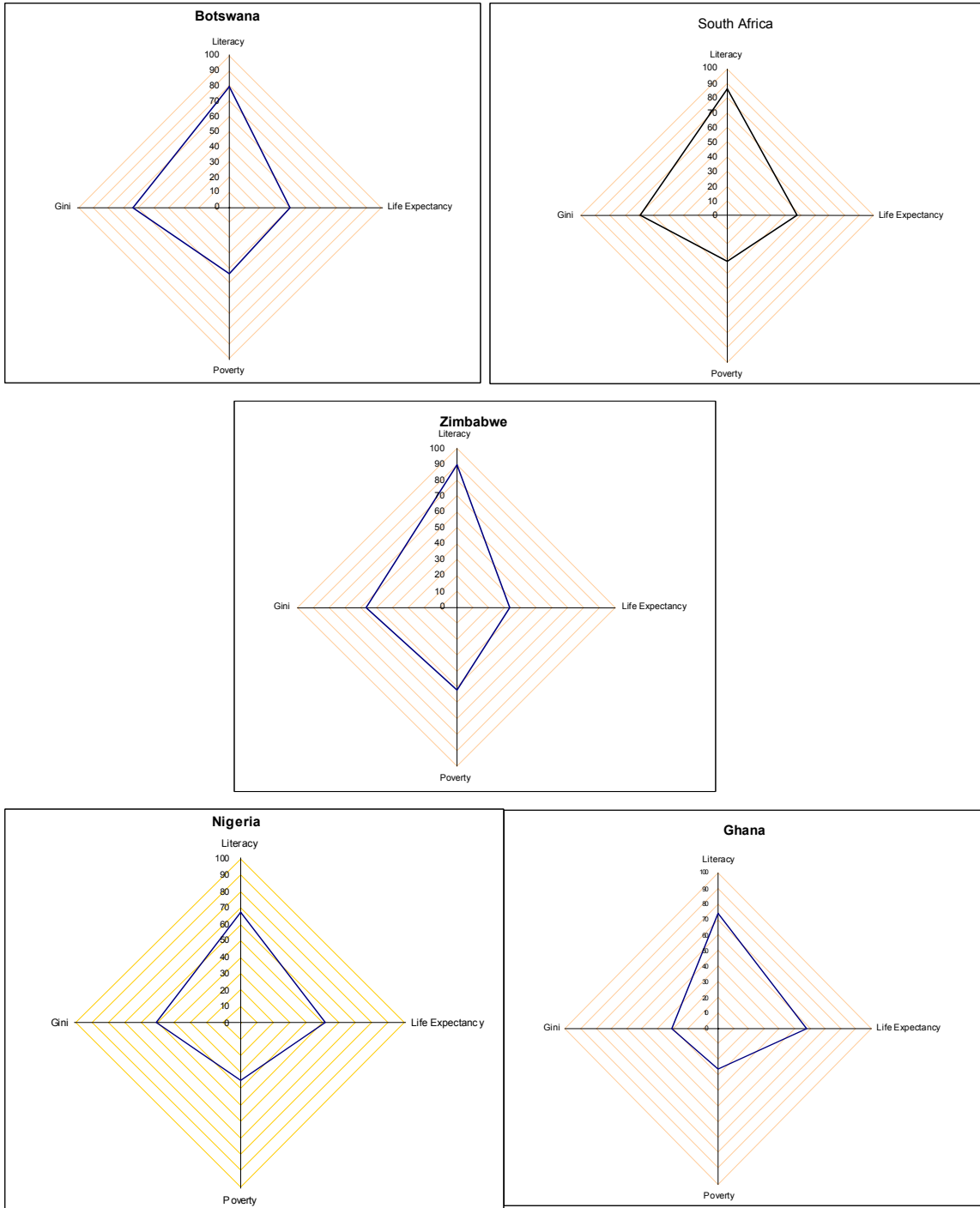
Similarly, the challenge to rethinking social policy is not only external but domestic. Over the last 25 years, the structural adjustment of Africa’s economies has gone hand-in-hand with the structural adjustment of politics and civil society (Adésinà 2004). Interest groups with

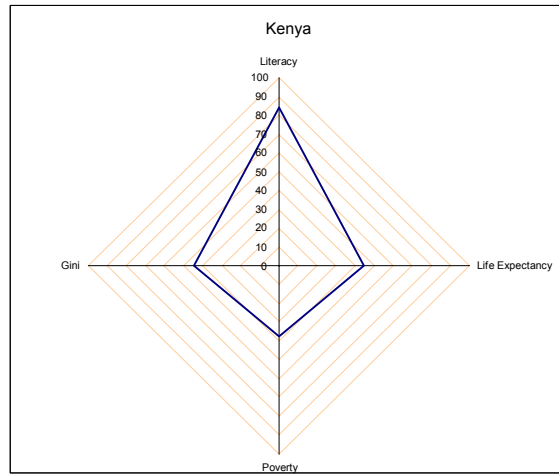
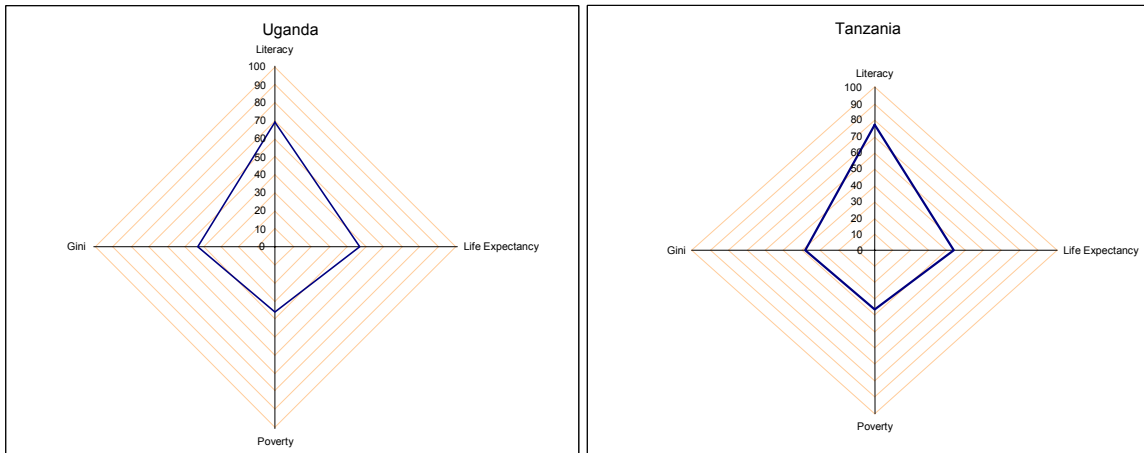
²⁸ Korpi and Palme 1998; Esping-Andersen 2001; Kuhnle and Hort 2004; Mkandawire 2005b.

instrumental, ideological and material commitment to the neoliberal project are prevalent not only within the economy and the state, but within civil society (not the least within the non-governmental organization/NGO sector). It takes the construction of new social coalitions to highlight the need for a fundamental rethinking of social policy, specifically, and development policy broadly. It would require a shift from a civil society dominated by NGOs to one led by social movements.

Sixth, in rethinking social policy making we need to come to terms with the profoundly gendered nature of the labour market, interactions between the formal and care economies, and broad social relations. Elson and Cagatay (2000) point to the “male breadwinner bias” at the heart of neoliberal macroeconomics; a similar bias is inherent in many traditional social provisioning and social security programmes. The gendered dimensions of labour market participation and sustained employment record—and therefore retirement annuity or provident fund contributions—distinctly disadvantage women whose labour market participation is often interrupted by marriage and childrearing, or who bear the work in the burden of unpaid care economy. As public provisioning collapsed, the burden—mainly for women—of a gender-ordered economy mounted (UNRISD 2005:129). Rethinking social policy requires a strongly pronatal approach, but it also requires social provisioning that treats women as persons in themselves rather than in their procreation and nurturing roles. Often, attempts at targeting women reinforce the gendered rendering of women as wives and mothers. The Progresas/ Oportunidades programme in Mexico, which started in 1997, is a clear case in point: “it provides cash transfers and food handouts to approximately five million poor rural households, but on the condition that they send their children to school and visit local health centres on a regular basis” (UNRISD 2005:138), which would have seemed a major social investment all round. However, the programme was focused on women: in addition to ensuring that the children attend school and visit the clinics, the women have “to perform community work such as cleaning schools and health centres, unlike those not in the scheme” (UNRISD 2005:139). The scheme ended up reinforcing the traditional idea of the women as mothers and hindered autonomous labour market participation.

Annex: Social Development Radar Charts





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